

KPLHS

Key Population-Led Health Services



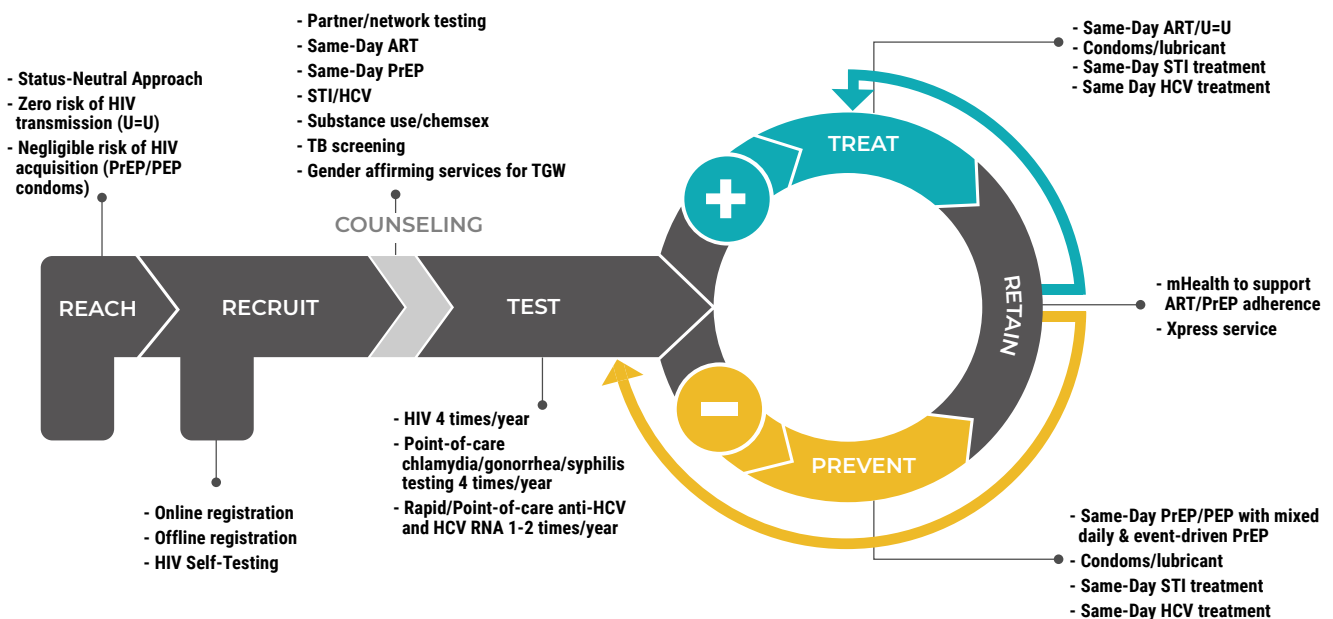
WHAT IS KPLHS?

The Key Population-Led Health Services or KPLHS model is a true partnership between the community, i.e., civil society organizations (CSOs), and the government public health facilities, which provides needs-based, demand-driven, and client-centered services. Service packages are designed by key populations (KPs). The model allows certified lay providers to provide specified high-quality health services to the KP clients in their community. KPLHS augments the national program by bridging the gap between government services and key populations, especially the most marginalized communities, and has been shown as a promising strategy to end AIDS in Thailand.

The services provided by KP lay providers contribute to the entire HIV service cascade: Reach, Recruit, Test, Treat, Prevent and Retain or RRTTPR.

KPs IN THAILAND:

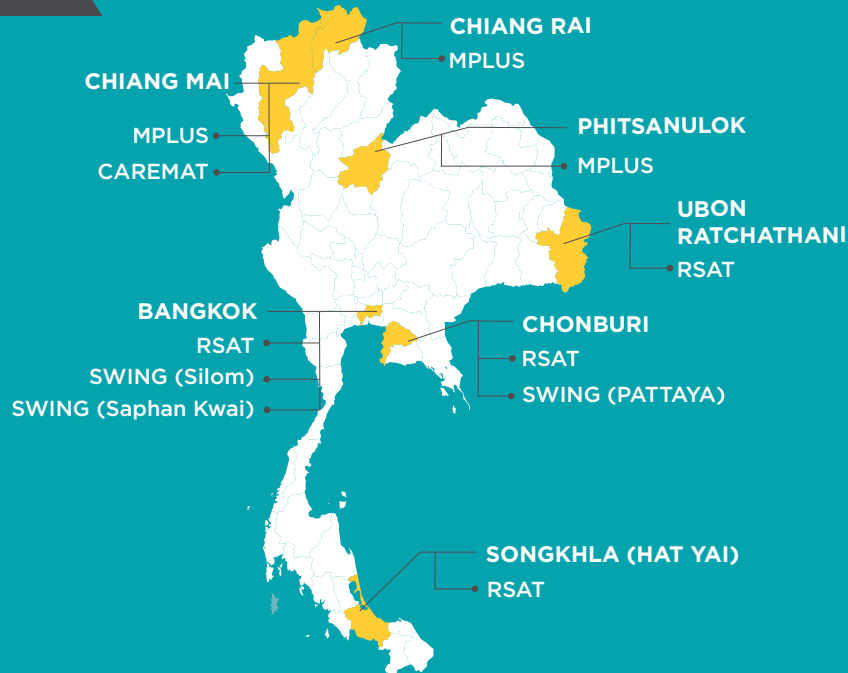
- Men who have sex with men (MSM)
- Transgender women (TGW)
- Male sex workers (MSW)
- Female sex workers (FSW)
- Transgender women sex workers (TGSW)
- People who inject drugs (PWID)



Abbreviations: U=U, Undetectable equals Untransmittable; PrEP, pre-exposure prophylaxis; PEP, post-exposure prophylaxis; ART, antiretroviral treatment; STI, sexually transmitted infections; HCV, hepatitis C virus; TB, tuberculosis; TGW, transgender women.

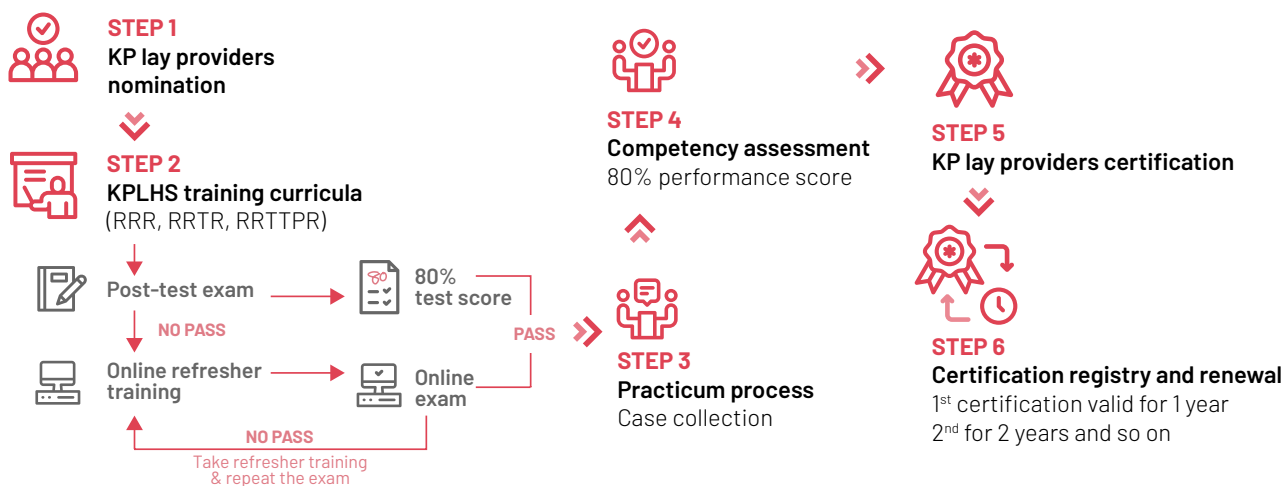
KPLHS SITES IN THAILAND

KPLHS implementation has been expanded from initially six to currently eleven community health centers: Rainbow Sky Association of Thailand (RSAT) in Bangkok, Chonburi, Ubon Ratchathani and Songkhla; Service Workers in Group Foundation (SWING) in Bangkok (Silom and Saphan Kwai) and Chonburi; Caremat in Chiang Mai; and Mplus in Chiang Mai, Chiang Rai and Phitsanulok.



ASSURING QUALITY STANDARDS OF KPLHS

The quality and standards of KPLHS are assured through systematic capacity building and certification. While there was no national training and certification system to support CSOs in Thailand prior to 2021, ENGAGE, IHRI's Advocacy and Capacity Building unit, established a six-step training and certification system for KPLHS in 2017. The six steps of KP lay providers certification are as follows:



STEP 1 KP lay providers' nomination: CSO Champions select KP lay providers based on education level, commitment, motivation, and work experience in the HIV response among key populations.

STEP 2 KPLHS training curricula: Depending on the clinical roles they will perform, KP lay providers must undergo 66-90 hours of training which is comprised of face-to-face training and online training, including two prerequisite training courses, Basic Information on HIV and Related Infections and Counseling for the HIV Test, plus at least one of 4 specialized training courses, Pre-Exposure Prophylaxis, Antiretroviral Therapy, HIV/STI Testing, and STI Treatment Dispensing. A final knowledge score of 80% or higher is required to pass each course.

STEP 3 Practicum Process: Within three months after training, the KP lay providers candidates must observe each type of service and be observed by experienced service providers before working independently. During the practicum, five case records for each service must be collected.

STEP 4 Competency assessment: At the end of the practicum, assessors evaluate a candidate's functional competencies and assess case records and client satisfaction assessments.

STEP 5 Certification: The outcomes of steps 2-4 are submitted to the ENGAGE Training and Certification Committee, a panel of national experts, for review and certification.

STEP 6 Certification registry and renewal: Certified KP lay providers enrolled into ENGAGE Certification Registry. Initial certification is valid for one year. The renewed certificate is valid for 2 years and so on.

TOWARDS SUSTAINABILITY

ENGAGE, together with Mplus, RSAT, and SWING, formed an advocacy coalition with the Division of AIDS and STIs (DAS), Department of Disease Control (DDC), Ministry of Public Health (MOPH), and other stakeholders to advocate for the legalization of KPLHS and KP lay providers delivering HIV and sexually transmitted infection (STI) services. The key outcomes of advocacy efforts include:

- A Ministerial regulation supporting lay provider HIV and STI services was endorsed in 2019.
- Stakeholders developed a KPLHS Standards Manual as a guideline for the certification of CSOs.
- Stakeholders formed joint KPLHS quality assurance and quality improvement committees with provincial health offices and regional disease control offices.
- The DDC adopted the KPLHS training and certification system developed from ENGAGE and established a national training and certification system in 2020.
- As of December 2021, 199 KP lay providers across Thailand received national certification.

NEXT STEPS

Additional advocacy efforts are required to accelerate the process of CSO registration by the National Health Security Office (NHSO) to assure the sustainability of CSOs in providing HIV and STI services.

- IHRI will include other health issues, i.e., hepatitis C, tuberculosis, and COVID-19, into existing KPLHS services.
- The advocacy coalition will continue efforts to obtain direct reimbursement of KPLHS to certified CSOs from NHSO.

