CASE WESTERN RESERVE UNIVERSITY
President's Leadership Development Program

Preparing Medical Staff for Safe, Patient-Centered Care in an Abortion Clinic: A Comprehensive Training Model

Mira Schwarz

Leadership Action Project Executive Summary

Submitted to the President's Leadership Development Program
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Me'Chelle Hayes, DNP, RN, FNP-BC
Frances Payne Bolton School of Nursing
Mentor

Andrea M. Hauser, PhD
Executive Director, President's Leadership Development Program

Executive Summary

Through my project I was trying to address the social issue regarding a lack of education in abortion care and sexual health. I worked with Ohio's largest independent abortion clinic to revamp education tools that were outdated. I found when researching different education platforms or just general statistics regarding how frequently healthcare provers are receiving this type of reproductive health education, that this information was being left out of health education programs. This was happening even with students requesting abortion education.

There was an added stigma attached to teaching sexual health care along with political aspects which impacts scope of practice in this care. This leads to providers not being able to access this knowledge which causes further barriers in access to care. Education in this field or the lack thereof is the result of failure from multiple social systems and educational institutions that refuse to acknowledge this care.

My project category was applied as I implemented new trainings. Before starting this project I reviewed literature for standards of best care while reviewing our outdated trainings to assess where the gaps in education are.

The outcome of my project consisted of three new trainings and guidelines for the abortion clinic. I assessed the success of my project through the approval of the director of nursing. In the future they will be able to use their patient satisfaction surveys to also assess any changes to nurse preparedness. Along with all of that the materials I created will be used for years as they provide continued education and refreshers on these concepts. These materials will also continue to impact our patients as we see over 5,000 patients annually, and they will benefit from up to date standards of care.

This whole project is deeply connected with our program values of justice and impact. Through addressing the disparities in reproductive healthcare education, I was working with both my personal value and the program's value of justice to provide a better education for providers and patients since our own educational institutions and social systems had failed us in that. The value of impact was shown through the amount of people who would experience the positive changes of up to date education and care. This includes both our staff and patients.

This whole project wouldn't have been possible without the relationships I worked to create, and truly the whole process was unknowingly guided through our leadership assumptions. With relationships being the foundation of leadership, I was able to provide credibility to create these materials as I had spent a year showing my work ethic and the passion I have in reproductive health. This showed the foundation of leaders is credibility, which led to our next assumption that leadership is non-positional. I worked on all of these materials without a leadership position, and as a student who wanted to create an impact. Which truly shows the last leadership assumption, that leadership is guided by values. And my personal values of justice, impact, and equity led me to creating the best possible educational materials to further help sexual health providers and patients.