

PROGRAM REVIEW TOOL

LEGEND

A	ADMINISTRATIVE
C	CLINICAL
F	FINANCIAL
GRANTEE	NC DPH IS THE TITLE X GRANTEE
SUB-RECIPIENT	ANY AGENCY THAT RECEIVES TITLE X FUNDING FROM NC DPH

8. PROJECT MANAGEMENT AND ADMINISTRATION

8.1 Voluntary Participation

Title X Program Requirement	Implementation Strategy	Assessment
8.1.1		
Family planning services are to be provided solely on a voluntary basis (Sections 1001 and 1007, PHS Act;	Agencies should institutionalize administrative procedures (i.e., staff training, clinical protocols, and consent forms) to ensure clients receive services on a voluntary basis.	
	Evidence that this requirement has been met includes:	

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Title X Program Requirement	Implementation Strategy	Assessment	
<p>42 CFR 59.5 (a)(2)).</p> <p>Clients cannot be coerced to accept services or to use or not use any particular method of family planning (42 CFR 59.5 (a)(2)).</p>	<p>1. A Agency has written policies and procedures that specify services are to be provided on a voluntary basis.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
	<p>2. A Documentation (e.g., staff communications, training curriculum and records) demonstrates staff has been informed at least once annually that services must be provided on a voluntary basis.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
	<p>3. A Administrative policies include a written statement that clients may not be coerced to use contraception, or to use any particular method of contraception or service.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
	<p>4. A General consent forms or other documentation at service sites inform clients that services are provided on a voluntary basis.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment		
8.1.2				
<p>A client's acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, any other services, assistance from, or participation in any other program that is offered by the grantee or sub-recipient (Section 1007, PHS Act; 42 CFR 59.5 (a)(2)).</p>	<p>Agency should assure clients' receipt of family planning services is not used as a prerequisite to receipt of other services from the service site.</p>			
	<p>Evidence that this requirement has been met includes:</p>			
	<p>1.</p>	<p>A The agency has a written policy that prohibits making the acceptance of family planning services a prerequisite to the receipt of any other services.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
	<p>2.</p>	<p>A Documentation (e.g., staff communications, training curriculum) indicates staff has been informed at least annually that a client's receipt of family planning services may not be used as a prerequisite to receipt of any other services offered by the service site.</p>	<p>Comments:</p>	<p>Met <input type="checkbox"/></p> <p>Not Met <input type="checkbox"/></p>
<p>3.</p>	<p>A General consent forms or other documentation provided to clients states that receipt of family planning services is not a prerequisite to receipt of any other services offered by the service site.</p>	<p>Comments:</p>	<p>Met <input type="checkbox"/></p> <p>Not Met <input type="checkbox"/></p>	

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Title X Program Requirement	Implementation Strategy	Assessment	
8.1.3			
Personnel working within the family planning project must be informed that they may be subject to prosecution if they coerce or try to coerce any person to undergo an abortion or sterilization procedure (Section 205, Public Law 94-63, as set out in 42 CFR 59.5(a)(2) footnote 1).	Evidence that this requirement has been met includes:		
	1.	A Agency has written policies and procedures that require that all staff is informed that they may be subject to prosecution if they coerce or try to coerce any person to undergo an abortion or sterilization procedure.	Met <input type="checkbox"/> Comments:
2.	A Documentation demonstrates that staff has been informed at least once annually that they are subject to this requirement.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

8.2 Prohibition of Abortion

Title X Program Requirement	Implementation Strategy	Assessment	
8.2			
Title X grantees and sub-recipients must be in full compliance with Section 1008 of the Title X statute and 42 CFR 59.5(a)(5), which prohibit abortion as a method of family planning.	Evidence that this requirement has been met includes:		
	1.	A Agency has written policies and procedures that prohibit providing abortion as part of the Title X project.	Met <input type="checkbox"/> Comments:

Title X Program Requirement	Implementation Strategy	Assessment												
	2. F If the agency has other, non-Title X funds with which to provide abortion services, financial documentation demonstrates that Title X funds are not being used for abortion services and adequate separation exists between Title X and non-Title X activities. Systems must be in place to assure adequate separation of any non-Title X activities from the Title X project.	<table border="0" style="width: 100%;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Met</td> <td style="width: 33%; text-align: center;">Not Met</td> <td style="width: 33%; text-align: center;">N/A</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">Comments:</td> </tr> </table>		Met	Not Met	N/A		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			
	Met	Not Met	N/A											
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
Comments:														

8.3 Structure and Management

Title X Program Requirement	Implementation Strategy	Assessment												
8.3.2														
If a sub-recipient wishes to subcontract any of its responsibilities or services, a written agreement that is consistent with Title X Program Requirements and approved by the grantee must be maintained by the sub-recipient (45 CFR parts 74 and 92).	Evidence that this requirement has been met includes: 1. A Agencies who subcontract basic Family Planning clinical services must include compliance with Title X requirements in their subcontracts.	<table border="0" style="width: 100%;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Met</td> <td style="width: 33%; text-align: center;">Not Met</td> <td style="width: 33%; text-align: center;">N/A (no sub-contracts)</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">Comments:</td> </tr> </table>		Met	Not Met	N/A (no sub-contracts)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			
	Met	Not Met	N/A (no sub-contracts)											
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
Comments:														

8.4 Charges, Billings, and Collections

Title X Program Requirement	Implementation Strategy	Assessment	
8.4, 8.4.1			
<p>8.4 Clients must not be denied project services or be subjected to any variation in quality of services because of inability to pay.</p> <p>8.4.1 Clients whose documented income is at or below 100% of the Federal Poverty Level (FPL) must not be charged, although projects must bill all third parties authorized or legally obligated to pay for services (Section 1006(c)(2), PHS Act; 42 CFR 59.5(a)(7)).</p> <p>Although not required to do so, grantees that have lawful access to other valid means of income verification because of the client's participation in another program may use those data rather than re-verify income or rely solely on the client's self-report.</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency has policies and procedures assuring that clients 1) are not denied services nor subject to variation in services due to inability to pay, 2) whose documented income is at or below 100% FPL are not charged for services and 3) that third party payers are billed.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
	<p>2. F Financial documentation indicates clients whose documented income is at or below 100% FPL are not charged for services.</p>	<p>Monitored by Administrative Consultants</p> <p>Date of last Admin review:</p> <p>_____</p>	

Title X Program Requirement	Implementation Strategy	Assessment
	<p>3. F Financial documentation indicates that if a third party is authorized or legally obligated to pay for services, the project has billed accordingly.</p>	<p>Monitored by Administrative Consultants</p> <p>Date of last Admin review: _____</p>
	<p>4. F Agency follows a written policy and procedure for verifying client income that is aligned with Title X requirements.</p> <p>Agencies may use reported income through other programs offered in said agency rather than re-verify income.</p>	<p>Met Not Met</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p>Comments:</p>

Title X Program Requirement	Implementation Strategy	Assessment	
	5. F Agency policy and procedure for verifying client income does not present a barrier to receipt of services.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
8.4.2			
A schedule of discounts, based on ability to pay, is required for individuals with family incomes between 101% and 250% of the Federal Poverty Level (FPL) (42 CFR 59.5(a)(8)).	Evidence that this requirement has been met includes:		
	1. F Agency has policies and procedures requiring that a schedule of discounts be developed for services provided in the project and updated periodically to be in line with the FPL.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
8.4.3			
<p>Fees must be waived for individuals with family incomes above 100% of the FPL who, as determined by the service site project director, are unable, for good cause, to pay for family planning services (42 CFR 59.2).</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency policy and procedure provides for a process to refer clients (or financial records) to the service site director for review and consideration of waiver of charges.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
<p>2. F Documentation at the agency demonstrates a determination is made by the service site director or designee, is documented, and the client is informed of the determination.</p>	<p>N/A <input type="checkbox"/></p> <p>Comments:</p>	<p>Met <input type="checkbox"/></p> <p>Not Met <input type="checkbox"/></p>	

Title X Program Requirement	Implementation Strategy	Assessment	
8.4.4			
<p>For persons from families whose income exceeds 250% of the FPL, charges must be made in accordance with a schedule of fees designed to recover the reasonable cost of providing services. (42 CFR 59.5(a)(8)).</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency policy and procedure provides a sound rationale and process for determining the cost of services.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
8.4.5			
<p>Eligibility for discounts for un-emancipated minors who receive confidential services must be based on the income of the minor (42 CFR 59.2).</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency policy and procedure establishes a process for determining whether a client (including minors) is seeking confidential services and stipulates that charges to the individual seeking confidential services will be based solely on the individual's income.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
8.4.6			
<p>Where there is legal obligation or authorization for third party reimbursement, including public or private sources, all reasonable efforts must be made to obtain third party payment without the application of any discounts (42 CFR 59.5(a)(9)).</p> <p>Family income should be assessed before determining whether copayments or additional fees are charged. With regard to insured clients, clients whose family income is at or below 250% FPL should not pay more (in copayments or additional fees) than what they would otherwise pay when the schedule of discounts is applied.</p>	Evidence that this requirement has been met includes:		
	<p>1. F The agency can demonstrate that it has contracts with insurance providers, including public and private sources. Documented attempts to obtain private insurance contracts will be accepted.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
8.4.8			
<p>Reasonable efforts to collect charges without jeopardizing client confidentiality must be made.</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency has policies addressing collection that include safeguards that protect client confidentiality, particularly in cases where sending an explanation of benefits could breach client confidentiality.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
8.4.9			
<p>Voluntary donations from clients are permissible; however, clients must not be pressured to make donations, and donations must not be a prerequisite to the provision of services or supplies.</p>	Evidence that this requirement has been met includes:		
	<p>1. F Agency policies and procedures indicate if donations are accepted.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

8.5 Project Personnel

Title X Program Requirement	Implementation Strategy	Assessment	
8.5.1			
<p>Grantees and sub-recipients are obligated to establish and maintain personnel policies that comply with applicable Federal and State requirements, including Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act of 1973, Title I of the Americans with Disabilities Act, and the annual appropriations language.</p>	Evidence that this requirement has been met includes:		
	<p>1. A Agency has written policies and procedures in place that provide evidence that there is no discrimination in personnel administration at its organizations. These policies should include, but are not to be limited to, staff recruitment, selection, performance evaluation, promotion, termination, compensation, benefits, and grievance procedures.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
8.5.2			
<p>Project staff should be broadly representative of all significant elements of the population to be served by the project, and should be sensitive to, and able to deal effectively with, the cultural and other characteristics of the client population (42 CFR 59.5 (b)(10)).</p>	Evidence that this requirement has been met includes:		
	<p>1. A Written agency policies and procedures that address how the project operationalizes cultural competency.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
<p>2. A Documentation includes records of annual cultural competence training, in-services, client satisfaction surveys, or other documentation that supports culturally competent services.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>	

Title X Program Requirement	Implementation Strategy	Assessment	
8.5.4			
<p>Projects must provide that family planning medical services will be performed under the direction of a physician with special training or experience in family planning (42 CFR 59.5 (b)(6)).</p>	Evidence that this requirement has been met includes:		
	<p>1. C Agency demonstrates evidence that the medical/clinical services operate under the direction of a physician with special training or experience in family planning (C.V., Board Certification, or Continuing Education).</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
	<p>2. C There is evidence (e.g., medical advisory committee, board, and staff meetings) indicating involvement of the Medical Director in program operations.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
	3.. C Clinic protocols are reviewed and approved annually by the Medical Director.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
		Comments:	

8.6 Staff Training and Project Technical Assistance

Title X Program Requirement	Implementation Strategy	Assessment	
8.6.1			
Projects must provide for the orientation and in-service training of all project personnel, including the staff of sub-recipient agencies and service sites (42 CFR 59.5(b)(4)).	Evidence that this requirement has been met includes: 1. A Agency maintains written records of Family Planning orientation, in-service and other training attendance by project personnel. Required use: <i>(Family Planning Staff Title X Orientation and Annual Training Checklists)</i>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
		Comments:	

Title X Program Requirement	Implementation Strategy	Assessment	
8.6.2			
<p>The project's orientation/in-service training includes training on Federal/State requirements for reporting or notification of child abuse, child molestation, sexual abuse, rape, or incest, as well as on human trafficking.</p>	Evidence that this requirement has been met includes:		
	<p>1. A Agency documentation includes evidence of staff training within the current fiscal year specific to this area which may include attendance records and certificates.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
8.6.3			
<p>The project's orientation/in-service training includes training on involving family members in the decision of minors to seek family planning services and on counseling minors on how to resist being coerced into engaging in sexual activities.</p>	Evidence that this requirement has been met includes:		
	<p>1. A Agency policies ensure that staff receives training annually on adolescent counseling.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
	<p>2. A Documentation includes training attendance records/certificates which indicate that training on family involvement counseling and sexual coercion counseling has been provided.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
8.7 Grantees must ensure that the project is competently and efficiently administered (42 CFR 59.5 (b) (6) and (7)).			
8.7 LINK TO QFP:			
Projects should follow the QFP that defines 'quality' care and describes how to conduct quality improvement processes so that performance is monitored and improved on an ongoing basis. QI activities should be overseen by the grantee and occur at both the grantee and sub-recipient levels.			
	1. A Agency records document the use of ongoing (at least annually) quality improvement processes related to contraceptive use or clinical service delivery, and a description of steps taken in response to findings.	Yes <input type="checkbox"/> Comments:	No <input type="checkbox"/>
9. Project Services and Clients Title X Program Requirement	Implementation Strategy	Assessment	
9.2			
Services must be provided in a manner which protects the dignity of the individual (42 CFR 59.5 (a)(3)).	Evidence that this requirement has been met includes: 1. A Agency ensures protection of client dignity as evidenced in their policies or client satisfaction surveys.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

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	2. A Client surveys document that clients perceive providers and other clinic staff to be respectful.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>
	3. A Agency maintains a patient bill of rights or other documentation which outlines client's rights and responsibilities.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>
9.2 LINK TO QFP:			
A core premise of Recommendations for Providing Quality Family Planning Services is that quality services are client-centered, which includes providing services in a respectful and culturally competent manner.			
	1. A The agency has written policies and procedures that require their staff to receive training in culturally competent care. This should include how to meet the needs of the following key populations: LGBTQ, adolescents, individuals with limited English-proficiency, and the disabled.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

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Title X Program Requirement	Implementation Strategy	Assessment	
	2. A Documentation (e.g., training records) that demonstrates staff have received training in providing culturally competent care.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
9.3			
Services must be provided without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies, or marital status (42 CFR 59.5 (a)(4)).	Evidence that this requirement has been met includes:		
	1. A Agency has written policies and procedures that require staff to provide service without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies or marital status, and to inform staff of this requirement on an annual basis.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>
	2. A Documentation (e.g., staff communications, orientation documentation, training curricula) demonstrates that staff has been informed at least once annually that services must be provided without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies or marital status.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
9.5			
<p>Projects must provide for coordination and use of referral arrangements with other providers of health care services, local health and welfare departments, hospitals, voluntary agencies, and health services projects supported by other federal programs (42 CFR 59.5 (b)(8)).</p>	Evidence that this requirement has been met includes:		
	<p>1. A Agency has policy regarding client referrals to other providers of health care services, local health departments, departments of social services, hospitals, voluntary agencies, and health services projects supported by other federal programs.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>
	<p>2. A The agency maintains a current list of relevant referral agencies, including: emergency care, HIV/AIDS care and treatment agencies, infertility specialists, and chronic care management providers, and providers of other medical services not provided on-site.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment
9.6		
All grantees should assure services provided within their project operate within written clinical protocols that are in accordance with nationally recognized standards of care, approved by the grantee, and signed by the physician responsible for the service site.		
9.6 LINK TO QFP:		
Grantees should follow QFP, which defines “family planning” services (i.e., contraception, pregnancy testing and counseling, achieving pregnancy, basic infertility services, STD services, preconception health services), describes what services should be offered by family planning providers, and recommends how to provide those services by citing specific Federal and professional medical associations’ recommendations for clinical care.		
	<p>1. C Written clinical protocols include the full scope of family planning services as defined in QFP and Family Planning Agreement Addenda including contraception, pregnancy testing, and counseling, achieving pregnancy, basic infertility, STD, and preconception health services. Clinic protocols state that these services will be provided to female, male, and adolescent clients as appropriate.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Comments:</p>
	<p>2. C Agency utilizes current clinical protocols (i.e., revised within the past 12 months) that reflect the most current version of Federal and professional medical associations’ recommendations for each type of service, as cited in QFP.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Comments:</p>

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Title X Program Requirement	Implementation Strategy	Assessment	
	3. C Documentation that clinical staff has participated in training on QFP (e.g., training available from the Title X National Training Centers).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.7			
<p>All projects must provide for medical services related to family planning and the effective usage of contraceptive devices and practices (including physician’s consultation, examination, prescription, and continuing supervision, laboratory examination, contraceptive supplies) as well as necessary referrals to other medical facilities when medically indicated (42 CFR 59.5(b)(1)).</p> <p>This includes, but is not limited to emergencies that require referral. Efforts may be made to aid the client in finding potential resources for reimbursement of the referral provider, but projects are not responsible for the cost of this care.</p>	Evidence that this requirement has been met includes:		
	1. C Breast and cervical cancer screening are available on-site and offered to female clients.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment		
	2. C A written collaborative agreement is required for primary care services, unless those services are provided on site. A list of referral agencies exists, including: emergency care, HIV/AIDS care and treatment providers, infertility specialists, primary care and chronic care management providers.	Comments:	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
9.8				
All Projects must provide a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including infertility services and services for adolescents). If an organization offers only a single method of family planning, it may participate as part of a project as long as the entire project offers a broad range of family planning services. (42 CFR 59.5(a)(1)).	Evidence that this requirement has been met includes:			
	1. C Agency policy indicates that clients are provided a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including infertility services and services for adolescents).	Comments:	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
9.9			
<p>Services must be provided without the imposition of any durational residency requirement or requirement that the client be referred by a physician (42 CFR 59.5(b)(5)).</p>	Evidence that this requirement has been met includes:		
	<p>1. A The agency has a written policy stating that services are provided without the imposition of any durational residence requirement or a requirement that the client be referred by a physician.</p>	<p>Met <input type="checkbox"/> Comments:</p>	<p>Not Met <input type="checkbox"/></p>
9.10			
<p>Projects must provide pregnancy diagnosis and counseling to all clients in need of these services (42 CFR 59.5(a)(5)).</p>	Evidence that this requirement has been met includes:		
	<p>1. C The agency has a written policy, in accordance with the recommendations presented in QFP, about providing pregnancy diagnosis and counseling services to all clients in need of these services. Policy includes guidance for reproductive life planning discussions and collecting medical histories that include any coexisting conditions.</p>	<p>Met <input type="checkbox"/> Comments:</p>	<p>Not Met <input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
9.10 Link to QFP:			
Projects should follow QFP, which describes how to provide pregnancy testing and counseling services, and cites the clinical recommendations of the relevant professional medical associations.			
	1. C Staff have received training on pregnancy counseling recommendations presented in QFP at least once during employment	Yes <input type="checkbox"/> Comments:	No <input type="checkbox"/>
9.11			
Projects must offer pregnant women the opportunity to be provided information and counseling regarding each of the following options: <ul style="list-style-type: none"> • Prenatal care and delivery; • Infant care, foster care, or adoption; and • Pregnancy termination. 	Evidence that this requirement has been met includes:		
	1. C The agency has written policies and procedures requiring staff to offer options counseling to pregnant women.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

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Title X Program Requirement	Implementation Strategy	Assessment	
<p>If requested to provide such information and counseling, provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with respect to any options(s) about which the pregnant woman indicates she does not wish to receive such information and counseling (42 CFR 59.5(a)(5)).</p>	<p>2. C Written clinical protocols ensure that pregnant clients are offered neutral, factual information, and non-directive counseling about all three pregnancy options except for those options that the woman does not wish to receive information, and that referrals requested by the client are provided to her.</p>	<p>Met <input type="checkbox"/></p>	<p>Not Met <input type="checkbox"/></p>
9.12			
<p>Title X grantees must comply with applicable legislative mandates set out in the HHS appropriations act. Grantees must have written policies in place that address these legislative mandates:</p> <p>“None of the funds appropriated in the Act may be made available to any entity under Title X of the Public Health Service Act unless the</p>	Evidence that this requirement has been met includes:		
	<p>1. A The agency has written policy and procedures requiring that staff be informed annually that: (a) clinic staff must encourage family participation in the decision of minors to seek FP services, (b) minors must be counseled on how to resist attempts to coerce them into engaging in sexual activities, and (c) State law must be followed requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest..</p>	<p>Met <input type="checkbox"/></p>	<p>Not Met <input type="checkbox"/></p>

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<p>applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”</p> <p>“Notwithstanding any other provision of law, no provider of services under Title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”</p>	<p>2. A Documentation (e.g., staff communications, training curricula) demonstrates that all staff has been formally informed about items 1a-c above at least once annually.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

10. Confidentiality

Title X Program Requirement	Implementation Strategy	Assessment	
10			
<p>Every project must have safeguards to ensure client confidentiality. Information obtained by project staff about an individual receiving services may not be disclosed without the individual’s documented consent, except as required by law or as may be necessary to provide services to the individual, with appropriate</p>	<p>Evidence that this requirement has been met includes:</p> <p>1. A The agency has written policies requiring that all staff and agency functions safeguard client confidentiality.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

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safeguards for confidentiality. Information may otherwise be disclosed only in summary, statistical, or other form that does not identify the individual (42 CFR 59.11).	2.	A Documentation (e.g., staff communications, new employee orientation documentation, training curricula) demonstrates that staff has been informed at least once annually about policies related to preserving client confidentiality and privacy.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	3.	A Clinical protocols and policies have statements related to client confidentiality and privacy.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

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	4. A The health records system has safeguards in place to ensure adequate privacy, security and appropriate access to personal health information.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	5. A There is evidence that HIPAA privacy forms are provided to clients and signed forms are collected as required.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
	6. A General consent forms or other documentation at service sites state that services will be provided in a confidential manner, and note any limitations that may apply.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

11. COMMUNITY PARTICIPATION, EDUCATION, AND PROJECT PROMOTION

Title X Program Requirement	Implementation Strategy	Assessment	
11.1			
Title X grantees and sub-recipient agencies must provide an opportunity for participation in the development, implementation, and evaluation of the project by persons broadly representative of all significant elements of the population to be served; and by persons in the community knowledgeable about the community's needs for family planning services (42 CFR 59.5(b)(10)).	Evidence that this requirement has been met includes: 1. A The agency has a community engagement plan. Participants should include individuals who are broadly representative of the population to be served, and who are knowledgeable about the community's needs for family planning services. 2. A The community engagement plan: (a) engages diverse community members including adolescents and current clients, and (b) specifies ways that community members will be involved in efforts to develop, assess, and/or evaluate the program.	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment	
<p>Note to agencies:</p> <p><i>The community engagement plan aims to obtain community-wide input about the agency's family planning services.</i></p>	<p>3. A Documentation demonstrates that the community engagement plan has been implemented (e.g., reports, meeting minutes, etc.)</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
11.2, 11.3			
<p>11.2 Projects must establish and implement planned activities to facilitate community awareness of and access to family planning services (42 CFR 59.5(b)(3)). Each family planning project must provide for community education programs (42 CFR 59.5(b)(3)).</p> <p>The community education program(s) should be based on an assessment of the needs of the community and should contain an implementation and evaluation strategy.</p> <p>11.3 Community education should</p>	Evidence that this requirement has been met includes:		
	<p>1. A Agency has a written community education and service promotion plan that has been implemented (e.g., media spots/materials developed, event photos, participant logs, and monitoring reports). The plan: (a) states that the purpose is to enhance community understanding of the objectives of the project, make known the availability of services to potential clients, and encourage continued participation by persons to whom family planning may be beneficial, (b) promotes the use of family planning among those with unmet need, (c) utilizes an appropriate range of methods to reach the community, and (d) includes an evaluation strategy.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment	
<p>serve to enhance community understanding of the objectives of the project, make known the availability of services to potential clients, and encourage continued participation by persons to whom family planning may be beneficial (42 CFR 59.5 (b)(3)).</p> <p>Note to agencies:</p> <p><i>The community education and service promotion plan is the agency's plan to educate the community and promote family planning services.</i></p>	<p>2. A Documentation that evaluation of community outreach and education has been conducted, and that program activities have been modified in response.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

12. INFORMATION AND EDUCATION MATERIALS APPROVAL

Title X Program Requirement	Implementation Strategy	Assessment	
12.1, 12.2, 12.3			
<p>12.1 Title X grantees and sub-recipient agencies are required to have a review and approval process, by an Advisory Committee, of all informational and educational materials developed or made available under the project prior to their distribution (Section 1006 (d)(2), PHS Act; 42 CFR 59.6(a)).</p> <p>12.2 The committee must include</p>	<p>Evidence that this requirement has been met includes:</p> <p>1. A Agency has policies and procedures that ensure materials are reviewed prior to being made available to the clients that receive services within the project.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

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Title X Program Requirement	Implementation Strategy		Assessment	
<p>individuals broadly representative (in terms of demographic factors such as race, color, national origin, handicapped condition, sex and age) of the population or community for which the materials are intended (42 CFR 59.6 (b)(2).</p> <p>12.3 Each Title X grantee must have an Advisory Committee of five to nine members, except that the size provision may be waived by the Secretary for good cause shown (42 CFR 59.6 (b)(1)). The Advisory Committee must review and approve all informational and educational (I&E) materials developed or made available under the project prior to their distribution to assure that the materials are suitable for the population and community for which they are intended and to assure their consistency with the purposes of Title X (Section 1006(d)(1), PHS Act; 42 CFR 59.6(a)).</p>	2.	<p>A Copies of media review participant evaluations and a summary of these evaluations demonstrate the process used to review and approve materials.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
	3.	<p>A The agency utilizes a rolling media review process or other media review process involving clients, with reviewers who are broadly representative of the population served.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
12.5				
<p>The Advisory Committee(s) may delegate responsibility for the review of the factual, technical, and clinical accuracy to appropriate project staff; however, final responsibility for approval of the I&E materials rests with the Advisory Committee.</p>	Evidence that this requirement has been met includes:			
	1.	<p>A Agency policies and procedures specify how the factual, technical, and clinical accuracy components of the review are assured. If delegated, participants provide final approval.</p>	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

Title X Program Requirement	Implementation Strategy	Assessment		
12.6				
<p>The I&E Advisory Committee(s) must:</p> <ul style="list-style-type: none"> • Consider the educational and cultural backgrounds of the individuals to whom the materials are addressed; • Consider the standards of the population or community to be served with respect to such materials; • Review the content of the material to assure that the information is factually correct; • Determine whether the material is suitable for the population or community to which it is to be made available; and • Establish a written record of its determinations (Section 1006(d), PHS Act; 42 CFR 59.6(b)). 	<p>Evidence that this requirement has been met includes:</p> <p>1. A Agency policies and procedures document that the required elements of this section are addressed, including assessment of reading level at 4th -6th grade and that educational materials are tailored to literacy, age, and language preferences of client populations. Current versions of materials are in use. Locally developed materials acknowledge Title X funding.</p>		<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

13. ADDITIONAL ADMINISTRATIVE REQUIREMENTS

Title X Program Requirement	Implementation Strategy	Assessment	
13.1			
<p>Facilities and Accessibility of Services Title X clinics must have written policies that are consistent with the HHS Office for Civil Rights policy document, <i>Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons</i> (August 4, 2003) (HHS Grants Policy Statement 2007, II-23).</p> <p>Projects may not discriminate on the basis of disability and, when viewed in their entirety, facilities must be readily accessible to people with disabilities (45 CFR 84).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li data-bbox="695 738 1400 1019"> <p>A Agency policies assure language translation services are readily provided when needed.</p> <li data-bbox="695 1019 1400 1315"> <p>A Documentation indicates that staff is aware of policies and processes that exist to access language translation services when needed.</p> 	<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>
		<p>Met</p> <p><input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met</p> <p><input type="checkbox"/></p>

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	3. A Agency policies and procedures ensure access to services for individuals with disabilities at their sites.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>
13.2			
All grantees, sub-recipients and Title X clinics are required to have a written plan for the management of emergencies (29 CFR 1910, subpart E) and clinical facilities must meet applicable standards established by Federal State and local governments (e.g. local fire, building, and licensing codes).	Evidence that this requirement has been met includes:		
	1. A Agency disaster plans have been developed and are available to staff.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

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	2. A Staff has completed training and understands their role in an emergency or natural disaster.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>
13.3			
Projects are required to establish policies to prevent employees, consultants, or members of governing/advisory bodies from using their positions for purposes that are, or give the appearance of being motivated by a desire for private financial gain for themselves or others (HHS Grants Policy Statement 2007, II-7).	Evidence that this requirement has been met includes:		
	1. A Agency policies address this requirement.	Met <input type="checkbox"/> Comments:	Not Met <input type="checkbox"/>

Title X Program Requirement	Implementation Strategy	Assessment		
13.4				
<p>Research conducted within Title X projects may be subject to Department of Health and Human Services regulations regarding the protection of human subjects (45 CFR Part 46). The grantee/sub-recipient should advise their Regional Office in writing of any research projects that involve Title X clients (HHS Grants Policy Statement 2007, II-9).</p>	Evidence that this requirement has been met includes:			
	1.	<p>A Agency policies address this requirement to notify the Women’s Health Branch in writing of any research projects involving Title X clients.</p>	<p>Met <input type="checkbox"/></p> <p>Comments:</p>	<p>Not Met <input type="checkbox"/></p>

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Additional Monitoring Requirements		Met	Not Met
Pharmacy Contract/Policy	A written contract or agency policy detailing the cost and safeguards for dispensing family planning pharmaceuticals is in place. The contract or agency policy provides for liability resolution, inventory reconciliations, rotation of stock, and written procedures for processing Medicaid prescriptions (<i>DPH FP AA</i>). Agency has adequate safeguards for assuring that supplies purchased through the Federal Drug Pricing Program (340B) are provided only to clients served in the Title X project (<i>Veterans Health Care Act of 1992</i>).	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy – Inventory	1. Inventory records must include the NDC number for each drug/device stocked.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Theoretical inventory must be compared to the physical inventory periodically, and the physical inventory must be dated.	<input type="checkbox"/>	<input type="checkbox"/>
	3. A process is in place for reconciling discrepancies and documenting how each discrepancy was reconciled.	<input type="checkbox"/>	<input type="checkbox"/>
	4. A broad range of methods, including LARCs, are available onsite or by referral.	<input type="checkbox"/>	<input type="checkbox"/>
	5. A process is in place for return of expired 340B drugs.	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy – Dispensing	1. Dispensing log includes a patient identifier, NDC number, lot number, expiration date, and date dispensed for each drug/device.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Pharmacist verifies dispensing log with signature or initials at least weekly, or, if 30 or more drugs are dispensed in a 24-hour period, within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>
	3. Pharmacist has access to medical records, EHR, or actual prescriptions to verify the appropriate medication was dispensed. This includes prescriptions for medications dispensed under nursing standing orders.	<input type="checkbox"/>	<input type="checkbox"/>
	4. Hard copies of prescriptions are maintained for five years in the pharmacy for each drug dispensed OR the pharmacist has access to prescriptions through the Electronic Health Record.	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy – Storage	1. 340 B Stock is physically separated from other inventory and is labeled.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Agency has established controls over access to medications and supplies (<i>45 CFR 74.21; 45 CFR 92.20; Accepted Internal Control Procedures</i>).	<input type="checkbox"/>	<input type="checkbox"/>

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Additional Monitoring Requirements		Met	Not Met
Additional Policy Requirements	1. Agency policy/procedure/protocol describes a process for obtaining a written Declination of Services from patients who refuse provider-recommended physical exam and/or laboratory testing components.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Agency policy/procedure/protocol describes a process for follow-up of abnormal clinical or laboratory findings.	<input type="checkbox"/>	<input type="checkbox"/>
Quality Assurance Requirements	1. Agency must provide evidence of annual record audits, following the WHB record monitoring tools' guidelines.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Agency must provide evidence of Corrective Action Plan with implementation for each out of compliance issue identified in the record audit.	<input type="checkbox"/>	<input type="checkbox"/>
Finance	1. Current Sliding Fee Scale is in use.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Payment agreements do not indicate that services may be denied for unpaid balances/failure to make payments.	<input type="checkbox"/>	<input type="checkbox"/>
Standing Orders	1. Comply with BON requirements.	<input type="checkbox"/>	<input type="checkbox"/>
	2. Signed by the Program's Medical Director within the past 12 months.	<input type="checkbox"/>	<input type="checkbox"/>
FP ERRNs	<p>Registered Nurses who have completed the Family Planning Enhanced Role Training Curriculum and have remained rostered continuously may perform family planning assessments through the direction of precise, written Standing Orders, reviewed and signed annually by the Program Medical Director for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Annual assessment on low-risk family planning patients who are currently on a contraceptive method <input type="checkbox"/> Initial visits on low-risk patients with documented complete normal physical exam within the past 6 months and currently using a prescribed contraceptive; low –risk patients currently using a prescribed or non-prescribed contraceptive method choosing a non-prescribed contraceptive method <input type="checkbox"/> Provide periodic assessment and care of low-risk family planning patients <input type="checkbox"/> The ERN may not insert or remove an IUD or Implant <input type="checkbox"/> May not see any women over age 35 using oral contraceptives <input type="checkbox"/> Every 3rd annual assessment done by a physician or mid-level provider 	<input type="checkbox"/>	<input type="checkbox"/>

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(12, 13.1) Clinic brochures and other client educational materials are current, and are tailored to the literacy, age, and language preferences of client populations.	<input type="checkbox"/>	<input type="checkbox"/>
(12) Client educational materials emphasize tiered method counseling.	<input type="checkbox"/>	<input type="checkbox"/>
(12) Agency developed material reflects Title X funding support.	<input type="checkbox"/>	<input type="checkbox"/>
(13.1) Clinic facilities are free from obvious structural or other barriers that would prevent disabled individuals from accessing services.	<input type="checkbox"/>	<input type="checkbox"/>
(13.1) Interpreter services signs are visible in client areas.	<input type="checkbox"/>	<input type="checkbox"/>
(13.1) Anti-discrimination signs are visible in client areas.	<input type="checkbox"/>	<input type="checkbox"/>
(13.2) Staff can identify evacuation routes. Exits are recognizable and free from barriers.	<input type="checkbox"/>	<input type="checkbox"/>
(13.2) Emergency cart reviewed for list of contents and expired drugs (no expired drugs on cart).	<input type="checkbox"/>	<input type="checkbox"/>
Clinical staff wear appropriate name badges stating name and proper credentials (NC BON; GS 91-640)	<input type="checkbox"/>	<input type="checkbox"/>