**Title X Subrecipient Administrative Assessment and Onboarding Checklist**

**Purpose:** This checklist is designed to help grantees assess whether a subrecipient meets administrative requirements specified in the [Title X Statutes, Regulations, and Legislative Mandates](https://opa.hhs.gov/grant-programs/title-x-service-grants/title-x-statutes-regulations-and-legislative-mandates), [Quality Family Planning Recommendations (QFP)](https://www.cdc.gov/reproductivehealth/contraception/qfp.htm), and other guidance. Grantees can use this checklist in conjunction with the other checklists in the Onboarding Toolkit to identify which requirements a subrecipient has in place and which they still need to implement and to record their approval of required protocols and procedures.

**How to use:** Gather information to complete this assessment by conducting document reviews, interviewing subrecipient or clinical site staff, conducting site visits, and electronic health record (EHR) reviews.

**Step 1:** Insert the grantee’s name and logo, subrecipient information, and other details where indicated. This checklist outlines key administrative documents, processes, procedures, and training necessary for Title X compliance, but it is not an exhaustive list of all items that a grantee may require. The grantee can add other items to this checklist or delete items as necessary.

 **Step 2:** Save the modified checklist and use it throughout the onboarding process to document approval of requirements. Grantees may find it beneficial to review the checklist with the subrecipient periodically or enable the subrecipient to use the checklist for their own tracking purposes. If so, grantees may consider saving the checklist in a format that is easily shareable, such as Google Docs.

**Step 3:** At the onset of the onboarding process, the grantee should review the subrecipient’s existing administrative requirements and note any that meet Title X requirements as approved.

**Step 4:** Assign due dates for any administrative requirements that the subrecipient will need to complete. Grantees may want to assign a certain number of tasks to be reviewed in monthly or quarterly batches to provide manageable goals. Incorporate outstanding activities into the Title X Subrecipient Onboarding Work Plans.

**Step 5:** Once all administrative requirements have been approved, notify the subrecipient and grantee staff that participated in this task. Acknowledging this effort, recognize the team work involved, and celebrate the success!

**Title X Subrecipient Administrative Assessment and Onboarding Checklist**

 *[Insert* ***Grantee Name/Logo***]

*[Insert* ***Subrecipient or Clinical Site Name***]

*[Insert* ***Date of Assessment***]

*[Insert* ***Grantee Contact Information and Assessment Participants***]

*[Insert* ***Subrecipient Contact Information and Assessment Participants***]

The numbers listed in the first column of the table below correspond to the numbering system used in the federal [Title X Program Review Tool](https://www.fpntc.org/resources/title-x-program-review-tool) (PRT). The assessment components relate to the subrecipient’s or clinical site’s compliance with the applicable statutes, regulations, and policy. Evidence of adherence may include but is not limited to: review of documents, policies, procedures, protocols, documentation of training, review of medical records, direct visual confirmation to ensure that what is contained in written policy or instructions is actually being carried out, or any other form of documentation that substantiates operation in accordance with the applicable Title X program requirement and/or policy.

| **REQUIRED DOCUMENTS**Subrecipients must have documentation and evidence, such as the items listed below, that supports and demonstrates compliance with Title X program requirements. These documents ensure that what is contained in written policy or instructions is actually being carried out and substantiate that the project is operating in accordance with Title X program requirements. The [Title X Program Review Tool](https://www.fpntc.org/resources/title-x-program-review-tool) contains additional information. | **DUE DATE** | **DATE APPROVED** | **REVIEWER INITIALS** | **COMMENTS** |
| --- | --- | --- | --- | --- |
| 1.1.1 Consent form informs clients that services are offered on voluntary basis |  |  |  |  |
| 1.6.3 Resume of Project Director demonstrates that they are qualified for the position |  |  |  |  |
| 1.7.1 Staff training plan includes Title X orientation and other required trainings |  |  |  |  |
| 2.2 Client bill of rights outlines clients’ rights and responsibilities |  |  |  |  |
| 2.5, 2.7 Has referral agreements with: |  |  |  |  |
| * Emergency care agencies
 |  |  |  |  |
| * HIV/AIDS care and treatment providers
 |  |  |  |  |
| * Infertility specialists
 |  |  |  |  |
| * Primary and chronic care management providers
 |  |  |  |  |
| 2.10 Health care provider list for pregnant clients is in compliance with Title X requirements |  |  |  |  |
| 5.1, 5.2, 5.3, 5.6 Information & Education (I&E) Committee meeting minutes demonstrate compliance with Title X requirements |  |  |  |  |
| 5.1 Educational materials at service sites have been approved by the I&E Committee |  |  |  |  |
| 5.2, 5.3 I&E Advisory Committee roster demonstrates that the committee broadly represents the population or community for which the materials are intended |  |  |  |  |
| 6.1 Subrecipient maintains documentation of accommodations made for disabled individuals  |  |  |  |  |

| **STAFF TRAININGS**Title X staff must receive appropriate and adequate training. These [required trainings](https://www.fpntc.org/sites/default/files/resources/fpntc_fed_training_reqs_2019-07-11.pdf) support staff in operating in accordance with Title X requirements and the QFP. The [Training Essentials for Title X Grantees Toolkit](https://www.fpntc.org/resources/grantee-training-essentials) provides a summary of training resources.  | **DUE DATE** | **DATE APPROVED** | **REVIEWER INITIALS** | **COMMENTS** |
| --- | --- | --- | --- | --- |
| 1.1 Voluntary and non-coercive services |  |  |  |  |
| 1.1 Services not a prerequisite for eligibility or services |  |  |  |  |
| 1.1 Personnel awareness |  |  |  |  |
| 1.3 Physical separation of Title X and non-Title X activities |  |  |  |  |
| 1.7.1 Personnel awareness |  |  |  |  |
| 1.7.2 Federal/state reporting requirements: Mandatory reporting for abuse, rape, incest, and human trafficking |  |  |  |  |
| 1.7.3 Family involvement and coercion |  |  |  |  |
| 2.2 Cultural competency |  |  |  |  |
| 2.3 Non-discriminatory services |  |  |  |  |
| 2.6 Training to support implementation of QFP |  |  |  |  |
| 3 Confidentiality |  |  |  |  |

| **AGENCY PROCESSES**Subrecipients must implement processes, such as those listed below, to operationalize Title X requirements. | **DUE DATE** | **DATE APPROVED** | **REVIEWER INITIALS** | **COMMENTS** |
| --- | --- | --- | --- | --- |
| Ensure that data collection allows for: |  |  |  |  |
| Tracking of each notification or report made pursuant to State mandatory reporting notification laws |  |  |  |  |
| Timely and accurate FPAR data |  |  |  |  |
| Grantee-specific community participation, education, and project promotion reports, if applicable |  |  |  |  |
| Grantee-specific enrollment assistance reports, if applicable |  |  |  |  |
| Other grantee-specific reports |  |  |  |  |
| Ensure that EHR allows for documentation:  |  |  |  |  |
| That family participation was encouraged in the decision of minors to seek family planning services *or* the specific reason why such family participation was not encouraged |  |  |  |  |
| That (i) the minor is suspected to be the victim of child abuse or incest and (ii) the situation has been reported to the relevant authorities as required by law, if family participation was not encouraged (if applicable) |  |  |  |  |
| That minors were counseled on how to resist attempts to being coerced into engaging in sexual activities |  |  |  |  |
| (i) Of the age of minor clients(ii) Of the age of the minor client’s sexual partners if such age is an element of a State notification law under which a report is required |  |  |  |  |
| That pregnancy information and counseling was nondirective |  |  |  |  |
| That pregnancy counseling, if offered, was provided by a physician or advanced practice provider |  |  |  |  |
| For pregnant clients, of referral for medically necessary prenatal care was made |  |  |  |  |
| That referrals were provided when medically indicated |  |  |  |  |

| **SITE EVALUATION**Subrecipients must ensure that site facilities comply with the Title X Guidelines below. | **DUE DATE** | **DATE APPROVED** | **REVIEWER INITIALS** | **COMMENTS** |
| --- | --- | --- | --- | --- |
| 2.1 Clinic location(s) are accessible |  |  |  |  |
| 2.2 Clinic environment(s) are welcoming |  |  |  |  |
| 3 Physical layout(s) allows for confidentiality |  |  |  |  |
| 6.1 Facility/facilities are accessible |  |  |  |  |

| **SUB-CONTRACTS**Subrecipients wishing to subcontract any responsibilities or services must maintain a written agreement consistent with Title X program requirements and approved by the grantee. The [Title X Program Review Tool](https://www.fpntc.org/resources/title-x-program-review-tool) contains additional information. | **DUE DATE** | **DATE APPROVED** | **REVIEWER INITIALS** | **COMMENTS** |
| --- | --- | --- | --- | --- |
| 1.4.2 Subcontract agreements are compliant with Title X program requirements |  |  |  |  |
| 1.4.2 Subcontract agreement are approved by grantee |  |  |  |  |