Title X Orientation

This course provides an overview of the key elements of the Title X Program requirements.

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Welcome

Welcome to the *Title X Orientation.*

Title X is the only federal program dedicated solely to the provision of core family planning and related preventive health services.

The Title X Program seeks to improve maternal and infant outcomes, and the health of women, men, and adolescents who seek family planning services to achieve desired birth spacing and family size. (42 CFR 59.2)

By the end of this training, participants will be able to:

1. Explain the key elements of the program requirements for Title X-funded family planning projects
2. Define Title X family planning services
3. Describe activities that are prohibited within Title X

Will cover	Will not cover
• Basic program requirements	• Clinical guidelines • Grants management • Revenue cycle management

Title X guidelines

Title X is dedicated to providing comprehensive family planning and related preventive health services.

The Title X Family Planning Guidelines consist of two components:

1. Title X Program Requirements

2 Providing Quality Family Planning Services: Recommendations of CDC and the US Office of Population Affairs (QFP)

The QFP identifies recommendations for providing quality family planning services in a client-centered way. Training and resources related to the QFP can be found in the following eLearning course on fpntc.org:

Introduction to QFP

CLICK HERE

Core Title X services

Family planning services help individuals prevent or achieve pregnancy in order to plan and space births and meet their goals related to family size and composition.

Core Title X family planning services are those that are directly related to preventing or achieving pregnancy, and include: contraceptive services, pregnancy testing and counseling,

support for how to achieve pregnancy, basic infertility services, sexually transmitted disease (STD) screening and treatment, and other preconception health services. (QFP)

In addition, Title X projects provide related preventive health services, such as cervical and breast cancer screening. Other preventive health services—such as screenings for lipid disorders, diabetes, or other health problems—should also be offered on-site or by referral.

Family planning services include the following:

1. Contraception to help individuals plan and space births, prevent unintended pregnancies, and reduce the number of abortions
2. Pregnancy testing and counseling
3. Helping clients who want to conceive
4. Basic infertility services
5. Preconception health services to improve infant and maternal outcomes, and improve women's and men's health
6. STD screening and treatment services to prevent tubal infertility and improve the health of women, men, and infants

Range of methods

All Title X projects **must** provide a broad range of acceptable and effective family planning methods and services, including fertility awareness-based methods, infertility services, and services for adolescents.

There is a wide range of FDA-approved birth control methods, including:

- Male and female sterilization surgery
- Hormonal IUDs
- Copper IUD
- Oral contraceptive pills
- Progestin- only contraceptive pills
- Hormonal patch
- Vaginal ring
- Hormonal injection
- Male and female condoms
- Diaphragm
- Fertility-based awareness methods
- Emergency contraception pills

Clients should be able to choose their methods from a broad range of contraceptive options. Not every site must offer every contraceptive option. But, if a site doesn't offer a particular method, it should be able to refer a client to another location to get that method. All sites must provide medical services related to family planning and the effective usage of contraceptive devices and practices. (42 CFR 59.5)

Some, but not all projects include male and female sterilization procedure. (42 CFR 50 Subpart B)

See below for more information.

Sterilization Procedures

Projects that perform or arrange voluntary sterilization procedures for clients who wish to use sterilization as their chosen method of family planning must meet the following conditions, in addition to any state or local laws.

The client must:

1. Be at least 21 years old at the time consent is obtained
2. Be mentally competent
3. Have given informed consent at least 30 days but not more than 180 days before the procedure (except in the case of emergency; see §50.204).

The individual getting informed consent, must:

1. Offer to answer any questions the client may have
2. Advise the client that they are free to withdraw consent any time
3. Provide a description of available alternative methods of family planning and birth control
4. Advise the client that the sterilization procedure is considered to be irreversible
5. Provide an explanation of the specific procedure, risks, benefits, and possible side effects
6. Provide an interpreter if the client does not understand
7. Include a witness chosen by the individual considering sterilization to be present when consent is obtained

Informed consent may not be obtained while the individual to be sterilized is:

1. In labor or childbirth
2. Seeking to obtain or obtaining an abortion
3. Under the influence of alcohol or drugs that could affect the individual's state of awareness

For more about the range of contraceptive methods:

Birth Control Methods Options Chart

CLICK HERE

Priority clients

Access to quality family planning and reproductive health services is integral to overall good health.

Research shows that closely spaced pregnancies and pregnancies very early or late in a woman's reproductive life can lead to adverse health and social consequences. Improving access to contraception can play a critical role in improving the lives and health of women, families, and children.

In this spirit, Title X projects have continued for more than 50 years. Title X-funded family planning projects exist to enable all persons who want to obtain family planning care to have access to such services, with priority given to persons from low-income families. (42 CFR 59.5(a)(6))

Voluntary participation

Voluntary participation is an essential part of the Title X Program.

Family planning services must only be offered in a voluntary manner. (42 CFR 59.5(b)(8))

Clients must not be coerced to accept services, or to use or not use any method of family planning. Any staff working on Title X-funded projects who coerce, or try to coerce, someone into having an abortion or being sterilized may face federal prosecution. (42 CFR 59.5(a)(2))

Some ways to ensure voluntary services are to:

- have internal policies and procedures that ensure voluntary participation
- confirm that all project staff are aware of Title X requirements on voluntary
- participation inform clients verbally and in writing that all services are voluntary
- use non-directive, client-centered counseling.

What projects cannot require

Family planning cannot be required in order to receive other services.

Family planning cannot be used as a prerequisite or incentive. An individual must choose the services voluntarily in order to meet their own personal reproductive health goals. (42 CFR 59.5 (a)(2))

Also, there can be no residency requirement. Individuals are eligible for services at any Title X site, regardless of home address. (42 CFR 59.5(b)(5))

Activity: Residency

Residency

Emily arrives at a Title X-funded health department clinic requesting family planning services. She lives in a neighboring county. The department policy is to only serve county residents.

Can she receive Title X services from your site?

1. No, the health department policy stands.
2. No, she should be told to seek services at her own county health department.
3. Yes. Title X sites must serve anyone who presents for services regardless of where they live.

The answer is number 3. Title X sites must serve anyone who presents for services, regardless of where they live.

Client dignity

Services must be provided in a respectful manner that protects the dignity of the individual.

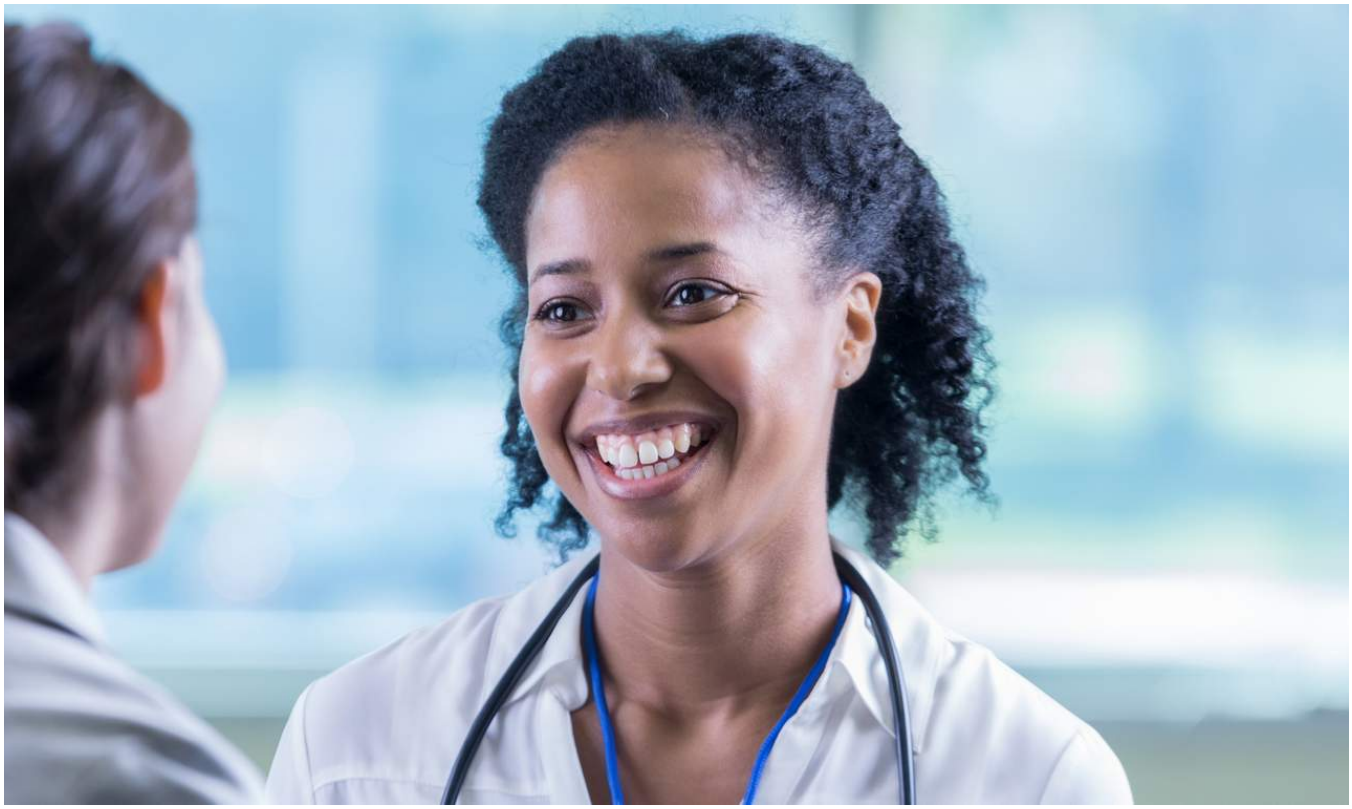
- Services must be provided without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies, or marital status. (42 CFR 59.5 (a)(4))
- Services must be provided without regard to sexual orientation or gender identity/expression. (42 CFR 59.5 (a)(3))

- Title X services must be accessible to people with limited English language skills. Title X sites must ensure access to language interpretation services is available, without cost to the client. (42 CFR Part 80)

In addition, Title X facilities and services must be accessible to people with disabilities. Program staff and activities must not discriminate on the basis of mental or physical ability. To ensure access to Title X services, projects should consider access to public transportation, clinic locations, hours of operation, and other factors that influence the ability of a range of clients to access services. (45 CFR 84)

Cultural competency

Quality services are client-centered, which includes providing services in a respectful and culturally competent manner.



Staff should be broadly representative of the population served, and should be sensitive to — and able to deal effectively with—the cultural and other characteristics of the client population. (42 CFR 59.5)

Training on cultural competency in family planning services can be found in the following eLearning course.

Cultural Competency in Family Planning Care

CLICK HERE

Activity: Can a site...

Instructions:

Think about the answer to each of the following questions .

Can a Title X site...

Require a woman to go to a family planning clinic in order to receive WIC? **The answer is No**

Require a client to live in the county to receive services? **The answer is No**

Only serve women? **The answer is No**

Only serve married individuals? **The answer is No**

Tell a woman with five kids she needs to get sterilized? **The answer is No**

Turn a client away because they don't speak English? **The answer is No**

Tell a non-native-English speaker to bring family members to translate for them? **The answer is No**

Require a client to be 18 or older? **The answer is No**

Confidentiality

Confidentiality is another key requirement of the Title X Program.

Information about the client may not be disclosed without the client's written consent, unless it is required by law (for instance, laws requiring notification or reporting of child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, human trafficking) or

is necessary to provide services to the client. Information can be disclosed only in summary, through statistics, or in other formats that won't identify the client. (42 CFR 59.11)

For more information on how to ensure confidential services:

Tracking Confidentiality Infographic

CLICK HERE

Challenges to Confidentiality Infographic

CLICK HERE

Activity: Confidentiality

Confidentiality

Clara is a 17 year old requesting family planning services and doesn't want to tell her parents. Your state has parental consent laws for minors.

What should you do?

1. Tell her you can't serve her without a parent present.
2. Tell her you can't serve her without written consent from a parent.
3. Provide Clara services, because Title X supersedes state law. Projects may not require consent of parents or guardians for Title X services.

The answer is number 3. Title X supersedes state law. Projects must not require consent of parents or guardians for Title X services.

Prohibition of abortion

Title X funds cannot be used in projects where abortion is a method of family planning.

- Title X funds can not be used to perform, promote, refer for, or support abortion as a method of family planning.

- Policies must be in place that show that no Title X funds will be used to pay for, promote, refer for, or support abortion as a method of family planning.
- Referral for abortion is permitted for medical emergencies, or in the case of rape or incest.
- Services must be physically and financially separate from activities that are prohibited by the program. (42 CFR 59.5, 59.14-59.16)

Pregnancy testing

Pregnancy testing is a common family planning service.

Within Title X sites, all clinical staff may provide pregnancy test results and basic factual information. Only physicians and advanced practice providers may provide pregnancy counseling. Physicians or advanced practice providers are permitted, but not required, to provide unbiased pregnancy counseling and information on each of the following options,

except if the client doesn't want information on one or more of them, so long as counseling is nondirective:

- Prenatal care and delivery
- Infant care, foster care, or adoption
- Pregnancy termination

Clients with positive pregnancy tests:

- Should be referred to a health care provider for medically necessary prenatal health care
- May be provided with a list of licensed, qualified, comprehensive primary health care providers (including prenatal care)
- May be given information about healthy pregnancy
- May be given a referral to social services or adoption agencies

The information and counseling must be neutral, factual, and nondirective for each of these options.

(42 CFR 59.14)

Postconception referrals

Once a client is verified as pregnant, she should be referred to a health care provider for medically necessary prenatal health care.

Referral for abortion as a method of family planning is prohibited; however, referral for abortion is permitted for medical emergencies, or in the case of rape or incest.

The Title X provider may also choose to provide pregnant clients with a list of licensed, qualified, comprehensive primary health care providers. The list may be limited to those who

do not provide abortion, or it may include licensed, qualified, comprehensive primary health care providers (including prenatal care); some, but not the majority, of whom also provide abortion as part of their comprehensive health care services. (42 CFR 59.14)

Neither the list nor project staff may identify which providers on the list perform abortion. Staff can say, for instance:

> *"This is a list of providers who serve pregnant women. Reach out to these providers to learn about the services they provide."*

Front desk staff should explain the policy to anyone seeking abortion referral. Staff can say, for instance:

> *"Although abortion falls outside the scope of our project under federal law, I can provide you with a list of providers that serve pregnant women, and you can reach out to these providers to learn about their services."*

Activity: Prohibition of abortion

Instructions:

Think about whether each action listed below is prohibited or allowed under Title X

Give out the card for an abortion provider. **Prohibited**

Verbally tell a client where to get an abortion. **Prohibited**

Medical assistant gives pregnancy test results . **Allowed**

Refer a client with likely ectopic pregnancy to the hospital. **Allowed**

Provide information about abortion services to an incest survivor. **Allowed**

Provide a caller with name & phone number of abortion provider. **Prohibited**

RN provides pregnancy options counseling. **Prohibited**

Refer a pregnant client to a prenatal care provider. **Allowed**

Hand out referral list with providers noted: "Includes abortion services." **Prohibited**

LPN gives information about abortion procedure. **Prohibited**

Provide a list of local resources that does not specify services provided. **Allowed**

Referral systems

Title X sites should have a robust referral network.

Title X projects are required to provide for a broad range of referrals related to family planning. These may include counseling, or referrals to and from other social and medical service sites. Other kinds of services may be necessary to facilitate clinic attendance.

Referrals are important to help your clients access other types of care they may need. Also, by establishing referral systems, other service providers can refer their clients to you. Your service site is not responsible for the cost of care in the case of referrals.

This means your project needs to have a system of referrals in place with other providers of health care and social services. This system should include:

- local health and welfare departments
- voluntary organizations and social services
- hospitals
- health services supported by other federal programs
- other medical facilities in case of an emergency or when medically indicated

Other services to consider including in your referral network are:

- primary care
- prenatal care
- HIV care and treatment
- substance abuse treatment
- children's and family services (including foster care and adoption)

(42 CFR 59.5(b)(8))

Establishing and Providing Effective Referrals for Clients: Toolkit for Family Planning Providers

CLICK HERE

Mandatory reporting of abuse

Title X project staff are required to follow state and local laws related to the reporting of child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, and human trafficking.

All project staff are required to receive annual training on state and local requirements for reporting child abuse, child molestation, sexual abuse, rape, incest, intimate partner violence, and human trafficking. (42 CFR 59.17)

Click the Play buttons below to start the videos.

Trauma-Informed Mandatory Child Abuse Reporting in a Family Planning Setting

PLAY

Look Beneath the Surface to End Trafficking

PLAY

More about identification, response, and prevention of human trafficking is covered in the following eLearning course on fpntc.org:

CLICK HERE

Activity: Mandatory reporting

Instructions:

Think about how each phrase might be verbalized in the context of a family planning visit that includes the mandatory reporting of abuse. An example is provided after each phrase.

Respect confidentiality	Example: "What you share is between you and me and select staff here on a need-to-know basis."
Explain exceptions to confidentiality	Example: "If I find out that you've been hurting yourself, someone else, or if you've been harmed."
Build rapport	Example: "I'm glad you came in. It's great that you're taking care of yourself."

Express empathy	Example: “It must’ve taken a lot of courage.”
Inform of the need to report	Example: “It’s wrong of him to treat you this way, and also illegal.”
Communicate the next steps clearly	Example: “I’ll have to do some follow-up that will involve sharing this information with others.”
Empower the client	Example: “You can be part of the process if you want.”
Be supportive	Example: “I want to make sure that you get the help that you need.”

Adolescent counseling

Title X project staff must encourage family participation in the decision of minors to seek family planning services. Staff must document in each minor's record the actions taken to encourage family participation or the reason why it was not encouraged. (42 CFR 59.2, 59.17)

Click the Play buttons below to start the videos.

Counseling Adolescent Clients to Encourage Family Participation

PLAY

Title X project staff must provide education and counseling to minors on how to resist sexual coercion; staff must document that the counseling was provided. (42 CFR 59.2, 59.17)

Counseling Adolescent Clients to Resist Sexual Coercion

PLAY

All project staff are required to receive annual training on counseling minors on family participation and how to resist sexual coercion. These and other training resources can also be accessed directly from FPNTC.org.

Activity: Adolescent counseling

Adolescent counseling

Laura is 18 years old. She has come in for an initial visit and wants to start a birth control method. She hasn't had sex yet but has been thinking about it, and wants to make sure she is protected.

In addition to information about birth control method options and education about optimal health outcomes, what other counseling would you provide?

1. None. That is all she needs.
2. Encourage family participation in the decision to seek family planning services and provide counseling on how to resist sexual coercion.
3. Counsel her on making sure not to tell her parents, so they won't get angry.

The answer is number 2. You should encourage family participation in the decision to seek family planning services and provide counseling on how to resist sexual coercion.

Total program concept

Let's look at the key fiscal and administrative program requirements for Title X.

When a clinical service site is awarded Title X funds, it agrees to abide by the Title X requirements for all family planning clients and report all family planning visits to the Family

Planning Annual Report database (FPAR). This reporting is required, regardless of payer source. This is known as the "total program concept."

All revenue received for family planning services, including payments from Medicaid, private insurance, fees collected from clients, and any other income should be reported as family planning project income. Similarly, any expenses associated with family planning services should be reported as family planning project expenses.

Charges, billing, and collections

No one can be denied services or be subjected to any variation in services due to inability to pay.

Each Title X project must have policies for charging, billing, and collecting funds for the services they provide. Title X requirements for charges and billing state that:

- If a client's family income is at or below 100% of the federal poverty level, that client cannot be charged. (42 CFR 59.5 (a)(7))

- If there is a third party that is authorized or obligated to pay for those services (Medicaid or health insurance company), that third party must be billed. (42 CFR 59.5 (a)(9))

- In addition, projects must make reasonable efforts to collect payments from those third party sources.

Whether or not to include a client in the FPAR data reporting depends on the services provided—not on the payer source.

Activity: Family planning client

Instructions:

Read each card and think about whether this would be a family planning client.

27-year-old male who got a vasectomy recently but wants to get screened for STDs and pick up condoms before he resumes sexual activity

Family planning client

1 of 9

63-year-old female with Medicaid saying she has a lump in her breast

Not a family planning client

2 of 9

46-year-old female who got married recently and wants to try to get pregnant quickly

Family planning client

16-year-old privately-insured female not having sex yet but provided anticipatory guidance on optimal health outcomes around sexual risk

Family planning client

18-year-old insured female
client getting the flu shot
and
nothing else

Not a family planning client

26-year-old uninsured male
who receives an HIV test and
nothing else

Not a family planning client

18-year-old female with Medicaid who uses condoms but during a primary care visit brings up unmet family planning needs

Family planning client

26-year-old uninsured mother of two who wants to get through school and wants an implant

Family planning client

33-year-old female with a managed care plan who has been trying to get pregnant for six months

Family planning client

Sliding fee discount

Title X services are provided on a sliding scale.

Title X family planning projects must apply a sliding fee discount to any self-pay charges. (42 CFR 59.5 (a)(7-8))

- Clients at or below 100% of the federal poverty level must not be charged for family planning services.

- Clients whose family income is between 101% and 250% of the federal poverty level must be charged a discounted rate based on the client's ability to pay.

- Clients whose family income is over 250% of the federal poverty level must be charged fees that are based on the reasonable cost of providing services.

- Insured clients with incomes at or below 250% of the federal poverty level mu not be charged more in copays or additional fees than they would otherwise p based on the sliding scale.

Fees may be waived for clients with family incomes above 100% of the federal poverty level. If the service site director determines that there is good cause that the client is not able to pay for services, the site director may apply the sliding fee discount schedule (for example, if her employer-sponsored health insurance does not cover certain contraceptives because of her employer's religious or moral objection to such contraceptives). (42 CFR 59.2)

Family income at or below federal poverty level:

Do not charge for services.

Family income 101% to 250% federal poverty level:

Apply sliding fee schedule of discounts to services.

Family income over 250% of federal poverty level:

May charge fair market price for services.

For more on sliding scale discount schedules, review the following:

Integrating Title X with Primary Care: Developing and Implementing Compliant Sliding Fee Discount Schedules

CLICK HERE

Samples of Title X and Health Center Program Sliding Fee Discount Schedules

CLICK HERE

Collecting Copay Job Aid

CLICK HERE

Cannot deny services

Title X projects cannot deny services due to a client's inability to pay.

Services should not be routinely o. ered free or at no cost, except for clients with family incomes at or below 100% of the federal poverty level (or for the good cause exception discussed previously). (42 CFR 59.5 (a)(7))

Minors should not be charged differently than other clients. Minors cannot be assumed to be no-charge clients; their income must still be assessed, and they must be charged based on the schedule of discounts. Minors who request confidentially billed services (for example, if they do not want their parent's insurance to be used) should be charged based on the individual adolescent's income. (42 CFR 59.2)

Income verification and voluntary donations

Income verification can be important to ensuring that clients are charged appropriately for their services.

Income verification should not present a barrier to clients needing services. If you have lawful access to information that would help verify a client's income (for example, if the client is part of another program that has already verified income), use that information, so the client doesn't have to go through the income verification process again. (42 CFR 59.2)

Voluntary donations from clients are allowed, but clients must not be pressured to make them. Donations must not be a prerequisite to the provision of services or supplies, and they must be completely voluntary, discussed in the same manner with all clients, and tracked as project income.

Make sure to follow your agency's policy for income verification and voluntary donations.

Defining Family Income for Title X Charges, Billing, and Collections Job Aid

CLICK HERE

Activity: How much would you charge?

Instructions:

Read the scenario below and think about how you should respond. Scroll down to move to the next scenario.

Sarah is a new family planning client with Medicaid coverage; the income for her three-person family is $19,000 per year (which is below 100% of the current federal poverty guidelines).

How much would you charge Sarah for the visit?

You would not charge her anything, regardless of her coverage, because she is under 100% of the federal poverty level. But, the project will bill Medicaid for her care, and submit data about this family planning user to FPAR.

Alex has come for STD treatment and condoms. He has private insurance, and his copay for an office visit is $20. However, according to his income and your schedule of discounts, if he was uninsured, his visit would be only $15.

How much would you charge Alex for the visit?

Even though Alex has a copay of $20, the project will collect $15 from Alex, bill his insurance, and submit data on this family planning user to FPAR.

Jackie is 18 years old with a part-time job with income under 100% FPL. She has yet to speak to her parents about her visit to the clinic for family planning services, and she does not want to use her insurance. She requests confidentially billed services.

How much would you charge Jackie for the visit?

Jackie's part-time job is the only income to use when determining what she would be charged based on the schedule of discounts. Because her income is under 100% of the federal poverty level, the project will not charge her, and will submit data about this family planning user to FPAR.

Abu is a 20 year old male who comes to the clinic with his parents requesting family planning services. They assisted him with making the appointment, and he is

covered under his parents' insurance policy, with an income over 250% FPL.

How much would you charge Abu for the visit?

You can assess his charges based on his family income and bill the parents' insurance for services. His income is above 250% of the federal poverty level, so, with his consent, you bill his insurance, charge him the full $20 copay, ans submit data on this family planning user to FPAR.

Jamie comes to the clinic with her child in a stroller and says she is overwhelmed and that she doesn't want to get pregnant again. She does not have any documentation with her, but tells you she is not working and her boyfriend works at a fast food restaurant. She only has enough money for bus fare to return home.

How much would you charge Jamie for the visit?

You cannot turn someone away because they can't pay for services. Follow your clinic policy for income verification. She would not have to pay anything because her income falls below 100% of the federal poverty level.

Laura comes to the clinic to purchase emergency contraception (EC). The full price cost of Plan B is $30 at your site. She is a single mother with one child and earns $25,000 a year. This income is 150% of the federal poverty level, which, according to your agency's scale, means that she would pay 25% of the cost of services.

How much would you charge Laura for the visit?

Since the full cost is $30 and her income places her at paying 25% of the cost, she should be charged $7.50 for the EC.

Materials review and approval

Title X projects are responsible for reviewing and approving informational and educational materials.

All client education materials—such as brochures, posters, videos or any other materials that your project uses to help inform or educate clients about services—must be reviewed and approved by an Information and Educational Materials Approval committee that represents the community served. (42 CFR 59.6(a))

Standards of conduct

Title X exists to provide a needed service to the public.

Title X projects must establish policies to prevent employees, consultants, or members of governing or 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.

Because of the importance of protecting family planning clients, Title X projects are required to inform the OPA Project Officer in writing about plans for any research projects that involve Title X clients. This will ensure that any research is done in accordance with regulations for the protection of human subjects. (45 CFR Part 46)

Quiz

Now let's review what we've covered. For each question, select the response option you think is correct.

Question

01/05

Title X projects should provide:

A. A broad range of acceptable and effective contraceptive methods

B. Support for how to achieve pregnancy, basic infertility services, and other preconception health services

C. STD screening and treatment

D. All of the above

The answer is D. Title X projects should provide all of the above.

Question

02/05

An individual would be considered a family planning client if they are of childbearing age, and:

A. Receive a service related to preventing pregnancy

B. Receive a service related to achieving pregnancy

C. Discuss their reproductive goals and receive preconception counseling

D. Any of the above

The answer is D. An individual receiving any of the above services would be considered a family planning client.

Question

03/05

Title X projects cannot:

A. Provide, promote, refer for, or support abortion as a method of family planning

B. Provide pregnancy testing and diagnosis

C. Provide non-directive options counseling

D. Refer for abortion in the case of rape or incest

The answer is A. Title X projects cannot provide, promote, refer for, or support abortion as a method of family planning

Question

04/05

A client should not be charged for family planning services under the following circumstances:

A. If they are a minor

B. If they are at or below 100% of the federal poverty level

C. If they are at or below 250% of the federal poverty level

D. If they are working

The answer is B. The client should not be charged if they are at or below 100% of the federal poverty level.

Question

05/05

All client education materials—such as brochures, posters, and videos—should be reviewed and approved by a committee that represents:

A. Researchers

B. Doctors and nurses

C. The community served

D. The clinic staff

The answer is C. Client education materials should be reviewed and approved by a committee that represents the community served.

Conclusion

*This is the end of **Title X Orientation.***

Thanks you for your participation in the Title X Orientation online course. For other family planning training resources, visit fpntc.org, follow us on Twitter, and subscribe to our newsletter.

This course has covered some of the Title X Program Requirements. We recommend referring to these requirements for more information and for a list of other applicable regulations and statutes. If you have any questions, please contact the Office of Population Affairs.

Your feedback is important to us!

Please complete a brief evaluation of this course. After completing the evaluation, you can download a certificate of completion from your FPNTC training account.

Course Evaluation

CLICK HERE

FPNTC

FAMILY PLANNING
NATIONAL TRAINING CENTER

References

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