

## CERTIFICATION OF YOUTH FRIENDLY SERVICES

### 1. Introduction

This certification tool is a means to quantify the status of youth friendly services (YFS) in a facility setting in order to issue a certification or a provisional certification for YFS. It can also be used as a way to compare progress made on instituting YFS when repeated by comparing the score at follow-up to that at baseline.

The tool is designed to accompany PI/AYA's *Rapid Assessment of Youth Friendly Reproductive Health Services* and should be applied after the full assessment has taken place and the report prepared. (See #2, below, on how to implement the tool.) It goes beyond the assessment and quality upgrade phases of making services youth friendly, and provides a clear indication of whether the facility has achieved the status of "youth friendliness." The process of certification through use of this tool has the following benefits:

- The tool provides an easy-to-use and straight-forward means to determine if health facilities meet the standards of YFS according to a set of criteria based on independently assessed indicators, adapted to country-specific conditions.
- The certification status helps health and other professionals to know where to refer clients for needed services and be assured that the quality meets accepted standards.
- Certification status helps the public in general and potential clients in particular to identify which facilities can be trusted as youth friendly and with quality services.
- Certification provides a means for facilities to publicize the nature and quality of their services and to help assure clients of what care they will receive.
- Certification provides a clearly defined benchmark for facilities to work towards achieving.
- Certification allows for recognition and acknowledgement of those facilities that have attained the standard of youth friendliness.

The tool is organized as follows:

1. Introduction
2. How to use the certification tool
3. Checklist for certification of YFS sites
4. Assistance and feedback

## 2. How to use the certification tool

### **WHEN TO IMPLEMENT THE CERTIFICATION TOOL:**

As noted, the certification tool should be applied after the *Rapid Assessment of Youth Friendly Reproductive Health Services* has been carried out, as the assessment provides a more thorough process of examining detailed aspects of youth friendly services. It could be used immediately after the assessment if the objective is to quantify the status of YFS for later comparison following operational adjustments and quality upgrading in accordance with the action plans developed as part of the assessment. If used to seek certification status, it should be applied after the upgrading actions have taken place.

### **REVIEW AND ADAPTATION OF INDICATORS:**

An important step before using the tool in any country is to review the checklist of indicators for any possible adaptation. The group set up to carry out this task should include government and NGO sector representatives, with both administrative and service provision experience, and should have at least one youth member. Adaptation of indicator definitions should be done only in cases where the law or health policy would compromise achievement of the standard. (For example, if PAC services are not part of the official health policy offerings, the facility should not be penalized for failing to include such a service. However, it then becomes important for referrals to accommodate absent services.) It is important to remember, in considering any adaptation of indicators, that these selected indicators, and their definitions, have been developed as part of a lengthy process including significant input from health professionals and youth, and have been extensively field-tested. Thus any changes should occur only where criteria would not be feasible to meet.

### **ASSEMBLING THE CERTIFICATION TEAM:**

The team conducting the certification exercise should be independent of the clinic. (This means that no staff from the facility to be certified should be a member of the team.) The team should consist of about four persons, ideally a public health administrator with responsibilities for RH issues, an experienced RH service provider, a representative of a group assisting with YFS project implementation (such as PI/AYA) and a youth with some experience in the RH field (such as a trained peer educator). Whoever is serving as team leader should make sure that the tasks are clearly defined (see below) and that the team members are able to reserve sufficient time to carry out their responsibilities.

### **CARRYING OUT THE CERTIFICATION PROCESS:**

The team should become clear about the nature of, and time required for, the process of determining certification, which includes the following tasks:

- a. Arrangements need to be made for the day of the visit with the clinic; the certification process will take a minimum of four hours. In addition to agreeing upon the date and hours, arrangements need to be made for all the interviews and observations: interview with clinic administrator, interview with one or more service providers, observation of a provider/client session (with client's informed consent obtained in advance), interview with a young person who has received services at the clinic. Presumably, the observation of the clinic itself can be done without precise scheduling.
- b. In advance of the clinic visit day, the team should review the action plans resulting from the assessment to better understand what changes and upgrading were indicated to make the facility youth friendly. This will help to point out the areas of likely concern for the team to investigate. Also, the team should familiarize itself with the essential and supportive elements to be assessed in the certification process, and discuss the definitions to make sure there is clarity and consensus among the team members.
- c. Also in advance, the team should create a plan to cover the five methods of collecting information (see annex A for a suggested plan for collecting indicator information by method). It is proposed that information about most indicators be gathered in two or more ways; for example, affordable fees would be an interview question for both the clinic administrator and the young person. The team can be divided into 2 or 3 groups, depending on membership, to conduct these tasks simultaneously.
- d. The group should reassemble, at a place on-site if possible, to compare notes and carry out the scoring process. If this task is done on-site, and if necessary, the team can go back for further questioning and observation to clarify issues or resolve conflicts.

### **SCORING AND DETERMINATION OF STATUS:**

The scoring of the essential and supportive elements are as follows:

**Score 2:** If the element meets the criterion fully.

**Score 1:** If the element meets the criterion partially or if actions are underway to comply.

**Score 0:** If the element does not meet the criterion.

The determination of certification status is calculated as follows:

- a. **Certified as a YF facility:**
  - Scores at least a total of 36 points including:

- Scores at least 10 essential elements at the “2” level and at least a “1” on the remaining 4 essential elements (Scores 24)
- Scores an additional 12 points on supportive elements.

b. **Provisional certification:**

- Scores at least a total of 31 points including:
  - Scores at least 8 essential elements at the “2” level and at least “1” on all the other essential elements.
  - Scores at least 10 additional points on supportive elements.

### Checklist for Certification of YFS Sites

Essential Elements	Indicators	Score 2, 1, 0	Comments/ Recommendations
<b>1. Convenient open hours</b>	In addition to being open during the day, services are available at least 6 hours during the periods of late afternoon (2 – 5 PM), evenings (5 – 7 PM) and weekends per week.		
<b>2. Privacy is ensured</b>	Visual and auditory privacy is ensured in consultation rooms with adequate enclosures; there are no non-essential interruptions or intrusions.		
<b>3. Competent staff</b>	Staff are able to communicate well with adolescents, competently deliver RH services, discuss protection options (including dual protection) and answer client questions.		
<b>4. Respect for youth client</b>	Clinic staff (receptionist, counselor, provider) treat the youth client with respect and courtesy and allow clients time to ask questions.		
<b>5. Minimum package of services</b>	The following services are offered on-site: information and counseling on sexuality, safe sex and reproductive health; contraceptive and protective method provision; STI diagnosis and management; HIV counseling (and referral for testing and care); pregnancy testing and antenatal and postnatal care; counseling on sexual violence and abuse (and referral for needed services); and post-abortion care (PAC) counseling and contraception. The minimum package may vary depending on the type of facility and the services offered at that level of facility as mandated by the MOH.		
<b>6. Sufficient supply of commodities and drugs</b>	Commodities and drugs are actually available and they have not expired.		
<b>7. Range of FP methods offered</b>	Many of the following FP methods are offered: condoms, OCs, injectibles, Norplant, emergency contraception.		
<b>8. Emphasis on dual protection/condoms</b>	Protection against pregnancy and STI/HIV is mentioned with each client regardless of presenting conditions, and condoms are easily obtained.		
<b>9. Referrals available</b>	A system for referring clients is in place, including referrals to youth-friendly services addressing sexual abuse/violence treatment, PAC (treatment of complications), VCT.		
<b>10. Young adolescents (12-</b>	Young adolescents (between 12-15) who are in need of protection, testing		

15) are served	or care are not refused services because of age to the full extent of the law.		
11. Confidentiality is ensured	Facility assures client confidentiality regarding both the consultation(s) and medical records.		
12. Waiting time not excessive	Young people can be seen within one hour of arrival or one-half hour of appointment time and internal referrals are done in an expedited manner.		
13. Affordable Fees	The cost of the service is free to adolescents, or at a level not comprising a barrier to access.		
14. Separate space and/or hours	Waiting areas and consultation rooms are separated from those of other clients, or YFS are provided at special hours, affording greater confidentiality.		
<b>Supportive Elements</b>		<b>Score 2, 1, 0</b>	<b>Comments/ Recommendations</b>
1. Youth input/feedback to operations	Youth are/were included in designing YF components and/or a mechanism is provided and used for obtaining youth feedback on improving YFS quality.		
2. Accessible location	Facility within walking distance or within easy reach via public transportation of schools, social spots and/or workplaces of the youth population.		
3. Publicity for YFS	Facility effectively makes its YFS known to the youth population in the community through outreach, media, signboard, and other channels.		
4. Comfortable setting	The facility environment includes items to make youth feel at ease and comfortable, such as youth-oriented posters and an environment that is not overly medicalized.		
5. Peer educators/counselors available	Peer educators or counselors are available to talk with youth clients and/or conduct outreach activities.		
6. Educational materials available	Brochures and pamphlets on key topics (protection methods, signs of STIs, condom negotiation) are available both to use on-site and to take away.		
7. Delay of blood test and pelvic exam possible	Blood tests and pelvic exams are deferrable if not essential to the care provided and if the client desires such delay.		
8. Partners welcomed and served	Clinics welcome partners of the primary clients both for their own needs and those of their partner.		

<b>9. Non-medical staff oriented</b>	Staff who provide supportive or auxiliary roles (such as receptionist, security guard, cleaner, etc.) are oriented to communicating with youth in a friendly and respectful manner.		
<b>10. Provision of additional educational opportunities</b>	Clinics provide additional activities and opportunities for educating/counseling youth on RH such as group discussions, special events, etc.		
<b>11. Outreach services available</b>	Services are available by means outside of the facility itself, such as through peer educators and community-based health workers or through community-based sites (such as recreational and social venues) that are linked, and able to refer, to the clinic.		

### 3. Assistance and feedback

For questions regarding implementation of this tool, please contact Gwyn Hainsworth ([Ghainsworth@pathfind.org](mailto:Ghainsworth@pathfind.org)).

Pathfinder International welcomes any feedback on use of this tool, including experiences, suggestions and reports.

## **Annex A: Elements by Information Collection Method**

### **Interview of Clinic Administrator**

- E-1 Convenient open hours
- E-5 Minimum package of services
- E-6 Sufficient supply of commodities and drugs
- E-7 Range of methods offered
- E-9 Referrals available
- E-10 Young adolescents (12-15) are served
- E-11 Confidentiality is assured
- E-12 Waiting time not excessive
- E-13 Affordable fees
- E-14 Separate space and/or hours

- S-1 Youth input/feedback to operations
- S-2 Accessible location
- S-3 Publicity for YFS
- S-5 Peer educators/counselors available
- S-7 Delay of blood test and pelvic exam possible
- S-8 Partners welcomed and served
- S-9 Non-medical staff oriented
- S-10 Provision of additional educational opportunities
- S-11 Outreach services available

### **Interview of Service Provider(s)**

- E-2 Privacy is ensured
- E-3 Competent staff
- E-4 Respect for youth client
- E-6 Sufficient supply of commodities and drugs
- E-7 Range of methods offered
- E-8 Emphasis on dual protection/condoms
- E-9 Referrals available
- E-11 Confidentiality is ensured

### **Observation of Provider/Client**

- E-2 Privacy is ensured
- E-3 Competent staff
- E-4 Respect for youth client
- E-7 Emphasis on dual protection/condoms

### **Observation of Facility**

- E-6 Sufficient supply of commodities and drugs
- E-11 Waiting time not excessive
- E-13 Separate space and/or hours
  
- S-2 Accessible location
- S-4 Comfortable setting
- S-5 Peer educators/counselors available
- S-6 Educational materials available
- S-9 Non-medical staff oriented

### **Interview of Youth Using Facility**

- E-2 Privacy is ensured
- E-3 Competent staff
- E-4 Respect for youth client
- E-6 Sufficient supply of commodities and drugs
- E-8 Emphasis on dual protection/condoms
- E-11 Confidentiality is ensured
- E-12 Waiting time not excessive
- E-13 Affordable fees
- E-14 Separate space and/or hours
  
- S-1 Youth input/feedback to operations
- S-2 Accessible location
- S-3 Publicity for YFS
- S-4 Comfortable setting
- S-5 Peer educators/counselors available
- S-6 Educational materials available
- S-8 Partners welcomed and served
- S-10 Provision of additional educational opportunities
- S-11 Outreach services available