

Department of Social and Health Services

Olympia, Washington

Social Service Manual

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Summary

Effective June 30, 2010, the Medicaid Purchasing Administration (formerly known as Health and Recovery Services Administration) is terminating the Community Services Office (CSO) family planning nurse contracts. Since family planning nurses will no longer be co-located in the CSO, a referral for family planning services is no longer required. However, staff is still responsible to provide adults and emancipated minors with information about available services, where to access services and a referral to the CSO Social Worker upon request to discuss the benefits of family planning services.

Family Planning Services

Revised | ~~February 19~~ [July 1, 2010](#)

Purpose: To provide Family Planning guidelines to ~~social service~~ [Community Services Office \(CSO\)](#) staff for providing educational, medical and social services to all Medicaid eligible men and women, helping them become self-sufficient and avoid unintended pregnancy by planning and spacing the birth of their children.

See [WAC 388-532](#) - FAMILY PLANNING SERVICES

GUIDELINES

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~~The CSO Family Planning Program is a shared partnership between Medical Assistance Administration (MAA), Economic Services Administration (ESA), Department of Health (DOH) and contracted Family Planning agencies.~~

~~CSO Family Planning~~ workers are not expected to be Family Planning medical experts. CSO staff provide individuals with needs assessment and information about family planning services.

~~individuals can call the Family Planning hotline number (1-800-770-4334) or WithinReach (1-800-322-2588) for Contracted CSO Family Planning nurses are on-site at the CSO to educate and partner with CSO staff. They also provide medical expertise, education and referrals for clinical services, such as pregnancy testing and birth control. The CSO staff and the Family Planning nurse work closely in developing referral processes, product information, individual or group education sessions (including WorkFirst), needs assessments, follow up services, home visits, and outreach activities.~~

Family Planning Program Objectives

1. Reduce unintended pregnancies using ~~established referral systems~~, state and local partnerships.
2. Provide all eligible ~~and/or~~ potentially eligible men and women with information about, and linkage to, available family planning services per WAC 388-532-100.
3. Reduce publicly funded maternity costs resulting from unintended pregnancies.
4. Educate men and women about:
 - a. Available family planning health services,
 - ~~a.b.~~ The variety of birth control methods to help plan, if or when, to have another child,
 - ~~b.c.~~ The cost of raising children,
 - ~~e.d.~~ Barriers that unintended pregnancies create in becoming self sufficient, and
 - ~~d.e.~~ The best use of TANF and Medicaid resources.

Family Planning Services

1. Services are provided ~~on-site~~ at ~~Community Service Offices (CSO's)~~, local Family Planning clinics or other medical provider agencies. ~~Eligible clients may choose where to receive services.~~
2. Services are covered under
 - a. Medical ~~ID~~ Services Cards, both Healthy Options and fee-for-service,
 - b. Private insurance policies, or
 - c. The "Take Charge" Family Planning program. More information about Take Charge is available at: <http://fortress.wa.gov/dshs/maa/familyplan/Take Charge/TC.index.htm>
3. Information about services is offered by any CSO or ~~Customer Service~~ all Center staff, with ~~the~~ Social Workers and CSO Family Planning nurse as the lead experts in motivating and educating men and women ~~clients~~ to access services. The Social Worker may help and CSO Family Planning nurse complete the referral process and ensure the individual client is linked to a Family Planning Provider via the Family

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Planning hotline number or WithinReach.

Upfront Screening –~~What Happens Before the Client is Referred to the Social Worker?~~

1. The CSO case managers and Customer Service all Center staffs play a critical role in providing individuals clients with information and links to Family Planning services. ~~The upfront referral process should initiate the discussion on the benefits of Family Planning Services.~~
2. All ~~eligible clients, not just TANF,~~ men and women are to be provided information ~~about~~ available services, where to access services or a ~~Family Planning~~ referral to the CSO Social Worker upon request to discuss the benefits of Family Planning Services.
3. All TANF clients must receive a minimum set of information ~~and mandatory Social Services referral for~~ about Family Planning services as listed at http://www1.dshs.wa.gov/ESA/wfhand/1_3.htm
4. ~~CSO staff will work with the on-site family planning nurse to outline communication and referral processes to:~~
 - a. ~~Help the client utilize the on-site family planning services, and~~
 - b. Exchange information regarding services that are provided to the client.

NOTE: ~~Contracted Family Planning nurses and First Steps providers have already signed Confidentiality Agreements with DSHS and are held to the highest standards for client protection during contract monitoring by MAA State Staff.~~

WORKER RESPONSIBILITIES

What Happens After the Client is Referred to a Family Planning Social Worker to discuss Family Planning?

1. Inform all referred men and women clients of available benefits and services under the Family Planning program.
2. Include what is covered under their Medical ~~ID~~ Services Card, such as:
 - a. Over the Counter (OTC) products
 - b. Emergency contraception pills (ECP)
 - c. Advantages of planning each pregnancy
 - d. How to talk to other family members.
 - e. Sterilization (vasectomies and tubal ligations)
3. Ensure that Family Planning information, pamphlets, brochures, and local provider lists are provided to each eligible client individual.
4. ~~Meet with referred clients and link to the on-site family planning nurse, or determine the best contact method for the client (in-office, home visit, or phone). Notify the Family Planning nurse of the referral and~~

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~~information. Document action and schedule follow-up for all activities completed, including response to the Case Manager in e-JAS.~~

- ~~5.4. Refer the individual client to the Family Planning hotline number or WithinReach nurse for medical expertise, referrals for dispensing of prescriptive, non-prescriptive methods, clinical services, and medical information on birth control and family planning services.~~
- ~~6. Print and review client referral lists from available automated systems such as Bar Code, Family Planning Extension P5 reports, and TANF e-JAS referrals for Family Planning. Share this information with the Family Planning nurse and generate referrals or contact with clients based on local policy.~~
- ~~7. Coordinate with the Family Planning nurse, order and distribute any Family Planning supplies and materials from MAA.~~
- ~~8.5. Develop local partnerships with CSO First Steps staff and community First Steps providers to eEstablish a continuum for referrals between Family Planning and First Steps.~~

CSO BEST PRACTICES

1. Conduct an assessment of the client's needs and barriers to self-sufficiency with regard to family planning. Arrange for other services as needed (such as shelter, clothing, food, mental health, etc.).
2. Collaborate with the local Family Planning Nurse agencies to provide educational sessions on Family Planning Program services.
3. Engage in outreach activities in the community to reach eligible or potentially eligible clients and provide program awareness.
4. Establish relationships with other community agencies to create effective cross agency referrals to Family Planning services. Some examples include Division of Children and Family Services, Chemical Dependency Treatment Centers, Schools, Colleges, and Job Training Programs.
5. Conduct client follow-up to discuss
 - a. If the client is using method of choice, and
 - a.b. How family planning methods are working;
 - b. Whether or not the client is using method of choice, or
 - c. Whether or not a referral back to the Family Planning nurse is appropriate.

The Social Worker, CSO Family Planning Nurse, and Case Manager need to complete documentation of referrals, actions, and results in e-JAS.

http://www1.dshs.wa.gov/ESA/wfhand/1_3.htm

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