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"Informing the Development of Mobile Apps for HIV Prevention, Treatment, & Care"

2c. Study Screener for HIV Care Providers

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## **Participant Screening Form for HIV Care Providers**

Date:		
Screening ID:	Eligibility Status: 🗌 No	Yes

"Hi. I work with a project that is that funded by The Centers for Disease Control and Prevention (CDC) to develop a mobile application (app) for HIV care and treatment, a research program. We are doing a research study to learn more about the HIV care and treatment needs of persons who live with HIV. Can I ask you a few questions to see if you are eligible to take part in the study?

It will only take a minute or two. Taking part is up to you. Your responses will be kept private. You can refuse to answer a question or stop at any time. The information you give us will be joined with everybody else's information so that we can describe the group, not individuals, taking part in the study. Are you interested?"

If you are eligible and decide to take part, you will receive \$50 as a token of appreciation for participation in a focus group session.

1. What is your age? \_\_\_\_\_ years old

[If under age 18...] I'm sorry but you are not eligible to participate in this study at this time. You have to be at least 18 years old to be in the study. Thank you for your interest.

Are you comfortable speaking and reading English, enough to participate in a program in English?
No [Ineligible]
Yes

[If not comfortable in English ...] I'm sorry but you are not eligible to participate in this study at this time. We are recruiting men who are comfortable speaking and reading English enough to participate in a program in English. Thank you for your interest.

3. Do you provide care for persons living with HIV?

No	
Yes	•••

## If eligible:

"You are eligible to take part in the study. There will be **a 1**.5 hour focus group session and you will receive \$50 as a token of appreciation. Are you interested in taking part in the study?"

## For those who are ineligible:

"I'm sorry but you are not eligible to take part in this study at this time. There are many possible reasons why people are not eligible to be in the study, reasons that were decided earlier by the researchers. We appreciate your interest in this study and willingness to consider helping to improve HIV programs in our community. Thank you."

## For ineligibles, if applicable...

"We do, however, have other studies that you may be eligible to participate in. Would you like me to refer you to those studies?"

ELIGIBLE: \_\_\_\_ No

\_\_\_\_Yes, date of baseline visit \_\_\_\_/\_\_\_/\_\_\_\_/\_\_\_\_