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# RH Coordinators' Meeting 2015

Oregon  
Health  
Authority

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PUBLIC HEALTH DIVISION  
Reproductive Health Section

# UPDATES

➤ **No changes to QFP this year**

❖ **Intent to revise annually**

➤ **QFP mobile App**

<http://fpntc.org/training-and-resources/quality-family-planning-services-mobile-app>

Providing Quality Family Planning Services  
Recommendations of CDC and the U.S. Office of Population Affairs



# RH Program

- **REVISED REVIEW TOOL**
- **STATE PROTOCOLS**
- **I & E Committee**



# TRIENNIAL REVIEW TOOL

## 1<sup>st</sup> revision

1. Branded

2. Citations hyperlinked

PUBLIC HEALTH DIVISION  
Reproductive Health Program



### REPRODUCTIVE HEALTH REVIEW TOOL Title X Family Planning Services

AGENCY:

REVIEWER:

REPRODUCTIVE HEALTH COORDINATOR:

PARTICIPANTS:

DATE(S) OF REVIEW (mm/dd/yyyy): -

DATE OF REPORT (mm/dd/yyyy):

**CLINICAL SERVICES:** The subrecipient provides family planning services to clients that are consistent with Title X regulations and with nationally recognized standards of care.

The clinical section of the program review is based on the following Title X and other federal grant requirements:

- Title X Legislation and Title X Implementing Regulations, [42 CFR Part 59](#)
- Sterilization of Persons in Federally assisted Family Planning Projects, [42 CFR Part 50 Subpart B](#)
- Office of Population Affairs (OPA); Program requirements for Title X Funded Family Planning Projects, [April 2014](#)
- Occupational Safety and Health Administration, [29 CFR 1910, Subpart E](#)
- Department of Health and Human Services, [45 CFR Part 46](#); [45 CFR Part 74](#); [45 CFR Part 84](#); [45 CFR Part 92](#)
- Title X [PHS Act 1006 \(d\)](#)
- HHS Grants Policy Statement [Part II](#)
- OMB [A-133](#)
- Oregon Board of Pharmacy [Dispensing Licenses](#)

Hover over link for date it was verified

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Shaded cells indicate optional services.

LE 9804e Revised and Approved: 3/2015



# **TRIENNIAL REVIEW TOOL**

**2<sup>nd</sup> revision**

## **In response to counties concerns**

- **Same questions from different programs**
- **Still some overlap**

## **Revision in the future**

- **OPA developing a review tool**

# STATE PROTOCOLS

## Title X requirement

- **9.6 All grantees should assure services provided within their projects 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.**

## Included in PE 41:

- **Each sub-recipient must adopt and implement policies, procedures and protocols developed and distributed, or approved by OHA, based on national standards of care, Title X requirements and MMWR Providing Quality Family Planning Services (QFP).**

# **PROTOCOLS continued**

**Released July 10 on our website**

**<https://public.health.oregon.gov/HealthyPeopleFamilies/ReproductiveSexualHealth/Resources/Pages/Resources.aspx>**

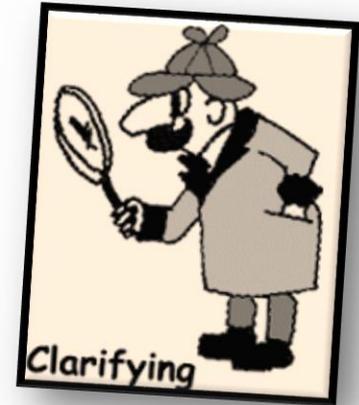
**Due February 1, 2016**



**All Title X agencies must return the state protocols**

# Clarifications

- **Formatting**
- **Protocols written as *Standing Orders***
  - 29 clinical**
  - 16 administrative/Financial**
- **Need to reflect your agency's Title X Scope of Services**
  - Written protocols may not cover all services provided in your agency- must develop and submit all protocols**
  - Administrative – some will need attachments sent back**
- **STI Screening verses STI Testing**



# Protocols:

(insert AGENCY name) Reproductive Health Program Administrative Policies and Procedures	
<b>Subject:</b> Scope of Title X Reproductive Health Program	<b>No.</b>
<b>Approved by:</b> <i>MS</i>	<b>Effective Date:</b>
<b>Revised Date:</b>	
<b>References:</b> Office of Population Affairs (OPA) Program Requirements for Title X Funded Family Planning Projects, 2014; U.S. Selected Practice Recommendations for Contraceptive Use (U.S. SPR), 2013; Centers for Disease Control and Prevention (CDC) Providing Quality Family Planning Services (QFP), 2014	
<b>POLICY:</b> This policy follows the OPA Program Requirements for Title X Funded Family Planning Projects, 2014; the recommendations of the U.S. SPR, 2013; and CDC's QFP, 2014.	
<b>PURPOSE:</b> This policy provides clear identification of the scope of RH services provided within the (insert AGENCY name) Title X Program. All services provided below are subject to Title X Program Requirements, as well as Oregon Health Authority RH Program requirements for all aspects of the provision of the service. A Client Visit Record (CVR) will be completed and submitted when the services listed below are provided.	
<b>PROTOCOL:</b> The following services are provided within the (insert AGENCY name) Title X Reproductive Health (RH) Program.	
<b>PROCEDURE:</b>	
1. Required Core RH services provided at (insert AGENCY name)	
a) A broad range of contraceptive methods, as defined below:	
<ul style="list-style-type: none"> <li>• IUD and IUS*</li> <li>• Sub-dermal implant*</li> <li>• Hormonal injection</li> <li>• A choice of combination oral contraceptives (phasic and monophasic)</li> <li>• A progestin-only pill</li> <li>• At least one non-oral combination contraceptive (ring or patch)</li> <li>• Diaphragm or cervical cap* (plus appropriate spermicide)</li> <li>• Latex and non-latex male condoms</li> <li>• Female condoms</li> <li>• A second type of spermicide</li> <li>• Fertility Awareness Method (FAM)</li> <li>• Information about abstinence and withdrawal</li> <li>• Information and referral for sterilization*</li> <li>• Emergency contraception pills (ECP)</li> </ul>	

(insert AGENCY name) Reproductive Health Program Clinical Policies and Procedures	
<b>Subject:</b> Combination Oral Contraceptive	<b>No.</b>
<b>Approved by:</b> <i>MEL Rodriguez</i>	<b>Effective Date:</b>
<b>Revised Date:</b>	
<b>References:</b> U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC), 2010; U.S. Selected Practice Recommendations for Contraceptive Use (U.S. SPR), 2013; Centers for Disease Control and Prevention (CDC) Providing Quality Family Planning Services (QFP), 2014	
<b>POLICY:</b> This policy follows the recommendations of the U.S. MEC, 2010; U.S. SPR, 2013; and CDC's QFP, 2014.	
<b>PURPOSE:</b> This policy provides direction for reproductive health clinics to assist clients in their use of combined oral contraceptives.	
Combined oral contraceptives (COCs) contain both estrogen and a form of progestin. Approximately 9 out of 100 women become pregnant in the first year of use with typical use. COCs are generally used for 21-24 consecutive days, followed by 4-7 hormone-free days. These methods are sometimes used for an extended period with infrequent or no hormone-free days. COCs do not protect against sexually transmitted infections (STIs).	
<b>PROTOCOL:</b>	
1. (insert AGENCY name) MDs, NPs, PAs, DOs, NDs, and RNs may provide COCs to any client who requests this method and has no U.S. MEC category 4 risk conditions.	
a) Category 4 risk conditions (risk of use outweighs the benefits of pregnancy prevention):	
<ul style="list-style-type: none"> <li>• Current breast cancer;</li> <li>• Severe cirrhosis: (decompensated);</li> <li>• Deep venous thrombosis/pulmonary embolism(DVT/PE): History of DVT/PE, not on anticoagulant therapy: higher risk for recurrent DVT/PE;</li> <li>• Acute DVT/PE;</li> <li>• DVT/PE and established on anticoagulant therapy for at least 3 months with higher risk for recurrent DVT/PE;</li> <li>• Major surgery with prolonged immobilization;</li> <li>• Diabetes mellitus with nephropathy/retinopathy/neuropathy;</li> <li>• Diabetes mellitus: other vascular disease or diabetes of &gt;20 years' duration;</li> <li>• Migraines with aura, any age;</li> <li>• Hypertension: systolic <math>\geq 160</math> or diastolic <math>\geq 100</math>;</li> <li>• Hypertension with vascular disease;</li> <li>• Ischemic heart disease: current and history;</li> </ul>	

# Forms:

## ➤ **Reproductive Health Consent form**

- **Voluntarily seeking services**
- **Cannot be coerced**
- **Not denied services for inability to pay**
- **Not a prerequisite to use other services**

## ➤ **Initial Health History form and Annual Health History forms**

- **Gathers all the information to address the protocols**
- **Screening questions have been validated**

# Forms: (continued)

## Medication Information Sheets

- **Methods consent**
- **Addresses Pharmacy rules**
  - **How to start and stop the method**
  - **What to do if miss a dose**
  - **Risks, side effects and warning signs**



# Questions?