

THE ORIENT STUDY PROTOCOL: IMPROVING RURAL AND REGIONAL ACCESS TO LONG-ACTING REVERSIBLE CONTRACEPTION AND MEDICAL ABORTION THROUGH NURSE-LED MODELS OF CARE, TASKSHARING AND TELEHEALTH

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Background

Ensuring access to contraception and abortion services is a priority of the National Women's Health Strategy 2020-2030. Women in rural and remote areas of Australia often experience difficulties in accessing long-acting reversible contraception (LARC) and early medical abortion (EMA). Extending the scope of practice of general practice nurses using nurse-led models and task-sharing could help to overcome access issues. While such models exist in community health and family planning settings, they have not been developed or evaluated in general practice. The ORIENT study aims to increase access to LARC and EMA for women in rural and regional Australia, through implementing an innovative nurse-led model in primary care.

Methods

ORIENT is a five-year pragmatic, stepped-wedge, cluster randomised controlled trial. We will co-design, implement and evaluate a nurse-led model of care that includes contraceptive implant insertions and use of telehealth to support LARC and EMA. Thirty-two general practices will be recruited. Online education, academic detailing and a virtual Community of Practice will be utilised to support implementation, and an evaluation will be undertaken.

Results

It is anticipated that broadening the scope of practice nurses to provide LARC and EMA services in general practice will increase LARC uptake and access to EMA for women living in rural and regional areas of Australia.

Conclusions

ORIENT will equip practice nurses with the resources, networks, knowledge and skills to increase the delivery of LARC and EMA in rural and regional Australia. This has the potential to decrease unintended pregnancies and improve reproductive health outcomes for this priority population in Australia.

Conflicts of interest: Nil