

Local public health process measures for effective contraceptive use

CLHO meeting, December 21, 2017

Background: In October the Public Health Advisory Board adopted a set of local public health process measures. These process measures are a component of the accountability metrics used to track progress toward meeting public health goals through a modernized public health system.

PHAB did not adopt the local public health process measure for effective contraceptive use that was recommended to them. PHAB requested that the PHAB Accountability Metrics subcommittee do additional work to develop a local public health process measure in this area.

Purpose: Solicit feedback from CLHO members on the following options for local public health process measures for effective contraceptive use.

Option	Measure	Data Source	Considerations	PHAB Accountability Metrics subcommittee discussion	Next steps
#1. Make adjustments to process measure that was recommended to PHAB in October <i>“Number of local policy strategies for increasing access to effective contraceptives”.</i>	Annual strategic plan that identifies gaps, barriers and opportunities for improving access to effective contraceptive use	LPHA reporting ¹	Consistent with activities proposed in new Reproductive Health Program Element. Developing a strategic plan will become a Program Element requirement. Aligns with core system functions for assuring access to clinical preventive services. Although this measure is yes/no, an LPHA would need to demonstrate it meets established criteria for a strategic plan (i.e. working with partners, focusing on reducing disparities, has a plan to monitor implementation, etc).	Supportive of this measure because of alignment with new Program Element. This is something that is already going to be collected and measured.	PHAB <u>will</u> review this measure at the January 18 meeting

¹ For areas where no established data collection system exists, each LPHA would be responsible for creating and supporting an internal mechanism to collect the data.

<p>#2 Change the outcome measure to unintended pregnancies. Use Effective contraceptive use as the local public health process measure</p>	<p>Percent of pregnancies that are unintended (public health accountability metric)</p> <p>Effective contraceptive use among women at risk of pregnancy (local public health process measure)</p>	<p>Unintended pregnancies: Pregnancy Risk Assessment Monitoring System (PRAMS) and Vital Statistics data</p> <p>Effective contraceptive use: Behavioral Risk Factor Surveillance System (BRFSS)</p>	<p>Using effective contraceptive use as the local public health process measure does not clearly define what an LPHA must do to increase the rate of effective contraceptive use.</p>	<p>BRFSS/PRAMs data can be meaningless for very small counties. Difficult to see impact of interventions.</p>	<p>PHAB <u>will</u> review this measure at the January 18 meeting</p>
<p>#3 Focus on specific policy interventions</p>	<p>Examples may include:</p> <p>Percent of providers that have implemented One Key Question (OKQ) or other pregnancy intention screenings</p> <p>Percent of women of childbearing age using long-acting reversible contraceptives (LARCs)</p> <p>Number of Title X or CCare clinics, or number of SBHCs providing ECU</p>	<p>OKQ- no existing data source. Would require LPHA reporting.</p> <p>LARCs- no population-level data source, although data are available for Title X and CCare providers.</p>	<p>Adopting a measure for a specific policy or programmatic intervention is consistent with other local public health process measures adopted by PHAB.</p> <p>Focusing on a single policy may not adequately address local needs and priorities.</p>	<p>Any of these policy options can be affected by the political climate.</p> <p>Selecting one policy intervention is a “one size fits all” approach that detracts from LPHA’s ability to address specific barriers to access in their community.</p>	<p>PHAB <u>will not</u> review this measure at the January 18 meeting</p>