

New York State Department of Health

Community Participation, Community Education, and Program Promotion Guidance for the Family Planning Program

This document describes the New York State Family Planning Program (NYS FPP) requirements for **community participation, community education, and program promotion (CPEP)** and corresponding expectations for NYS FPP to comply with these requirements. Questions about allowable or unallowable activities or staffing should be directed to FPP Program Managers.

1. All NYS FPP Providers Should:

- Have *at least one Health Educator* who:
 - Is trained as a health educator; and
 - Has dedicated time to Family Planning Outreach and Education.
- Have a process for ensuring competency of health education staff to deliver client-centered family planning counseling and education including information on training/onboarding and evaluation of existing health education/outreach staff.
- Have a *written CPEP Plan* that includes community participation and community education/program promotion activities (*see below*).
- Describe their *process for creating the CPEP Plan* including:
 - How community needs for and access to family planning services are assessed;
 - How plans are monitored and evaluated, including who is responsible and how often the plan is reviewed; and
 - How input from members of priority populations is solicited and incorporated into program planning.

2. The CPEP Plan should:

- Establish measurable goals using a SMART (Specific, Measurable, Achievable, Realistic, and Time-Oriented) framework.
- Clearly address plans for both **Community Participation** and **Community Education/Program Promotion**:
 - **Community Participation**--Community partners who are broadly representative of the population served should inform the development, implementation, and evaluation of a FPP agency's project plan.

- **Community Education/Program Promotion** should be based on a needs assessment and should ensure that the community is aware of and encouraged to access family planning services at the FPP agency.
- Include outreach and education activities and/or efforts to increase community awareness of and ability to access FP services. A specific emphasis should be placed on addressing the unique needs of key priority populations including:
 - Racial/ethnic minorities
 - Adolescents
 - Individuals at or below 100% of the Federal Poverty Level
 - Males
 - Other populations not included above but identified through the community needs assessment
- Describe how community partnerships are identified and evaluated.
- Describe marketing and communication plan/activities that include using social media as one method to support community outreach and engagement.
- Have ***evaluation components*** that address SMART objectives and focus on ensuring that FPPs are achieving their stated CPEP goals. The plan might include:
 - Measures of successful **community participation** such as:
 - Number of partners providing input on project plan
 - Increased input from community into FP program
 - Increase staff understanding of community
 - Number of program/policy changes implemented based on participant input
 - Demographic or volume changes in patient numbers
 - Increased patient satisfaction
 - Measures of successful **community education/program promotion** such as:
 - New referral partnerships developed
 - Number of referrals made (by referral partner, by patient demographic)
 - Demographic or volume changes in patient numbers
 - Increased community understanding of program
 - Increased support for FP program in the community
 - Increased access to previously hard to reach populations (presence with faith based organizations, schools, etc.)
 - Measures of the effectiveness of social media efforts (such as impressions, clicks).
 - Descriptive challenges and insights.