TRAUMA-INFORMED ABORTION CARE:

Direct Observation Feedback Form

	Activity	Yes	No	Comments		
Thi are	ESTABLISHING SAFETY AND CONNECTION USING LIVES METHOD This is the first step of high-quality trauma-informed care. Strong interpersonal communication and rapport are key to providing this care using the LIVES method and helping a patient feel safe and comfortable. Please assess the person playing the provider role against the following questions.					
1	Did the provider take the time to establish empathy & rapport with the patient? (i.e., did they do anything that helps patient feel comfortable and safe like: ensure privacy? model kindness? provide non- judgmental care and treatment? provide individualized information and interactive counseling?)					
2	Did the provider ask the patient if they came with someone, and if they would like that person to join them during the information session?					
3	Did the provider LISTEN to the patient effectively? (i.e., did they do things like: make eye contact with the patient? give them full attention? reflect how they are feeling? be gentle and patient? speak without judgment?)					
4	Did the provider INQUIRE about the patient's condition and needs? (i.e., did they do things like: ask open-ended questions? ask for clarification/detail? reflect back patient's feelings? help identify emotional, physical, social needs or concerns? summarize what patient said?)					
5	Did the provider VALIDATE the patient and show them they understand and believe them? (i.e., did they use phrases similar to the following: it's not your fault? you are not to blame? you are not alone? everybody deserves to feel safe? I am concerned this may be affecting your health?)					
6	Did the provider ENHANCE the patient's safety? (i.e., did they ask questions like: has your experience of physical violence increased in the last 6 months? have you ever been beaten when you were pregnant? has anyone ever threatened you with a weapon? do you believe someone could kill you?)					
7	Did the provider SUPPORT the patient? (i.e., did the provider ask patient what they could do to help right away? did the provider help patient connect to information, services and social support?)					

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PROVIDING ENHANCED SUPPORT This section is ensuring that the support provided to the patient explains the referral process, includes consent and full explanation of the patient's rights and conforms to local legal requirements for providing abortion care or other SRH services. Please assess the person playing the provider role against the following questions.					
8	Did the provider utilize the referral form and explain the referral process in detail?				
9	Did the provider utilize the consent form for the abortion service and explain in detail the rights of the person?				
This	SESSING THE PATIENT'S HEALTH s section helps ensure proper confidentiality, privacy and ta mination takes place. Please assess the person playing the				
10	Did the provider ensure privacy and confidentiality for the patient? (i.e., did they do thing like: close any doors or windows? ensure there were no other providers or people in the room without the consent of the patient? tell the patient that they will keep all information confidential?)				
11	Did the provider ask the patient their medical history, including timing of the incident and last menstrual period?				
12	If the patient comes within 72-120 hours of the incident, did the provider offer emergency contraception, treatment for STIs and post- exposure prophylaxis (PEP) for HIV or referral services?				
This pelv	STEPS OF TRAUMA-INFORMED CARE s section ensures that providers follow proper procedures of vic exam and/or if an abortion procedure is provided. Please inst the following criteria.				
13	Did the provider establish rapport before the exam?				
14	Did the provider invite the patient to suggest measures that will make them more comfortable with the exam and procedure?				
15	Did the provider ask if the patient would like someone to accompany them during the exam?				
16	Did the provider allow the patient to choose the gender of the provider if they prefer it?				

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17	 Did the provider explain the bimanual and speculum exam process before starting? a. Did the provider ensure that each of these steps is necessary for the care being provided? b. Did the provider inform the patient that the exam and/or the procedure will stop if they feel uncomfortable and provide an opportunity for the patient to decline this care? c. Did the provider assure the patient that they have control over the pace of the exam and/or procedure? 			
18	Did the provider tell the patient about each step of the exam and/or the procedure right before it happens?			
19	Did the provider keep the patient's body covered, exposing only the areas being examined?			
20	Did the provider encourage the patient to use abdominal breathing to relax the pelvic floor muscles?			
21	 Did the provider rest the hands for bimanual exam or the unopened speculum against the client's genitals so that they get used to the sensation before the hand or speculum is inserted and opened? You can also allow the patient to help guide the speculum if they desire. a. Did the provider use lubricant and/or the smallest possible speculum (if available)? This is especially important if the patient is post-menopausal. 			
22	If the patient did not want to continue the exam or procedure, did the provider stop, inquire about the patient's needs, and proceed when they were ready?			
POST-EXAMINATION PROCEDURE This section ensures that providers deliver appropriate care and attention following the pelvic examination and or abortion service. Please assess the person playing the provider role against the following questions.				
23	If a discussion about referrals during counseling was incomplete or not conducted, did the provider follow-up with the patient about any referrals?			
24	Did the provider offer contraceptive counseling, or confirm that the woman received contraceptive counseling, and prepare to provide her with her method of choice?			

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25	 Did the provider discuss with the patient a plan or story that might be acceptable to their abuser regarding their contraceptive method or abortion? a. Did the provider ask if the patient needs a contraceptive method that they can hide from their abuser? b. Did the provider explain what the patient should tell an abuser about seeking medical care after or during a medical abortion if they start bleeding heavily? (i.e., did they do things like: teach the patient that no one can tell whether they are having a miscarriage versus an abortion? Inform the patient could say they are just having a heavy period (that is too heavy if there is a problem)? c. Did the provider confirm that the patient can safely return for an appointment, and if not, discuss with the patient how they might accommodate them for care? 			

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