

## FAMILY PLANNING PROGRAM REVIEW

COUNTY/AGENCY:

FAMILY PLANNING COORDINATOR:

DATE:

REVIEWER:

PARTICIPANTS:

Criteria for Compliance	Compliance Met		Comments/ Documentation/ Explanation/Timelines
	Yes	No	
<b>1. Organization and Administration</b>			<b>Program Guidelines for Project Grants for Family Planning Services* Section 6.0 Program Management</b>
A. There is a line item budget, which reflects the annual plan for family planning services. <i>(Section 6.2*)</i>			
B. There is a written description of the program, which is current and reflects the annual health plan. <i>(Section 6.2*)</i>			
C. There is an advisory group of 5-9 members that is involved in the development, implementation and evaluation of the program. <i>(Section 6.8*)</i>			
1. There is written documentation that printed material and visual aids are approved by the Advisory Committee is current, accurate and appropriate for the population served. <i>(Section 6.8*)</i>			
D. All program personnel participate in continuing education programs related to their activities. <i>(Section 6.6*)</i>			
1. There is a written record of attendance by personnel at educational activities. <i>(Section 6.6*)</i>			
E. Priority for services is given to adolescents and persons from low-income families. <i>(42 CFR 59.5**)</i>			
F. The current State DHS OFH fee schedule is used to determine patient fees. <i>(Section 6.3*)</i>			
G. The program/agency is listed in the phone directory. <i>(Section 6.9*)</i>			

Criteria for Compliance	Compliance Met		Comments/ Documentation/ Explanation/Timelines
<b>I. Organization and Administration (Continued)</b>	<b>Yes</b>	<b>No</b>	<b>Program Guidelines for Project Grants for Family Planning Services* Section 6.0 Program Management</b>
H. Services are provided in locations and at times appropriate to meet the needs of the area. <i>(Section 6.4*)</i>			
<b>II. Services</b>	<b>Yes</b>	<b>No</b>	<b>Program Guidelines for Project Grants for Family Planning Services* Section 7.0 Client Services</b>
A. Services include provision for natural family planning methods, infertility care, and services for adolescents. <i>(42 CFR 59.5**)</i>			
B. Services are provided in a manner that protects the dignity of the individual. <i>(42 CFR 59.5**)</i>			
C. Abortion services are not provided on site. <i>(42 CFR 59.5**)</i>			
1. Agency does not pay for abortion services through referral.			
2. Agency does not arrange for abortion services.			
D. To the extent practical, agency encourages parental participation in services provided to clients 17 years and below. <i>(Section 8.7*)</i>			
E. The agency has child abuse reporting policy and procedures to meet the minimum elements of the State DHS OFH requirements. <i>(OPA 99-1****)</i>			
F. To the extent practical, agency provides counseling to minors on resisting attempts to coerce minors into engaging in sexual activities. <i>(Section 8.7*)</i>			
G. There are current written policies, procedures and protocols for the provision of all services offered, signed by the Medical Director including: <i>(Section 7.1*)</i>			
1. Current written clinic policies and procedures, including fiscal, that are consistent with Title X. <i>(Section 6.3*)</i>			

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<b>II. Services (Continued)</b>			<b>Program Guidelines for Project Grants for Family Planning Services* Section 7.0 Client Services</b>
2. Current written client education plans with content outlines. <i>(Section 8.1*)</i>			
3. Current written clinical protocols for RN's and clinicians appropriate for scope of practice. <i>(Section 7.1*)</i>			
4. Medical emergencies <i>(Section 7.3*)</i>			
5. Laboratory service procedures <i>(Section 7.1*)</i>			
6. Disinfection and sterilization <i>(Section 10.0*)</i>			
H. The new patient receives family planning information prior to examination, allowing for informed consent. Describe patient health education activities. <i>(Section 8.0*)</i>			
I. A post exam counseling interview is provided to insure the patient's understanding of the current usage of the method received. <i>(Section 8.1*)</i>			
J. All clients receive counseling on STD's and HIV that is based on the clients personal risk and includes steps to be taken by the client to reduce risk. <i>(Section 8.2*)</i>			
K. Risk assessment for HIV infection or referral for assessment, testing and counseling is provided when indicated. <i>(Section 8.2*)</i>			
L. Clients newly starting prescriptive methods are scheduled for return visits within 3 months. <i>(Section 8.3*)</i>			
M. There is a tracking system to identify clients in need of follow-up or continuing care. <i>(Section 8.3*)</i>			
N. There is a written policy and procedure regarding the follow-up of clients who are treated for chlamydia and their partners. <i>(Section 8.3*)</i>			

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<b>II. Services (Continued)</b>			<b>Program Guidelines for Project Grants for Family Planning Services* Section 7.0 Client Services</b>
O. There are community information and educational programs designed to: achieve community understanding of the objectives of the program; inform the community of the availability of services; and, promote continuing participation in the project by persons to whom family planning services may be beneficial. <i>(Section 6.9*)</i>			
<b>III. Quality Assurance</b>			<b>Program Guidelines for Project Grants for Family Planning Services* Section 6/10 Program/Clinic Management</b>
A. There is a quality assurance system in place that provides for ongoing evaluation of project personnel and services. <i>(Section 10.4*)</i>			
B. The program participates in a client data collection system. <i>(Section 6.7*)</i>			
C. There is a written plan for periodic routine efforts to assess and measure progress toward attaining stated program objectives. <i>(Section 6.2*)</i>			
<b>QUALITY ASSURANCE REVIEW QUESTIONS</b>			
1. Average attendance is:			
2. Waiting time for new patient does not exceed two weeks.			
3. No-show rate is:			
4. Two to four patients are scheduled per hour per provider, and sessions are not less than two hours.			
5. There is adequate staff with supervision to provide services.			

\*OPA Office of Family Planning Program Guidelines for Project Grants for Family Planning Services, January 2001

\*\*42 CFR Ch. 1 (10-1-00 Edition) Public Health Service, HHS, Part 59 Grants for Family Planning Services

\*\*\*OPA Program Instruction Series, OPA 99-1: Compliance with State Reporting Laws