

**PUBLIC HEALTH DIVISION
CLINICAL PROTOCOL/MANUAL APPROVAL SHEET**

PROGRAM/BUREAU: Family Planning Program/ Family Health Bureau

CLINICAL PROTOCOL/MANUAL TITLE: 2024 Family Planning Program Protocol

Reviewed by:

Name: Courtney Burke, PharmD, RPh Date: 8/1/24

Name: Kathleen Cathey, DNP, FNP-C Date: 10/11/24

Name: Leo Duran, PharmD, RPh Date: 7/25/24

Name: Rickie Eslick, BSN, RN Date: 10/18/24

Name: Janis Gonzales, MD, MPH, FAAP Date: 10/11/24

Name: Frances Martinez Date: 10/9/24

Name: Christopher Novak, MD, MPH Date: 10/22/24

Name: Margaret Perea Date: 10/9/24

Name: Rameet Singh, MD, MPH, OB/GYN Date: 10/11/24

Name: Laine Snow Date: 10/1/24

Name: Barbara Tivis Date: 10/9/24

Name: Angelica Torres Date: 10/9/24

Name: Janine Waters Date: 10/1/24

Approved by:

Program Manager _____

Bureau Chief _____

Program Medical Director _____

PHD Medical Director _____

Regional Health Officer _____

PHD Chief Nurse _____

**PUBLIC HEALTH DIVISION
ACKNOWLEDGEMENTS AND RECEIPT OF NEW/REVISED CLINICAL
PROTOCOL**

PROGRAM: Family Planning Program

CLINICAL PROTOCOL/MANUAL TITLE: 2024 Family Planning Program Protocol

I have reviewed the document listed above and I approve it for practice in Region _____

Regional Director Date

Regional Health Officer Date

Regional Director of Nursing Service Date

Regional Director of Nursing Service Date

I have received, reviewed and will follow this Clinical Protocol and I acknowledge that I have read and understand certain key Title X requirements, as referenced on the following pages.

Staff (Clinicians, PHNs, Clerks etc.):

_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date

For PHOs: Each clinician and PHN must review the document mentioned above and sign this sheet. Each Clerk must review Appendix B. (Use additional sheets as necessary.) The Nurse Manager will retain the signed copy(ies) of this sheet at the clinic and submit the original(s) to the Director of Nursing Services.

For Provider Agreement sites: Clinic staff who provide Title X services must review and sign this sheet.

Title X Requirements Acknowledgement Statements

By signing the protocol acknowledgement page, I agree and I am aware that:

1. Title X family planning services must be provided in a manner that does not discriminate against any client based on religion, race, color, national origin, disability, age, sex, sexual orientation, gender identity, sex characteristics, number of pregnancies, or marital status (42 CFR 59.5(a)(4)).
2. Services must be provided without imposition of any durational residence expectation or an expectation that the client be referred by a physician (42 CFR 59.5(b)(5)).
3. Services must be provided solely on a voluntary basis (Sections 1001 & 1007, PHS Act; 42 CFR 59.5(a)(2)).
4. If I coerce or try to coerce any person to accept services, to use or not use any particular method of family planning, or to undergo an abortion or sterilization procedure, I could be fined or imprisoned (42 U.S.C. 300a-8; 42 CFR 59.5(a)(2)).
5. Acceptance of family planning services is not a prerequisite to receipt of any other services (Section 1007, PHS Act; 42 CFR 59.5(a)(2)).
6. The Title X project may not perform, promote, or support abortion as a method of family planning.
7. Services must be provided in a way that ensures client confidentiality and privacy. 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 safeguards for confidentiality. I am aware that I must inform the client of any potential for disclosure of their confidential health information to policyholders where the policyholder is someone other than the client.
8. OSDH HIPAA privacy policy must be followed and training must be received annually (HIPAA-45 CRF Section 160.103; OSDH Administrative Procedure 1-38).
9. There are policies and processes that exist to access language translation services when needed.
10. Clinic staff must encourage family participation in the decision of minors to seek family planning services. Adolescents must be counseled on how to resist attempts to coerce them into engaging in sexual activities (Legislative Mandates).
11. State law must be followed requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest (Title 10A O.S., Section 1-2-101) (OSDH Administrative Procedures 1-17; Legislative Mandates).
12. Project staff should provide services in a manner that is client-centered, culturally and linguistically appropriate, inclusive, and trauma-informed; protects the dignity of the individual; and ensures equitable and quality service delivery consistent with nationally recognized standards of care (42 CFR 59.5(a)(3)).
13. Offer pregnant clients the opportunity to be provided information and counseling regarding each of the following options: prenatal care and delivery; infant care, foster care, or adoption; and pregnancy termination. If requested to provide such information and counseling, projects must provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with respect to any option(s) about which the pregnant client indicates they do not wish to receive such information and counseling. (42 CFR § 59.5(a)(5), Consolidated Appropriations Act, 2022, Pub. L. No. 117-103, 136 Stat. 49, 444 (2022))

Title X Program Requirements for Acknowledgement

Voluntary and Non-Coercive Services

Family planning services are to be provided solely on a voluntary basis (Sections 1001 and 1007, PHS Act; 42 CFR 59.5 (a)(2)). 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)).

Acceptance of FP Services not a Prerequisite for Eligibility or Services

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 subrecipient (Section 1007, PHS Act; 42 CFR 59.5 (a)(2)).

Personnel working within the family planning project may be fined or prosecuted for coercing or endeavoring to coerce any person to undergo an abortion or sterilization procedure, by threatening such person with the loss of, or disqualification for the receipt of, any benefit or service under a program receiving Federal financial assistance shall be fined not more than \$1,000 or imprisoned for not more than one year, or both. (Section 205 of Pub. L. 94-63)

Standards of compliance with prohibition on abortion. This project may not provide abortion and does not include abortion as a method of family planning. This Title X project may not perform, promote, or support abortion as a method of family planning (42 U.S.C. 300 Section 1008).

Non-Discriminatory Services

Services must be provided without regard to religion, race, color, national origin, disability, age, sex, sexual orientation, gender identity, sex characteristics, number of pregnancies, or marital status (42 CFR 59.5 (a)(4)).

Confidentiality.

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 safeguards for confidentiality. Concern with respect to the confidentiality of information may not be used as a rationale for noncompliance with laws requiring notification or reporting of child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, human trafficking, or other similar reporting laws. Information may otherwise be disclosed only in summary, statistical, or other form that does not identify the individual. The project must inform the client of any potential for disclosure of their confidential health information to policyholders where the policyholder is someone other than the client (42 CFR 59.10).

Facilities and Accessibility of Services

Title X clinics must have written policies that are consistent with the HHS Office for Civil Rights policy document, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (August 8, 2003) (HHS Grants Policy Statement 2007, II-23). 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).

Sources:

1. Title X Statutes, Regulations and Legislative Mandates <https://opa.hhs.gov/grant-programs/title-x-service-grants/title-x-statutes-regulations-and-legislative-mandates>
2. [Title 42: Public Health PART 59—GRANTS FOR FAMILY PLANNING SERVICES Subpart A—Project Grants for Family Planning Services.](#)