Barriers to Contraception Access: Staff Survey

**Study Information** 

**Survey of Barriers to Contraception Access** 

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This form describes a research study that is being conducted by Dr. Hartman, Dr. Loomis and Lauren Cowen from the University of Rochester's Highland Family Medicine (HFM) in a parallel study conducted by Dr. Srinivasan and Dr. Gasbarro from University of Pittsburgh Medical Center (UPMC) St. Margaret.

The purpose of this study is to obtain information from providers and staff members regarding barriers to providing patient contraceptive care at family health centers.

If you decide to take part in this study, you will be asked to complete a brief survey that will ask questions about potential barriers to contraceptive care and general contraception knowledge. We estimate the survey will take 3-5 minutes to complete.

Participation in this study is being offered to all providers and staff members at HFM. Similarly, participation is being offered to all providers and staff members at UPMC St. Margaret. We expect about 100 subjects will participate in the study.

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#### **Risks and Benefits of Participation**

Some of the survey questions may make you uncomfortable. You can skip any questions you do not wish to answer. To protect confidentiality, identifying information will not be collected as part of the study data. There are no other risks.

You may or may not benefit from participating in this study. The potential benefits to you from being in this study could be a better understanding of the barriers to providing contraceptive care at the clinic and an opportunity to improve this area of patient care in the future.

You will not be paid for participating in this study.

Independently, the University of Rochester and the University of Pittsburgh make every effort to

keep the information collected from you private. In order to do so, there will be no recording of names or other identifying information, so your individual responses to questions will not be linked to you personally. Data analysts will only have access to aggregate survey responses. We may jointly present our parallel study results at meetings or in publications, however only de-identified and aggregated information will be shared.

Sometimes, however, researchers need to share information you provided with people that work for the University, or regulators. If this does happen, we will take precautions to protect the information you have provided.

Your participation in this study is completely voluntary. You are free not to participate or to withdraw at any time, for whatever reason. No matter what decision you make, there will be no penalty or loss of benefits to which you are otherwise entitled.

Participating in this study will not affect your employment at the University of Rochester or at the University of Pittsburgh. You will not be offered to receive any special consideration if you take part in this research. Taking part in this research is not a part of your University duties, and refusing will not affect your job. You will not be offered or receive any special job-related consideration if you take part in this research.

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## **Study Contact Information**

For more information or questions about this research you may call Lauren Cowen at (585) 330-0525 for HFM or Dr. Sukanya Srinivasan at (412) 795-6069 for UPMC St. Margaret.

Please contact your specific institutional review board for any of the following reasons:

• You wish to talk to someone other than the research staff about your rights as a research subject

- To voice concerns about the research;
- To provide input concerning the research process;
- In the event the study staff could not be reached.

The University of Rochester Research Subjects Review Board: 265 Crittenden Blvd., CU 420628, Rochester, NY 14642, Telephone (585) 276-0005 or (585) 449-4441

The University of Pittsburgh Institutional Review Board: 3500 Fifth Avenue, Hieber Building Main Office, Suite 106, Pittsburgh, PA 15213, Telephone (412) 383-1480.

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## Demographics

#### 1. Age

- less than 20 years
- 20-25 years
- 26-30 years
- 31-35 years
- 36-40 years
- 41-45 years
- 46-50 years
- 51-55 years
- 56-60 years
- 61-65 years
- Over 65 years

#### 2. Gender

- 🔵 Female
- Male
- Transgender male
- Transgender female
- Other
- Prefer not to answer

#### 3. Ethnicity/Race

- Black/African American
- Hispanic/Latino
- White/Caucasian
- 🔿 Asian
- American Indian/Alaska Native
- Native Hawaiian or Other Pacific Islander
- Mixed
- Other

#### 4. Do you work at Highland Family Medicine (Rochester, NY) or St. Margaret (Pittsburgh, PA)?

- Highland Family Medicine
- St. Margaret

#### 5. What is your area of employment?

- Administrative
- Secretary
- Medical Assistant
- Nurse
- Social Work
- Care Manager

#### 6. How long have you been working in the healthcare field?

- less than 3 years
- 3-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- Over 20 years

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Patient Barriers to Contraception Access

7. Do you believe child-care is a barrier for patient access to contraception?				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
8. Do you believe insura	ance coverage is a l	parrier for patient acces	s to contraception?	
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
9. Do you believe difficulty scheduling appointments is a barrier for patient access to contraception?				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
10. Do you believe lack of awareness and misconceptions is a barrier for patient access to contraception?				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

# 11. Which of the following **have you directly observed** as reported barriers for **patient access** to contraception? (Please Rank)

Child-care
Insurance coverage/patient cost
Transportation
Difficulty scheduling appointments
Absence from work
Lack of awareness and misconceptions about contraceptive methods
Concern for side effects
Concern for side effects   Religious beliefs

## Barriers to Contraception Access: Staff Survey

Challenges to Providing Contraception in the Health Center

13. Do you believe finances (expense of medical supplies, maintaining insertional medical equipment, adequate compensation for counseling and procedure, et.) are a barrier to providing contraception interventions in the Health Center?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

14. Do you believe the logistics of stocking medical supplies (storage space, purchasing devices from the manufacture, etc.) is a barrier to providing contraception interventions in the Health Center?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

15. Do you believe scheduling challenges (limited availability of slots for contraception dedicated appointments) are a barrier to providing contraception interventions in the Health Center?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

16. Do you believe limited availability of rooms is a barrier to providing contraception interventions in the Health Center?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$

## 17. Which of the following have **you directly experienced with patients** in providing contraception interventions in the Health Center? (Please Rank)

Financial (expense of medical supplies, maintaining insertional medical equipment, adequate compensation for counseling and procedure, etc.)
Logistics of stocking medical supplies (storage place, purchasing devices from the manufacture, etc.)
Scheduling challenges (limited availability of slots for contraception dedicated appointments)
Availability of rooms
Other

18. If you chose "other" in the previous question, please specify:

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## Contraception Knowledge

19. LARC (Long Acting Reversible Contraception) is appropriate for adolescents and nulliparous women.

🔵 True

🔵 False

20. ACOG (American College of Obstetricians and Gynecologists) Guidelines recommend the use of routine prophylactic antibiotics at the time of IUD (Intrauterine Device) insertion to decrease risk of pelvic infection.

🔵 True

🔵 False

21. History of previous ectopic pregnancy is a contraindication for IUD contraception.

True

🔵 False

22. Immediate post-partum insertion of LARC is safe.

True

🔵 False

23. Which of the following are required prior to inserting an IUD in an asymptomatic patient according to ACOG recommended guidelines? (mark all that apply)

Pap Smear
STI (Sexually Transmitted Infection) testing

Pregnancy test

None of the above