RISK REDUCTION SELF-ASSESSMENT: FOLLOW-UP SESSION FOR POSITIVE HIV AND HCV RESULTS (OPTIONAL)

Risk Reduction Specialist:		Observer:
Session Date:		Site/Location:
Start Time:	End Time:	Total Time:

Did you also do the initial counseling for this client? ___ Yes ___ No

Instructions: Using your *Session Evaluation Notes*, please check the *Met* column to show that the area was covered satisfactorily during the session. Check the *Part Met* column to show that you tried to cover a topic but need improvement, and check the *Not Met* column to show that you did not try to cover the topic at all. Check the *N/A* column if the topic was not applicable. Use the *Comments* area to give more detail.

1. Orient To Session and Provide HIV and HCV Test Results	Met	Part Met	Not Met	N/A
1. Introduce yourself to client (*if first meeting with client*).				
2. Re-explain confidentiality.				
3. Verify that the HIV result belongs to the client.				
4. Assess client's readiness to receive the result.				
5. Provide result clearly and simply.				
6. Allow the client time to absorb the meaning of the result.				
7. Explore client's understanding of the result.				
8. Assess how the client is coping with the result.				
9. Address immediate concerns and fears.				
10. Acknowledge the challenges of dealing with a positive result.				
11. Verify the HCV result belongs to the client.				
12. Assess the client's readiness to receive the result.				
13. Provide result clearly and simply.				
14. Allow the client time to absorb the meaning of the result.				
15. Explore the client's understanding of the result.				
16. Assess how the client is coping with the result.				
17. Address immediate concerns and fears.				
18. Acknowledge the challenges of dealing with both positive HIV and HCV results.				
19. *If applicable*, assess the results with feelings about any other STD tests performed.				

Did you provide the results according to standards?
___ Yes ___ Tried to, but needs improvement ___ Didn't try
Comments:

2. Identify Sources of Support and Provide Referrals	Met	Part Met	Not Met	N/A
1. Assess who the client would like to tell about his/her positive HIV and HCV test results.				
2. Discuss wellness strategies or “living positively.” *(If the client is not prepared for this discussion, offer him/her printed material to reference at a later time.)*				
3. Identify a family member or friend to help support the client.				
4. Address the need for health care providers to know client’s test results.				
5. Identify current health care resources.				
6. Explore client’s access to medical services.				
7. Assess client’s receptiveness to referral.				
8. Provide referral to confirm HCV presence.				
9. *If applicable,* address HCV ambiguity for clients who defer referral to confirm ongoing HCV infection.				
10. *If applicable,* help client access referral services.				

Did you review the prior RR step?
___ Yes ___ Tried to, but needs improvement ___ Didn’t try
Comments:

3. Address Risk Reduction Issues	Met	Part Met	Not Met
1. Refer to client’s RR step.			
2. Assess client’s plan to reduce risk of HIV/HCV transmission to current partner(s).			
3. Explore client’s plan for reducing the risk of transmission to future partners.			
4. Address disclosure of HIV and HCV status to current and future partners.			
5. Encourage the client to protect others from HIV.			
6. Encourage client to protect others from HCV.			
7. Encourage client to protect him/herself from additional liver damage.			
8. Revise or develop a new SMART step.			
9. Document the revised RR step with a copy to the client.			

Did you help the client develop a realistic RR step?
___ Yes ___ Tried to, but needs improvement ___ Didn’t try
Did the step address HIV/STD/HCV risk? ___ Yes ___ No
Was the step appropriate to the client’s risk? ___ Yes ___ No
Was the step SMART? ___ Yes ___ No
Did the step work from the client’s strengths? ___ Yes ___ No
Comments:

4. Negotiate Disclosure and Partner Referral for HIV	Met	Part Met	Not Met	N/A
1. Transition to discussion of partner elicitation/notification.				
2. Present options for notification and resolve problems preventing client cooperation in partner elicitation.				
3. Elicit number of sex partners (# men, # women) and needle-sharing partners.				
4. Elicit number of marriage partners.				
5. Elicit names of partners.				
6. Elicit locating and identifying information.				
7. Negotiate options for notification, encouraging health department referral.				
8. *If applicable*, coach client on all partners s/he wants to tell, encouraging health department referral when client cannot demonstrate skills and steps for notifying partners.				
9. *If applicable*, negotiate follow up to assure self-referred partners receive timely information.				
10. Provide the client with support.				
Comments:				

5. Summarize and Close the Session	Met	Part Met	Not Met
1. Validate client feelings.			
2. Summarize key issues addressed.			
3. Review client and RRS contact information.			
4. Get the client's immediate plans.			
5. Close the session.			
Comments:			

Instructions: For the following section, mark those elements and components you used well in the first column, the skills you used adequately in the second column, the skills you need improvement on in the third column, and those that did not apply in the last column.

6. Use of Counseling Elements and Components	Met	Part Met	Not Met	N/A
1. Kept client's emotional status in mind.				
2. Maintained focus on RR.				
3. Redirected client when necessary.				
4. Used open-ended questions.				
5. Used active listening techniques.				
6. Gave information simply.				
7. Was nonjudgmental.				
8. Offered options, not directives.				
9. Provided opportunities for client to build skills.				
10. Supported client.				
11. Summarized and closed the session.				
Comments:				

1. What things interfered with or supported the RR session (e.g. setting, interruptions)?

2. What did you do that enhanced the quality and outcome of the session?

3. What could be improved about your work in this session?

4. Describe your use of the protocol.

5. Did you follow the goals in the correct order? ___ Yes ___ No If not, why not?

6. Is there a need for an action plan for further improvement of your work? ___ Yes ___ No If yes, please describe.