

## Introduction

Dear Health Department Colleague,

HIV partner services (PS) is a core component of CDC-funded HIV prevention programs at local, state, and territorial health departments. The Program Evaluation Branch in the Division of HIV/AIDS Prevention at the Centers for Disease Control (CDC) is interested in understanding how HIV Partner Services (PS) programs are organized within a health department and how HIV PS activities are implemented by CDC-funded health departments. We will use this information to gain a better understanding of the structure and functions of HIV PS programs across CDC-funded health departments, identify gaps in services within PS programs, and provide enhanced PS technical assistance to state, territorial, and local health departments.

This assessment, which will take approximately 60 minutes to complete, will ask you about the current structure of your HIV partner services program, its functions, and its implementation processes. Please note that this is not an assessment of your organization's performance. Your participation is voluntary, and you can decline to respond to some or all questions in this assessment.

The assessment tool can be completed all at once or you can start it at one time and return to complete it later. If you have questions, please contact Dr. Michele Rorie at [mrorie@cdc.gov](mailto:mrorie@cdc.gov).

Thank you very much for taking the time to complete the assessment and for sharing information about your partner services program.

**Program Evaluation Branch**  
**Division of HIV/AIDS Prevention, CDC**

CDC estimates the average public reporting burden for this collection of information as 60 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

## Definitions and Participant Information

### DEFINITIONS

For the purpose of this assessment, the following definitions apply:

**Acute HIV infection:** The phase of HIV-1 disease occurring immediately after transmission, during which HIV-1 RNA or p24 antigen are detectable in serum or plasma, but anti-HIV-1 antibodies are not detectable (i.e., HIV-1 antibody test result is negative or indeterminate).

**Recent HIV infection:** The phase of HIV-1 disease occurring up to six months after infection, during which detectable anti-HIV-1 antibodies develop, characterized by a current positive test for HIV-1, with a documented negative HIV test within the previous six months.

**Established HIV infection or infection of unknown duration:** HIV-1 disease in which anti-HIV-1 antibodies are detectable, but there is no evidence that infection occurred within the previous six months (e.g., there is no documentation of a negative HIV test within the previous six months).

**Newly reported HIV infection:** HIV infection that has not previously been reported to the health department's HIV surveillance program.

**Previously reported HIV infection:** HIV infection that has previously been reported to the health department's HIV surveillance program and is subsequently reported again.

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1. Please fill in your work-related information.

Job title

Job description

Number of years in current position

Health department name

Health department address (Street, City,  
State, Zip Code)

## Goals, Organization, and Resources

2. Which of the following are **major** aims of your health department's HIV partner services activities? (Check all that apply.)

- Identify and intervene in **HIV transmission chains, networks, and clusters**
- Identify persons with **acute HIV infection and link them to care**
- Identify persons with **previously undiagnosed, established HIV infection, or infection of unknown duration, and link them to care**
- Identify persons with **previously diagnosed infection who are not in care and link them to care**
- Identify **HIV-negative persons at risk for infection and link them to PrEP**
- Identify **HIV-negative persons at risk for infection, who decline or are not eligible for PrEP, and re-test them periodically** (e.g., every 3-6 months, annually)

3. Where is the HIV partner services program **located** within your health department organizational structure?

- Within the HIV program only
- Within the STD program only
- Within both HIV program and STD program
- Within an integrated HIV/STD program
- Other (please describe in box below)

4. What **sources of funding** are used to support HIV partner services in your jurisdiction? (Check all that apply.)

- CDC Division of HIV/AIDS Prevention CDC
- Division of STD Prevention
- State/territory government
- County government
- Local (e.g., city) government
- Other federal and non-federal sources (please describe in box below)

5. What is the **approximate total annual budget** for HIV partner services in your jurisdiction? (**Note:** Please use this year's or last year's budget to provide your estimate in box below.)

6. What is your **primary health department affiliation for the purpose of this assessment?**

- State/territory health department..... **Skip to Question # 7**
- CDC directly funded city/county health department..... **Skip to Question # 11**

## State/Territory Health Department HIV Partner Services Program -- Staffing & Training

7. What health department staff conduct HIV partner services in your state/territory?

	No	Yes
Partner service specialists (e.g., Disease Intervention Specialists) in the state/territorial health department	<input type="radio"/>	<input type="radio"/>
Other staff (e.g., public health nurses) in the state/territorial health department	<input type="radio"/>	<input type="radio"/>
County health department staff or Local health department staff (other than those from directly funded city/county health departments)	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

8. Of the persons indicated above as conducting partner services, which persons receive specialized HIV partner services training?

	No	Yes	Not applicable
Partner service specialists (e.g., Disease Intervention Specialists) in the directly funded state/territorial health department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other staff (e.g., public health nurses) in the directly funded state/territorial health department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
County health department staff or Local health department staff (other than those from directly funded city/county health department)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

9. What is the approximate total number of filled full-time equivalent partner services specialist positions (DIS, care navigators, etc.) in your state/territory, including health department employees, federal assignees, and contractor positions? (**Note: Do not include positions in cities/ counties directly funded by CDC for HIV prevention.**)

State/territory-level FTEs

County/city/local level FTEs

Federal FTE Assignees

Contractor FTE Positions

10. What is the approximate total number of **unfilled (or currently open)** full-time equivalent **partner services specialist positions** in your state/territory, including health department employees, federal assignees, and contractor positions? (*Note: Do not include positions in cities/ counties directly funded by CDC for HIV prevention.*)

State/territory-level FTEs	
County/city/local level FTEs	
Federal FTE Assignees	
Contractor FTE Positions	

## CDC Directly Funded City or County Health Department PS Program -- Staffing & Training

11. What health department staff **conduct HIV partner services** in your directly funded city or county?

	No	Yes
Partner service specialists (e.g., Disease Intervention Specialists) in the city/county health department	<input type="radio"/>	<input type="radio"/>
Other staff (e.g., public health nurses) in the city/county health department	<input type="radio"/>	<input type="radio"/>
State health department staff	<input type="radio"/>	<input type="radio"/>
Local (e.g., sub-city) health department staff	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)		

12. Of the persons indicated above as conducting partner services, which persons receive **specialized HIV partner services training**?

	No	Yes	Not applicable
Partner service specialists (e.g., Disease Intervention Specialists) in the city/county health department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other staff (e.g., public health nurses) in the city/county health department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
State health department staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local (e.g. sub-city) health department staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)			

13. What is the approximate total number of **filled** full-time equivalent **partner services specialist positions** in your directly funded city or county, including health department employees, federal assignees, and contractor positions?

County/city/local level FTEs	
State/territorial level FTE Assignees to County/City	
Federal FTE Assignees to County/City	
Contractor FTE Positions	

14. What is the approximate total number of **unfilled (or currently open)** full-time equivalent **partner services specialist positions** in your directly funded city or county, including health department employees, federal assignees, and contractor positions?

County/local level FTEs

State/territorial level FTE Assignees to  
County/City

Federal FTE Assignees to County/City

Contractor FTE Positions



## Other Categories of Persons Authorized to Conduct Partner Services

15. Are any categories of **persons outside of health department authorized** to (1) elicit partner information from index patients with HIV (i.e., "**partner elicitation**") or (2) notify partners of their possible exposure to HIV on behalf of the health department in your jurisdiction (i.e., "**partner notification**")?

- No ..... **Skip to Question # 20**
- Yes

16. If **yes**, what categories of persons outside of the health department are authorized to conduct **partner elicitation** with index patients?

	No	Yes
Physicians	<input type="radio"/>	<input type="radio"/>
Physician assistants	<input type="radio"/>	<input type="radio"/>
Advanced practice nurses or nurse practitioners	<input type="radio"/>	<input type="radio"/>
Registered or licensed practical nurses	<input type="radio"/>	<input type="radio"/>
HIV test providers	<input type="radio"/>	<input type="radio"/>
Community-based organization staff	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

17. What categories of persons outside of the health department are authorized to conduct **partner notification**?

	No	Yes
Physicians	<input type="radio"/>	<input type="radio"/>
Physician assistants	<input type="radio"/>	<input type="radio"/>
Advanced practice nurses or nurse practitioners	<input type="radio"/>	<input type="radio"/>
Registered or licensed practical nurses	<input type="radio"/>	<input type="radio"/>
HIV test providers	<input type="radio"/>	<input type="radio"/>
Community-based organization staff	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

18. Of non-health department persons authorized to conduct partner services on behalf of the health department, which are required to **receive specialized HIV partner services training**?

(**Note:** If not authorized to conduct any PS activity, indicate by selecting "Not applicable".)

	No	Yes	Not applicable
Physicians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physician assistants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advanced practice nurses or nurse practitioners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registered or licensed practical nurses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV test providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community-based organization staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

19. Of non-health department persons authorized to conduct partner services on behalf of the health department, which are required to **report partner information** to health department partner services program?

(**Note:** If not authorized to conduct any PS activity, indicate by selecting "Not applicable".)

	No	Yes	Not applicable
Physicians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physician assistants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advanced practice nurses or nurse practitioners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registered or licensed practical nurses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIV test providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community-based organization staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

## Other Partner Services Activities and Policies

20. Which of the following **activities/policies** are practiced in your health department's HIV partner services program?

	No	Yes
Molecular epidemiology or molecular surveillance is used in conjunction with your health department's HIV partner services program	<input type="radio"/>	<input type="radio"/>
Partner services specialists have access to HIV surveillance database	<input type="radio"/>	<input type="radio"/>
Partner services specialists are allowed to use social media (e.g., Facebook, hook-up apps/websites) for field work	<input type="radio"/>	<input type="radio"/>
HIV and STD programs routinely share information or have integrated data systems	<input type="radio"/>	<input type="radio"/>

## Reporting Requirements for Index Patients with HIV Infection

21. What requirements are there in your jurisdiction for **healthcare providers or HIV test providers** to report persons testing positive for HIV **directly to the partner services program**?

	No	Yes
Persons with <b>acute infections</b> must be reported directly to HIV partner services program	<input type="radio"/>	<input type="radio"/>
If "Yes", enter the <b>number of days after diagnosis</b> within which the case must be reported in the box below. (Note: if there is no required time for reporting, enter "None".)		
<input style="width: 100%;" type="text"/>		

Persons with **established infections or infections of unknown duration** must be reported directly to HIV partner services program

No       Yes

If "Yes", enter the **number of days after diagnosis** within which the case must be reported in the box below. (Note: if there is no required time for reporting, enter "None".)

22. What requirements are there in your jurisdiction for **HIV surveillance staff** to relay HIV case reports **to the partner services program**?

	No	Yes
Relay of case reports of persons with <b>acute infections</b> to partner services program	<input type="radio"/>	<input type="radio"/>
If "Yes", enter <b>the number of days within which the case must be relayed to the partner services program after it is received by the surveillance program</b> . (Note: if there is no required time for reporting, enter "None".)		
<input style="width: 100%;" type="text"/>		

Relay of case reports of persons with **established infections or infections of unknown duration** to partner services program

No       Yes

If "Yes", enter **the number of days within which the case must be relayed to the partner services program after it is received by the surveillance program**. (Note: if there is no required time for reporting, enter "None".)

23. If relay of case reports **from HIV surveillance to partner services program** is required, what method is used to relay the reports? Check all that apply. (Note: Select "Not applicable" if relay of cases is not required for one or more groups.)

	Case-by- case relay	<input type="checkbox"/>	Batch or periodic relay	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Relay method for persons with acute infection						
Relay method for persons with established infection or infection of unknown duration						

## Locating and Contacting Index Patients with HIV Infection

24. Which of the following **methods** do partner services workers in your jurisdiction use for **locating index patients?**

	No	Yes
Review of HIV case reports	<input type="radio"/>	<input type="radio"/>
Review of other available databases (STI partner services database, DMV database, jail or prison databases)	<input type="radio"/>	<input type="radio"/>
People search tools (e.g., Accurant)	<input type="radio"/>	<input type="radio"/>
Social media platforms (e.g., Facebook, hook-up apps/website)	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)		
<input type="text"/>		

25. Which of the following **methods** do partner services workers in your jurisdiction use for **contacting index patients?**

	No	Yes
Social media platforms (e.g., Facebook; hook-up apps/websites)	<input type="radio"/>	<input type="radio"/>
Text messaging	<input type="radio"/>	<input type="radio"/>
Telephone call	<input type="radio"/>	<input type="radio"/>
E-mail messaging	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)		
<input type="text"/>		

## Actions Taken for Index Patients with Newly Reported HIV Infection

26. Are **ALL** persons with HIV who are (1) newly reported to your health department's HIV surveillance program and (2) able to be located, contacted for interview by a health department partner services worker?

No

Yes..... skip to question 28

27. If **not**, which of the following are **reasons** some persons with newly reported HIV infection are **not contacted** for interview by a health department partner services worker?

	No	Yes
Insufficient number of partner services workers to interview all persons with newly reported HIV	<input type="radio"/>	<input type="radio"/>
Partner services declined by the person's diagnosing provider	<input type="radio"/>	<input type="radio"/>
Concern about the safety of the partner services worker	<input type="radio"/>	<input type="radio"/>

Other (please describe in the box below)



28. In what **order** are persons with newly reported HIV infection (that is, newly reported index patients) contacted for interview?

- Contacted and interviewed in the order in which case reports are received
- Prioritized according to specified criteria to determine order in which they will be contacted and interviewed
- Other (Please specify)

| \_\_\_\_\_ |  
\_\_\_\_\_

29. If newly reported index patients are prioritized for contact and interview, which of the following are used as **criteria for prioritizing** them?

	No	Yes
Index patient known to be <b>pregnant</b>	<input type="radio"/>	<input type="radio"/>
Index patient known to have a <b>partner who is pregnant</b>	<input type="radio"/>	<input type="radio"/>
Index patient suspected of, or known to be, <b>engaging in behaviors that substantially increase risk of transmission</b> to multiple other persons (e.g., multiple concurrent sex or drug-injection partners)	<input type="radio"/>	<input type="radio"/>
Index patients <b>co-infected with one or more other STIs</b> (e.g., syphilis)	<input type="radio"/>	<input type="radio"/>
Index patients known to have a <b>high HIV viral load</b> (>50,000 copies per mL)	<input type="radio"/>	<input type="radio"/>
Index patients have evidence of <b>acute infection</b> (HIV RNA test positive and HIV antibody test negative)	<input type="radio"/>	<input type="radio"/>
Index patient has signs or <b>symptoms of primary HIV infection</b>	<input type="radio"/>	<input type="radio"/>
Index patient has evidence of <b>recent infection</b> (current positive HIV antibody test with history of negative test within the previous 6 months)	<input type="radio"/>	<input type="radio"/>

Other (please describe in the box below)

30. What actions are taken by partner services workers for index patients **with newly reported acute HIV infection?**

	No	Yes, for some	Yes, for all
Locate and contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verify HIV care status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited ART (dose-pack within 24 hrs.) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care, if not already in care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (clustering)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Develop plan for notifying partners and ensuring their appropriate evaluation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. What actions are taken by partner services workers for index patients **with newly reported established HIV infection?**

	No	Yes, for some	Yes, for all
Locate and contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verify HIV care status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited ART (dose-pack within 24 hrs.) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care, if not already in care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (clustering)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Develop plan for notifying partners and ensuring their appropriate evaluation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. For index patients with newly reported infection, is there a program standard for the length of the interval between receipt of report and first contact with the index patient?

- No -- program does not have a standard for this interval
- Yes -- program has a single standard for this interval, regardless of the characteristics of the index patients
- Yes -- program has different standards for this interval, based on the characteristics of the index patients

33. If **yes** (i.e., your program has a single or different standards), please specify the length of the interval, in days, for contacting index patients.

*(Note: If your program has a single standard for all index patients, enter the interval in # of days in the first box; if different standards, enter the interval in # of days for index patients with acute or established infections separately.)*

**Single** standard: For **all** index patients with   
HIV infection

**Different** standard: For index patients with   
**acute infection**

**Different** standard: For index patients with   
newly reported **established infection**

34. What level of referral or linkage services is provided to assist newly reported index patients with accessing to HIV medical care, if they are not already in care?

- No referral/linkage to care service is provided
  - Referral only
  - Referral and assistance with scheduling an appointment
  - Active linkage (e.g., accompany index patients to their appointment), with follow up
-

**Actions Taken for Index Patients with Previously Reported HIV Infection**

35. Are persons with HIV who have previously been reported to the health department's HIV surveillance program, and are subsequently reported again, contacted for interview by a health department partner services worker?

- No, previously reported persons are not contacted for interview ..... **Skip to Question # 40**
- Yes, some but not all are contacted for interview
- Yes, all are contacted for interview

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36. If some previously diagnosed persons are **not contacted**, which of the following are used as criteria to determine who will be contacted for interview?

	No	Yes
Index patient is known to be pregnant	<input type="radio"/>	<input type="radio"/>
Index patient known to have a partner who is pregnant	<input type="radio"/>	<input type="radio"/>
Index patient suspected of or known to be, engaging in behaviors that substantially increase risk of transmission to multiple other persons (e.g., multiple concurrent sex or drug-injection partners)	<input type="radio"/>	<input type="radio"/>
Index patient previously reported with HIV, now reported as infected with one or more STIs (e.g., syphilis)	<input type="radio"/>	<input type="radio"/>
Index patient known to have high HIV viral load (>50,000 copies per mL)	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

37. What actions are taken by partner services workers for index patients **with previously reported HIV infection?**

	No	Yes, for some	Yes, for all
Locate and contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verify HIV care status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited ART (dose-pack within 24 hrs.) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care, if not already in care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (clustering)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Develop plan for notifying partners and ensuring their appropriate evaluation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

38. For index patients with previously reported infection, is there a program **standard for the length of the interval between receipt of report and first contact with the index patient?**

- No -- program does not have a standard for this interval
- Yes -- program has a standard for this interval. Please specify the length of this interval, in number of days, in the box below.

39. What level of **referral or linkage services** is provided to assist previously reported index patients with accessing to HIV medical care, if they are not already in care?

- No referral/linkage to care service is provided
- Referral only
- Referral and assistance with scheduling an appointment
- Active linkage (e.g., accompany index patients to their appointment), with follow up



## Locating, Contacting, and Notifying Partners

40. Are **ALL** named sex and drug-injection **partners** of index patients with newly diagnosed or reported HIV infection **contacted** by health department partner services worker for notification of their possible exposure to HIV?

*(Note: In this context, a “named partner” is a partner for whom the index patient provides enough identifying information that there is a reasonable likelihood the partner can be located and notified of their possible exposure to HIV.)*

No

Yes..... **Skip to Question # 42**

41. If not, which of the following are reasons some named partners are not contacted for notification by a health department partner services worker?

	No	Yes
Insufficient number of partner services workers to locate and contact all named partners	<input type="radio"/>	<input type="radio"/>
Partner already known to be HIV-positive	<input type="radio"/>	<input type="radio"/>
Risk of domestic or partner violence (e.g., history of abuse)	<input type="radio"/>	<input type="radio"/>
Concern about the safety of the partner services worker	<input type="radio"/>	<input type="radio"/>
Insufficient identifying or contact information	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

42. Which of the following **methods** do partner services workers in your jurisdiction use for **locating partners**?

	No	Yes
Review HIV case reports	<input type="radio"/>	<input type="radio"/>
Reviews of other available databases (e.g., STI partner services database, DMV database, jail or prison database)	<input type="radio"/>	<input type="radio"/>
People search tools (e.g., Accurint)	<input type="radio"/>	<input type="radio"/>
Social media platforms (e.g., Facebook, hook-up apps/website)	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)		
<input type="text"/>		

43. Which of the following **methods** do partner services workers in your jurisdiction use for **contacting partners for notification**?

	No	Yes
Social media platforms (e.g., Facebook; hook-up apps/websites)	<input type="radio"/>	<input type="radio"/>
Text messaging	<input type="radio"/>	<input type="radio"/>
Telephone calls	<input type="radio"/>	<input type="radio"/>
E-mail messaging	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)		
<input type="text"/>		

44. In what **order** are named partners contacted for **notification**?

- Contacted in the order in which they are named
- Prioritized according to specified criteria to determine order in which they will be contacted and notified
- Other (please describe in box below)

45. If named partners are prioritized for contact and notification, which of the following are used as **criteria for prioritizing** them?

	No	Yes
Partner exposed in the last 72 hours, who might be candidates for non-occupational post-exposure prophylaxis (PEP) if available	<input type="radio"/>	<input type="radio"/>
Partner known or likely to be pregnant	<input type="radio"/>	<input type="radio"/>
Partner with whom the index patient reports having had unprotected anal or vaginal sex (i.e., sex without condom or PrEP with an index patient with an unsuppressed viral load)	<input type="radio"/>	<input type="radio"/>
Partner of index patient suspected of having acute HIV infection at the time of exposure	<input type="radio"/>	<input type="radio"/>
Partner of index patient with signs or symptoms of primary HIV infection at the time of exposure	<input type="radio"/>	<input type="radio"/>
Partner of index patient suspected of having recent HIV infection at the time of exposure	<input type="radio"/>	<input type="radio"/>
Partner of index patient known to have high HIV viral load (e.g., > 50,000 copies per mL)	<input type="radio"/>	<input type="radio"/>
Partner of index patient co-infected with one or more other STIs (e.g., syphilis) at the time of exposure	<input type="radio"/>	<input type="radio"/>
Partner whose exposure history suggests they may have been infected within the previous three months, in which case they might be more contagious and more likely to spread HIV to others	<input type="radio"/>	<input type="radio"/>
Partner suspected of, or known to be, engaging in behaviors that, if they are already infected, substantially increase their risk for transmitting infection to multiple other persons (e.g., multiple concurrent sex or drug-injection partners)	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

46. What options are offered for **notifying partners of index patients with acute infection?** (Check all that apply)

- Provider notification** (Partners are notified by health department staff)
- Self-notification** (Index patients notify their partners themselves)
- Contract notification** (Index patients agree to notify their partners within a specific time; if partners do not access partner services within that time, the health department will contact them directly)
- Third-party notification** (Partners are notified by providers who are not with the health department; e.g., private physicians)
- Dual notification** (Partners are notified by index patients and health department staff together).
- Other (please describe in box below)

## Actions Taken for Partners Already Known to be HIV-Positive

47. Is any further action taken if the partners are already known by record or database review to be HIV-positive?

- No ..... **Skip to Question # 49**
- Yes

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48. If yes, what actions are taken for such partners?

	No	Yes, for some	Yes, for all
Review available records and databases to check HIV care status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Review available records and databases to determine if virally suppressed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Locate and contact to verify HIV medical care status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/link to HIV medical care, if not already in care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information ("clustering")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (Please describe in box below)

49. If your program locates and contacts such partners, is there a program standard for the length of the interval between when the person is named as a partner and when they are contacted?

- No -- program does not have a standard for this interval ..... **Skip to Question # 51**
  - Yes -- program has a single standard for this interval, regardless of the characteristics of the index patient naming the partner
  - Yes -- program has different standards for this interval, based on the characteristics of the index patient naming the partner
-

50. If **yes** (i.e., your program has a single or different standards), please specify the length of the interval, in days, for contacting partners.

*(Note: If your program has a single standard, enter the interval in # of days in the first box; if different standards, enter the number of days for partners of index patients with newly reported acute or established infections or those with previously reported infections separately.)*

**Single** standard: For partners of **all**  
index patients with HIV infection

**Different** standards: For partners of index  
patients with **acute infection**

**Different** standards: For partners of index  
patients with newly reported **established**  
**infection**

**Different** standards: For partners of index  
patients with  
**previously reported infection**



51. What level of referral or linkage services is provided to assist such partners with accessing HIV medical care, if they are not already in care?

- No referral/linkage to care service is provided
- Referral only
- Referral and assistance with scheduling an appointment
- Active linkage (e.g., accompany partners to their appointments), with follow up

## Actions Taken for Partners Not Already Known to be HIV-Positive

52. What actions are taken by partner services workers in your jurisdiction for partners not already known to be HIV-positive?

	No	Yes, for some	Yes, for all
<b>Locate, contact, and notify</b> of possible exposure to HIV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Test for HIV in the field</b> -- with point-of-care rapid HIV test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Test for HIV in the field</b> -- phlebotomy for laboratory-based HIV test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Test for HIV in clinic</b> -- with point of care rapid HIV test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Test for HIV in clinic</b> -- with laboratory-based HIV test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

53. What type of HIV tests does your HIV partner services program use for point-of-care (POC) rapid HIV testing in the following settings? Check all that apply.

	Antigen/Antibody Test (e.g., Determine)	Other Rapid Test	Not Applicable
In the field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

54. What type of HIV tests does your HIV partner services program use in laboratory-based HIV testing in the following settings? Check all that apply.

	4th Generation Test	Other Laboratory-based Test	Not Applicable
In the field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

55. If your program provides HIV testing to partners, is there a program standard for the length of the interval between when the person is named as a partner and when he/she is tested?

- No -- program does not have a standard for this interval.....skip to #57
- Yes -- program has a single standard for this interval, regardless of the characteristics of the index patient naming the partner
- Yes -- program has different standards for this interval, based on the characteristics of the index patient naming the partner

56. If **yes** (i.e., your program has a single or different standards), please specify the length of the interval, in days, for testing partners for HIV infection.

*(Note: If your program has a single standard, enter the number of interval days in the first box; if different standards, enter the number of interval days for partners of index patients with newly reported acute, established or previously reported infections separately.)*

**Single** standard: For partners of **all**  
index patients with HIV infection

**Different** standards: For partners of index  
patients with **acute infection**

**Different** standards: For partners of index  
patients with newly reported **established  
infection**

**Different** standards: For partners of index  
patients with  
**previously reported infection**

57. What actions are taken in your jurisdiction for **partners who decline to be tested for HIV?**

	No	Yes, for some	Yes, for all
Elicit social contact information ("cluster interview")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contact later to re-offer HIV test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

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## Actions Taken for Partners Not Already Known to be HIV Infected Who Test Positive for HIV

58. What actions are taken for partners who test positive for HIV when the index patient has an acute HIV infection?

	No	Yes, for some	Yes, for all
Initiate expedited ART (dose pack within 24 hours) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information ("clustering")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

59. What actions are taken for partners who test positive for HIV when the index patient has a newly reported, established HIV infection?

	No	Yes, for some	Yes, for all
Initiate expedited ART (dose pack within 24 hours) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information ("clustering")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

60. What actions are taken for partners who test positive for HIV when the index patient has a previously reported HIV infection?

	No	Yes, for some	Yes, for all
Initiate expedited ART (dose pack within 24 hours) if not on treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer/Link to HIV medical care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit information about sex and drug-injection partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information ("clustering")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

61. What level of **support or assistance with referral or linkage to HIV medical care** is provided to partners who test positive for HIV and are not already in care?

- No referral/linkage to care service is provided
- Referral only
- Referral and assistance with scheduling an appointment
- Active linkage (e.g., accompany partners to their appointment), with follow up

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## Actions Taken for Partners Not Already Known to be HIV Infected Who Test Negative for HIV

62. What actions are taken for partners who test negative for HIV when the index patient has an acute HIV infection?

	No	Yes, for some	Yes, for all
Recommend follow-up HIV tests, based on last likely exposure or in standard interval (e.g., 4 weeks)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited preventive treatment with PrEP (e.g., dose pack within 24 hours), if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to PrEP provider, if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (cluster interview)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)			

63. What actions are taken for partners who test negative for HIV when the index patient has a newly reported, established HIV infection?

	No	Yes, for some	Yes, for all
Recommend follow-up HIV tests, based on last likely exposure or in standard interval (e.g., 4 weeks)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited preventive treatment with PrEP (e.g., dose pack within 24 hours), if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to PrEP provider, if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (cluster interview)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (please describe in box below)			

64. What actions are taken for partners who test negative for HIV when the **index patient has a previously reported HIV infection?**

	No	Yes, for some	Yes, for all
Recommend follow-up HIV tests, based on last likely exposure or in standard interval (e.g., 4 weeks)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiate expedited preventive treatment with PrEP (e.g., dose pack within 24 hours), if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to PrEP provider, if not already on PrEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elicit social contact information (cluster interview)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enlist as recruiter for social network testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

65. For partners testing HIV-negative who are not started on or referred for PrEP, does your program recommend **regular, periodic re-testing for HIV?**

- No..... **Skip to Question # 67**
- Yes, for some
- Yes, for all



66. If yes, what is the recommended frequency of re-testing for HIV?

- Every 3-6 months
- Every 6-12 months
- Annually
- Other (Please specify the frequency in months in box below)

## Other Services Provided by Partner Service Workers for Index Patients or Partners

67. Do partner services workers in your jurisdiction provide syphilis testing for index patients or partners?

- No
- Yes, if epidemiologically indicated
- Yes, for all

68. Do partner services workers in your jurisdiction provide hepatitis C testing for index patients or partners?

- No
  - Yes, only for PWID
  - Yes, only if born 1945-1965
  - Yes, for all
-

69. What **other actions** are taken by partner services workers in your jurisdiction for index patients or partners?

	No	Yes, for some	Yes, for all
Provide <b>risk reduction counseling</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide <b>condoms</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screen for <b>mental health</b> service needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to mental health service providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screen for <b>substance use disorder</b> service needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to substance use disorder service providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screen for <b>housing</b> service needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to housing service providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screening for <b>transportation</b> service needs (e.g., to medical appointments)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to transportation service providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screen for <b>domestic violence intervention</b> needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to domestic violence intervention service providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Screen for <b>HIV perinatal service</b> coordination needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refer or link to perinatal services coordinators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

**Non-Partner Services-related Activities Performed by Partner Services Workers**

70. Do HIV partner services workers in your health department perform duties not directly related to partner services?

No ..... **Skip to End of Survey**

Yes

71. If **yes**, which of the following **non-partner services related actions** do they perform?

	No	Yes
Linkage to HIV medical care for persons testing positive in health departments HIV testing programs	<input type="radio"/>	<input type="radio"/>
Investigation of PWH identified through data-to-care activities as presumptively not in care	<input type="radio"/>	<input type="radio"/>
Linkage to HIV medical care for persons confirmed through data-to-care activities not to be in care	<input type="radio"/>	<input type="radio"/>
Investigation of PWH identified through data-to-care activities presumptively not in care	<input type="radio"/>	<input type="radio"/>
Linkage to HIV medical care for persons confirmed through data-to-care activities not in care	<input type="radio"/>	<input type="radio"/>

Other (please describe in box below)

**Thank you for your time and valuable input!**















