

C2.4 – CLIENT EDUCATION

Purpose

The purpose of this policy is to describe the Iowa HHS process for ensuring compliance (including the SRs and service sites) for client education regarding diagnosis, lab results and plan of care or discharge/home instructions are stored and how they are maintained to ensure best practices are the standard.

Policy

Client education must be documented in the client record by referencing material name. The education provided should be appropriate to the client's age, level of knowledge, language, and socio-cultural background, be presented in an unbiased manner and from a reputable source (e.g. RHNTC, AWHONN, CDC, etc). A mechanism to determine that the information provided has been understood should be established. Documentation that the client appears to understand the information must be made.

Procedure

Client-centered counseling about contraceptive methods should be employed. Information must be medically accurate, balanced, and provided in a non-judgmental manner. Clinical Services providers should work with their client interactively to establish a plan, identify barriers, use of contraceptives and establish a follow-up plan.

- Contraceptive counseling is neutral, factual, and nondirective on each option. Counseling is non-coercive and informative, while prioritizing the holistic health needs and optimal wellbeing of the client, regardless of parenting intent, including participation of trusted adult.
- Client-centered counseling is culturally sensitive, includes client priorities about pregnancy prevention, acceptability of methods, and consider the relationship and [CDC Chart of U.S. Medical Eligibility Criteria for Contraceptive Use](#) and [CDC U.S. Selected Practice Recommendations for Contraceptive Use](#)
- Non-clinical counseling (nondirective options counseling, reproductive life planning etc) can be provided by an adequately trained staff member who is involved in providing family planning services to Title X clients. An adequately trained staff member may be a non-clinical service provider (e.g. health educator, doula, community health worker) who has attended and participated in required orientation, courses, curriculums, maintains appropriate competencies and is knowledgeable in providing non-clinical counseling services (2021 Final Rule FAQs)

Education Services Must Provide Clients with the Information Needed To:

- Make informed decisions about FP and their RLP.
- Use their choice of methods of contraception and identify adverse effects.
- Reduce risk of transmission of STIs and HIV.
- Understand the range of services available to them, their purpose in maintaining overall health and sequence of clinic procedures.
- Understand the importance of recommended screening tests and other procedures involved in the Title X FP visits.

Additional education should include information on reproductive health and health promotion/disease prevention, including nutrition, exercise, smoking cessation, alcohol and drug abuse, domestic violence and sexual abuse.

Informed Consent

Written informed consent must be signed before services are provided. The consent forms must be written in a language understood by the client or translated and witnessed by an interpreter. To provide informed consent for contraception, the client must receive information on the benefits and risks, effectiveness, potential side effects, complications, discontinuation issues and danger signs of the contraceptive method chosen. Clients must be informed that services are voluntary and can be stopped at any time.

The signed informed consent form must be a part of the client’s record.

Date Revised	September 2023
References	<p>CDC Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (https://www.cdc.gov/reproductivehealth/contraception/pdf/summary-chart-us-medical-eligibility-criteria_508tagged.pdf)</p> <p>CDC U.S. Selected Practice Recommendations for Contraceptive Use (https://www.cdc.gov/reproductivehealth/contraception/mmwr/spr/summary.html)</p> <p>Title X Program Handbook, Section 3, Provision of High Quality Family Planning Services (https://opa.hhs.gov/sites/default/files/2022-08/title-x-program-handbook-july-2022-508-updated.pdf#page=20)</p>
Additional Resources	<p>Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP) [2014] (https://opa.hhs.gov/sites/default/files/2020-10/providing-quality-family-planning-services-2014_1.pdf)</p>