

INSTRUMENT 1
GRANTEE WEB SURVEY

OMB Control No: XXXX-XXXX
Expiration Date: XX/XX/XXXX

Title X Grantee Survey

DRAFT

THE PAPERWORK REDUCTION ACT OF 1995

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-new. The time required to complete this information collection is estimated to average 60 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

July 2022

INTRODUCTION

Thank you for participating in the Title X Implementation Study sponsored by the Office of Population Affairs (OPA). The information you provide in this survey will be used to develop a summary profile describing your Title X grant and for summary reports on themes that emerge from information collected across all grantees, such as the different strategies grantees use to ensure access to equitable, affordable, and client-centered services.

As part of this study, we are asking Title X project directors to complete a web survey. We estimate it will take about 60 minutes.

While we will not attribute the information you share in the survey to you personally, it will contribute to the grant summary profile and OPA may share these profiles with other Title X grantees and publicly. We may also use your responses to open-ended questions to illustrate findings, but if we do, we will not report any information that will allow your response to be identified with you.

There are no right or wrong answers to the survey questions. We understand that things may have changed for your grant since the time of your application. Your responses should indicate what is currently happening with your grant and does not need to align with your application. In addition, we understand your organization may have several persons overseeing Title X grant operations and services. You may designate another person to complete the survey for you or to provide input to certain sections.

You may skip any questions you do not want to answer, but we hope you will answer them all, because the information you provide is important.

There are no known risks or benefits for participating in this survey.

The survey is designed so you can stop at any point and come back later. All of your previous responses will be saved.

Please contact the study team at TitleXstudy@mathematica-mpr.com or XXXXXXXX (toll-free) if you have any questions. Thank you for your time and contributions to this study.

If you have questions about your rights as a research volunteer, you can call Health Media Lab Institutional Review Board at (202) 549-1982.

☐ CLICK HERE IF YOU AGREE TO PARTICIPATE IN THE SURVEY.

A. Title X program overview, including the populations you serve

The first few questions are about how you implement family planning and other preventive services. When you are answering these questions, consider all subrecipients and service delivery sites funded through your Title X grant.

Grantee. An agency that receives Title X funds directly from the Office of Population Affairs (OPA).

Subrecipient. An agency that receives Title X funds from a grantee.

Service site or site. A location providing clinical care that is operated by a subrecipient or grantee providing Title X-funded family planning services.

A1. As a grantee, which of the following best describes how you deliver Title X services?

- ☐ Through direct service sites.....1
- ☐ Through subrecipient agencies.....2
- ☐ Through both direct service sites and subrecipient agencies.....3
- ☐ Other (please describe).....4

A2. Now, think about all the service sites where clients receive Title X family planning services and STI prevention and treatment services.

Please enter the total number of service sites funded through your Title X grant (including subrecipients) that are in the following types of settings:

	Number of service sites
a. City or county health departments	<input type="text"/>
b. Hospitals	<input type="text"/>
c. Free standing family planning clinics	<input type="text"/>
d. Federally Qualified Health Centers	<input type="text"/>
e. Community/migrant health centers	<input type="text"/>
f. School-based health centers	<input type="text"/>
g. Primary care associations	<input type="text"/>
h. Federally Qualified Health Center Look-Alike	<input type="text"/>
i. Other (please describe) <input type="text"/>	<input type="text"/>
j. Other (please describe) <input type="text"/>	<input type="text"/>
k. Other (please describe) <input type="text"/>	<input type="text"/>
l. Other (please describe) <input type="text"/>	<input type="text"/>

A3. IF A1 = 2 or A1 = 3: How many subrecipients do you provide funding to for Title X services?

The next questions are about the populations served by the all the subrecipients and service sites funded through your Title X grant.

A4. Please describe the geographic area(s) served by the subrecipients and service sites funded through your Title X grant. Please include the number of counties served and, if applicable, the areas of your state(s) they are in.

For example: "Our grant serves 10 counties across the northeast area of [state name], along with 5 counties in the southeast."

The next few questions are about your perceptions as a Title X project director of the experiences or challenges the populations served through your Title X grant might be facing. In answering, think about the populations served across all subrecipients and service sites funded through your Title X grant.

A5. On a scale of 1-5, where 1 is not a challenge and 5 is a major challenge, how much of a challenge do you see each of these for the clients served by your Title X grant?

	1-Not a challenge	2	3	4	5-A major challenge	Not sure/ don't know
a. Complex medical circumstances	1 m	2 m	3 m	4 m	5 m	d m
b. Complex personal circumstances	1 m	2 m	3 m	4 m	5 m	d m
c. Food insecurity	1 m	2 m	3 m	4 m	5 m	d m
d. Formerly or currently incarcerated	1 m	2 m	3 m	4 m	5 m	d m
e. Housing insecurity	1 m	2 m	3 m	4 m	5 m	d m
f. Human trafficking	1 m	2 m	3 m	4 m	5 m	d m
g. Insufficient or no health insurance	1 m	2 m	3 m	4 m	5 m	d m
h. Intimate partner violence	1 m	2 m	3 m	4 m	5 m	d m
i. Lack of transportation	1 m	2 m	3 m	4 m	5 m	d m
j. Language barriers	1 m	2 m	3 m	4 m	5 m	d m
k. Living at or below the poverty level	1 m	2 m	3 m	4 m	5 m	d m
l. Physical or intellectual disabilities	1 m	2 m	3 m	4 m	5 m	d m

B. Provision of equitable, affordable, accessible, and client-centered family planning services

The next questions are about clinical strategies used to implement family planning services, including strategies to make them equitable, affordable, accessible, and client centered.

- B1.** To the best of your knowledge, are the following services available to Title X network clients at all sites, available only through referrals, or available at some service sites and at others only through referrals?

	Available at all service sites	Available only through referrals	Available at some service sites and at others only through referrals	Not sure/ don't know
a. Pregnancy testing and counseling	1 m	2 m	3 m	4 m
b. Counseling on achieving pregnancy	1 m	2 m	3 m	4 m
c. Basic infertility services	1 m	2 m	3 m	4 m
d. Pre-conception health services	1 m	2 m	3 m	4 m
e. Short term contraceptive methods (such as oral pill, patch, injection, etc.)	1 m	2 m	3 m	4 m
f. Long-acting reversible contraceptive methods (implants and IUDs)	1 m	2 m	3 m	4 m
g. Natural family planning methods	1 m	2 m	3 m	4 m
h. HPV vaccinations	1 m	2 m	3 m	4 m
i. Adolescent-friendly health services	1 m	2 m	3 m	4 m
j. Screening for obesity	1 m	2 m	3 m	4 m
k. Screening for smoking, drug and alcohol use	1 m	2 m	3 m	4 m
l. Screening for mental health issues	1 m	2 m	3 m	4 m
m. Screening for intimate partner violence	1 m	2 m	3 m	4 m
n. Screening for breast cancer	1 m	2 m	3 m	4 m
o. Screening for cervical cancer	1 m	2 m	3 m	4 m
p. Other (please describe)	1 m	2 m	3 m	4 m

- B2.** To the best of your knowledge, are the following STI and HIV prevention and treatment services available to Title X network clients at all service sites, available only through referrals, or available at some service sites and at others only through referrals?

	Available at all service sites	Available only through referrals	Available at some service sites and at others only through referrals	Not sure/don't know
a. STI and HIV education and counseling	1 m	2 m	3 m	4 m
b. STI and HIV screening and testing	1 m	2 m	3 m	4 m
c. STI and HIV treatment	1 m	2 m	3 m	4 m
d. Extragenital screening for genital sores and vaginal infection	1 m	2 m	3 m	4 m
e. STI self-testing	1 m	2 m	3 m	4 m
f. Expedited partner therapy	1 m	2 m	3 m	4 m
g. PrEP counseling and risk assessment	1 m	2 m	3 m	4 m
h. PrEP prescription services	1 m	2 m	3 m	4 m
i. Full range of PrEP services, including follow-up services on-site	1 m	2 m	3 m	4 m
j. PEP counseling	1 m	2 m	3 m	4 m
k. PEP prescription services	1 m	2 m	3 m	4 m
l. Other (please describe)	1 m	2 m	3 m	4 m
<div></div>				

The next questions are about your perceptions of the challenges and strategies involved in **making family planning and STI screening and treatment services accessible**. The first questions are about family planning services specifically, followed by a separate question about STI screening and treatment.

- B3.** What do you see as the **main challenges related to making family planning** services accessible to clients served by your Title X grant? List up to three challenges.

	Specify
a. Challenge 1	<div></div>
b. Challenge 2	<div></div>
c. Challenge 3	<div></div>

B4. What do you see as the **main challenges related to making STI screening and treatment services** accessible to clients served by your Title X grant? List up to three challenges.

	Specify
a. Challenge 1	
b. Challenge 2	
c. Challenge 3	

The next questions are about strategies to make services more accessible.

B5. In your opinion, how much has implementation of the following strategies increased access to family planning and STI screening and treatment in the communities served by the subrecipients and service sites funded through your Title X grant?

	No increase	Increased a little	Increased somewhat	Increased a lot	This strategy is not currently implemented
a. Location of services (e.g., easily accessible by public transportation; multiple locations)	1 m	2 m	3 m	4 m	5 m
b. Hours of services (e.g., extended hours including evening and weekend hours)	1 m	2 m	3 m	4 m	5 m
c. Modality of service provision (e.g., in person, telehealth, drive-through, mobile clinics, in home health care)	1 m	2 m	3 m	4 m	5 m
d. Availability of ancillary services, such as translation services and referral linkages	1 m	2 m	3 m	4 m	5 m
e. Providing robust education and community outreach	1 m	2 m	3 m	4 m	5 m
f. Ensuring access to a broad range of acceptable and effective family planning methods and services at service sites	1 m	2 m	3 m	4 m	5 m
g. Implementing billing and payment practices that expand access to services	1 m	2 m	3 m	4 m	5 m
h. Ensuring access to a broad range of acceptable and effective family planning methods and services at service sites	1 m	2 m	3 m	4 m	5 m
i. Offering same-day insertions of IUDs and/or implants	1 m	2 m	3 m	4 m	5 m
j. Offering same-day removals of IUDs and/or implants	1 m	2 m	3 m	4 m	5 m
k. Offering same-day STI testing results	1 m	2 m	3 m	4 m	5 m
l. Offering same-day STI treatment	1 m	2 m	3 m	4 m	5 m

- B6.** Please use the space to share any other strategies not included in the item below that are being used to increase access to family planning and STI screening and treatment in the communities served by the subrecipients and service sites funded through your Title X grant.

☐ Nothing else to share.....1

ONLY SHOW RESPONSES WHERE B5 IS NOT EQUAL TO 5

- B7.** In your opinion, how challenging has it been to implement the following strategies to improve access at the subrecipients and service sites funded through your Title X grant?

	Not at all challenging	A little challenging	Somewhat challenging	Very challenging	Not sure/don't know
a. Location of services (e.g., easily accessible by public transportation, multiple locations)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
b. Hours of services (e.g., extended hours including evening and weekend hours)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
c. Modality of service provision (e.g., in-person, telehealth, drive-through, mobile clinics, in home healthcare)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
d. Availability of ancillary services such as translation services and referral linkages	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
e. Providing robust education and community outreach	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
f. Ensuring access to a broad range of acceptable and effective family planning methods and services at service sites	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
g. Offering same-day insertions of IUDs and/or implants	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
h. Offering same-day removals of IUDs and/or implants	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
i. Offering same-day STI testing results	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
j. Offering same-day STI treatment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
k. Implementing billing and payment practices that expand access to services	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
l. Other (please describe)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					

The next questions ask about staff training.

B8. To the best of your knowledge, please indicate how many subrecipients and service sites funded through your Title X grant have staff who received formal training on how to best serve the needs of each of the following groups:

	All service sites	Most service sites	Some service sites	No service sites	Not sure/ don't know
a. Adolescents (Adolescent friendly services)	1 m	2 m	3 m	4 m	d m
b. Quality Family Planning (QFP) for Men	1 m	2 m	3 m	4 m	d m
c. Persons with physical disabilities	1 m	2 m	3 m	4 m	d m
d. Persons with intellectual disabilities	1 m	2 m	3 m	4 m	d m
e. Persons who are experiencing homelessness	1 m	2 m	3 m	4 m	d m
f. Persons reporting substance use	1 m	2 m	3 m	4 m	d m
g. Indigenous communities	1 m	2 m	3 m	4 m	d m
h. Persons with limited English proficiency	1 m	2 m	3 m	4 m	d m
i. Immigrants	1 m	2 m	3 m	4 m	d m
j. Refugees	1 m	2 m	3 m	4 m	d m
k. Persons experiencing intimate partner violence	1 m	2 m	3 m	4 m	d m
l. LGBTQI+ persons	1 m	2 m	3 m	4 m	d m
m. Other (please describe)	1 m	2 m	3 m	4 m	d m
<input type="text"/>					

B9. In your opinion, could the staff at the subrecipients and service sites funded through your Title X grant benefit from additional training in any of the following areas?

	Yes, staff could benefit from additional training	No, staff already have any training they need	Not sure/ don't know
a. Counseling adolescents about sexual coercion and abuse	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
b. Complying with state mandatory reporting laws for abuse, rape, incest, and human trafficking	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
c. Identifying victims of human trafficking in a family planning setting and linking them to appropriate services	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
d. Voluntary and non-coercive services	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
e. Client-centered services	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
f. Confidentiality	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
g. Nondiscriminatory services	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
h. Pregnancy options counseling	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
i. Substance use	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
j. STD screening and testing	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
k. Contraception, including fertility awareness-based methods	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
l. Cultural considerations	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
m. Mental health	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
n. Clinical guidelines and updates	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>
o. Cancer screening	1 <input type="checkbox"/>	0 <input type="checkbox"/>	d <input type="checkbox"/>

- B10.** To the best of your knowledge, how many subrecipients and service sites funded through your Title X grant have staff who received formal training on how to ask clients about any of the following?

	All service sites	Most service sites	Some service sites	No service sites	Not sure/ don't know
a. Racial and ethnic backgrounds—to better understand clients' needs and identities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
b. Genders and pronouns, to address clients according to their stated gender identity and refer to them using those pronouns	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
c. Sexual identities and sexual behaviors, relationship statuses, and the gender(s) of their partner(s)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
d. Prior medical issues or disabilities, to use sensitivity in communicating with clients and to better prepare to offer clients accommodations due to prior medical issues or disabilities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
e. Understanding religious preferences in the context of contraception.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
f. Difficulty paying for bills, medicine, or food, to assess possible needs and related health issues if client is unable to fulfill these needs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
g. Housing situation, to learn about possible health outcomes associated with housing difficulties	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
h. Transportation situation, to determine if there is a lack of access	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
i. Attitudes toward and experiences with family planning services or other medical services, to be able to provide clients with more positive experiences and rebuild trust that may have been lost	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>
j. Other (please describe) <div style="border: 1px solid black; height: 20px; width: 280px; margin-top: 5px;"></div>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>

The next set of questions are about providing quality care in accordance with the Quality Family Planning Recommendations (QFP).

B11. How confident are you that staff at the subrecipients and service sites funded through your Title X grant consistently follow each of the following principles of the Quality Family Planning Recommendations (QFP)?

	Very confident	Somewhat confident	A little confident	Not at all confident	Not sure
a. Establish and maintain rapport with client	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Assess client's needs (including clinical needs, personal life considerations, and concerns) and personalize discussions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Work with the client to establish a reproductive health plan	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Provide medically accurate information that is balanced, nonjudgmental, in line with the client's plan at the time, and can be understood and retained	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. Confirm client's understanding—for example, give client an opportunity to explain in their own words the information shared during the encounter	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

PROGRAMMER: Display B12 and B13 on same screen

The next questions are about your perceptions of the challenges and strategies involved in delivering quality family planning and STI screening and treatment services. The first questions are about family planning services specifically, followed by a separate question about STI screening and treatment.

B12. What do you see as the **main challenges related to delivering quality family planning** faced by subrecipients and service sites funded through your Title X grant? You can list up to three challenges.

	Specify
a. Challenge 1	<input type="text"/>
b. Challenge 2	<input type="text"/>
c. Challenge 3	<input type="text"/>

B13. What do you see as the **main strategies related to delivering quality family planning services** used by subrecipients and service sites funded through your Title X grant overcome these challenges? You can list up to three strategies.

	Specify
a. Strategy 1	
b. Strategy 2	
c. Strategy 3	

PROGRAMMER: Display B14 and B15 on same screen

B14. What do you see as the **main challenges related to delivering STI screening and treatment services** faced by subrecipients and service sites funded through your Title X grant? List up to three challenges.

	Specify
a. Challenge 1	
b. Challenge 2	
c. Challenge 3	

B15. What do you see as the **main strategies related to delivering STI screening and treatment services** used by subrecipients and service sites funded through your Title X grant to overcome these challenges? List up to three strategies.

	Specify
a. Strategy 1	
b. Strategy 2	
c. Strategy 3	

C. Administrative practices related to your Title X program operations and services

The next questions are about coordinating referrals at subrecipient and service sites.

- C1.** In your opinion, how challenging has it been to establish and maintain the following types of partnerships and referral services for the subrecipients and service sites funded through your Title X grant?

	Very challenging	Somewhat challenging	A little challenging	Not at all challenging	Don't know	Not applicable
a. Primary care services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
b. Providers of behavior health care services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
c. Providers of infertility services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
d. Providers of infectious disease services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
e. Providers of prenatal care services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
f. Providers of pregnancy termination services not on-site	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
g. Other medical facilities (including hospitals) when medically indicated	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
h. Infant care, foster care, adoption	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
i. Local health and welfare departments (e.g., Supplemental Nutrition Assistance Program, Special Supplemental Nutrition Program for Women, Infants, and Children)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
j. Voluntary agencies (e.g., domestic violence, crisis intervention, Alcoholics Anonymous)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
k. Ancillary services that may be necessary for participants to go to clinics (e.g., child care, transportation)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
l. Health services projects supported by other federal programs that are in close physical proximity to the Title X site when feasible, to promote access to services and provide a seamless continuum of care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
m. Providers of gender-affirming health care services (e.g., hormonal transition therapy, wellness visits for preventive care, birth control, safer sex supplies, and STI testing and treatment)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>
n. Partnerships with college and university health care systems	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	d <input type="checkbox"/>	n <input type="checkbox"/>

- C2.** On a scale of 1 to 5, where 1 means “never” and 5 means “always,” select the number that best describes your perception of the subrecipient and service sites funded through your Title X grant on each of the following:

	<div> <div>Never</div> <div> <div></div> <div></div> </div> <div>Always</div> </div>				
a. Provides respectful care that meets the needs of diverse client populations	1 m	2 m	3 m	4 m	5 m
b. Provides services equally, without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies, or marital status	1 m	2 m	3 m	4 m	5 m
c. Provides services that are responsive to diverse cultural health beliefs and practices	1 m	2 m	3 m	4 m	5 m
d. Provides services that meet the preferred languages, health literacy, and other communication needs of clients	1 m	2 m	3 m	4 m	5 m
e. Has written policies and procedures to support Culturally and Linguistically Appropriate Services (CLAS) Standards	1 m	2 m	3 m	4 m	5 m
f. Works to recruit, retain, and promote staff that reflect the cultural diversity of the community	1 m	2 m	3 m	4 m	5 m
g. Has staff that are sensitive to, and able to deal effectively with, the cultural and other characteristics of the client population	1 m	2 m	3 m	4 m	5 m
h. Regularly trains staff at all levels in culturally and linguistically appropriate service delivery to meet the needs of key populations	1 m	2 m	3 m	4 m	5 m
i. Is geographically accessible to the population being served	1 m	2 m	3 m	4 m	5 m
j. Considers clients' access to transportation, clinic locations, hours of operation, and other factors that influence their ability to access services	1 m	2 m	3 m	4 m	5 m
k. Ensures facilities are readily accessible to people with disabilities	1 m	2 m	3 m	4 m	5 m
l. Considers the barriers to care for telehealth clients and services, such as access to good quality or any Wi-Fi, and access to a private space to speak with a provider	1 m	2 m	3 m	4 m	5 m

D. Financial practices related to your Title X program and services

The next series of questions are about billing and payment practices.

- D1.** To the best of your knowledge, how often do the subrecipients and service sites funded through your Title X grant use the following practices for **payment for contraceptives**?

	Never	Rarely	Sometimes	Often	Always
a. Clients are provided their contraceptive method of choice, regardless of ability to pay or delay in insurance verification	1 m	2 m	3 m	4 m	5 m
b. Reasonable efforts to collect charges are made (without jeopardizing client confidentiality)	1 m	2 m	3 m	4 m	5 m

- D2.** How often do the subrecipients and service sites funded through your Title X grant use the following practices for **payment for STI testing and treatment**?

	Never	Rarely	Sometimes	Often	Always
a. Clients are provided STI testing and treatment without a delay, regardless of ability to pay or delay in insurance verification	1 m	2 m	3 m	4 m	5 m
b. Reasonable efforts to collect charges are made (without jeopardizing client confidentiality)	1 m	2 m	3 m	4 m	5 m

- D3.** Have the subrecipients and service sites funded through your Title X grant developed or implemented any of the following strategies for billing the correct payer and optimal amount?

MARK ALL THAT APPLY

- ☐ Developing and/or updating billing policies and procedures.....1
- ☐ Conducting cost analysis.....2
- ☐ Using data to inform fee schedule adjustments and make other business decisions.....3
- ☐ Implementing front-end procedures that ensure accurate information gathering on third-party payers, family size, and income.....4
- ☐ Providing training on documentation and coding.....5
- ☐ Other (please describe).....99

D4. Which of the following challenges related to billing the correct payer and optimal amount are faced by subrecipients and service sites funded through your Title X grant?

MARK ALL THAT APPLY

- ☐ Time..... 1
- ☐ Training..... 2
- ☐ Unclear policies and procedures..... 3
- ☐ Data extraction: user knowledge..... 4
- ☐ Data extraction: system limitations..... 5
- ☐ Cost-analysis-related issues..... 6
- ☐ Other (please describe)..... 7

D5. Please indicate whether the subrecipients and service sites funded through your Title X grant have implemented any of the following strategies to collect client fees for services at.

MARK ALL THAT APPLY

- ☐ Establish or update and implement policies on client payment and collection processes..... 1
- ☐ Manage discounted fee collections at time of visit for uninsured/self-pay clients..... 2
- ☐ Accurately discount and bill for third-party payer client fees (co-pays, deductibles, and co-insurances)..... 3
- ☐ Other (please describe)..... 4

E. Describe how Title X grantees reach the diverse communities they serve

The next questions are about the various ways the subrecipients and service sites funded through your Title X grant reach diverse and underserved communities.

- E1.** In your opinion, how easy or difficult is it for the subrecipients and service sites funded through your Title X grant to deliver quality, client-centered services to the following populations?

	Very easy					Very difficult	Do not serve this population
a. Adolescents	1 m	2 m	3 m	4 m	5 m	n m	
b. LGBTQI+	1 m	2 m	3 m	4 m	5 m	n m	
c. Indigenous communities living in Tribal areas	1 m	2 m	3 m	4 m	5 m	n m	
d. Indigenous communities living in non-Tribal areas	1 m	2 m	3 m	4 m	5 m	n m	
e. Persons with limited English proficiency	1 m	2 m	3 m	4 m	5 m	n m	
f. Remote and rural populations	1 m	2 m	3 m	4 m	5 m	n m	
g. Persons with disabilities	1 m	2 m	3 m	4 m	5 m	n m	
h. Persons who are experiencing homelessness	1 m	2 m	3 m	4 m	5 m	n m	
i. Persons without insurance	1 m	2 m	3 m	4 m	5 m	n m	

- E2.** What do you see as the **main challenges** faced by the subrecipients and service sites funded through your Title X grant when it comes to delivering quality, client-centered family planning and STI screening and treatment services to diverse and underserved communities? List up to three challenges.

	Specify
a. Challenge 1	<input type="text"/>
b. Challenge 2	<input type="text"/>
c. Challenge 3	<input type="text"/>

- E3.** What do you see as the **main strategies** used by subrecipients and service sites funded through your Title X grant to overcome these challenges in delivering quality, client-centered services to diverse, underserved communities? List up to three strategies.

	Specify
a. Strategy 1	
b. Strategy 2	
c. Strategy 3	

- E4.** To the best of your knowledge, how do the subrecipients and service sites funded through your Title X grant **inform clients** about the availability of family planning or contraception and STI prevention and treatment services?

MARK ALL THAT APPLY

- ☐ Brochures that provide information on family planning and contraception methods.....1
- ☐ Brochures that provide information on STI and HIV testing and prevention.....2
- ☐ Care coordinators (that is, individuals responsible for managing individual clients' health care)3
- ☐ During visits to clinicians, medical assistants, or health educators.....4
- ☐ Referrals to online resources.....5
- ☐ Notices posted in service sites about available services.....6
- ☐ Online chat from service site website for clients to ask questions.....7
- ☐ Call center staff from service site available to answer questions8
- ☐ Internal network of providers (LCSW, dietitian, etc.).....9
- ☐ Other (please describe):

E5. How do the subrecipients and service sites funded through your Title X grant **inform the community**, including potential clients, served by your program about the availability of family planning and STI prevention and treatment services?

MARK ALL THAT APPLY

- ☐ Health screening events.....1
- ☐ Brochures on that provide information on family planning and contraceptive methods.....2
- ☐ Brochures that provide information on STI and HIV testing and prevention...3
- ☐ Community-based events and meetings.....4
- ☐ Health fairs or workshops.....5
- ☐ Social and professional gatherings.....6
- ☐ Partnerships in schools or universities (such as school-based health centers).....7
- ☐ Partnerships with community-based organizations (churches, state or county organizations, etc.).....8
- ☐ Social media.....9
- ☐ Advertising campaign.....10
- ☐ Other (please describe):.....99

E6. [If E5 = 9] In what ways are social media and social marketing used at the subrecipients and service sites funded through your Title X grant?

E7. What do you see as the **main challenges** faced by subrecipients and service sites funded by your Title X grant that are related to **raising awareness of and delivery of services in accessible ways**? List up to three challenges.

	Specify
a. Challenge 1	<input type="text"/>
b. Challenge 2	<input type="text"/>
c. Challenge 3	<input type="text"/>

- E8.** What do you see as the **main strategies** the subrecipients and service sites funded through your Title X grant **use to overcome these challenges to raising awareness and delivery of services in accessible ways**? List up to three strategies.

	Specify
a. Strategy 1	<input type="text"/>
b. Strategy 2	<input type="text"/>
c. Strategy 3	<input type="text"/>

- E9.** Please list three areas for improvement that you think could help subrecipients and service sites funded through your Title X grant reach diverse and underserved communities—for example, more service locations, extended service hours, etc.

	Specify
a. Area of improvement 1	<input type="text"/>
b. Area of improvement 2	<input type="text"/>
c. Area of improvement 3	<input type="text"/>

F. Pivots and accommodations made by Title X grantees and subrecipients to provide care in recent years, including during the COVID-19 pandemic

The next questions are about changes you, your subrecipients, and service sites funded through your Title X have made in recent years, including in response to the COVID-19 pandemic that began in March 2020.

F1. Were you a Title X grantee at any time in the two-year period between when the COVID-19 pandemic began around March 2020 and two years later in March 2022?

- ☐ Yes..... 1
- ☐ No..... 0

F2. **If F1 = 1:** Thinking specifically about the COVID-19 pandemic, which of the following were challenges faced by subrecipients and service sites funded through your Title X grant because of the pandemic?

MARK ALL THAT APPLY

- ☐ Staff or partner lack of adherence to safety protocols.....1
- ☐ Lost funding.....2
- ☐ Difficulty meeting Title X program requirements.....3
- ☐ Reduced client volume4
- ☐ Needing to prioritize urgent client needs over routine care and preventative screenings.....5
- ☐ Limited community outreach activities.....6
- ☐ Staff shortages.....7
- ☐ Additional staff burden or responsibilities.....8
- ☐ Reduced number of service sites.....9
- ☐ Mode of service changed (telehealth/telephone visits/mobile/other distance care)10
- ☐ Community served by the service site(s) changed11
- ☐ Funds reallocated for COVID-19 related services.....12
- ☐ Limited in-person appointments.....13
- ☐ Other (please describe).....14

F3. If F1 = 1: Before the COVID-19 pandemic began in March 2020, had any of the subrecipients and service sites funded through your Title X grant made any of the following accommodations to delivery of services?

	Yes	No	Not sure/ Don't Know
a. Offered evening or extended hours	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
b. Offered walk-in appointments	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
c. Offered same-day insertion of IUDs and implants	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
d. Offered same-day removal of IUDs and implants	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
e. Offered telehealth services	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
f. Used an online portal and other digital infrastructure	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
g. Provided counseling and obtained consent virtually before a visit for IUD and implant placement	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
h. Virtually discussed the evidence that methods are effective longer than their FDA-approved duration for IUD and implant removal not related to the onset of symptoms such as irregular bleeding	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
i. Explored the client's interest in self-administered Depo (DMPA-SQ) and provided on-site or virtual training; sent prescription to pharmacy if client was interested	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
j. Provided virtual contraceptive counseling	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
k. Discussed proper use of condoms or other barrier methods virtually and offered curbside pickup	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
l. Discussed proper use of condoms or other barrier methods virtually and offered mail delivery	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
m. Virtually screened for contraindications and provided a prescription for birth control pills, the patch, or the ring	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
n. Virtually diagnosed STIs and screen for contraindications and provided a prescription for STI treatment	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
o. Provided curbside pickup or prescribing to a pharmacy for same-day pickup for emergency contraceptive	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
p. Provided options to mail to the client when refilling birth control pills, ring, patch, self-administered Depo Provera	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
q. Provided options to arrange for curbside pickup when refilling birth control pills, ring, patch, self-administered Depo Provera	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
r. Allowed clients to drop off urine samples at the clinic for pregnancy tests	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
s. Mail at home pregnancy testing that allowed clients to collect sample for pregnancy test at home and mail to lab.	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
t. Allowed clients to drop off urine samples at the clinic for STI testing for chlamydia or gonorrhea	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
u. Mail at home testing that allowed clients to collect urine samples at home and mail to lab for STI testing for chlamydia or gonorrhea	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m
v. Collected medical history before the appointment	<input type="checkbox"/> m	<input type="checkbox"/> m	<input type="checkbox"/> m

Yes	No	Not sure/ Don't Know
-----	----	-------------------------

w. Other (please describe)

1 m

0 m

0 m

F4. If F1 = 1 and F3 = 0: **After** the COVID-19 pandemic began around March 2020, did any of the subrecipients and service sites funded through your Title X grant make any of the following accommodations to delivery of services?

Yes	No	Not sure/ Don't Know
-----	----	-------------------------

a. Offered evening or extended hours

1 m

0 m

0 m

b. Offered walk-in appointments

1 m

0 m

0 m

c. Offered same-day **insertion** of IUDs and implants

1 m

0 m

0 m

d. Offered same-day **removal** of IUDs and implants

1 m

0 m

0 m

e. Offered telehealth services

1 m

0 m

0 m

f. Used an online portal and other digital infrastructure

1 m

0 m

0 m

g. Provided counseling and obtained consent virtually before a visit for IUD and implant placement

1 m

0 m

0 m

h. Virtually discussed the evidence that methods are effective longer than their FDA-approved duration for IUD and implant removal not related to the onset of symptoms such as irregular bleeding

1 m

0 m

0 m

i. Explored the client's interest in self-administered Depo (DMPA-SQ) and provided on-site or virtual training; sent prescription to pharmacy if client was interested

1 m

0 m

0 m

j. Provided virtual contraceptive counseling

1 m

0 m

0 m

k. Discussed proper use of condoms or other barrier methods virtually and offered curbside pickup

1 m

0 m

0 m

l. Discussed proper use of condoms or other barrier methods virtually and offered mail delivery

1 m

0 m

0 m

m. Virtually screened for contraindications and provided a prescription for birth control pills, the patch, or the ring

1 m

0 m

0 m

n. Virtually diagnosed STIs and screen for contraindications and provided a prescription for STI treatment

1 m

0 m

0 m

o. Provided curbside pickup or prescribing to a pharmacy for same-day pickup for emergency contraceptive

1 m

0 m

0 m

p. Provided options to mail to the client when refilling birth control pills, ring, patch, self-administered Depo Provera

1 m

0 m

0 m

q. Provided options to arrange for curbside pickup when refilling birth control pills, ring, patch, self-administered Depo Provera

1 m

0 m

0 m

r. Allowed clients to drop off urine samples at the clinic for pregnancy tests

1 m

0 m

0 m

	Yes	No	Not sure/ Don't Know
s. Mail at home pregnancy testing that allowed clients to collect sample for pregnancy test at home and mail to lab.	1 m	0 m	0 m
t. Allowed clients to drop off urine samples at the clinic for STI testing for chlamydia or gonorrhea	1 m	0 m	0 m
u. Mail at home testing that allowed clients to collect urine samples at home and mail to lab for STI testing for chlamydia or gonorrhea	1 m	0 m	0 m
v. Collected medical history before the appointment	1 m	0 m	0 m
w. Other (please describe) <div></div>	1 m	0 m	0 m

F5. Thinking about today: To the best of your knowledge, how many of the subrecipients and service sites funded through your Title X grant currently integrate each of the following accommodations into standard practices?

	All service sites	Most service sites	Some service sites	No service sites	Not sure/Don't know
a. Offered evening or extended hours	1 m	2 m	3 m	4 m	0 m
b. Offered walk-in appointments	1 m	2 m	3 m	4 m	0 m
c. Offered same-day insertion of IUDs and implants	1 m	2 m	3 m	4 m	0 m
d. Offered same-day removal of IUDs and implants	1 m	2 m	3 m	4 m	0 m
e. Offered telehealth services	1 m	2 m	3 m	4 m	0 m
f. Used an online portal and other digital infrastructure	1 m	2 m	3 m	4 m	0 m
g. Provided counseling and obtained consent virtually before a visit for IUD and implant placement	1 m	2 m	3 m	4 m	0 m
h. Virtually discussed the evidence that methods are effective longer than their FDA-approved duration for IUD and implant removal not related to the onset of symptoms such as irregular bleeding	1 m	2 m	3 m	4 m	0 m
i. Explored the client's interest in self-administered Depo (DMPA-SQ) and provided on-site or virtual training; sent prescription to pharmacy if client was interested	1 m	2 m	3 m	4 m	0 m
j. Provided virtual contraceptive counseling	1 m	2 m	3 m	4 m	0 m
k. Discussed proper use of condoms or other barrier methods virtually and offered curbside pickup	1 m	2 m	3 m	4 m	0 m
l. Discussed proper use of condoms or other barrier methods virtually and offered mail delivery	1 m	2 m	3 m	4 m	0 m
m. Virtually screened for contraindications and provided a prescription for birth control pills, the patch, or the ring	1 m	2 m	3 m	4 m	0 m
n. Virtually diagnosed STIs and screen for contraindications and provided a prescription for STI treatment	1 m	2 m	3 m	4 m	0 m

	All service sites	Most service sites	Some service sites	No service sites	Not sure/Don't know
o. Provided curbside pickup or prescribing to a pharmacy for same-day pickup for emergency contraceptive	1 m	2 m	3 m	4 m	d m
p. Provided options to mail to the client when refilling birth control pills, ring, patch, self-administered Depo Provera	1 m	2 m	3 m	4 m	d m
q. Provided options to arrange for curbside pickup when refilling birth control pills, ring, patch, self-administered Depo Provera	1 m	2 m	3 m	4 m	d m
r. Allowed clients to drop off urine samples at the clinic for pregnancy tests	1 m	2 m	3 m	4 m	d m
s. Mail at home pregnancy testing that allowed clients to collect sample for pregnancy test at home and mail to lab.	1 m	2 m	3 m	4 m	d m
t. Allowed clients to drop off urine samples at the clinic for STI testing for chlamydia or gonorrhea	1 m	2 m	3 m	4 m	d m
u. Mail at home testing that allowed clients to collect urine samples at home and mail to lab for STI testing for chlamydia or gonorrhea	1 m	2 m	3 m	4 m	d m
v. Collected medical history before the appointment	1 m	2 m	3 m	4 m	d m
w. Other (please describe) <div></div>	1 m	2 m	3 m	4 m	d m

The next few questions are about telehealth.

F6. To the best of your knowledge, how many of the subrecipients and service sites funded through your Title X grant currently provide telehealth services?

- m All service sites.....1
- m Most service sites.....2
- m Some service sites.....3
- m No service sites.....4

F7. In your opinion, which of the following are ways telehealth **improves the client experience** at the subrecipient and service sites funded through your Title X grant?

MARK ALL THAT APPLY

- ☐ User-friendly digital infrastructure (such as to set up appointments, view medical records, or fill out intake forms).....1
- ☐ New or creative approaches to distributing prescriptions (such as virtual consultations).....2
- ☐ Transportation barriers decreased.....3
- ☐ Scheduling challenges decreased.....4
- ☐ Increased flexibility in scheduling.....5

- o Service delivery costs decreased.....6
- o Time barriers decreased.....7
- o Financial challenges decreased.....8
- o Client comfort increased.....9
- o Client autonomy increased (over choosing type of visit).....10
- o Texting and messaging app access to communicate with clinic.....11
- o Other (please describe).....99

F8. Which of the following do you perceive as **barriers or challenges to accessing telehealth for clients** served through your Title X grant?

MARK ALL THAT APPLY

- o Lack of access to technology (such as limited or no access to a computer or smartphone).....1
- o Lack of private space for telehealth visit.....2
- o Client's comfort level on receiving care through telehealth.....3
- o Lack of digital literacy.....4
- o Lack of access to internet.....5
- o Lack of access to high quality broadband or internet.....6
- o Preference for in-person visits.....7
- o Lack of awareness or understanding of telehealth offerings.....8
- o Lack of health insurance that covers telehealth services.....9
- o Other (please describe).....99

F9. Which of the following do you perceive as **barriers and challenges to providing telehealth services** through your Title X grant?

MARK ALL THAT APPLY

- o Low or no reimbursement.....1
- o Medical liability.....2
- o Integration with the electronic health record (EHR).....3
- o Lack of technical support.....4
- o Clinician dissatisfaction with telehealth.....5
- o Cost of implementation/maintenance of telehealth platforms.....6
- o Low client engagement.....7
- o Insurance company policies covering telehealth services.....8
- o Government rules and regulations.....9

- o Inability to perform some services (such as contraceptive placement and removal/administration and STI testing that requires a visual exam and swabbing)..... 10
- o Difficulty with navigation of non-HIPAA compliant platform (passwords, 2 factor authentication)..... 11
- o Other (please describe)..... 99

F10. To the best of your knowledge, how many subrecipients and service sites funded through your Title X grant received telehealth-specific training in the last year, either through your organization or an outside organization?

- m All service sites..... 1
- m Most service sites..... 2
- m Some service sites..... 3
- m No service sites..... 4

F11. In general, do you think staff at the subrecipients and service sites funded through your Title X grant would benefit from additional training and/or technical assistance on any of the following areas related to providing contraceptive services via telehealth?

MARK ALL THAT APPLY

- o Coding for telehealth..... 1
- o Billing for telehealth..... 2
- o Informed consent..... 3
- o Practicing cultural humility in telehealth delivery (defined as expressing humble curiosity and empathy, asking questions, being open to different perspectives, listening actively, being patient, and taking your time)..... 4
- o Telehealth chart audits..... 5
- o Telehealth services for adolescents..... 6
- o Other (please describe)..... 7

- m No training/technical assistance needs related to using telehealth for providing contraceptive services..... 8

G. Document grantees' self-assessments of impact and highlight best practices

The final questions in the survey are about how you assess impact and document best practices.

- G1.** In addition to the Family Planning Annual report (FPAR), what types of data do you ask the subrecipients and service sites funded through your Title X grant to collect?

- G2.** How useful do you find the following activities for monitoring the progress of subrecipients and service sites funded through your Title X grant?

	Not at all useful	A little useful	Somewhat useful	Very useful	Not applicable
a. Formal site visits	1 m	2 m	3 m	4 m	n m
b. Informal/interim site visits	1 m	2 m	3 m	4 m	n m
c. Chart reviews	1 m	2 m	3 m	4 m	n m
d. Check in or monitoring telephone calls	1 m	2 m	3 m	4 m	n m
e. Budget monitoring	1 m	2 m	3 m	4 m	n m
f. Other (please describe)	1 m	2 m	3 m	4 m	n m

- G3.** Which of the following actions have you taken to replicate best practices to ensure federal quality standards are being met?

MARK ALL THAT APPLY

- ☐ Identifying service sites in the network that are performing well by reviewing FPAR or other financial reports.....1
- ☐ Examining processes, policies, and procedures to identify practices that led to high performance on indicators.....2
- ☐ Providing training across service sites on identified policies, practices, and procedures to build capacity.....3
- ☐ Other: Please describe.....4

H. Closing

- H1.** One of the project's goals is to understand the challenges and success stories grantees have had and to compose grantee profiles that will allow us to share those lessons across the network of grantees. We have heard that many grantees face similar challenges, and they have come up with creative ways of overcoming these challenges.

What are three topic area that you would like to learn more about approaches and lessons learned from other Title X grantees?

	Describe
a. Topic 1	
b. Topic 2	
c. Topic 3	

- H2.** We will be conducting listening visits in early 2023 as part of this study. These will be either in person or virtual based on the site's preference. We will purposively select sites for the listening visits to obtain a good representation of the range of Title X grantees, geographical areas, and populations served. If your site is selected for a listening visit, you will have the option to decline or to nominate locations and persons our research team could speak to directly about the services offered at the site.

Would you be interested in having subrecipients or service sites funded through your Title X grant participate in one of these visits?

m Yes..... 1 GO TO H3

m No..... 0 GO TO H4

- H3.** To help us prepare, please list the names and locations of up to five service sites, and give the name of a contact we could talk to as part of the listening visits. We will follow up with you by telephone after this survey for more information. During this call, we will ask for more input about possible listening visits to subrecipients and service sites funded through your Title X grant.

Name of contact	Location	Email	Phone number
1.			
2.			
3.			
4.			
5.			

H4. Please give your title at the grantee organization.

MARK ALL THAT APPLY

- ☐ Project director.....1
- ☐ Clinical director.....2
- ☐ Lead nurse.....3
- ☐ Other (please describe)99

H5. Please give the name of the person who completed this survey. If more than one person worked on it, give the name of the person who completed most of it.

End: Thank you for participating in this survey!