

Tab 2 PRIMARY CARE PROVIDER SURVEY

As part of the *Stay Connected* project, all primary care providers at this clinic are being asked to complete a very brief survey periodically. Your participation on this survey is voluntary. Your consent to participate is implied by completing and returning this survey.

Your name will not appear on this survey but we will ask you to provide the last two digits of your social security number and the month you were born as a means of linking your surveys across time.

If you decide to participate, please seal your completed survey in the attached envelope and return to the study coordinator (name of person).

Last two digits of your social security number: _____

Month of your birth (check one):

- | | |
|-----------------------------------|------------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> July |
| <input type="checkbox"/> February | <input type="checkbox"/> August |
| <input type="checkbox"/> March | <input type="checkbox"/> September |
| <input type="checkbox"/> April | <input type="checkbox"/> October |
| <input type="checkbox"/> May | <input type="checkbox"/> November |
| <input type="checkbox"/> June | <input type="checkbox"/> December |

1. Today's Date: ____/____/____ (MM/DD/YYYY)

2. Study Site

- | | |
|---|--|
| <input type="checkbox"/> Alabama-Birmingham | <input type="checkbox"/> Johns Hopkins |
| <input type="checkbox"/> Boston | <input type="checkbox"/> Miami |
| <input type="checkbox"/> Houston/Thomas St. | <input type="checkbox"/> SUNY Brooklyn |

3. What type of medical provider are you?

- MD/DO
 PA
 NP

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 0.67 hours per respondent annually, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.

4. What is your sex?

- Female
 Male

5. Think back to the last clinic session in which you saw patients for HIV primary medical care. How many of these patients did you talk to about the importance of keeping clinic appointments?

- Every patient (100%)
 Almost every patient (80- 99%)
 More than half of the patients (60-79%)
 About half of the patients (40-59%)
 Fewer than half of the patients (20-39%)
 Very few patients (1-19%)
 No patients (0%)

6. Think back to the last clinic session in which you saw patients for HIV primary medical care. With how many of these patients did you point out the exam room poster showing that regular clinic attendance can improve CD4 and viral load?

- Every patient (100%)
 Almost every patient (80- 99%)
 More than half of the patients (60-79%)
 About half of the patients (40-59%)
 Fewer than half of the patients (20-39%)
 Very few patients (1-19%)
 No patients (0%)

7. Compared to before the *Stay Connected* project started, how much are you talking to patients about the importance of keeping clinic appointments?

- Much less than before
 Somewhat less than before
 About the same as before
 Somewhat more than before
 Much more than before

8. Compared to before the *Stay Connected* project started, how much attention is the clinic giving to the importance of patients keeping clinic appointments?

- Much less than before
- Somewhat less than before
- About the same as before
- Somewhat more than before
- Much more than before