

Readiness Worksheet

Before implementing Red Carpet Entry (RCE), complete this readiness worksheet with your team to make sure your clinic or implementation system has the capacity, motivation, and supports to sustain RCE's core components with fidelity.

Instructions: Consider each question below and indicate (Yes/No) whether your clinic meets these indicators for organizational readiness. If you answer no to any of the questions, come up with concrete actions you can take to change your answer to yes and write those actions in the Comments/Next Steps column. Refer to the **RCE Implementation Manual** for suggested effective strategies.

The domains covered in this readiness worksheet include:

- Organizational Motivation, which looks at:
 - Leadership support
 - Staff buy-in
 - Organizational culture
 - Clinic Capacity, which covers:
 - Funding and sustainability
 - Staff resources to accommodate RCE
 - Staff training and readiness
 - Client referrals
 - Clinic workflows and processes
 - Monitoring and evaluation of RCE
 - Client Population, which includes:
 - Demographics and needs
 - Client health insurance status
 - External Environment, which addresses the clinic's connection to external partners and resources available to RCE clients.

RCE Quick Tip

Refer to the **RCE Implementation Manual** to better understand why these domains are important and to determine how to address any gaps or needs you identify. For instance, the manual includes strategies for securing organizational buy-in and explains the importance of understanding your clients' needs and barriers to care.



Part 1: Organizational Motivation

Prior to answering the questions in this section, work with your team to brainstorm and come up with a shared understanding of <u>WHY</u> your clinic is motivated to make changes to your HIV linkage to care and care delivery.

My clinic is motivated to make changes to our HIV linkage to care and care delivery because...

Questions	Yes	Νο	Comments/Next Steps
Leadership Support			
 Do you have support for RCE from senior clinic management and/or health system leadership? 			
Do you have a senior clinical staff person who can serve as the RCE champion?			
 Do you have support from key staff who will be involved, such as HIV specialists, Counseling Testing, and Referral (CTR) counselors, case 			



managers, and nurses?		
Staff Buy-In		
 Are staff open to changes in their workflow? 		
 Do you know what motivates staff at every level, including providers, nurses, and front desk staff? 		
 Do you have ways to provide incentives for staff to participate in RCE? Do clinic leaders reward staff for high-quality care and service delivery? Are there other initiatives that RCE may help address, such as quality initiatives? 		
Organizational Culture		
Does your organization have a culture of patient-centered care delivery?		
 Does your organization prioritize quality and process improvement initiatives? 		
 Has your organization successfully implemented at least one structural intervention in the past? For example, an intervention to change clinic workflows to accommodate clients and patients as compared with expecting clients and patients to change their behavior. 		



Part 2: Clinic Capacity

The questions in this section are designed to help your team think through <u>HOW</u> your clinic will need change its processes around HIV linkage to care and care delivery for RCE. At the end of this section, we'll ask you to outline the changes that will need to be made and brainstorm ideas for making these changes in a way that leverages existing workflows and processes.

Questions	Yes	No	Comments/Next Steps
Funding and Sustainability			
Have you secured funding for RCE implementation?			
 Could the local or state health department support this 			
initiative, financially or otherwise?			
Have you assessed the revenue implications of new staff and			
changing roles?			
Do you have a plan for sustaining RCE long term?			
Staff Resources to Accommodate RCE			
Do you have enough staff, particularly HIV care providers, to			
accommodate an increase in the number of clients or to			
accommodate new clients being seen within 72 hours of referral?			
– Are you able to add new staff roles, as needed?			
Do staff have time in their schedules to perform their assigned			
RCE responsibilities?			
Do you have staffing alternatives and "backups" in case a core			
staff member is unavailable, such as a clinic champion, a RCE			
Concierge, or a CTR counselor?			
Staff Training and Readiness			
Have you defined and communicated staff roles and			
responsibilities?			
Have all client-facing staff at the clinic and partner organizations			
been educated about RCE and how to conduct ACE and warm			
handoffs (see Implementation Manual for definitions)?			
Do all staff within the clinic and at partner organizations know or			
have access to the name and telephone number of the RCE			



Concierge and the discreet phrase for clients?	
[For Broader Dissemination Only] Do you have a staff person and	
systems to facilitate RCE data collection, monitoring, and	
evaluation?	
Do you have established channels for staff to communicate and	
coordinate linkages and handoffs?	
Do you conduct regular staff meetings to share performance	
feedback and guidance on the program with all staff, including	
those who are not client-facing?	
Client Referrals	
Do you have a good understanding of where clients come from in	
your own system—such as the Emergency Department—and have	
established procedures for timely testing and referral?	
Clinic Workflows and Processes	
Have you determined how RCE will integrate with existing	
programs and workflows and developed additional standard	
operating procedures, if needed?	
Have you defined RCE new client appointment hours?	
Does your clinic have enough flexibility in providers' schedules	
and operating hours—such as nights and weekends—to	
accommodate RCE clients?	
Have providers agreed to preserve open appointment times for	
new RCE clients and walk-in clients?	
[For Broader Dissemination Only] Monitoring and Evalu	uation of RCE
Do you have a system to track RCE clients along the care	
continuum, including referrals from CTR counselors, visit	
attendance, client engagement efforts, and referrals to	
wraparound services?	
Does your organization have the capacity to evaluate RCE by	
collecting clinical outcomes and other success metrics, such as	
retention in care, clinical indicators, program costs, and client	
satisfaction?	



Is there sufficient time for staff to complete data fields in tracking		
tools after service delivery?		

Our clinic needs to make the following changes to our HIV linkage to care and care delivery for RCE.
How might we make these changes in a way that leverages existing workflows and processes in our clinic so that they can be adopted as easily as possible?



Part 3: Client Population

Prior to answering the questions in this section, use the space below to describe <u>WHO</u> will need RCE services at your clinic.

Questions	Yes	No	Comments/Next Steps
Client Demographics and Needs			
Do you know the demographics of the target clients for RCE, such as people with HIV who were recently diagnosed or are out of care?			
Do you know the barriers preventing clients from accessing and staying in care and do you have strategies to address them?			
Do you know the days and times clients are more likely to be available for appointments, such as afternoons, evenings, or weekends?			
Do you have existing channels to communicate with current and potential clients, such as a Facebook page or website?			
Client Health Insurance Status			
 Do most of your clients have insurance? If not, do you have benefit counselors who can help clients obtain insurance? 			
 Do you have a plan or system in place for covering the initial RCE Visit (including labs) if a client does not have insurance? 			



Part 4: External Environment

Prior to answering the questions in this section, discuss with your team <u>WHAT</u> needs your patients have, <u>WHO</u> can help address these needs, <u>HOW</u> you can establish strong external partnerships, and <u>WHEN</u> your patients are likely to seek help.

WHAT are your patients' needs?	WHO can help address these needs?
HOW can you establish strong external partnerships?	WHEN are your patients likely to seek help?



Questions	Yes	No	Comments/Next Steps
 Do you know trends around higher volumes of people testing positive for HIV or seeking HIV treatment at your clinic? These may occur around pride events or HIV awareness days, for example. 			
 Do you have a system in place to refer clients and link them to HIV support services in your community—for example, community- based organizations that offer wraparound services such as transportation, housing or employment support or substance use treatment? 			
Do you have an established partnership with at least one HIV testing and referral site?			
Have you developed and secured memorandums of understanding with RCE partner organizations?			
 Do you have bidirectional communication channels and standard operating procedures with referral sites and wraparound service providers to communicate when a referral has been successful? 			
 Have you identified financial assistance programs and/or payment plan options that clients without insurance may qualify for to help them pay for their HIV care? 			