

2.14 DETERMINING NEED FOR SERVICES

Policy: Title X providers must determine the need for services for all clients at every visit (see CDC's *Providing Quality Family Planning Services*). Any client receiving services related to preventing or achieving pregnancy, or a service that protects reproductive health, is a Title X client.

Definition of Services

Title X family planning services are embedded within a broader framework of preventive health services (see Figure 1: Family Planning and Related and Other Preventive Health Services).

According to the QFP, health services are divided into three main categories:

1. Family planning services that include:
 - a. Contraceptive services for clients who want to prevent pregnancy and space births
 - b. Achieving pregnancy
 - c. Basic infertility services
 - d. Pregnancy testing and counseling and other preconception health services (e.g. screening for obesity, smoking, and mental health)
 - e. STI/HIV testing and other preconception health services. These are considered family planning services because they improve women's and men's health and can influence a person's ability to conceive or to have a healthy birth outcome.
2. Related preventive health services that include services considered to be beneficial to reproductive health, are closely linked to family planning services, and are appropriate to deliver in the context of a family planning visit but do not contribute directly to achieving or preventing a pregnancy (e.g. cervical or breast cancer screening).
3. Other preventive health services that include preventive health services for women and men not included above. Screening for lipid disorders, skin cancer, colorectal cancer, or osteoporosis are examples of this type of service. Although important in the context of primary care, these have no direct link to family planning services.
 - a. A client may come to the clinic for other preventive services or management of a chronic condition. If the client is assessed for contraceptive needs during this visit, she/he qualifies as a Title X client. For example, a woman presents for management of care for diabetes. The provider counsels and provides a referral for contraceptive services. In this way, the woman becomes a Title X client.

Procedure:

Title X providers should use the following questions to determine what family planning services are most appropriate for a given visit. The provider should avoid making assumptions based on personal characteristics. Identifying the need for contraceptive services at each visit is important.

1. What is the client's reason for the visit?
2. Does the client have another source of primary care?
3. What is the client's reproductive life plan?
4. Does the client need preconception health services?
5. Does the client need STI services?
6. What other related preventive health services does the client need?

The individual client's needs should be considered when determining what services to offer at a given visit. It may not be feasible to deliver all the needed services in a single visit, and they might need to be delivered over the course of several visits. Title X providers should tailor services to meet the specific needs of the population they serve. In some cases, the provider will deliver the initial screening service, but refer to another provider for further diagnosis or follow-up care (see MT TX FP Clinical Protocol

Manual, Policy 15.18 *Social Service Referral Guidelines* and Policy 15.19 *Medical Service Referral Guidelines*).

Diverse Populations

Professional recommendations for how to address the needs of diverse populations, such as LGBT (Lesbian, Gay, Bi-Sexual or Transgender) persons, adolescents, or persons with disabilities should be consulted and integrated into procedures as appropriate (see MT TX FP Administrative Policy 2.16, *Diverse Populations*). Title X providers should not assume the reason of visit for any client.

A clinical pathway of family planning services for women and men of reproductive age is provided below in Figure 2: *Clinical Pathway QFP Services*.

Title X Visit Components

In determining the need for services:

1. A reproductive life plan must be assessed at every visit. If a client does not want a child at this time and is sexually active, offer contraceptive services (see MT TX FP Clinical Protocol Manual, Policy 1.3, *Reproductive Life Plan*).
2. A sexual health assessment must be conducted during visits related to contraceptive services, achieving pregnancy, preconception health, basic infertility services and STI services (see MT TX FP Clinical Protocol 1.4, *Sexual Health Assessment*).
3. A comprehensive health history, appropriate for the visit, must be obtained and reviewed at each service.
4. If the client desires pregnancy testing, provide pregnancy testing and counseling.
5. If the client wants to have a child now, provide services to help the client achieve a pregnancy.
6. Preconception health services are intended to promote the health of women and men of reproductive age before conception, with the goal of improving pregnancy-related outcomes, and should be included in all visits of women and men of reproductive age consistent with a client centered approach.
7. The need for STI services, including HIV/AIDS testing should be considered at every visit.
8. Whether the client needs related services (e.g. breast and cervical screening for female clients, immunizations, etc.) must be assessed at each visit. Professional medical judgment based on comprehensive health history, as well as professional medical society recommendations must be followed when determining which preventive health services, a client may need. It remains the responsibility of the medical provider to determine the individual client's need for medical services at every visit.
9. Counseling and provision of services must be client centered.
10. Re-visits should be scheduled as appropriate to optimize contraception, and/or to follow-up on identified problems.
11. All of the above must be documented in the client's medical record.

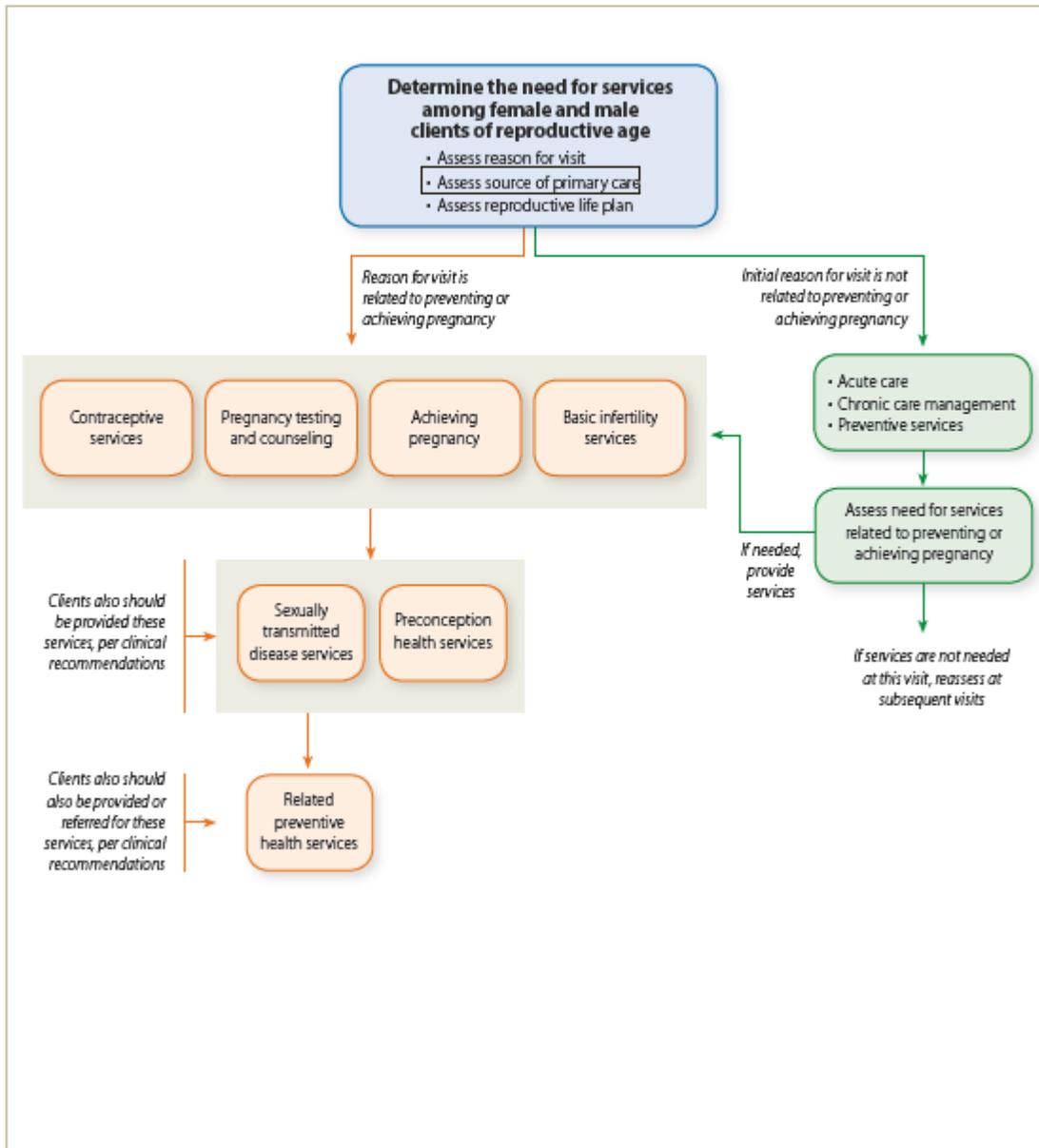
Figure 1: Family Planning and Related and Other Preventive Health Services



Figure 2: Clinical Pathway QFP Services

Clinical Pathway

For family planning services for women and men of reproductive age



Source: Centers for Disease Control and Prevention (CDC). (2014, April 25). Providing quality family planning services: Recommendations of CDC and the U.S. Office of Population Affairs. *MMWR. Morbidity and Mortality Weekly Reports*. Retrieved from <http://www.cdc.gov/mmwr/pdf/rr/r6304.pdf>