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| **REPRODUCTIVE HEALTH FAMILY PLANNING (RHFP) PROGRAM ADMINISTRATIVE REVIEW** |
| **Instructions:** The WI DHS RHFP Nurse Consultant will use this review form to complete the Administrative Review |
| Subrecipient | RHFP Program Reviewer | Date of Review |
|       |       |       |
| **REQUIRED DOCUMENTS** |
| Subrecipients must have documentation and evidence that support and demonstrate compliance with Title X Program requirements. These documents ensure that what is contained in written policy is being carried out and substantiate that the project is operating in accordance with Title X Program expectations. |
| **Documents** | **Result** | **Comments** |
| Chart Audit – a chart audit has been completed for this review. |  |       |
| Client Bill of Rights – a bill of rights is handed out for posted for clients to view. |  |       |
| Community Education, Community Engagement, and Service Promotion Plan (CPEP) – a written CPEP is complete and includes:* An objective
* Description of the event
* Target priority population
* Event reach or indicator of completion
 |  |       |
| DHS Contract – a current signed grant contract between grantee and subrecipient. |  |       |
| General Consent Form – a general consent for that:* Informs clients that services are offered on a voluntary basis, may not be a prerequisite to other services, and note any limitations to confidentiality.
* Notifies clients of any potential for disclosure of their confidential health information to policyholders when the policyholder is someone other than the client.
* Verifies that HIPAA forms are provided to clients.
 |  |       |
| HIPAA Form – a HIPAA form informs client of confidentiality/privacy and is offered to each client. |  |       |
| Interpreter Services Notification – availability of interpreter services is posted in the waiting area or available on site. |  |       |
| Mandated Reporting – mandated reporting directions and/or forms are readily available. |  |       |
| Memoranda of Understanding (MOU) – as appropriate, written MOUs between subrecipient and medical/social service agencies for consistent client referral. |  |       |
| Quality Improvement/Quality Assurance (QI/QA) – a current QI/QA work plan is in place and is actively being used. |  |       |
| Referral List – a referral list is available and has been recently reviewed/revised. |  |       |
| Statement of Understanding – each staff member working with the Title X program has signed the WI DHS RHFP Statement of Understanding. |  |       |
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| **REQUIRED TRAININGS** |
| Title X staff must receive appropriate and adequate training. These required trainings support staff in operating in accordance with Title X Program requirements and the Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP).Each staff member working with the Title X program shall have completed the trainings listed below for the current project period and grant year.* **Annual** – 4/1/202X through 3/31/202X.
* **Project Period** – 4/1/2022 through 3/31/2027
 |
| **Annual Trainings** | **Result** | **Comments** |
| Family Involvement and Coercion |  |       |
| State Reporting Requirements: Mandatory Reporting for Abuse, Rape, Incest, and Human Trafficking |  |       |
| **Project Period Trainings** | **Result** | **Comments** |
| Client-Centered Services |  |       |
| Confidentiality |  |       |
| Non-Discriminatory Services |  |       |
| Personnel Awareness |  |       |
| Personnel Training |  |       |
| Services Not a Prerequisite for Eligibility or Services |  |       |
| Voluntary and Non-Coercive Services |  |       |
| Providing QFP Toolkit (RHNTC) or equivalent |  |       |
| **EXPECTATIONS** |
| For an expectation to be considered met, subrecipient must: meet all required documentation and training line items listed above **AND** meet all policy, procedure, and site evaluation line items in each listed expectation below. |
| **Expectation 1.1:** Provide services without subjecting individuals to any coercion to accept services or to employ or not to employ any particular methods of family planning. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.2:** Ensure that acceptance of services is solely on a voluntary basis and may not be made a prerequisite to eligibility for, or receipt of, any other services, assistance from or participation in any other program of the recipient. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Chart audit demonstrates compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.3:** Ensure that staff are informed that any officer or employee of the United States, officer or employee of any State, political subdivision of a State, or any other entity, which administers or supervises the administration of any program receiving federal financial assistance, or person who receives, under any program receiving federal assistance, compensation for services, who coerces or endeavors 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. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.4:** Provide services 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. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.6:** Provide services without the imposition of any durational residence requirement or a requirement that the client be referred by a physician. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.9:** Ensure that all information as to personal facts and circumstances obtained by the project staff about individuals receiving services must be held confidential and must not be disclosed without the individual’s documented consent, except as may be necessary to provide services to the patient or as required by law, with appropriate safeguards for confidentiality. Information may otherwise be disclosed only in summary, statistical, or other form that does not identify the individual. Reasonable efforts to collect charges without jeopardizing client confidentiality must be made. Recipients 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. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Third party billing is processed in a manner that does not breach client confidentiality.[ ]  Physical layout of the clinic allows for confidentiality and privacy.[ ]  Safeguards in place ensure privacy, security, and appropriate access to personal health information.[ ]  Chart audit demonstrates compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.10:** Develop plans and strategies for implementing family planning services in ways that make services as accessible as possible for clients. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Services are implemented in ways that makes services as accessible as possible for clients.[ ]  Clinic location is accessible and ADA compliant.[ ]  Clinic environment is welcoming. |
| **Result** | **Comments** |
|  |       |
| **Expectation 1.11:** Identify and execute strategies for delivering services that are responsive to the diverse needs of the clients and communities served. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Access to language line or other translation services.[ ]  Educational material(s) is approved by an I & E Committee.[ ]  Services are responsive to the diverse needs of the clients and communities served. |
| **Result** | **Comments** |
|  |       |
| **Expectation 2.3:** Provide services in a manner that is client-centered, culturally, and linguistically appropriate, inclusive, and trauma-informed. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Access to language line or other translation services.[ ]  Educational material(s) is approved by an I & E Committee.[ ]  Educational material(s) is translated into other languages, as needed. |
| **Result** | **Comments** |
|  |       |
| **Expectation 2.7:** Advance health equity through the delivery of Title X services. Health equity is when all persons have the opportunity to attain their full health potential, and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Educational material(s) is approved by an I & E Committee.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 2.8:** Improve and expand accessibility of services for all clients, especially low-income clients by providing client-centered services that are available when and where clients need them and can most effectively access them. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Access to language line or other translation services.[ ]  Educational material(s) is approved by an I & E Committee.[ ]  Clinic layout allows for client mobility.[ ]  Community needs assessment is done periodically to ensure services are meeting client’s needs.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 3.3:** To the extent practical, Title X projects shall encourage family participation. However, Title X projects may not require consent of parents or guardians for the provision of services to minors, nor can any Title X project staff notify a parent or guardian before or after a minor has requested and/or received Title X family planning services. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Chart audit demonstrates compliance with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 3.4:** Ensure that all applicants for Title X funds certify that they encourage family participation in the decision of minors to seek family planning services. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Chart audit demonstrates compliance with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 3.5:** Ensure that all applicants for Title X funds certify that they provide counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.  |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Chart audit demonstrates compliance with this expectation. [ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 3.6:** No Title X services provider shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Chart audit demonstrates compliance with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 4.3:** Provide for coordination and use of referrals and linkages with primary healthcare providers, other providers of healthcare services, local health and welfare departments, hospitals, voluntary agencies, and health services projects supported by other federal programs, who are in close physical proximity to the Title X site, when feasible, in order to promote access to services and provide a seamless continuum of care. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 6.5:** In accordance with 45 CFR § 75.352(d), monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. |
| [ ]  Written policy and procedure comply with this expectation.[ ]  Expenses reported are in accordance with a current contract monitor approved agency budget.[ ]  Participate in required site reviews.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 7.1:** Provide for opportunities for community education, participation, and engagement to: achieve community understanding of the objectives of the program; inform the community of the availability of services; and promote continued participation in the project by diverse persons to whom family planning services may be beneficial to ensure access to equitable, affordable, client-centered, quality family planning services. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 7.2:** Provide, to the maximum feasible extent, 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 others in the community knowledgeable about the community’s needs for family planning services. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 8.1:** Have an advisory committee (sometimes referred to as information and education committee) that reviews and approves print and electronic informational and educational materials developed or made available under the project, prior to their distribution, to assure that the materials are suitable for the population or community to which they are to be made available and the purposes of Title X. The project shall not disseminate any materials which are not approved by the advisory committee. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  As applicable, subrecipient demonstrates compliance with this expectation by providing I & E committee meeting minutes and material review/approval process. |
| **Result** | **Comments** |
|  |       |
| **Expectation 8.2:** Think specifically about the print and electronic materials made available to Title X clients under the Title X project when considering which materials require review and approval by the advisory committee. To help identify what materials require review and approval by the advisory committee, Title X projects should think specifically about the materials that they are making available to Title X clients under the Title X project. For Title X projects that provide non-Title X services (e.g., hospitals, FQHCs), this does not include all possible materials that a Title X client may find on the organization’s website or as they walk through the building, but only those specific materials that are made available to the Title X client under the Title X project and those materials developed specifically for the Title X client. If the material is intended to be provided to the client as information and education, it should be reviewed by the advisory committee; this does not include tweets. |
| [ ]  Educational materials available at the service sites have been approved by an I & E Committee. |
| **Result** | **Comments** |
|  |       |
| **Expectation 8.3:** Establish and maintain an advisory committee that:* consists of no fewer than five members and up to as many members the recipient determines and

includes individuals broadly representative of the population or community for which the materials are intended (in terms of demographic factors such as race, ethnicity, color, national origin, disability, sex, sexual orientation, gender identity, sex characteristics, age, marital status, income, geography, and including but not limited to individuals who belong to underserved communities, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality). |
| [ ]  As applicable, written policy and procedure complies with this expectation.[ ]  As applicable, subrecipient demonstrates compliance with this expectation by providing a committee member list (which is broadly representative of the population served) and meeting minutes. |
| **Result** | **Comments** |
|  |       |
| **Expectation 8.4:** Ensure that the advisory committee, in reviewing materials:* consider the educational, cultural, and diverse backgrounds of 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, medically accurate, culturally, and linguistically appropriate, inclusive, and trauma-informed,
* determine whether the material is suitable for the population or community to which is to be made available, and establish and maintain a written record of its determinations.
 |
| [ ]  As applicable, written policy and procedure complies with this expectation.[ ]  As applicable, subrecipient demonstrates compliance with this expectation by providing meeting minutes, review forms, and review instructions that comply with all required components. |
| **Result** | **Comments** |
|  |       |
| **Expectation 9.1:** Provide for orientation and in-service training for all project personnel. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 9.2:** Ensure routine training of staff on Federal/State requirements for reporting or notification of child abuse, child molestation, sexual abuse, rape or incest, as well as on human trafficking.  |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 9.3:** Ensure routine 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. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 9.4:** Are expected to provide routine training as noted above on an annual basis. In addition, OPA recommends Title X recipients provide routine training in accordance with the RHNTC’s Title X Training Requirements Summary Job Aid. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 10.1:** Develop and implement a quality improvement and quality assurance plan that involves collecting and using data to monitor the delivery of quality family planning services, inform modifications to the provision of services, inform oversight and decision-making regarding the provision of services, and assess patient satisfaction. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Subrecipient has a QI/QA Plan.[ ]  Subrecipient has completed annual clinical chart review. |
| **Result** | **Comments** |
|  |       |
| **Expectation 10.2:** Address oversight and service provision at the recipient level, the subrecipient level, and the service site level within their QI/QA plan. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Subrecipient has completed annual clinical chart review. |
| **Result** | **Comments** |
|  |       |
| **Expectation 10.3:** Submit a Family Planning Annual Report (FPAR). The information collection (reporting requirements) and format for this report have been approved by the Office of Management and Budget (OMB) and assigned OMB No. 0990-0479. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Submits FPAR data to WI DHS as required. |
| **Result** | **Comments** |
|  |       |
| **Expectation 11.1:** Not provide abortion as a method of family planning as part of their Title X project. |
| [ ]  Written policy and procedure complies with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 11.2:** Prohibit providing services that directly facilitate the use of abortion as a method of family planning, such as providing transportation for an abortion, explaining and obtaining signed abortion consent forms from clients interested in abortions, negotiating a reduction in fees for an abortion, and scheduling or arranging for the performance of an abortion, promoting or advocating abortion within Title X program activities, or failing to preserve sufficient separation between Title X program activities and abortion-related activities.  |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 11.3:** Prohibit promoting or encouraging the use of abortion as a method of family planning through advocacy activities such as providing speakers to debate in opposition to anti-abortion speakers, bringing legal action to liberalize statutes relating to abortion, or producing and/or showing films that encourage or promote a favorable attitude toward abortion as a method of family planning. Films that present only neutral, factual information about abortion are permissible. A Title X project may be a due paying participant in a national abortion advocacy organization, so long as there are other legitimate program-related reasons for the affiliation (such as access to certain information or data useful to the Title X project). A Title X project may also discuss abortion as an available alternative when a family planning method fails in a discussion of relative risks of various methods of contraception. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Staff interviews/observations indicate compliance with this expectation. |
| **Result** | **Comments** |
|  |       |
| **Expectation 12.7:** Acknowledgement of Federal Grant Support: Recipients acknowledge Federal funding when issuing statements, press releases, publications, requests for proposal, bid solicitations and other documents --such as tool-kits, resource guides, websites, and presentations (hereafter “statements”)-- describing the projects or programs funded in whole or in part with HHS federal funds, the recipient must clearly state the percentage and dollar amount of the total costs of the program or project funded with federal money and the percentage and dollar amount of the total costs of the project or program funded by non-governmental sources. When issuing statements resulting from activities supported by HHS financial assistance, the recipient entity must include an acknowledgement of federal assistance using one of the approved statements. |
| [ ]  Written policy and procedure complies with this expectation.[ ]  Acknowledges federal assistance using one of the approved statements on applicable documents. |
| **Result** | **Comments** |
|  |       |
| **SIGNATURE** — Reviewer | Name — Reviewer (printed) | Date Signed |
|  |       |  |