

AT THE SOUTHERN NEVADA HEALTH DISTRICT

# SOUTHERN NEVADA COMMUNITY HEALTH CENTER POLICY AND PROCEDURE

			_	
<b>DIVISION:</b>	FQHC		NUMBER(s):	CHCA-014
PROGRAM:	Family Planning		<b>VERSION:</b>	1.0X
TITLE:	Nondirective Counseling and Referral		PAGE:	1 of 5
			<b>EFFECTIVE I</b>	DATE:
			Click or tap here	e to enter text.
<b>DESCRIPTION:</b>	<b>IPTION:</b> Process to ensure compliance with Title X for		<b>ORIGINATION DATE:</b>	
	pregnancy and abort	ion counseling.	Click or tap here	e to enter text.
APPROVED BY:			REPLACES:	
			Click or tap here to enter text.	
FQHC OPERATIONS OFFICER:				
Dondy Smith		Data		
Randy Smith Date		Date		
DISTRICT HEALTH OFFICER:				
Fermin Leguen MD, MPH Date				

### I. PURPOSE

The purpose of this policy is to describe Southern Nevada Community Health Center (SNCHC) process for ensuring grantee and subrecipient compliance with the requirements that the project: 1) will not provide abortion as a method of family planning and 2) will offer pregnant clients the opportunity to be provided information and counseling regarding: prenatal care and delivery; infant care, foster care, or adoption; and pregnancy termination. This policy also describes the process by which, if requested to provide such information and counseling, SNCHC will provide neutral, factual information and nondirective counseling on each of the options, and referral upon request.

#### II. SCOPE

This policy applies to all Workforce members involved in the delivery of family planning services.



#### III. POLICY

Title X projects must not provide abortion as a method of family planning (42 CFR 59.5 (a)(5)).

Title X projects must offer pregnant clients the opportunity to be provided information and counseling regarding each of the following options (42 CFR 59.5 (a)(5)(i))

- Prenatal care and delivery.
- Infant care, foster care, or adoption; and
- Pregnancy termination.
- A. Abortion will not be provided as a method of family planning.
- B. Pregnant clients will be offered the opportunity to be provided information and counseling regarding each of the follow options
  - 1. Prenatal care and delivery.
  - 2. Infant care, foster care, or adoption, and
  - 3. Pregnancy termination (42 CFR§59.5(a)(5))
- C. If requested to provide such information and counseling, staff at the service site will provide neutral, factual information and nondirective counseling on each of the options (except with respect to any option(s) about which the pregnant client indicates they do not wish to receive such information and counseling).
  - 1. Referral for additional services (e.g., for prenatal care, delivery, infant care, foster care, adoption, or pregnancy termination) will be made upon request (42 CFR§59.5(a)(5)).
  - 2. When a client requests referral for pregnancy termination/abortion, they will be given a name, address and telephone number/ Staff will not take further affirmative action (such as negotiating a fee reduction, making an appointment, providing transportation) to secure abortion services for the client (65 Fed. Reg, 41281 (July 3, 2000)).
  - 3. Where a referral to another provider who might perform an abortion is medically indicated because of the client's condition or the condition of the fetus (such as where the woman's life would be endangered), such as referral by a Title X project is not prohibited by section 1008 and is referred by 42 CFR § 59.5(b)(1). The limitation on referrals do not apply in cases in which a referral is made for medical indications (65 Fed. Reg 41281 (July 3, 2000)).
- **D.** Subrecipients and/or service sites will have written policies or procedures that detail how pregnant clients will be offered the opportunity to be provided information and nondirective counseling.

#### **IV. PROCEDURE**

Title X projects must provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with respect to any option(s) about which the pregnant client indicates they do not wish to receive such information and counseling (42 CFR 59.5 (a)(5)(ii)).

- A. Trained clinical staff will provide nondirective options counseling at the service site.
- **B.** Description of referral workflow for different type of referral(s).
  - 1. Patients opting to continue with a pregnancy will be referred for prenatal care. Referral will be generated thru the electronic health record (EHR) system and assigned to the referral specialist. Encourage patient to start prenatal care and assess for any potentially teratogenic medications, discuss alcohol, drug, and/or tobacco use (Clinical Staff).
  - 2. Patients wanting to terminate pregnancy will be referred for abortion services. Clinical staff will discuss difference between medication abortions and in-clinic abortions, review gestational age limits for each option.
  - 3. Undecided patients will be presented with the opportunity to discuss option and will be given information on a variety of options (continuation, termination, or adoption services).
  - 4. Staff will use clear, straightforward language, assess barriers to care and offer telehealth options (if appropriate).
- **C.** A referral packet that will include educational material, resources and up to date referral names and contact information will be provided to the patient during visit. This packet is available in the clinic and maintained by the health educator.
- **D.** Description of the legal status of abortion in your state.

Abortion is safe and legal in the State of Nevada. The procedure is governed by NRS 442.250. Any person in Nevada who is pregnant has the legal right to choose to have an abortion when performed by a licensed physician within the first 24 weeks of pregnancy. An abortion may be performed after 24 weeks where the physician has reasonable cause to believe an abortion is necessary to preserve the life or health of the pregnant person. You do not have to be a Nevada resident to receive abortion care in the state.

- **E.** Workflow and script for sharing information about specific options
  - 1. Staff will provide information consistent with patient's choice.
  - 2. Information will be given without bias and sensitively offer to discuss all options when appropriate.
  - 3. Assess for reproductive coercion/intimate partner violence



- Nondirective Counseling and Referral
  - 4. Assess for support systems.
  - 5. Staff will use Person-Centered Communication when sharing information about specific options.
    - a. Sample script:
      - "How would that be for you"
      - "Has that ever happened before?"
      - "What questions do you have about...?"
      - "Do you have a sense of how you would manage it?"
      - "Would you like me to talk to you about pregnancy options and give you information"?
      - "I am hearing you say you would like another child, but now just doesn't feel like the right time. Is this correct?"
      - "On the one hand, it sounds like your partner doesn't think you should have a baby now and on the other hand, you're excited about becoming a parent. Do I have that right?"
      - "Many clients stay they are worried about getting pregnant in the future if they have an abortion. Is that what you mean?"
      - "What do you think would work for you?"
      - Is there anyone in your life you want to include in this process?
  - **F.** Referral information will be updated annually.
  - G. Staff training and policy review will be conducted annually.
  - **H.** This policy will be stored in the SNHD Policy Hub and Reproductive Health Policy binder.
  - I. Referral resource with clients will be included in the pregnancy packet given to patients during visit.

### **Additional Sections**

Not Applicable

#### Acronyms/Definitions

Not Applicable

#### V. REFERENCES

Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs (pgs. 4–20) https://www.cdc.gov/reproductivehealth/contraception/qfp.htm Code of Federal Regulations 42 CFR 59.5 (a)(5) (i-ii) https://www.ecfr.gov/current/title-42/chapter-I/subchapter-D/part-59

# VI. DIRECT RELATED INQUIRIES TO

Community Health Nurse, Supervisor (Family Planning)

## HISTORY TABLE

## Table 1: History

Version/Section	Effective Date	Change Made
Version 0		First issuance

### VII. ATTACHMENTS

Not Applicable