

Module 3: Red Carpet Entry (RCE)—Measuring
Success

Module Overview

- 1. Learning Objectives
- 2. Monitoring and Evaluation
- 3. RCE Monitoring
- 4. Outcomes Evaluation
- 5. The RCE Report Card
- 6. Next Steps





Learning Objectives





After taking this training module, you should be able to...

- 1. Understand the difference between monitoring and evaluation
- 2. Identify the key monitoring and evaluation metrics for RCE
- 3. Understand the types of **informal client feedback** that can help quality improvement
- 4. Identify the **evaluation outcomes data** to be collected from your electronic health record (EHR) system(s)
- 5. Understand the **RCE Report Card metrics** and how to use the Report Card for quality improvement





Who Should Take This Training Module?



RCE Champion



RCE Concierge





Key Staff





Key Staff for Monitoring and Evaluation

Data Manager

- Extracts data for consenting patients from the clinic EHR through queries or manually input into the RCE Access Database
- Completes quality assurance checks on RCE and clinical data
- Sends data to RTI according to schedule
- Works with RTI to resolve any data issues identified by RTI

Clinic Champion

- Oversees preparation
- **Secures** leadership buy-in
- **Reviews** RCE procedures
- Monitors RCE fidelity
- Supports RCE staff
- **Troubleshoots** problems with the RCE team

RCE Concierge

- Receives referrals from CTR
 Counselor and self-referrals
- Facilitates access to medical care and wraparound services through RCE Visit
- Conducts outreach to clients who missed their RCE appointment



Key Terms





RCE Visit

During a visit to the RCE clinic, the client receives the following services within 72 hours of referral:

- Introduction to the RCE Concierge
- Brief intake
- Assessment for wraparound services
- Financial assistance/benefits discussion
- Introduction to their HIV Specialist
- Laboratory tests
- Visit wrap up





RCE Outreach and Reengagement

A formal structure for outreach and engagement-initiated following a client's loss of contact or missed RCE Visit:

- The Concierge makes two attempts to warmly engage the client, address barriers to care, and schedule or reschedule the RCE Visit.
 - If attempts are unsuccessful, the Concierge contacts the referring CTR Counselor—except in cases of self-referral—to inform them of the client's loss of contact/absence.
- The CTR Counselor makes at least two attempts to warmly engage the client, address barriers to care, and schedule or reschedule the RCE Visit.



Monitoring and Evaluation





Measuring Success Helps You Answer Important Questions

- 1. Is RCE being implemented as intended?
- 2. Is RCE meeting clients' needs?
- 3. Is RCE affecting client outcomes?
- 4. Are there areas for improvement?





Monitoring and Evaluation

Monitoring is the regular collection of information about project activities that allows project managers to:

- Identify whether things are going as planned
- Identify and solve problems quickly

Evaluation asks whether the objectives, aims, and goals of the project are being achieved.

Pop Quiz

What key questions does monitoring and evaluation help you answer?

Write down your answer.

 1.
 3.

 2.
 4.

What key questions does monitoring and evaluation help you answer? Answers

- 1. Is RCE being implemented as intended?
- 2. Is RCE meeting clients' needs?

3. Is RCE affecting client outcomes?

4. Are there areas for improvement?



RCE Monitoring





Monitoring Activities



The RCE Concierge will record all activities related to RCE in the RCE Access Database, including:

- 1. All referrals
- 2. RCE Visits
- 3. RCE Outreach and Reengagement attempts





RCE Monitoring Key Metrics

- 1. Date, time, and source of the referral
- 2. Date and time of the scheduled RCE Visit
- 3. Client's attendance at the RCE Visit
- 4. RCE core components received at the RCE Visit
- 5. Second appointment scheduled





RCE Client Input

It may be valuable to obtain **informal feedback** from your clients, such as

- Their experience with HIV and their challenges, concerns, fears, and needs
- Their experience going through RCE, including what they liked or what they wish was different

This information can inform quality improvement and help identify additional partners to engage for wraparound services and referrals.

Pop Quiz

Which of the following **is NOT** a key RCE monitoring metric?

Select all that apply.

- A. Client's attendance at the RCE Visit
- B. Date, time and source of referral
- C. Reasons for a missed RCE Visit

- D. Date and time of the scheduled RCE Visit
- E. RCE core components received at the RCE Visit
- F. Second appointment scheduled

Which of the following **is NOT** a key RCE monitoring metric?

Answer

C. Reasons for a missed RCE Visit





RCE Monitoring Reports

Weekly Report

- Aggregated data only
- Generated by and exported from the RCE Access Database
- Sent to RTI weekly

RCE Data

- Individual-level data
- Exported from the RCE Access Database
- Sent to RTI monthly



Outcomes Evaluation





Evaluation Data Sources

- 1. RCE data collected in the RCE Access Database
- 2. Appointment data, date of diagnosis, and demographic data extracted from your clinic's EHR into the RCE Access Database





EHR Data Collection

- 1. Appointment Data
 - Includes the following data for all **HIV primary care appointments at** *your clinic* in the 4 months following the client's RCE Visit:
 - Appointment date
 - Appointment time
 - Attendance status





EHR Data Collection (cont.)

- 2. Date of HIV diagnosis
- 3. Demographic data
 - Age
 - Sex

 - Race

- Ethnicity
- Insurance status
- Gender
 HIV risk factors

Which data should be collected from your clinic's EHR?

Select all that apply.

A. Date of Diagnosis

D. CD4 Counts

B. Appointment Data

E. Demographic Data

C. Viral Load

F. Provider Visit Notes

Which data should be collected from your clinic's EHR? *Answers*

A. Date of Diagnosis

B. Appointment Data

E. Demographic Data





Key Evaluation Metrics

- Linkage to care
 - Client linked to care within 72 hours of referral

- Retention in care
 - Client attended a second primary care appointment 3 months after the RCE Visit





Evaluation Reporting

EHR Data

- Individual-level data for consenting clients only
- Extracted from clinic EHR
- Sent to RTI every 2 months

RCE Data

- Individual-level data
- Exported from the Access Database
- Sent to RTI monthly





EHR Data Extraction

- Data collected for all enrolled clients (RCE clients who have consented to share their EHR data)
- Data should be extracted between the data collection dates for each client:
 - Start date day of consent
 - End date up to 4 months after day of consent OR day of withdrawal, if client has withdrawn from the study



The RCE Report Card





RCE Report Card Process

1

Site sends RCE data to RTI 2

RTI generates RCE Report Card every 2 months 3

RTI reviews
RCE Report
Card with site
on technical
assistance
call

4

Site staff review internally and set objectives

RCE Report Card



RCE Report Card

[MONTH] 2022

Objectives

	Month 2	Month 4	Month 6
70% of RCE Clients attending an RCE			
Visit within 72 hours of referral			

Process Metrics

	Baseline		Month 2		Month 4		Month 6	
	N	%	N	%	N	%	N	%
Number of RCE Clients Referred								
By internal CTR Counselor								
By external CTR Counselor								
By self-referral								
RCE Client Characteristics								
Newly diagnosed with HIV								
New to HIV care								
Returning to HIV care								
Number of RCE Clients Who Received an RCE Visit Within								
0-24 hours of referral								
25-72 hours of referral								
RCE Visit Components Received								
Orientation with RCE Concierge								
Brief intake				·		·	·	
Meeting with HIV Specialist								
HIV confirmatory blood draw								
Referral to wraparound services		<u> </u>						





RCE Report Card Metrics

Monitoring

- 1. Participant characteristics
- 2. Number of clients referred, by source
- 3. Number of clients receiving RCE Visit within 0 to 24 hours or 25 to 72 hours of referral
- 4. Number of clients receiving each RCE Visit component

Evaluation

1. Number of clients attending second appointment





RCE Report Card Metrics (cont.)

Narrative Report

- 1. What went well during the reporting period?
- 2. What didn't go well during the reporting period? What could be improved?
- 3. What actionable steps can your clinic take in the next 2 months to:
 - Improve the number of eligible clients who are reached through RCE?
 - See more clients within 72 hours of referral?
 - Make referrals to wraparound services at the RCE Visit?
 - Improve the client's overall experience?
 - Improve the intake process?
 - Ensure clients receive all indicated labs?

If your clinic collects **informal feedback** from clients, use key learnings to inform your narrative report.





Using the RCE Report Card for Quality Improvement

The RCE **Report Card** can be used to facilitate quality improvement by...

- Using metrics to garner support from stakeholders
- Ensuring fidelity to the RCE core components
- Identifying aspects of RCE that need additional resources (e.g., staff or time)
- Initiating conversations with the internal team about implementation progress
- Tracking trends over time



- 1. Has your organization been engaged in quality improvement initiatives previously?
- 2. What lessons can you apply to quality improvement for RCE?



Summary





Monitoring and Evaluation

Monitoring

- Is RCE being implemented as intended?
- Is RCE meetings clients' needs?
- Are there areas for improvement?

Evaluation

• Is RCE affecting client outcomes?





Key Monitoring and Evaluation Metrics

Monitoring

- Date, time, and source of referral
- Date and time of scheduled RCE Visit
- Client's attendance at the RCE Visit
- RCE core components received at the RCE Visit
- Second appointment scheduled

Evaluation

- Linkage to care
- Retention in care





Informal Client Feedback

- Feedback can be obtained through informal conversations with RCE clients
- Client input can help inform quality improvement
- Informal feedback includes information:
 - The client's experience with HIV and their challenges, concerns, fears, and needs
 - The client's experience going through RCE, including what they liked or what they wish was different





Evaluation Outcomes Data from the EHR

- 1. Appointment data, including date, time, and attendance status
- 2. Date of HIV diagnosis
- 3. Demographic data
 - Age
 - Sex

 - Race

- Ethnicity
- Insurance status
- Gender
 HIV risk factors





RCE Report Card

The RCE Report Card includes the following:

- Monitoring metrics, including number of clients served and time between referral and RCE Visit
- Evaluation metrics, including number of clients attending a second appointment
- Narrative report

This information can be used to **garner support** from others in your organization or to identify **areas for improvement.**



Next Steps





More Information

For more information about monitoring and evaluation of RCE, refer to Chapter 4 of the **RCE Implementation Manual**.



Questions