

YOUR FEEDBACK IS IMPORTANT TO US.

Please take a few minutes to tell us what you thought of the Toolkit.

How do you think you will use the Toolkit?

What aspects of the Toolkit were most helpful to you?

What aspects were least helpful?

**Are there any elements of the Toolkit that you had hoped were included, but were not?
If so, please describe.**

Do you think the Toolkit is user-friendly? If not, what would make it easier to use?

Comments:

Are you interested in additional information or support related to abortion care? Yes No

Would you be open to providing additional feedback on the Toolkit in the future? Yes No

If yes on either above, please provide your e-mail address _____

Please return this form to: Abortion Access Project, PO Box 410164 Cambridge, MA 02141
Fax: 617-252-6878

Providing Abortion Care

A PROFESSIONAL TOOLKIT FOR NURSE-MIDWIVES,
NURSE PRACTITIONERS, AND PHYSICIAN ASSISTANTS

USER EVALUATION

Professional Identification: Please check all categories that apply.

Administrator:

- Executive Director
- Owner
- Clinic Director
- Medical Director
- Other: _____

Academic/Researcher

Advocate

Attorney

Counselor:

- Social Worker
- Psychologist
- Other: _____

Nurse:

- RN
- Advanced Practice Nurse
- CNM
- NP type: _____
- Other APN describe: _____

Physician Assistant

Physician, specialty:

- OB/GYN
- Family Practice
- Adolescent Medicine
- Other: _____

Student specify profession:

Other: _____

Are you either an abortion provider or employed in an office that provides abortions?

Abortion provider

Yes No

Employed at an office that provides abortions

Yes No

If you are a health care professional, what is your affiliation?

Please check all that apply.

Hospital-based Practice

Independent Abortion Clinic

Independent Provider

Planned Parenthood Affiliate

Primary Care Practice

Private Practice

Specialty Practice

Other: _____

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Module One: Understanding Abortion Care					
Section I. Abortion in Context					
Information increased my knowledge in this area.	1	2	3	4	5
Content is relevant to my professional needs.	1	2	3	4	5
Section is a helpful resource.	1	2	3	4	5
Section II. Advanced Practice Clinicians as Abortion Providers					
Information increased my knowledge in this area.	1	2	3	4	5
Content is relevant to my professional needs.	1	2	3	4	5
Section is a helpful resource.	1	2	3	4	5
Module Two: Advancing Scope of Practice to Include Abortion Care					
Section III. APC Practice Regulation: Roles of Legislatures, Licensing Boards, and Professionals					
Information increased my knowledge in this area.	1	2	3	4	5
Content is relevant to my professional needs.	1	2	3	4	5
Section is a helpful resource.	1	2	3	4	5
Section IV. Advancing Abortion into APC Scope of Practice: Evidence and Methods					
Information increased my knowledge in this area.	1	2	3	4	5
Content is relevant to my professional needs.	1	2	3	4	5
Section is a helpful resource.	1	2	3	4	5
Section V: Becoming Clinically Competent and Documenting Competency in Abortion Care					
Information increased my knowledge in this area.	1	2	3	4	5
Content is relevant to my professional needs.	1	2	3	4	5
Section is a helpful resource.	1	2	3	4	5
Overall Toolkit Use					
The Toolkit provided me with new information.	1	2	3	4	5
I will use the Toolkit as a reference on an ongoing basis.	1	2	3	4	5
I will refer colleagues to the Toolkit as a reference.	1	2	3	4	5
Information in the Toolkit is easy to access.	1	2	3	4	5

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
For those currently offering abortion care					
I am familiar with how my state regulatory board functions.	1	2	3	4	5
I plan to become more familiar with how my state regulatory board functions.	1	2	3	4	5
I am active within my state or national professional association.	1	2	3	4	5
I plan to become more active within my state or national professional association.	1	2	3	4	5
I have developed a professional portfolio that describes my work in abortion care.	1	2	3	4	5
I plan to develop a professional portfolio that describes my work in abortion care.	1	2	3	4	5
For those not currently offering abortion care					
I believe that abortion care should be a part of my profession's scope of practice.	1	2	3	4	5
My patients would benefit from my providing abortion care.	1	2	3	4	5
My community would benefit from my providing abortion care.	1	2	3	4	5
I plan to provide the following abortion care in the future	1	2	3	4	5
Abortion Counseling	1	2	3	4	5
Abortion Referrals	1	2	3	4	5
Medication Abortion	1	2	3	4	5
Aspiration Abortion	1	2	3	4	5
Post-abortion Care	1	2	3	4	5