



**Fort Lauderdale / Broward County EMA
Broward County HIV Health Services Planning Council**

200 Oakwood Lane, Suite 100, Hollywood, FL, 33020
Tel: 954-561-9681 / Fax: 954-561-9685

JOINT CLIENT/COMMUNITY RELATIONS COMMITTEE

Meeting Agenda

August 7, 2012 at 1:00 P.M.

200 Oakwood Lane, Suite 100, Hollywood, FL, 33020

Karen Creary, Part A Co-Chair

Leslie Washington, Part B Co-Chair

***Reminder:** Meeting Attendance Confirmation Required at least 48 Hours Prior to Meeting Date*

- 1. CALL TO ORDER**
- 2. REVIEW MEETING GROUND RULES, STATEMENT OF SUNSHINE & PUBLIC COMMENT REQUIREMENTS**
- 3. WELCOME & INTRODUCTIONS**
- 4. MOMENT OF SILENCE**
- 5. APPROVALS**
 - a) Approval of Today's Agenda
 - b) Approval of the 7/10/12 Meeting Minutes
- 6. TESTIMONIALS**
- 7. PUBLIC COMMENT**
- 8. GRANTEE REPORTS**
 - a) Part A
 - b) Part B (HANDOUT A-1)
 - c) ADAP (HANDOUT A-2)
- 9. OVERVIEW OF PART B – Ann Mercer, Part B Grantee (HANDOUT B)**
- 10. OTHER BUSINESS**
 - a) Update on Community Educational Event/Business Meeting Locations (HANDOUT C-1)
 - b) Agenda for Community Educational Event/Business Meeting (HANDOUT C-2)
- 11. NEW BUSINESS**
- 12. REVIEW COMMITTEE'S:**
 - a) Work Plan
 - b) Social Marketing Strategy
 - c) Policies/Procedures/By-Laws/Mission Statement
 - d) Grievance Policy/Procedures & Grievance Form
- 13. PUBLIC COMMENT**
- 14. REQUEST FOR INFORMATION/DIRECTIVES**
- 15. AGENDA ITEMS FOR NEXT MEETING: 9/4/12 at 1:00 p.m., VENUE: TBD**
- 16. ADJOURNMENT**

IMPORTANT NOTICE:

Please be aware this meeting and all information stated thereof is a matter of public record under FL's Government in the Sunshine Law (Florida Chapter 119.01). Acknowledgement of HIV status is not required, and if disclosed becomes a part of the public record



JOINT CLIENT/COMMUNITY RELATIONS COMMITTEE
 200 Oakwood Lane, Suite 100, Hollywood, FL 33020
 July 10, 2012 at 1:00 p.m.
Meeting Minutes

Attendance						
	Members		Present	Absent	Guests	Grantee Staff
1	Creary, K.	Part A Chair	X		Laxamana-Schiffer, K.	Jones, L. (Part A)
2	Washington, L.	Part B Chair		A	Davis, E.	Strong, K. (Part A)
3	Franks, H.			A	Wynn, J.	Mercer, A. (Part B)
4	Hernandez, R.		X			Moore, P. (ADAP)
5	Katz, H.B.		X			
6	Kenny, K.		X			
7	Parker-Maysonet, P.			A		HIVPC Support Staff
8	Marcoviche, W.		X			Hosein, F.
9	Myers, K.		X			LaMendola, B.
10	Perigny, W. J.		X			Rosiere, M.
11	Stoakley, M.		X			
12	Wilkins, D.		X			
	Quorum = 7		9	3		

1. CALL TO ORDER

The Part A Co-Chair called the meeting to order at 1:15p.m.

2. WELCOME AND INTRODUCTIONS

The Part A Co-Chair welcomed everyone and self-introductions were made. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. Attendees were advised that the meeting ground rules are present, for reference. In addition, attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed.

The Part A Chair stated that in view of the public record law, the Statement of Sunshine item be placed on the agenda before the Welcome and Introductions item.

3. MOMENT OF SILENCE

A moment of silence was observed.

4. GROUND RULES AND APPROVALS

Attention was brought to the meeting ground rules, public record under Sunshine law and public comment requirements.

Approval of Today's Agenda

Motion #1	To approve 7/10/12 Meeting Agenda
Proposed by	H. Bradley Katz
Seconded by	Debbie Wilkins
Action	Passed Unanimously

Approval of 6/5/12 Meeting Minutes

Motion #2	To Approve the 6/5/12 Meeting Minutes
Proposed by	H. Bradley Katz
Seconded by	Debbie Wilkins
Action	Passed Unanimously



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5. TESTIMONIALS

There were no testimonials.

6. PUBLIC COMMENT

There was no public comment.

7. Grantee Reports

A. Part A

The Part A Grantee reported on HRSA's (Health Resource Services Administration) listening sessions on the 2013 Reauthorization of Ryan White. The Grantee urged all to listen in and comment in the light of the Supreme Court's decision on the ACA and also with regards to the state Governor's stance on expanding Medicaid.

The committee was asked for input into the Ryan White Part A newsletter. Some suggestions were:

- Condom use for HIV+ persons
- Calendar
- Simplifying the language of the newsletter for the layperson

B. Part B

The Part B Grantee report was provided on expenditures up to May 31 2012: Non Medical Case Management conducted 568 eligibility interviews in May 104 of which were new clients. Medication co-payment served 305 clients of which 11 were new to the program. There were 292 clients served in May for Med Co-Pay and 13 clients served for mail orders. Cost avoidance for Med Co-Pay program for May is \$15,386. Total cost avoidance is \$35,397. Medical Transportation for May 2012:

Part A Bus Passes: There were 153 (31 day) and 154 (10 ride) distributed in May.

Part B Bus Passes: There were 110 (31 day) and 43 (10 ride) distributed in May.

Total combined Bus Passes distributed in May for both Parts: 263 (31 day) and 197 (10 ride).

ADAP Update

The ADAP report through June 27, 2012 was provided: The total ADAP "open" enrollment was 2,694 with 1,716 total ADAP clients being served in the last 30 days. The ADAP Waitlist enrolled 75 clients and the total ADAP/Medicare Part D Enrollment was 176. There were 840 appointments of which 239 (28%) were missed. Clients Served is defined as clients who had at least one "pickup" in the period. The category definitions are as follows:

Category A Clients Served = 15 (CD4 < 200 cells/mm³ and/or CD4% < 14%: A diagnosis of AIDS and/or diagnosis of active opportunistic infection and/or diagnosis of HIV-associated nephropathy.)

Category B Clients Served = 28 (CD4 cell count between 201-350 cells/ mm³: Persons currently on ARV therapy, persons previously on ARV therapy but therapy was interrupted and treatment naïve clients)

Category C Clients Served = 32 (Treatment naïve clients with CD4 cell count > 350 cells/mm³)

Category D Clients Served = 0 (Unknown/Other)

Clients are removed from the Wait List by medical category in the order of earliest enrollment. This serves as a reminder that clients MUST recertify every 6 months or they will lose their position on the Wait List.

8. REVIEW: 2012-2015 Comprehensive HIV Health Services Plan and the National HIV/AIDS Strategy

Guest presented on the National HIV/AIDS Strategy (NHAS) and the 2012/2015 Broward County Comprehensive Plan and how it relates from Washington to the HIV Planning Council and Committees.

9. COMMUNITY EVENTS

The Part A Chair initiated discussion of the first outreach meeting for the year was discussed. The work plan mandates the committee has three events in the community per fiscal year. After discussion, the Committee decided to hold an event in September that would educate HIV+ consumers and get their feedback on key topics, and a second event in November or December. Venues suggested were Shadowood and MODCO, with Sun Serve and Broward House also possible. Topics would include: Navigating the HIV care system, barriers to access services, the impact of the Affordable Care Act on HIV services, the importance of staying in medical care, and



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preventing HIV for positives and negatives. Support staff will research the availability of the venues, schedules (daytime and evening) and draft an event agenda to be reviewed at the next JCCR meeting.

10. REVIEW COMMITTEE’S:

- i. Work Plan
This will be revised so that the goals will be attainable.
- ii. Social Marketing Strategy
In the interest of time this was tabled.
- iii. Policies/Procedures/By-Laws/Mission Statement
In the interest of time this was tabled.
- iv. Grievance Policy/Procedures & Grievance Form
In the interest of time this was tabled.

11. OTHER BUSINESS - Ryan white Reauthorization 2013 – Public Comment Request.

This was covered under the Part A Grantee’s report.

12. NEW BUSINESS

Future training survey for members Membership/Council Development Committee (from MCDC) was distributed to JCCR members. Support staff will report findings to MCDC.

13. PUBLIC COMMENT

There was no public comment.

14. REQUEST FOR INFORMATION/DIRECTIVES (to staff)

Directives to staff were finalized.

15. AGENDA ITEMS FOR NEXT MEETING - Tuesday, August 7, 2012 at 1:00 p.m. Venue: BRHPC.

- ❖ Standing Agenda Items
- ❖ Part B Overview
- ❖ Outreach Event Planning

16. ADJOURNMENT

Without objection the meeting was adjourned at 3:16 p.m.



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JOINT CLIENT/COMMUNITY RELATIONS - ATTENDANCE CY 2012														
# Absences	Count	Member	1/3/12	2/7/12*	3/6/12	4/6/12	5/1/12	6/5/12	7/10/12	Aug	Sep	Oct	Nov	Dec
Part A														
0	1	Creary, K., Co-Chair	√	Quorum	E	E	E	√	√					
0	2	Hernandez, R.	√		√	√	√	√	√					
1	3	Katz, H.B.	A		√	E	√	√	√					
0	4	Perigny, W	√		√	√	√	√	√					
0	5	Marcoviche, W.	√		√	√	√	√	√					
1	6	Parker-Maysnet, P.	Member as of 5/1/12				√	√	A					
Part B														
1	7	Washington, L., Co-Chair	√	Lack of	√	√	√	√	A					
0	8	Franks, H.	√		√	√	√	√	E					
1	9	Stoakley, M.	√		√	E	A	E	√					
0	10	Kenny, K.	Member as of 5/1/12				√	√	√					
0	11	Myers, K.	Member as of 5/1/12				E	√	√					
0	12	Wilkins, D.	Member as of 5/1/12				E	√	√					
Quorum=7			YES	NO	YES	YES	YES	YES	YES					



Ryan White Part B Program

The Part B Program's fiscal year is
April 1, 2012 through March 31, 2013



Funded Programs

- Medication Co Payment Program
- Home Delivered Meals
- Medical Transportation
- Non-Medical Case Management (Part B Core Eligibility)

Part B Core Eligibility Requirements

Clients must bring the following to their eligibility interview:

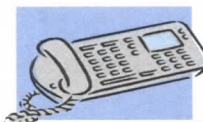
- Proof of HIV (lab with a detectable viral load or a western blot)
- Proof of residency in Broward County
- Proof of income 400% FPL or below (\$44,680 single household)

Part B Core Eligibility Recertification

- Clients must complete recertification for Part B Core Eligibility every 6 months.

Core Eligibility Hours/Phone Numbers

- Broward County Health Dept. provides evening hours two nights each week for the ADAP Program. (5-8 p.m. on Mondays at the Ft. Lauderdale Health Center, 2421 SW 6th Street, Ft. Lauderdale) and (5-8 p.m. on Tuesdays at Paul Hughes Clinic, 205 NW 6th Avenue, Pompano Beach) (954-713-3196)
- Evenings hours are available from 5-6 p.m. for Medical Transportation, AICP and Medication Co Payment Programs upon request at the Broward County Health Dept., Operations Bldg. 2421 SW 6th Street, Ft. Lauderdale. (954-467-4700 ext 5646)



Medication Co-Payment

- Medication Co-Payment Program covers prescription co-pays and deductibles for eligible clients with insurance prescription coverage.
- Clients are required to utilize pharmaceutical co-pay cards for their anti-retroviral medications.
- The program only covers medications on the Part B Formulary
- Clients can only use participating pharmacies



Home Delivered Meals

- Home Delivered Meals serves clients who are homebound and newly released from the hospital.
- Case Managers must submit requests for services with copies of script from the doctor stating the reason for home delivered meals.
- Case Managers can only request services one month at a time.



Medical Transportation

- Bus Pass Administrator distributes bus passes to Part A Case Managers who have eligible clients.
- 10 ride passes are provided to clients with at least one core service.
- 31 day passes are provided to clients with at least two or more core services in a month.
- Clients must be at 150% FPL or less (\$16,755 single household), live in Broward County and be HIV positive, have at least one core service a month to be eligible for a pass.

Non-Medical Case Management

- Non-Medical Case Mangers conduct Core Eligibility for Part B Services
- Clients must re-determine eligibility every 6 months.
- Clients can call 954-467-4700 ext 5646 to schedule an appointment to do Core Eligibility for Medication Co Payment, AICP and Medical Transportation.
- Clients who need to certify eligibility for ADAP must call 954-713-3196 to schedule an appointment.



OTHER SEPARATELY FUNDED PART B PROGRAMS IN BROWARD COUNTY

AIDS DRUG ASSISTANCE PROGRAM (ADAP)

Broward County Health Department receives medications valued at approximately \$18 - \$20,000,000 through the ADAP Program in Tallahassee each year.

- ADAP provides antiretroviral medications for eligible clients.
- The medications are distributed through the Broward County Health Department.
- The eligibility process for ADAP is a two step process:
 - 1) Part B Core Eligibility (conducted every 6 months)
 - 2) Must be enrolled into ADAP by providing copies of current labs no more than 6 months old and have a current prescription for antiretroviral medications

OTHER SEPARATELY FUNDED PART B PROGRAMS IN BROWARD COUNTY

AIDS INSURANCE CONTINUATION PROGRAM

(AICP) pays for insurance premiums up to \$750 per month for eligible clients.

- The eligibility process for AICP is a two step process:
 - 1) Part B Core Eligibility (conducted every 6 months)
 - 2) Client must apply to AICP by contacting one of the authorized providers in Broward County:
 - **Broward House 954-322-4749 ext 2249**
 - **Wellness Center 954- 568 0152**

Additional Information

- The Part B Medication Co Payment Program serves approximately 300-330 clients each month. (Approximately 530 unduplicated clients each year)
- Part B non-medical case management staff conduct core eligibility for approximately 500 clients each month.
- Part B home delivered meals program serves up to 10 clients a year.
- The Bus Pass Administrator distributes approximately 300-450 bus passes to Broward County Part A Case Management providers each month.

Contacts for Part B Program

- Ann Mercer Part B Administrator
(954-467-4700 ext 5650)
- Serena Cook 954-467-4700 ext 5648
(SFAN, Home Delivered Meals, Home Health Services)
- Myisha Roberson 954-467-4700 ext 5646
(Appointments Core Eligibility for Medication Co Payment, AICP and Medical Transportation)
- ADAP Core Eligibility Apts. /ADAP enrollment 954-713-3196
- Shirley Scott –954-467-4700 ext 5647
Medication Co Payment Invoices
- Bonnie Majcher 954-467-4700 ext 5658
Bus Pass Administrator contact for Case Managers to schedule apt to pick up passes





COMMUNITY OUTREACH / EDUCATION EVENTS

Questions for JCCR to decide

1. Location and date. (See details on MODCO and Shadowood on pgs 2-3)
 - a) MODCO. Pros: HIV+ residents are required to attend a monthly three-hour meeting, and the agency will let JCCR use the entire time. Cons: The meeting goes from 9 am to noon on Wednesday (Sept. 5), not at the JCCR regular meeting time.
 - b) Shadowood. Pros: HIV+ residents live there and will attend. JCCR can go there any day of the week. Cons: Best time to reach residents is after dinner.
2. Do you hold the education session during your regular business meeting or as a separate event before or after your meeting?
 - a) If the session were part of the meeting, some consumers may feel intimidated by the formality or having to introduce themselves in public.
 - b) If the business meeting follows the event, the consumers can stay to attend it and see how the Committee operates, in case they want to get involved.
3. Hours of the event
MODCO and Shadowood suggested keeping the educational session to 60-90 minutes. They suggested ending the session by letting consumers give feedback on their experiences with the care system. Afterward, there could be an informal time when consumers mingle with the Committee, have refreshments and ask questions.
4. Educational topics to be covered
The four discussed in July by the JCCR were: Prevention for Positives, the Need to Stay in Care, Advice for Navigating the Services, and the Affordable Care Act. MODCO and Shadowood preferred the first three.
5. Education session presenters
MODCO suggested finding a physician or expert to talk about prevention and the importance of staying in medical care, to lend credence to the message.

POTENTIAL LOCATIONS FOR JCCR COMMUNITY MEETING

Mount Olive Development Corp.

Fort Lauderdale

Contact: Sharon Bryant, director of operations and property management

954-764-6488, sbryant356@bellsouth.net

Status: MODCO is open to having community meetings there, others have done so. She considers it a positive for the clients.

When:

1. Monthly tenant meeting. Most tenants are HIV positive. They are required to attend monthly meeting on 5th of the month from 9 am to noon. 20-30 usually attend.
2. Weekly “mentor and life skills” meetings. These start at 9 am on the 1st and 2nd Wednesday for men and women, 3rd Wednesday for women only and 4th Wednesday for men (some HIV+, some are recently released from jail). 20-25 usually attend. MODCO also holds these at 6 pm on 1st and 3rd Mondays.

- 9 am Wednesday Sept. 5 will be a combined tenant and mentor meeting.

Logistics:

She would open the 9 am meeting with a few announcements and tell people about the JCCR program. Then JCCR would begin the educational session. An hour or 90 minutes would be good. Allow time for questions and for client feedback. Refreshments for the clients would be a good attraction. JCCR would be welcome to hold its regular business meeting as well. JCCR could use the entire three-hour meeting time.

She said it would be no problem to make the arrangements after the 8/7/12 JCCR meeting.

Desired educational subjects:

She recommends we provide information on the fact that HIV is NOT a death sentence, which some still believe despite her staff’s counseling. It would help clients to hear from experts and other HIV+ people that the virus can be managed with medications, that they can live healthy lives and that it is crucial to stay on the drugs.

She favored giving information on prevention for positives, and why that is important.

She liked the idea of giving information on how to navigate services.

She said this group would be in good position to give feedback about barriers to accessing services, because they experience some.

Shadowood II

307 SW Fifth St., Fort Lauderdale

Contact: Ken Fountaine, executive director

954-462-3719, 954-462-3756, shadowII@bellsouth.net

Status: He is open to having community meetings there, others have done so. He called it a positive for the clients.

When:

All residents are HIV+ and present in a single location.

Any day is OK. The best time is after dinner, at 630 or 7 pm. At past events, clients have contributed to the discussion.

Logistics:

He needs only a couple weeks notice to tell the residents and make plans. His staff can get feedback in advance from clients about what they want to hear about in the educational sessions.

He said it would be no problem to wait to make the arrangements until after the 8/7/12 JCCR meeting.

Desired educational subjects:

He said clients are nervous about funding, and fear losing services. They worry about the future of ADAP.

Staying in care, prevention for positives and navigating the system are all be good topics. They can tell the JCCR about barriers to care.

Some clients struggle to read, do math and keep appointments. If they must have multiple recertifying appointments, that's a hardship they can describe.

Most do not know about their rights or the grievance procedure. That would be a good topic.

Flow Chart for PLWH

PLWH Caucus/Committee Strategies

Step 1

Work to develop a strong and active consumer caucus or committee

Step 2

Provide staff support

Step 3

Consider possible activities based on analysis of key information

Step 4

Discuss and reach understanding of what works best in particular communities

Step 5

Support development of strong PLWH leadership with the ability to organize and delegate work

Step 6

Choose one or more models or activities, such as:

- Outreach at community events to increase awareness of Ryan White Services and points of entry into care
- Community conference or educational forum designed to attract and engage PLWH who are not in care
- Individual support to PLWH to help them enter care

Step 7

Arrange for needed resources

Step 8

Determine and meet PLWH training needs

Step 9

Implement, providing support for development of strong PLWH leadership with the ability to organize and delegate work

Step 10

Evaluate your efforts

Learn + Link + Live

Conference Outline

Theme of the Learn+Link+Live Conference

"The Learn+Link+Live Conference will empower HIV-positive consumers to proactively manage their needs by providing them with essential information, community resources, and useful tools to monitor and maintain their health."

Purpose of the Learn+Link+Live Conference

The Learn+Link+Live Conference is an educational forum that provides resources to help consumers obtain services and self-manage their health care. Peer co-facilitators may assist the attendees in trusting that the presentations are in their best interests.

Possible topics:

1. HIV basics—short, concise information about HIV ("nuts and bolts Q&A")
2. Why it's important to access medical care and medications
3. Treatment adherence
4. Agency overview with descriptions of services and contact information
5. Housing information
6. How to qualify and apply for Ryan White Title I services
7. Self-management issues regarding the life-changing steps in family life, work, appointment management, exercise, nutrition, support groups, etc.
8. Medication trial programs
9. Ryan White Planning Council overview
10. National organizations for advocacy and support
11. Appropriate non-Title I HIV service/care/wrap providers (but not private doctors).
12. Counseling and testing
13. Disclosure, stigma and discrimination
14. Stress reduction
15. Agency introductions
16. Overview of their grievance processes presented by the Administrative Agent/Quality Management
17. Attendees will be surveyed to identify their interests for the next forum

Learn+Link+Live Conference Learning Objectives

1. Provide information regarding the services available to HIV-positive individuals in Maricopa and Pinal County
2. Educate consumers about how to apply for Ryan White Title I services, and what information they will need to provide
3. Educate consumers as to why it is so important to remain in primary health care
4. Educate consumers as to why it is so important to maintain their medication regimen
5. Steps you must take to keep you from spreading HIV
6. Survey attendees to identify issues of importance for next conference
7. Survey attendees on conference effectiveness and revisions to the event

Learn+Link+Live Conference Emotional Objectives

1. Taking responsibility for managing and directing your healthcare is important
2. Consumers feel empowered to manage and direct their health care
3. Confidence in safe sex behaviors and reduced anxiety about retransmission
4. Connections among services highlight that medical care is part of a continuum of services all meant to support health
5. Sense of empathy and support from others who are affected by the disease and living with similar circumstances

Learn+Link+Live Conference Behavioral Objectives

1. Attendees of the Care Conference will stay in care
2. Attendees will maintain their medication regimens
3. Attendees will understand what Ryan White services are available and how to qualify and apply
4. Attendees will experience improved health because they know where to go for services and are tracking their own health
5. Attendees will have the tools to make informed decisions about treatment and provide better information to their healthcare provider
6. Attendees will make and keep appointments

Who is the primary target market for the Learn+Link+Live Conference?

1. Ryan White eligible HIV positive people from Maricopa and Pinal Counties, and other HIV-positive people, especially individuals who are new to care or returning to care (Out-of-Care)
2. Other HIV positive consumers

How will the Learn+Link+Live Conference be marketed?

1. Advertising in a variety of local magazines/newspapers
2. Post at various public locations (bars, bookstores, etc.)
3. word of mouth by other PLWH
4. Post at HIV health care and social service agencies
5. Include in mailings from Title I agencies as part of their on-going correspondence
6. Post on the websites of service providers
7. Notify hospitals and clinics
8. Notify HIV-specialized docs
9. It will be announced at the regional planning group meetings, ADAP meetings, "doc talks" and other events targeting the HIV community and/or those at risk

Additional notes

1. Conference must be focused on Ryan White eligible people, but can include other HIV positive individuals
2. Use graphics as much as possible to describe services or steps to receive care
3. Clearly define expectations of keeping appointments and maintaining medication regimens
4. Stress that self-managing your health care needs is essential
5. Execution of the event should be polished and professional without incurring great expense

Learn+Link+Live

Participant Evaluation

	Strongly Disagree		Neutral		Strongly Agree
I liked the overall quality of the presentations:	☐	☐	☐	☐	☐
I liked the choice of session topics:	☐	☐	☐	☐	☐
I learned a lot by attending:	☐	☐	☐	☐	☐
I liked the quality of the materials provided:	☐	☐	☐	☐	☐
A day-long event was the right length of time:	☐	☐	☐	☐	☐
The day of the week was good for me:	☐	☐	☐	☐	☐
The meeting rooms were comfortable:	☐	☐	☐	☐	☐
The event location was easy to find:	☐	☐	☐	☐	☐
The event location was convenient:	☐	☐	☐	☐	☐
I liked the quality of the food:	☐	☐	☐	☐	☐
I liked the food choices:	☐	☐	☐	☐	☐
Any special needs I had were met:	☐	☐	☐	☐	☐
The volunteers and staff were friendly:	☐	☐	☐	☐	☐
I would recommend this event to others:	☐	☐	☐	☐	☐

Of the sessions you attended, which did you like the most? _____

Why? _____

(Continued on the back)

Suggestions or comments about today's event:

What topics would you like to see presented at a future event?

I receive Ryan White Part A services: ☐ Yes ☐ No ☐ Not Sure ☐ I have in the past, but not now

I have seen a doctor in the past year (HIV related): ☐ Yes ☐ No

I am currently taking HIV medications: ☐ Yes ☐ No

I have had HIV lab work (CD4 and/or viral load) done in the past year: ☐ Yes ☐ No

I am: ☐ Male

☐ Female

☐ Transgendered

Race/Ethnicity:

☐ White, Not Hispanic

☐ Black, Not Hispanic

☐ Hispanic

☐ American Indian/Alaska Native

☐ Asian/Pacific Islander

☐ More than one race

Age: ☐ 13 to 19

☐ 20 to 44

☐ 45 and over

☐ Decline to say

☐ I would like to be informed of upcoming Learn+Link+Live HIV Education Conferences

☐ I would like information about free or low-cost HIV medical care and supportive services

Please Print

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Phone: _____