



**Elizabeth Glaser
Pediatric AIDS Foundation**
Fighting for an AIDS-free generation

Implementing the Red Carpet Program Tools for the Linkage to and Retention in Care of Adolescents and Youth Living with HIV

RCP Health Facilities Module



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Welcome!

- Introductions
- Official welcome
- Icebreaker
- Expectations



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Session Objectives

- ✓ Become familiar with the Red Carpet Program (RCP) model at facility level
- ✓ Understand the VIP package of interventions
- ✓ Understand how RCP health facilities fit into the broader RCP
- ✓ Become familiar with RCP tools
- ✓ Identify site-specific areas of focus for RCP implementation
- ✓ Develop action plans for RCP implementation



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Session Agenda

- Goals and Objectives of an RCP health care facility (HCF)
- Setting up an RCP facility
- Adapting the model to local context
- Case studies

Goals and Objectives of a RCP Facility



Goals of a RCP Facility

- Improve access to **fast-tracked HIV linkages to care, initiation of antiretroviral therapy (ART), retention in care, and treatment services** at HCFs and within the community, including schools.
- Increase the proportion of AYLHIV who have been **linked to HIV care after testing positive**
- Increase the proportion of newly-identified AYLHIV who **engage in care**
- Increase the number of AYLHIV who **are retained in treatment** (e.g., seen every six months or more frequently as needed) for viral load testing

RED CARPET

The logo for 'Red Carpet' features the text 'RED CARPET' in white, bold, uppercase letters on a red background. To the right of the text is a red graphic element consisting of a vertical bar with rounded ends and a circular target-like symbol at the bottom.

Objectives of a RCP Facility

1. Well trained health care workers (HCWs) implement the RCP model of care, including the provision of AYLHIV-friendly services, optimal linkages to care and retention, and psychosocial support (PSS) for newly-identified AYLHIV, while providing responsive ongoing care to those already enrolled.
2. Meaningfully engage AYLHIV in the design, implementation, and quality improvement of HIV prevention, care, and treatment interventions.
 - Engage adolescent and youth peer navigators in supporting AYLHIV at facilities and within schools and other community settings.
3. Connect surrounding communities to health services for adherence and care support, especially local schools.

What is a RCP Health Facility?

A RCP health facility is a facility that provides adolescent friendly and responsive services through fast track plus very important person (VIP) interventions by trained and sensitized staff

- At health facilities, the RCP package is anchored on fast-tracking access to services through the VIP express card
- The VIP experience ensures that the AYLHIV can seek and receive quality services in an environment that is valued, dignified, respected, and non-judgmental, providing client-centered and responsive services promptly

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HCF RCP Package of Interventions



RCP VIP Express Desk

RCP VIP express health
room

RCP VIP Express card

RCP Client Feedback Forms

Fast track essential services

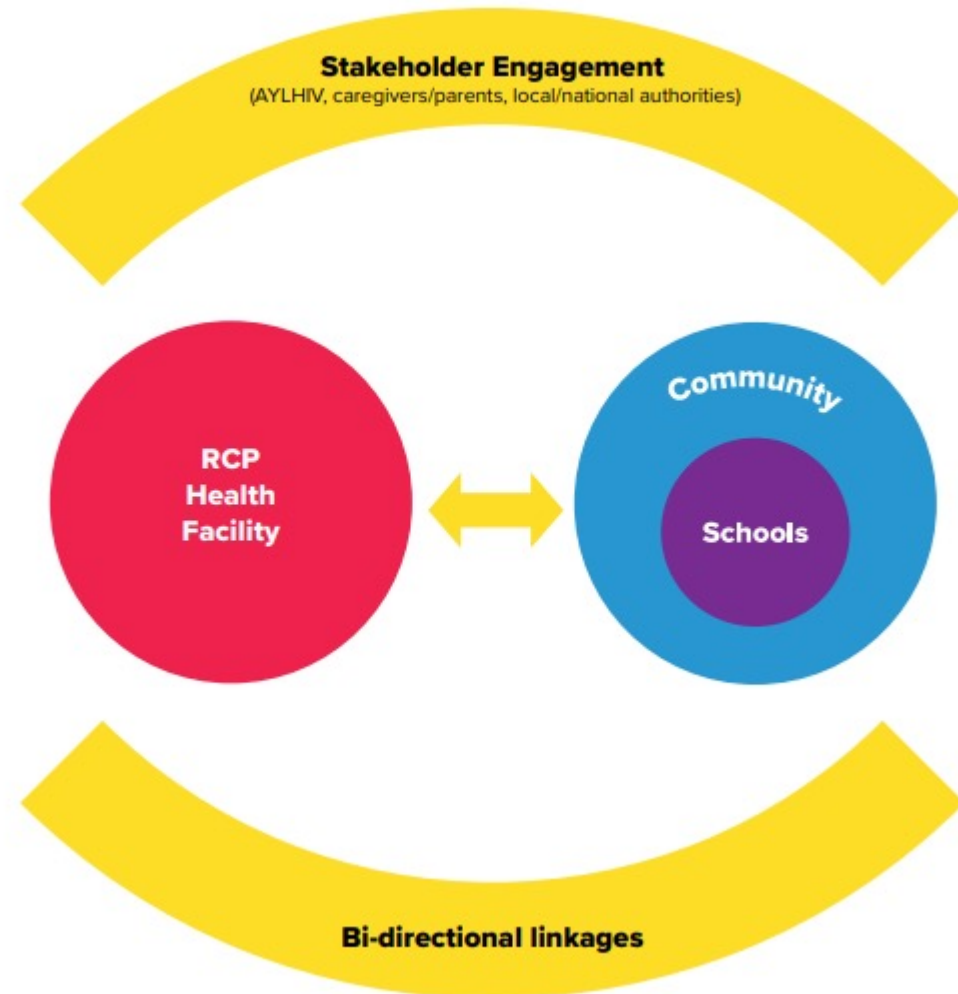
Adherence support tools

Communication

Home and school visits

How RCP Facilities Fit into the Larger RCP Model

RCP facilities are a crucial place to provide care and treatment services but also service as an essential linkage to the community



Setting up a RCP HCF



Setting up a RCP HCF



1. Engage relevant stakeholders
2. Identify the RCP team
3. Train/sensitize RCP team
4. Assess the friendliness of the facility for adolescent and youth clients
5. Implement VIP/fast-track services
6. Recognize HCF as an RCP facility

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Step 1. Engaging Relevant Stakeholders

In small groups, fill out the table thinking about the relevant stakeholders to engage

Various kinds of stakeholders exist

- Local and national authorities (ministries of health and education)
- Staff and providers at the selected facility (clinicians, peer cadres)
- AYLHIV (clients and existing peer cadres)
- Support persons from local schools (parents, teachers, matrons)

Stakeholder	Type of Stakeholder	Background information on Stakeholder	Stakeholder interest in RCP	Stakeholder capacity or level of influence in RCP	Engagement actions with stakeholder around RCP

Step 1. Engaging Relevant Stakeholders

Discuss as a larger group:

- Similarities/differences in the type of stakeholders identified to engage
- Confirm action items for engagement with stakeholders and ensuring buy-in
- Any perceived challenges with the action plan?

Initial sensitization meetings with identified stakeholder for awareness building on the aims of RCP are recommended, as well as engaging them throughout activity planning, implementation and evaluation

Step 2. Identify the RCP Team

RCP team roles include:

- RCP focal point (one or more depending on the volume of clients and schedule of the identified person(s))
- Adolescent and youth peer navigators (number depending on the size of facility and number of AYLHIV clients)
- RCP health providers/clinician, nurse
- RCP response team--multi-disciplinary facility-based team including:
 - Clinician
 - Nurse
 - Peer navigator (adolescent and youth age)
 - Other staff as available – social worker, psychologist, counselor
- Health records officer
- Data clerk

RCP Focal Point Responsibilities

ROLES	RESPONSIBILITIES
RCP FOCAL POINT(S)	<ul style="list-style-type: none">• Support and coordinate RCP services• Coordinate with the AYLHIV and RCP HCF staff to ensure optimal implementation of the program• Ensure all RCP clients receive adherence and ART counseling• Facilitate counseling sessions, as per individual client care plans, as needed• Act as an advocate for AYLHIV within the HCF• Serve as a facilitator of the linkage between the AYLHIV and health providers at HCF• Support providers and peer navigators to ensure quality service delivery to clients• Work with the peer navigators and the clinician/nurse to ensure that linkage with schools is maintained• Organize bi-directional meetings between the RCP HCFs and schools• Act as a liaison for school-based staff to access and link AYLHIV to care

Adolescent & Youth (AY) Peer Navigators Responsibilities

AY PEER NAVIGATOR(S)

- Spearhead RCP activities at the health facility and community levels
- Connects with newly diagnosed AYLHIV within testing and counseling entry points and escort them to the HCF
- Ensure AYLHIV are registered in the Pre-ART register and receive a Pre-ART number
- Register AYLHIV within the RCP program and issue them an individual VIP express card
- Set up appointments for AYLHIV for the first clinical visit (if conducted on a different day) and include them in the appointment register
- Make telephone calls/send text messages to registered AYLHIV to confirm attendance at the first clinical visit and follow up if they did not show up
- Conduct home visits to AYLHIV newly enrolled in care and as needed
- Invite and enroll AYLHIV in PSS after the first clinical visit and follow up to ensure they attend
- Welcome AYLHIV in the Red Carpet program when they attend the HCF and facilitate the fast-tracking of service delivery
- Support counseling on disclosure, adherence, school, family planning, hygiene, nutrition, etc
- Refer AYLHIV for any subsidiary services as required (e.g. nutrition, legal support, education support, family planning, etc.)
- Manage the VIP express room and the VIP express desk in collaboration with the facility staff in charge

RCP Health Provider Responsibilities

RCP HEALTH PROVIDERS

- Provide HIV care including clinical examinations, TB and malnutrition screening, and clinical staging
- Ensure laboratory sampling for baseline and follow up test, as per the guidelines, including viral load and CD4 count, where applicable
- Initiate and support prophylaxis for opportunistic infections, as indicated
- Initiate AYLHIV on ART regimens as per guidelines
- Support disclosure of HIV status and advance treatment literacy for client and treatment supporter(s)
- Make necessary referrals and ensure linkage to other services within and outside of the HCF
- Provide support to AY peer navigators in the formation and activities of PSS groups
- Supervise AY peer navigators and other staff involved in the care of the AYLHIV
- Ensure/support the implementation of the RCP in the facility
- Coordinate the formation and facilitation of multi-disciplinary teams to ensure adolescent health issues are addressed in an integrative comprehensive way

RCP Response Team

RCP RESPONSE TEAM (MDT)

- Clinician
- Nurse
- AY Peer navigator
- Other staff as available (social worker, psychologist, counselor)

- Meet regularly to review the progress of AYLHIV
- Discuss any issues/challenges among AYLHIV clients and proposed the next steps
- Ensure appropriate referrals are made
- Support/coordinate successful AYLHIV transitions: to adult/general care, to another HCF, school/home setting, and to and from PMTCT services.

This is meant to be a multidisciplinary team (MDT)

Health records/data clerk responsibilities

HEALTH RECORDS OFFICER/ DATA CLERK

- Sort and organize RCP AYLHIV files
- Work with the clinician and RCP coordinators to ensure completeness and data quality in client files and RCP registers
- Participate and support MDT review of AYLHIV files by conducting quality checks, ensuring complete documentation in files
- Follow-up on action points for AYLHIV and ensure their documentation
- Participate in facility data review meetings

These are roles that can be filled by existing staff, but depending on capacity and site need, new staff can also be identified

Step 3. Train and Sensitize the Team

Once identified, training and sensitization on RCP responsibilities and expectations need to be conducted and cover:

- ✓ An overview of the RCP and its goals
- ✓ RCP activities and the package of interventions to be implemented at the facility
- ✓ Roles and responsibilities of each cadre in the implementation of the program and quality monitoring

Step 4. Assessment of Friendliness and Responsiveness of the Facility for AY Clients

- Adolescent and youth-friendly services (AYFS) and spaces are a cornerstone of the provisions of RCP at HCFs
- To ensure all components of AYFS are met, an initial assessment needs to be conducted to evaluate existing strengths and gaps
 - Build off assessment when planning to implement the RCP model

Some resources on AYFHS –

- [WHO, UNAIDS: Global standards for quality healthcare services for adolescents](#): a guide to implement a standards-driven approach to improve the quality of health care services for adolescents
- [Global Health Network of Youth People Living with HIV: Ready to Care](#) (health-friendly self-assessment score care)

Reflecting on AY Friendly Health Services

In small groups:
review the score
card and reflect
on its contents

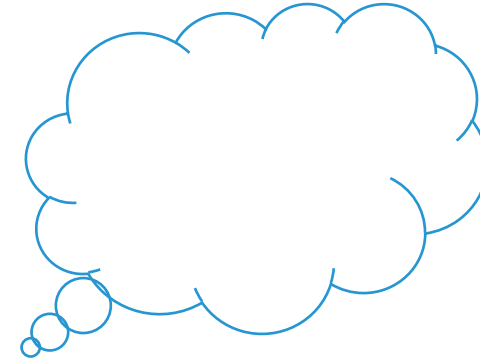
- What do you see?
- What are important elements included?

Scorecard

We have committed to providing adolescent and youth-friendly health services at this health facility. If you are between the ages of 10-24 years, please complete this survey. Your responses will help us to improve our services. This survey is anonymous – you don't have to write your name. This is your opportunity to share your experiences.

		Always	Mostly	Sometimes	Never
1	Health providers greet me with a SMILE.				
2	Health providers show me that they believe I can live a full and happy life, have healthy relationships, and have a family of my own.				
3	Health providers listen to my questions without judgement.				
4	Health providers provide me with answers that are positive and give me hope.				
5	Even when health providers are busy they give me time to talk.				
6	Health providers explain things clearly and make sure I understand everything and can make my own choices.				
7	Health providers treat me with respect and don't talk about me with others.				
8	Health providers respect my privacy and will speak to me in a confidential space.				
9	Health providers make appointments quick and smooth so I am not waiting around.				
10	Health providers are fair to me and do not allow older clients to jump the queue ahead of me unnecessarily.				
11	Health providers find ways to make sure that I do not have to visit the clinic too often and that I get the range of services I need.				
12	Health providers do not behave inappropriately – they don't flirt with me, gossip about me or insult me.				
13	Health providers make sure that the medication they give me is correct, not expired and they explain to me what I need to know to be able to take it.				
14	Health providers do not burden me with any stress they may be feeling.				
15	Health providers care about me and make me feel cared for, understood and protected.				

Client Centered Service Provision



How can you provide AY client center services?

What is Not Client-Centered?

- Setting appointments for clients; not offering them choices
- Routine working hours
- Giving a strict, unrealistic ART schedule to all patients, disregarding their schedules (such as 7:00 a.m./7:00 p.m.)
- Provider states treatment plan as orders
 - “Take these pills every day for the rest of your life”
 - “Come back for your next clinic visit”
 - “Viral load tests are due in six months”

In small groups – turn this list into elements that would be patient-centered

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What is Client-Centered

- Adapting to the patients' schedule (morning, afternoon, evening, weekends, school holidays, etc.)
- Flexible service delivery options
 - Special support groups for age/status (pregnancy, married, family)
 - Community-base services (community distribution points, community ART groups)
- Creating an individualized treatment plan to meet their own schedule and priorities
- Discuss how the patient is feeling and experiencing treatment or adherence, listen and respond accordingly
- Allow time for questions or clarifications

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AYHS Facility Checklist

The RCP checklist can provide insight into areas of focus during the initial training and roll out of RCP at a facility

Activity:

- In small groups, complete the AYSH facility checklist for your facility
- Document areas of strengths and potential areas of focus
- Keep this for future activities

AYFS Facility Checklist

- Accessible services - facility hours, location, short waiting times, safe
- Staff trained – youth friendly service delivery (non-judgmental, confidentiality, respectful)
- Access to information – comprehensive health, sexual and reproductive health
- Meaningful partnership and engagement of ALIHV
- Active relationships between facility and schools in the community
- Ability of AYLHIV to provide anonymous feedback

Break



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Step 5. Implementation of VIP/Express Services



RED CARPET VIP EXPRESS CARD

Patient # _____ Date of Birth _____
 Red Carpet Health Facility: _____
 Date enrolled in care: _____ Date started ART: _____

- Ensure you carry this card everytime you visit the health facility
- In case of emergency, contact the nearest health care facility
- With any questions or support needs, contact the Red Carpet Health facility at: _____
- Consult a doctor or nurse anytime you feel unwell
- Take your ARVs as instructed by your health care provider. Do not stop taking your ARVs without talking to a doctor or nurse



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Red Carpet VIP Card

- The RCP VIP card is issued to all adolescents and youth who are newly identified as living with HIV upon enrollment in care.
- The purpose of the card is to enable AYLHIV access to fast-tracked HIV treatment and other related services within HCFs.
- The card, recognized at all RCP sites, is intended for AYLHIV to show when they come to the clinic so providers and HCF staff can facilitate their VIP experience at the site.



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VIP Express Desk



The VIP express desk →

- Enables AYLHIV presenting to the facility with VIP cards to be provided with expedited youth friendly services.
- Allows AY client to come to the desk to make appointments as well as any referrals
- This is managed by AY peer navigators



Fast Tracked Essential Services

Essential Services include:

- **HIV care services:** lab work, pharmacy, clinical, adherence counselling, nutrition, TB and PMTCT services, where applicable
- **Adolescent-friendly sexual and reproductive health services:** pregnancy, family planning, PAC, post violence care, and STI management
- **Mental health services:** screening and treatment for depression and anxiety, drugs and substance abuse, and general counselling
- Other health services

If some of these services are not provided at the facility, clients can be referred to facilities or organizations that offer those services and acknowledge the VIP RCP express approach

RCP/VIP Express Room/Day



- The facility will designate a VIP express room that is youth friendly to provide adolescent and youth health services
- If possible, the space could be available for use throughout the week and on weekends
- Specific times/days during the week or month can be designated for the use of the room
- Facilities that do not have additional space/rooms for AY express services can integrate their services within the existing facility spaces and structures

RCP/ VIP Express Room/ Day

- The VIP room can have resources for AY such as posters, games, computers with youth resources, or an internet hotspot
- VIP room needs to offer a space for private confidential counseling of young people, and a place to relax as clients wait for any additional services
- The VIP express room can also serve as a “one stop shop” in providing additional health services specific to AY attending the facility, such as those listed in the essential services list

Rapid round brainstorm of resources for AY's for the VIP express room

Go around the room and everyone say one item or element



Adherence Support

- RCP facilities can provide AYLHIV on ART with adherence support in different forms
 - Pill boxes
 - Diaries for pills
 - Phone alert/reminders
 - Hand-on instructions on how to use them and set up the reminders on their phones and other adherence tips (watch alarms, mealtime coordination)
 - Case management: pill boxes can be useful for clients to visually organize their treatment and support their daily and weekly adherence



Client Feedback on Service Quality

- Use feedback forms for AY clients to relay input and support facilities to respond to their needs
- Ensure facilities continuously respond to client concerns on satisfaction and service quality

Youth Friendly Survey

- Available at accessible points for AY clients
- Short survey—use emojis
- Confidential



How can collecting this information be useful in improving the quality and AY responsiveness of services?

Telephone Support

- A phone and WhatsApp line/number/group for AY clients to access health information on key individual issues
- Use of phone/app-based communications can **enhance communication between clinic visits, feedback, and linkage for further support**
- Peer navigators can use this technology to stay in touch with clients and for educational and peer support activities, *especially considering COVID restrictions*

Provide time to support peer navigators to follow up with AYLHIV in RCP and manage virtual communications (WhatsApp groups)



Home and School Visits

Follow-up visits conducted by AY peer navigators at school and homes for AYLHIV in need of additional support include providing support to enhance adherence and assess local barriers and facilitators

It is crucial to ensure confidentiality and agency of AYLHIV throughout these visits



Transportation Reimbursement

To support clients and peer navigators with transport costs for monthly home/community visits to ALHIV in RCP, a transport reimbursement should be considered



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Case Studies



- Split into small groups—ideally with various stakeholders
- Read the short case study and discuss the questions in your groups
- Select one focal person to share your group discussion with the larger group

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Case Study 1: VIP & Fast-Track Services

William has a monthly appointment at the facility to see a provider and get his ARV refill. He is 15 years old and in secondary school. He comes early to clinic to wait in line. He usually waits a long time to see his provider and when his turn comes, he is concerned about the lack of privacy and confidentiality. He does not feel comfortable honestly discussing his challenges or sharing his concern about the clinic waiting time.

Discuss

- How incorporating VIP services (express services, VIP cards, patient navigators) can improve William's experience?
- How can you ensure routine input from clients on their satisfaction and access to services?

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Discussing Trust



- What role does trust play in a provider-patient relationship?
- What are ways to maintain trust?
- What are best practices in ensuring a successful relationship between a provider and patient?

Create a master list of best practices and ways to ensure trust

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Case Study 2: Bottleneck & Entry Points

Carol, a counselor at a health clinic, has had several cases where an adolescent has come to the clinic to get tested, was identified as HIV-positive, but was not successfully linked to care or initiated on ART. She informs her superiors and they begin to think about initiatives to improve the linkage and retention of ALHIV.

Discuss

- Which elements of RCP or VIP services could support this challenges?
- What role could a peer cadre play?



Break



Planning for RCP Implementation



How Can Red Carpet Be Integrated Into Existing Services?

- Review the existing national policy and guidelines for ALHIV
- Conduct site assessment to determine gaps that can be filled with improved quality or novel approaches
- Introduce Red Carpet service concepts for improved clinical outcomes for ALHIV
- Decide on the package components to be adopted
- Update data collection tools
- Build capacity of facility staff and youth on new components
- Implement with fidelity
- Track data and results
- Share lessons and continue with quality assurance processes

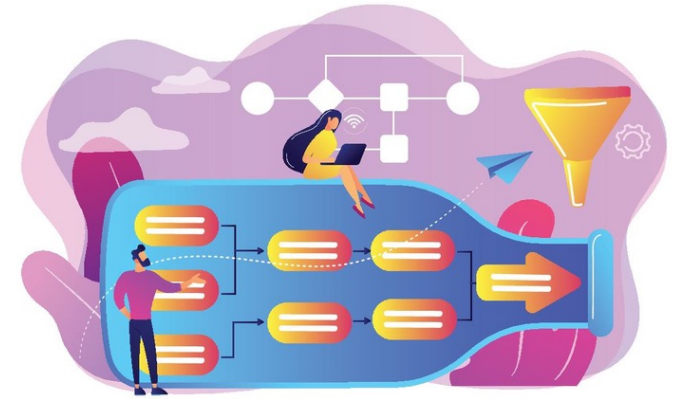
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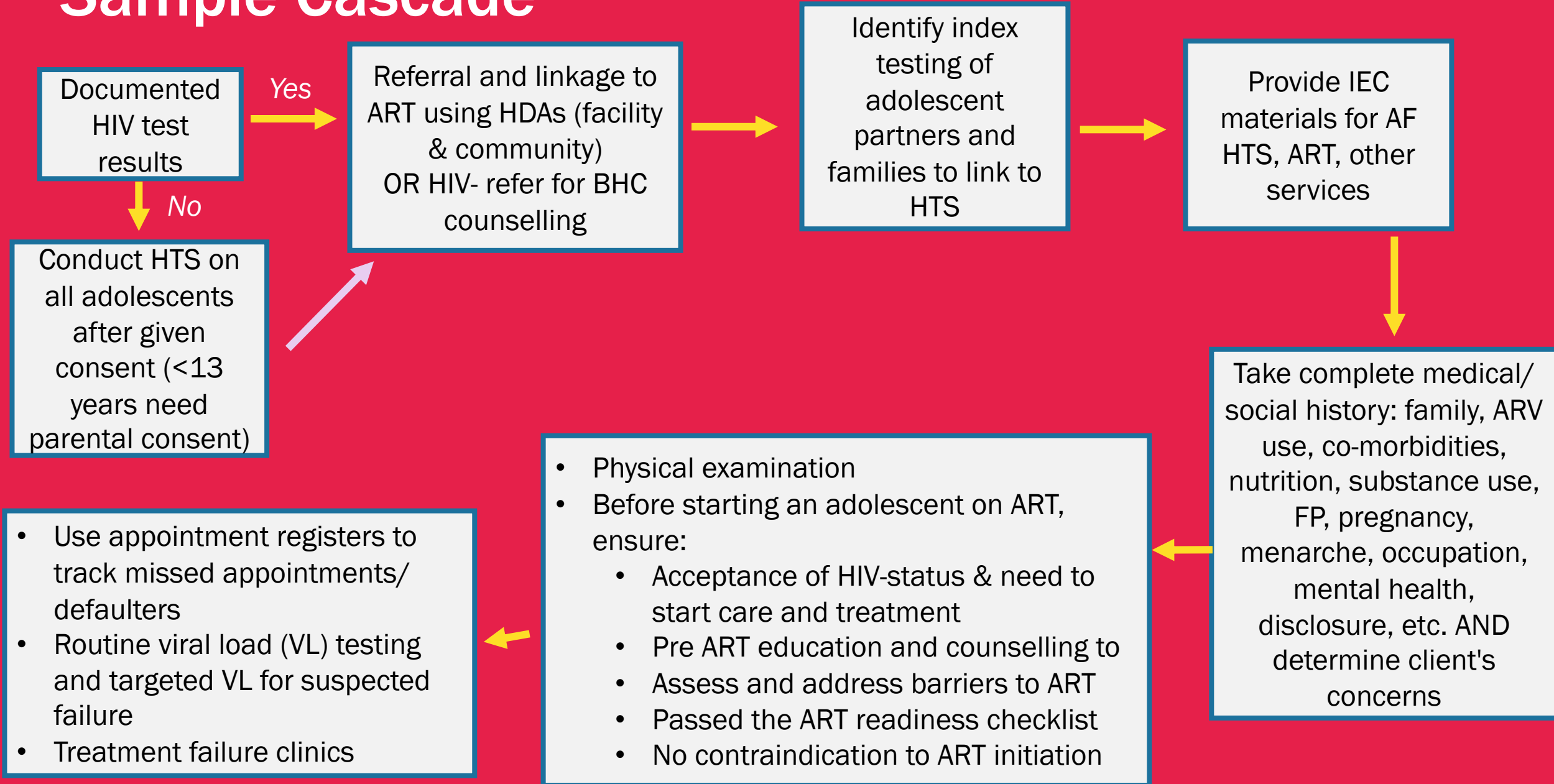
Activity: Client Mapping and Identifying Bottlenecks

Each facility (or small groups) will create a map following clients through the process of receiving services

1. Draw this map
2. Identify bottlenecks of time
3. Complete the patient flow chart (next slide)
4. Re-design the process and discuss how to implement express services (VIP)



Sample Cascade



Patient Flow/Logistics Assessment

	AY centred services
Times services offered	
Space available	
Rooms available	
Patient flow – from arrival to leaving the facility	
Staff who offer services	
Services offered Clinics available	
Cost to the client	
Age limit for clients served	

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Re-designed Express/VIP services

Outline the ways in which services can be altered to ensure express/VIP provision for AYLHIV

These can be written or drawn in adjusting the cascade

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Action Planning

- As a group discuss and develop an **action plan** to implement the changes you outlined in the previous activity and other RCP elements
- Please remember to be realistic and think about things you can change that are in your control and can be proposed to someone “in charge”
- Discuss roles based on the client flow and RCP elements
 - Including identification, linkage, retention (case management)



Remember – RCP elements for HCF are designed with flexibility to adapt and model based on local context

Action Planning

Current Practice	Planned change (type of VIP/express service)	RCP staff needed	Proposed Next Steps	Focal person responsible for step	By when (timeline)

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Certifying a Red Carpet Facility

- RCP HCFs are designed to have a unique, standardized, easily recognizable logo that is visible on the wall at a facility so clients can recognize that the facility offers the RCP
- The logo was designed with AY input and was intentionally created to be youth-friendly and non-stigmatizing
- Once a facility completes the RCP HCF Checklist, they can display the RCP HCF certification
 - RCP certified schools will also be able to display a similar certificate for easy identification



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RCP Health Facilities - Tools

RCP FACILITY CHECKLIST

- Trained/orientated health care providers, AY peer navigators, and other identified stakeholders on:
 - Red Carpet Package
 - VIP Express interventions
 - Roles and responsibilities
- Provision of Red Carpet VIP Express Cards for all AYLHIV
- Provision of fast-track essential services
- Availability of pillboxes and other adherence tools for AYLHIV clients
- Availability of designated phone line
- Conducting of follow-up visits for AYLHIV
- Availability of Red Carpet tools:
 - Checklist
 - Register
 - SOPs
- Availability of AY Peer Navigators
- Linkage of HCFs to community resources and school

RCP Health Facilities - Tools

SOPs within RCP Package

- Enrollment and linkage of AYLHIV into Care at first encounter
- Supporting adherence to ART
- Client empowerments—building resilience and responsibility of care
- First viral load and subsequent discussion with AYLHIV
- Re-engagement in care for AYHLIV who are lost in care
- Support for AYLHIV attending schools

Questions?



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**Elizabeth Glaser
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