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JOHN AUERBACH COMMISSIONER The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health Division of Health Care Quality 99 Chauncy Street, 2<sup>nd</sup> Floor, Boston, MA 02111 617-753-8000

# Circular Letter: DHCQ 08-06-491

- TO: Medical Director Acute Care Hospital
- **FROM:** Paul Dreyer, Ph.D. Bureau Director
- **DATE:** June 27, 2008
- **RE:** Emergency Contraception

The purpose of this communication is to advise you that <u>we have not received the requested</u> <u>documentation of compliance with your obligations under certain sections of Chapter 91</u> <u>of the Acts of 2005, An Act Providing Timely Access to Emergency Contraception,</u> <u>(Chapter 91) including the submission of an attestation that your hospital is in</u> <u>compliance with the law, as was requested by the Department of Public Health (the</u> <u>Department) by May 11, 2007.</u>

In December of 2005, July of 2006, and April of 2007 the Department issued circular letters DHCQ 05-12-456, DHCQ 06-6-462, and DHCQ 07-04-475, respectively, which notified hospitals of the requirements of the new law, and promulgation of 105 CMR 130.1040 through 130.1043, provided them with the health information and reporting materials necessary to implement and comply with the statute and regulation; and requested submission of the following materials:

- 1. All hospital policies and protocols relating to the implementation of and compliance with the statute, regulation and circular letters,
- 2. A signed affirmation of compliance

**Due to the failure to submit proper documentation, your hospital is not in compliance with Department requirements.** A revised copy of affirmations for you to sign and return, as well as a statement of compliance are provided in Attachment A and B, respectively. A compliance checklist that will be used to evaluate your submission is provided for your convenience in Attachment C. To verify that the hospital is in compliance, the Department requests that all hospital policies and protocols regarding the provision of emergency contraception to rape survivors, in addition to Attachments A and B, be submitted to Lucille Gunn, Department of Public Health, Division of Health Care Quality, 99 Chauncy Street, Boston, MA 02111 by July 20th, 2008.

Department representatives will be contacting hospitals that have not submitted the requested documents by the aforementioned deadline, and subsequent on-site reviews may be conducted to verify compliance. We appreciate your continued cooperation with the implementation of this legislation. If you have questions regarding this correspondence please contact Ms. Gail Palmeri at 617-753-8230 or email gail.palmeri@state.ma.us, or Ms. Lenore Tsikitas at 617-624-6059 or email lenore.tsikitas@state.ma.us.

#### Enclosures (4)

- Updated Provider Sexual Crime Report
- American College of Obstetricians and Gynecologists Practice Bulletin
- World Health Organization, Medical eligibility criteria for contraceptive use, excerpted
- Available at <u>www.who.int/reproductive-health/publications/mec/index.htm</u>
- Rape Crisis Center Referral List

# ATTACHMENT A

## **HOSPITAL:**

### CAMPUS:

# Division of Health Care Quality Hospital Affirmations 105 CMR 130.1040 through 130.1043

The Hospital affirms the Emergency Department is:

- 1) Providing the medically and factually accurate written information prepared by the Commissioner of Public Health about emergency contraception to all persons who provide care to victims of sexual assault.
- 2) Promptly providing the medically and factually accurate written information about emergency contraception prepared by the Commissioner of Public Health to every female rape victim of childbearing age who presents at a facility after a rape.
- 3) Promptly offering emergency contraception to each female rape victim of childbearing age and initiating emergency contraception upon her request.
- 4) Reporting the administration of emergency contraception to each female rape victim of childbearing age with required reporting via the updated Provider Sexual Crime Report that includes the Emergency Contraception Report.

The Hospital also affirms that:

- 1) The hospital provides a notice of patient rights, updated as amended by Chapter 91, to all patients as required by M.G.L. c. 111, § 70E.
- 2) When providing Emergency Contraception, the hospital offers pills (i.e., not a prescription).
- 3) Neither the hospital nor its staff requires any female rape victim of childbearing age to complete any part of a sexual assault evidence collection kit or police report as a condition of any of the following:
  - The provision of medically and factually accurate written information about emergency contraception;
  - The prompt offering of emergency contraception; and
  - The initiation of emergency contraception.
- 3) To ensure that particular hospital staff's values or beliefs do not interfere with compliance with the law, the hospital will institute systems to ensure that all female rape victims of childbearing age are promptly provided medically and factually accurate information about emergency contraception, are promptly offered emergency contraception, and emergency contraception is initiated upon her request.
- 4) If emergency contraception is not initiated upon the request of the female rape victim of childbearing age, the contraindication(s) for non-initiation are based on best clinical practice and information (such as American College of Obstetrics and Gynecology Practice Bulletin, 69, 2005; or World Health Organization Medical Eligibility Criteria for Contraceptive Use, Third edition, 2004). The contraindications are documented in the patient's medical record.

Signature

Date

Hospital

Title

# **ATTACHMENT B**

#### HOSPITAL:

#### **CAMPUS:**

## Access to Emergency Contraception Compliance Statement

- 1. Please explain the hospital's failure to establish and/or submit the requested policies and procedures:
  - Identify and describe any issues or barriers to compliance

### 2. Quality Assurance:

- Please describe your Quality Assurance Program to ensure that all staff receive adequate training and adhere to the policies regarding the prompt provision of emergency contraception to rape survivors.
- Please identify the staff person responsible for ensuring that the administration of emergency contraception to victims of rape is reported to the Department of Public Health via the Provider Sexual Crime Report (PSCR). Please provide job title.

# ATTACHMENT C

## HOSPITAL:

### CAMPUS:

Hospital policies and protocols must be revised to include specific language that details the regulatory requirements of the law. Please use this checklist which is based on the law posted at <u>www.mass.gov/emergencycontraception</u> to assess the Hospital's EC policy and ensure that it reflects the provisions identified in the law prior to resubmission.

The Department is concerned about any barriers to compliance hospitals are encountering, and is preparing materials to assist hospitals in the further development of their protocols. Information will be posted on the Department website when complete: (*www.mass.gov/emergencycontraception*).

## Requirements for Compliance with Chapter 91 of the Acts of 2005

- When hospitals initiate emergency contraception (EC) upon the request of a female rape victim of childbearing age, hospitals must provide emergency contraceptive pills. The provision of a prescription for emergency contraception pills does **not** constitute compliance.
- Hospitals and their staff cannot require any female rape victim of childbearing age to complete any
  part of a sexual assault evidence collection kit or police report as a condition for any of the following:

   The provision of medically and factually accurate written information about emergency
  - contraception;
  - The prompt offering of emergency contraception; or
  - The initiation of emergency contraception.
- When hospitals initiate emergency contraception upon the request of a female rape victim of childbearing age, hospitals must report the administration of emergency contraception with required reporting via the Provider Sexual Crime Report.

#### In order to demonstrate compliance all policies, protocols and affirmations must:

Specifically call for the prompt provision of written information about emergency contraception (EC) prepared by the Department of Public Health to female rape survivors of child bearing age

Specifically call for prompt provision of emergency contraception *at the facility* to each female rape victim and initiation of EC upon her request

- Specifically state that EC pills, not a prescription, are provided to survivors
- Specifically state that no sexual assault evidence collection kit or police report is required prior to the provision of emergency contraception.
- Specify that the administration of emergency contraception to rape survivors must be reported via the updated Provider Sexual Crime Report<sup>1</sup> that includes the Emergency Contraception Report
- Contain medically accurate information and appropriate directions for administration of EC according to recent evidence-based clinical guidelines such as those published by the American College of Obstetricians and Gynecologists<sup>2</sup> or the World Health Organization<sup>3</sup>
- Affirm that the hospital provides a notice of patient rights, updated as amended by Chapter 91, to all patients as required by M.G.L. c. 111, § 70E

<sup>1</sup> See updated PSCR, enclosed

<sup>2</sup> ACOG Practice Bulletin. Clinical Management Guidelines for Obstetrician-Gynecologists, Number 69, December 2005

<sup>3</sup> WHO. Medical eligibility criteria for contraceptive use. Third edition. Geneva, 2004.