



## 2.8 RANGE OF FAMILY PLANNING METHODS

### **POLICY:**

A Title X project must provide a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including pregnancy testing and counseling, assistance to achieve pregnancy, basic infertility services, STI services, preconception health services, and adolescent-friendly health services). 42 CFR § 59.5(a)(1)

If an organization offers only a single method of family planning, it may participate as part of a project if the entire project offers a broad range of acceptable and effective medically approved family planning methods and services. Title X service sites that are unable to provide clients with access to a broad range of acceptable and effective medically approved family planning methods and services must be able to provide a prescription to the client for their method of choice or referrals to another provider, as requested. 42 CFR § 59.5(a)(1)

QFP notes the need to offer a broad range of contraceptive methods, which is an important part of providing client-centered care that respects the individual's choice. Projects should have a system in place to ensure continuous access to a broad range of medically approved contraceptive methods, optimally on-site.

QFP notes the special needs of adolescent clients and recommends ways to address those needs, e.g., how to tailor contraceptive counseling for adolescents and ways to make services more youth friendly.

### **PROCEDURE:**

Services provided by subrecipients and service sites, when viewed in its entirety, provide a broad range of acceptable and effective methods and services.

Medical record reviews demonstrate that clients are offered a broad range of acceptable and effective family planning methods and services.

A review of the current stock of contraceptive methods demonstrates that a broad range of methods, including LARCs, are available on-site or by referral. All methods available on-site are in stock with no outdated contraceptive methods.

All services listed in QFP are offered to all clients, when appropriate, regardless of gender, including adolescents as specified in clinical protocols.

Clinic protocols for contraceptive methods are reviewed and updated annually.

Method-specific client information sheets are reviewed annually.

Consent forms are required for procedures (IUDs and Implants).



Grantee oversight of subrecipients/service sites compliance with this section includes participation with the protocol committee, triennial site reviews, grant applications, work plan evaluation and FPAR-required reporting.

A review of medical records confirms that adolescents have been counseled about abstinence, the use of condoms and other contraceptive methods, including LARCs.

**RESOURCES:**

NDFPP Protocol manual <https://www.hhs.nd.gov/cfs/family-planning/grantees>

CDC U.S. Selected Practice Recommendations for Contraceptive Use, 2016. MMWR 2016;65(4):1-72.

[CDC - Summary - US SPR - Reproductive Health](#)

CDC U.S Medical Eligibility Criteria for Contraceptive Use, 2016. MMWR 2016: 65(3):1-96 [US Medical Eligibility Criteria \(US MEC\) for Contraceptive Use, 2016 | CDC](#)

[Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use. \(cdc.gov\)](#)