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	Local Agency Policy Required
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1.1 Non-Coercive Services	
1.2 Prohibition of Abortion	
<b>1.4 Structure and Management</b>	<b>X</b>
1.4.7 Grant Application (Competitive and Continuation)	
1.4.8 Funding Formula	
1.4.9 Changes in Service Site Information or Services Provided	
1.4.10 Contract Termination	
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1.5.10 Expenditure Report	
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<b>1.9 340B Program</b>	<b>X</b>



**Local Agency Policy Required**

**PROJECT SERVICES AND CLIENTS**

2 Project Services and Clients

2.2.1 Adolescent Services

**2.3 Non-Discriminatory Services** X

**2.4 Availability of Social Services** X

**2.5 Availability and Use of Referrals** X

**2.6 Clinical Protocols and Standards of Care** X

2.7 Provision of Family Planning and Related Health Services

2.7.1 Comprehensive Health History

2.7.2 STI Testing and Treatment

2.7.3 Preconception Counseling

2.7.4 Basic Infertility Services

2.7.7 Recommended Screenings for Title X

2.7.8 Substance Use Screenings

**2.7.9 Depression Screening** X

**2.7.10 Medical Records** X

**2.7.11 Laboratory Services** X

**2.7.12 Dispensing of Pharmaceuticals** X

**2.7.13 Telehealth Services** X

**2.7.14 Texting** X

2.8 Range of Family Planning Methods



**Local Agency Policy Required**

**2.9 Durational Residency Requirements** X

2.10 Pregnancy Testing and Counseling

**2.11 Compliance with Legislative Mandates** X

**CONFIDENTIALITY**

3 Confidentiality

**COMMUNITY PARTICIPATION, EDUCATION, AND PROJECT PROMOTION**

**4 Community Participation, Education and Project Promotion** X

**INFORMATION AND EDUCATION MATERIALS APPROVAL**

5 Information and Education Materials Approval

**ADDITIONAL ADMINISTRATIVE REQUIREMENTS**

**6.1 Facilities and Accessibility of Services** X

6.2 Human Subjects Clearance (Research)

**6.3 Acknowledgement of Federal Grant Support** X