

Plate 201 IL-1 Intervention Session Participation Log

Visit Code

HPTN 037 Sessions (105)

IL-1 (201)

Page 1 of 1

Group ID

-

Intervention Session Participation Log

Intervention Session Participation Log

Session Date

Group Leader #1 ID

-

Group Leader #2 ID

-

Session #

ed session

Participants expected to attend:

Enter Participant ID

Did participant attend?

yes no

Session Start Time

Session End Time

- 1. -
- 2. -
- 3. -
- 4. -
- 5. -
- 6. -
- 7. -
- 8. -
- 9. -
- 10. -
- 11. -
- 12. -

-
-
-
-
-
-
-
-
-
-
-
-

yes no

Was the session audio-taped?

If no, record reason in Comments field below.

Comments:

Group ID

-

Site Number Group

RTI Monitoring—
Intervention Session 1

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
11. Follows script	<input type="checkbox"/> INA2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Time management	<input type="checkbox"/> INA2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Neutral/non-judgmental delivery	<input type="checkbox"/> INA2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Maintains focus on group activity	<input type="checkbox"/> INA2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Listens and integrates participant comments with group activity	<input type="checkbox"/> INA2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Uses suggested discussion questions	<input type="checkbox"/> INA2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Overall delivery of session	<input type="checkbox"/> INA2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Attempted to include all participants in discussion	<input type="checkbox"/> INA2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Ensures accuracy of information discussed	<input type="checkbox"/> INA2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Group ID

GPID -

Site Number Group

RTI Monitoring—
Intervention Session 2

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
10. Follows script	<input type="checkbox"/> INB2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Time management	<input type="checkbox"/> INB2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Neutral/non-judgemental delivery	<input type="checkbox"/> INB2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Maintains focus on group activity	<input type="checkbox"/> INB2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Listens and integrates participant comments with group activity	<input type="checkbox"/> INB2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Uses suggested discussion questions	<input type="checkbox"/> INB2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall delivery of session	<input type="checkbox"/> INB2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Attempted to include all participants in discussion	<input type="checkbox"/> INB2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Ensures accuracy of information discussed	<input type="checkbox"/> INB2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: **INB2com**

Plate 215 INC-1 RTI-Monitoring-Intervention Session 3 (pg 1)

Visit Code

HPTN 037 Sessions (105)

INC-1 (215)

Page 1 of 2

Group ID

-

Site Number Group

RTI Monitoring—Intervention Session 3

RTI Monitoring—
Intervention Session 3

Session Date

dd MMM yy

Group Leader #1 ID

-

Site Number Leader

Group Leader #2 ID

-

Site Number Leader

Review Date

dd MMM yy

Session 3: Safer Sex Practices and Communication Skills

Was the session audio-taped? →

If no, end of form.
Record reason in
Comments field below.

Instructions: Mark "yes" or "no" to indicate whether each element of the intervention was completed.

- | | yes | no | not taped |
|--|---------------------------------------|----------------------|----------------------|
| 1. Welcome back and review homework/peer mentoring activity..... | <input type="text" value="INC1welc"/> | <input type="text"/> | <input type="text"/> |
| 2. Present Sex Risk Ladder/Steps..... | <input type="text" value="INC1ladd"/> | <input type="text"/> | <input type="text"/> |
| 3. Conduct male condom use demonstration..... | <input type="text" value="INC1cmcd"/> | <input type="text"/> | <input type="text"/> |
| 4. Practice male condom use..... | <input type="text" value="INC1pmcu"/> | <input type="text"/> | <input type="text"/> |
| 5. Philadelphia only: Conduct female condom use demonstration..... | <input type="text" value="INC1cfcđ"/> | <input type="text"/> | <input type="text"/> |
| 6. Philadelphia only: Practice female condom use..... | <input type="text" value="INC1pfcu"/> | <input type="text"/> | <input type="text"/> |
| 7. Summarize condom use..... | <input type="text" value="INC1scu"/> | <input type="text"/> | <input type="text"/> |
| 8. Present peer mentoring in action video using SPEAKK..... | <input type="text" value="INC1spea"/> | <input type="text"/> | <input type="text"/> |
| 9. Present homework assignment (peer mentoring training activity) and wrap-up..... | <input type="text" value="INC1hmwk"/> | <input type="text"/> | <input type="text"/> |

Comments:

Group ID

-

Site Number Group

RTI Monitoring—
Intervention Session 3

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
10. Follows script	<input type="checkbox"/> INC2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Time management	<input type="checkbox"/> INC2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Neutral/non-judgemental delivery	<input type="checkbox"/> INC2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Maintains focus on group activity	<input type="checkbox"/> INC2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Listens and integrates participant comments with group activity	<input type="checkbox"/> INC2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Uses suggested discussion questions	<input type="checkbox"/> INC2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall delivery of session	<input type="checkbox"/> INC2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Attempted to include all participants in discussion	<input type="checkbox"/> INC2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Ensures accuracy of information discussed	<input type="checkbox"/> INC2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: INC2com

Plate 217 IND-1 RTI Monitoring—Intervention Session 4 (pg 1)

Visit Code

HPTN 037 Sessions (105)

IND-1 (217)

Page 1 of 2

Group ID

-

Site Number Group

RTI Monitoring—Intervention Session 4

**RTI Monitoring—
Intervention Session 4**

Session Date

dd MMM yy

Group Leader #1 ID

-

Site Number Leader

Group Leader #2 ID

-

Site Number Leader

Review Date

dd MMM yy

Session 4: Personal Resistance to Change

Was the session audio-taped? →

*If no, end of form.
Record reason in
Comments field below.*

Instructions: Mark “yes” or “no” to indicate whether each element of the intervention was completed.

- | | yes | no | not taped |
|--|---------------------------------------|----------------------|----------------------|
| 1. Welcome back and review homework/peer mentoring activity..... | <input type="text" value="IND1welc"/> | <input type="text"/> | <input type="text"/> |
| 2. Reflect on personal resistance to change..... | <input type="text" value="IND1refl"/> | <input type="text"/> | <input type="text"/> |
| 3. Present dyad active listening..... | <input type="text" value="IND1dyad"/> | <input type="text"/> | <input type="text"/> |
| 4. Participant report on active listening exercise..... | <input type="text" value="IND1alex"/> | <input type="text"/> | <input type="text"/> |
| 5. Summarize dyad active listening exercise..... | <input type="text" value="IND1summ"/> | <input type="text"/> | <input type="text"/> |
| 6. Discuss problem solving impediments..... | <input type="text" value="IND1prob"/> | <input type="text"/> | <input type="text"/> |
| 7. Present homework assignment (peer mentoring training activity) and wrap-up..... | <input type="text" value="IND1hmk"/> | <input type="text"/> | <input type="text"/> |

Comments:

Group ID

-

Site Number Group

RTI Monitoring—
 Intervention Session 4

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
8. Follows script	<input type="checkbox"/> IND2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Time management	<input type="checkbox"/> IND2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Neutral/non-judgemental delivery	<input type="checkbox"/> IND2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Maintains focus on group activity	<input type="checkbox"/> IND2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Listens and integrates participant comments with group activity	<input type="checkbox"/> IND2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Uses suggested discussion questions	<input type="checkbox"/> IND2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Overall delivery of session	<input type="checkbox"/> IND2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Attempted to include all participants in discussion	<input type="checkbox"/> IND2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Ensures accuracy of information discussed	<input type="checkbox"/> IND2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Group ID

GPID -
 Site Number Group

RTI Monitoring—
 Intervention Session 5

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
7. Follows script	<input type="checkbox"/> INE2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Time management	<input type="checkbox"/> INE2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Neutral/non-judgemental delivery	<input type="checkbox"/> INE2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Maintains focus on group activity	<input type="checkbox"/> INE2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Listens and integrates participant comments with group activity	<input type="checkbox"/> INE2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Uses suggested discussion questions	<input type="checkbox"/> INE2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Overall delivery of session	<input type="checkbox"/> INE2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Attempted to include all participants in discussion	<input type="checkbox"/> INE2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Ensures accuracy of information discussed	<input type="checkbox"/> INE2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: **INE2com**

Group ID

-

Site Number Group

RTI Monitoring—
 Intervention Session 6

Instructions: Rate the session using the scale from 1–3 to indicate overall qualitative assessment.

	<i>not adequate</i>	<i>acceptable</i>	<i>good</i>	<i>could not evaluate</i>
6. Follows script	<input type="checkbox"/> INF2scri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Time management	<input type="checkbox"/> INF2time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Neutral/non-judgemental delivery	<input type="checkbox"/> INF2neut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Maintains focus on group activity	<input type="checkbox"/> INF2focu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Listens and integrates participant comments with group activity	<input type="checkbox"/> INF2list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Uses suggested discussion questions	<input type="checkbox"/> INF2sugg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Overall delivery of session	<input type="checkbox"/> INF2over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Attempted to include all participants in discussion	<input type="checkbox"/> INF2incl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Ensures accuracy of information discussed	<input type="checkbox"/> INF2accu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Plate 301 BL-1 Booster Session Participation Log

Visit Code

HPTN 037 Sessions (105)

BL-1 (301)

Page 1 of 1

Group ID

-
Site Number Group

Booster Session Participa-
tion Log

Booster Session
Participation Log

Session Date

dd MMM yy

Group Leader #1 ID

-
Site Number Leader

Group Leader #2 ID

-
Site Number Leader

Booster Session

12-month

Participants who attended:

Enter Participant ID

1. - -
2. - -
3. - -
4. - -
5. - -
6. - -
7. - -
8. - -
9. - -
10. - -
11. - -
12. - -

Session Start Time

hr min

Session End Time

hr min

