

**Assessment of the Feasibility of a National HIV  
Behavioral Surveillance System for Young Men  
Who Have Sex with Men:**

**NHBS-YMSM  
OPERATIONS  
MANUAL**



**Behavioral Surveillance Team**

**NCHHSTP/DHAP/BCSB**

**Version: September 2014**

# Table of contents

Table of contents .....	2
Appendices.....	6
Chapter 1 Introduction .....	8
1.1 Overview .....	8
1.2 Justification .....	8
1.3 Staff Responsibilities .....	9
1.4 NHBS-YMSM Methods .....	9
1.5 References .....	11
Chapter 2 Staffing, Training and Evaluation .....	13
2.1 Overview .....	13
2.2 Staffing .....	13
2.3 The Importance of Skill Standardization and Quality Assurance.....	21
2.4 Project Staff Training.....	25
2.5 Project Staff Evaluations .....	29
Chapter 3 Project Preparation .....	31
3.1 Overview .....	31
3.2 Project Logo and Marketing Materials .....	31
3.3 Access to the Data Coordinating Center Data Portal.....	31
3.4 Project Supplies.....	32
3.5 Local Safety Procedures .....	36
3.6 Field Incident Reporting Procedures.....	39
3.7 Operations Checklist .....	40
Chapter 4 Seeds (RDS Only).....	41
4.1 Overview .....	41
4.2 Identifying and Recruiting Seeds .....	41
4.3 Assessing Seeds.....	43
4.4 Screening and Interviewing Seeds .....	44
4.5 Referral Cards.....	45
Chapter 5 Coupons (RDS only).....	48

5.1 Overview .....	48
5.2 Coupon Number .....	48
5.3 Coupon Options .....	48
5.4 Making Coupons .....	52
5.5 Coupon Tracking System .....	53
Chapter 6 Facebook Sampling (FBS Only) .....	55
6.1 Overview .....	55
6.2 Making the Banner Advertisements and Targeting the Population .....	55
6.3 Landing Page .....	63
6.4 Contacting Participants, Telephone Eligibility Screening, and Scheduling Appointments .....	63
6.5 Data Documentation .....	65
6.6 In-person eligibility screenings and interviews .....	71
6.7 References .....	71
Chapter 7 Field Sites (RDS and FBS) .....	73
7.1 Overview .....	73
7.2 Field Site Location .....	73
7.3 Multiple Field Sites .....	74
7.4 Field Site Set-up .....	75
7.5 Hours of Operation .....	76
7.6 Crowd Control .....	77
7.7 Appointment System .....	77
Chapter 8 Fieldsite Check-in, Interviewing, and Check-out (RDS and FBS) .....	80
8.1 Overview .....	80
8.2 Participant Tracking .....	80
8.3 Check-in with RDS .....	83
8.4 Check-in with FBS .....	86
8.5 Completing the Participant Tracking form and escorting participant to interviewer .....	87
8.6 NHBS-YMSM Interview .....	88
8.7 Data Errors .....	97
8.8 HIV Counseling and Testing .....	97
8.9 Recruiter Training (RDS only) .....	98

8.10 Check-out .....	100
8.11 Wrap-up at the field site and office .....	106
Chapter 9 Recruiter Reward Process (RDS Only) .....	109
9.1 Overview .....	109
9.2 Verify Participant’s Identity .....	110
9.3 Ask recruiter questions .....	110
9.4 Verify and Pay Reward .....	112
Chapter 10 Monthly Recruitment Calendar (VBS Only) .....	114
10.1 Overview .....	114
10.2 Sampling Venues and Day-Time Periods .....	114
10.3 Constructing a Monthly Recruitment Calendar .....	118
10.4 Revising a Monthly Recruitment Calendar .....	122
Chapter 11 Recruitment Event Preparation and Management (VBS Only).....	124
11.1 Overview .....	124
11.2 Recruitment Event Information and Tracking Forms.....	124
11.3 Preparing for Recruitment Events .....	125
11.4 Setting up at Recruitment Events .....	131
11.5 General Guidance for Managing Recruitment Events .....	134
Chapter 12 Counting, Recruitment, and Interviewing (VBS Only).....	139
12.1 Overview .....	139
12.2 Counting.....	139
12.3 Recruitment .....	143
12.4 Interviewing .....	151
12.5 HIV Counseling, Testing, and Referral.....	156
12.6 Participant Compensation .....	157
12.7 HIV Prevention Materials and Service Referrals.....	157
Chapter 13 Recruitment Event Closeout (VBS Only) .....	159
13.1 Overview .....	159
13.2 Closeout at the Venue .....	159
13.3 Closeout at the Project Office.....	161
Chapter 14 HIV testing.....	163

14.1 Overview .....	163
14.2 Testing.....	163
14.3 Staffing and Training.....	167
14.4 Specimen Collection.....	168
14.5 Specimen Storage and Processing .....	172
14.6 Specimen Transport and Shipping .....	174
14.7 Test Results and Active Linkage to Care .....	175
14.8 Data Management .....	178
Chapter 15 Process Monitoring and Ongoing Data Gathering .....	179
15.1 Overview .....	179
15.2 Process Goals .....	179
15.3 Process Monitoring Reports .....	179
15.4 Possible Previous Participant Report – one table includes all sampling methods .....	182
15.5 Sample Characteristics – Interviewed Report – 1 report for all methods .....	184
15.6 Other data not sent DCC or presented in the process monitoring reports .....	185
15.7 Ongoing Monitoring and Data Gathering .....	186
Chapter 16 Data Submission and Management .....	193
16.1 Overview .....	193
16.2 Data Submission.....	193
16.3 Data Management .....	194

## Appendices

Appendix A: All Methods - Operations Checklist .....	195
Appendix B: All Methods - Field Supervisor, HIV Testing Operations Evaluation Form .....	217
Appendix C: All Methods - Data Manager Evaluation Form .....	219
Appendix D: RDS and FBS Only – Check-in/Coupon Manager Evaluation Form.....	221
Appendix E: VBS Only - Field Supervisor Project Management Evaluation Form .....	224
Appendix F: VBS Only - Recruiter Evaluation Form.....	227
Appendix G: RDS and FBS Only - Field Supervisor, Project Management Evaluation Form .....	229
Appendix H: All Methods - HIV Counseling and Testing Evaluation Form.....	232
Appendix I: All Methods - Interviewer Evaluation Form.....	235
Appendix J: RDS and FBS Only - Field Site Checklist .....	239
Appendix K: VBS Only - Recruitment Event Checklist.....	244
Appendix L: All Methods - NHBS-YMSM Field Incident Report .....	250
Appendix M: RDS Only - Recruiter Training Script.....	252
Appendix N: RDS Only – Coupon Manager Log .....	255
Appendix O: Facebook Only- Banner Advertisement Images.....	256
Appendix P: All Methods - Cost Evaluation Form .....	280
Appendix Q: Facebook Only – Landing Page Language .....	285
Appendix R: All Methods - Participant Tracking Form.....	287
Appendix S: VBS Only - Recruitment Event Information & Outcomes Form.....	289
Appendix T: Facebook Only – Phone Screener Talking Points and Questions.....	293
Appendix U: VBS Only - Strategies for Overcoming Recruitment and Participation Barriers.....	295
Appendix V: VBS Only - Intercept Form .....	305
Appendix W: VBS Only - Intercept Form and Instructions.....	306
Appendix X: Fingerstick quick reference guide.....	312
Appendix Y: All Methods - Flashcards.....	315
Appendix Z: All Methods - YMSM Process Monitoring Reports .....	321
Appendix AA: VBS Only- Post-event Appointment Card.....	330
Appendix BB: All Methods - Specimen Transport/Shipping Log.....	331
Appendix CC: All Methods - Rapid Testing Quality Control Log.....	333
Appendix DD: All Methods - Rapid Testing Temperature Log .....	335
Appendix EE: All Methods - DBS Supplies and Vendors.....	336
Appendix FF: All Methods - Appointment for Results Card.....	338
Appendix GG: All Methods - Model HIV Testing Log .....	339
Appendix HH: All Methods - Data Entry for Lab-based Testing .....	340
Appendix II: Facebook Only - Facebook Data Tracking Form .....	342
Appendix JJ: All Methods - Appointment Reminder Call Form and Procedures .....	345
Appendix KK: Facebook Only – Facebook Contact Tracking Sheet.....	348

## Tables

Table 2.1 Recommended positions and responsibilities for management staff .....	15
Table 2.2 Recommended positions and responsibilities for field staff and the data manager .....	20
Table 2.3 Evaluation and retraining recommendations .....	23
Table 2.4 Pre-implementation knowledge and trainings .....	26
Table 3.1 Summary of forms and logs for project management .....	34
Table 8.1 Facebook Survey ID Log.....	88
Table 8.2 Recruiter ID questions.....	102
Table 8.3 Collecting and recording physical marks.....	105
Table 9.1 Recruiter Questions.....	111
Table 11.1 VBS Survey ID Log.....	127
Table 12.1 Appointment Log.....	151
Table 15.1 Operational problems and potential evaluation methods .....	187

## Figures

Figure 1.1 RDS recruitment waves.....	9
Figure 4.1 Example of the front of a referral card .....	46
Figure 4.2 Example of the back of a referral card.....	47
Figure 5.1 Example of the front of a coupon .....	52
Figure 5.2 Example of the back of a coupon.....	53
Figure 6.1 Uploading images.....	57
Figure 6.2 Typing in Text for Ads .....	58
Figure 6.3 Setting audience parameters.....	59
Figure 6.4 Finalizing and paying for ads.....	60
Figure 6.5 Example banner ads.....	61
Figure 6.6 Facebook Data Tracking form – advertisement performance section .....	65
Figure 6.7 Example Facebook Contact Tracking Sheet (Appendix KK). .....	69
Figure 6.8 Facebook Data Tracking form – contact and eligibility section .....	70
Figure 8.1 Check-in, interviewing, and check-out procedures for RDS .....	82
Figure 8.2 Check-in, interviewing, and check-out procedures for FBS.....	85
Figure 8.3 Model information card (front and back) .....	104
Figure 9.1 Recruiter Questions and recruiter reward process .....	109
Figure 10.1 Sorted sampling frame.....	117
Figure 10.2 Table of selected VDTs.....	119
Figure 12.1 Model Appointment Card .....	150

# Chapter 1

# Introduction

## **1.1 Overview**

The *NHBS-YMSM Operations Manual* is designed to guide project staff during the implementation of NHBS-YMSM. All project staff should read this manual, as well as the *NHBS-YMSM Protocol* in order to prepare for NHBS-YMSM activities. Copies of the operations manual and the protocol should also be available for reference at each field site (RDS and FBS), during each recruitment event (VBS), and at the project office.

The operations manual provides a detailed description of the procedures needed to conduct NHBS-YMSM using respondent-driven sampling (RDS), Facebook sampling (FBS), or Venue-Based sampling (VBS). These include:

- Staffing the project (Chapter 2)
- Preparing materials / project preparation (Chapter 3)
- Identifying seeds and creating coupons for RDS (Chapter 4-5)
- Creating and managing the Facebook site (Chapter 6)
- Selecting and managing field sites for RDS and FBS (Chapter 7)
- Interviewing participants at field sites for RDS and FBS (Chapter 8)
- Paying recruiter rewards for RDS (Chapter 9)
- Constructing recruitment calendars, making preparations for and managing recruitment events, implementing recruitment event procedures, closing out recruitment events for VBS (Chapters 10-13)
- Conducting HIV testing (Chapter 14)
- Reviewing process monitoring reports (Chapter 15)
- Performing data management activities (Chapter 16)

## **1.2 Justification**

The primary purpose of an operations manual is to develop and document procedural guidelines to be used for conducting NHBS-YMSM. The manual ensures operational standardization of NHBS-YMSM activities across all three project sites.

### 1.3 Staff Responsibilities

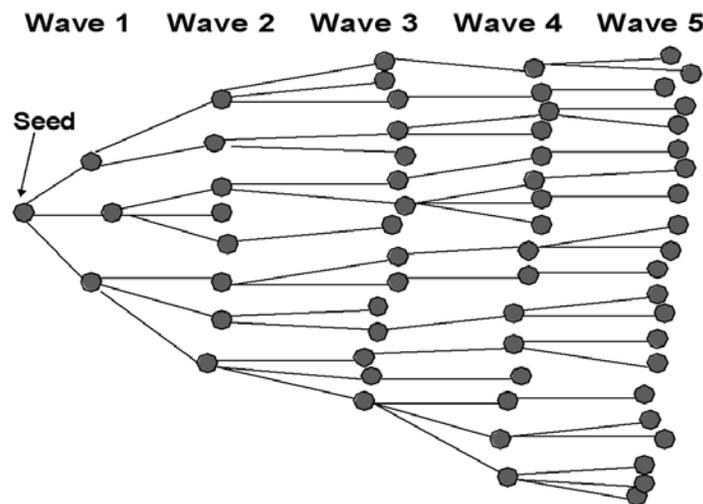
CDC staff are responsible for writing the *NHBS-YMSM Operations Manual* and providing technical assistance to project sites during implementation. Local NHBS-YMSM staff are responsible for conducting the project using the procedures described in the manual and for submitting all required data to CDC in a timely manner through the Data Coordinating Center (DCC) data portal.

### 1.4 NHBS-YMSM Methods

#### 1.4.a RDS methods

RDS is a type of peer-driven chain-referral sampling (Heckathorn 1997, 2002). RDS begins with the non-random selection of a small number of initial recruiters or “seeds.” These seeds recruit project participants who in turn recruit other participants. This chain of recruiters and recruits then continues for multiple “waves” of recruitment (see **Figure 1.1**). Ongoing recruitment is fostered with a dual incentive system: one incentive for participating in the project and another incentive for each person recruited who participates. Recruiters are linked to their recruits by an encoded number on the recruitment coupons, and they are limited in how many people they can recruit based on the number of recruitment coupons they are given. In NHBS-YMSM, the maximum number of coupons that can be distributed to each participant is five.

Figure 1.1 RDS recruitment waves



Source: *Behavioral Surveillance Introduction to Respondent-Driven Sampling Participant Manual*, CDC Global AIDS Program, September, 2007

One bias with chain-referral sampling is that people with large personal networks (i.e., who know many other people) are more likely to recruit participants, and are therefore more likely to be overrepresented in the sample. A second bias with chain-referral sampling is that people tend to know others who are like themselves. This tendency for “within-group” association is called “homophily” and affects recruitment because participants often recruit people who have similar characteristics to themselves. These biases can be minimized by limiting the number of coupons given to each recruiter and generating long chains of recruitment that approach equilibrium. In addition, by conducting data analysis in RDSAT, data are weighted by the participant’s personal network size (those with smaller networks are given more weight than those with larger networks) and by the probability of one sub-population recruiting another (e.g., black young men recruiting Latino young men). This weighting further reduces some of the biases associated with chain-referral sampling and is how RDS is able to produce population estimates.

RDS has to be implemented correctly so that its underlying assumptions are not violated and bias is minimized. For instance, recruiters should not give coupons to strangers. Project sites need to make this clear to participants when training them to recruit others. Project sites should also monitor the recruitment of strangers as part of their ongoing monitoring. Hours of operation and locations of field sites should be considered carefully so that certain sub-populations are not limited in their ability to participate in the study, and as a result, are underrepresented in the sample. Seeds should not be chosen from networks that are so sparse and disconnected that peer-recruitment would be unsuccessful.



The NHBS-YMSM questionnaire has a series of “Network Questions” that ask participants to 1) estimate their personal network size of male friends, relatives or people they hang out who are between 13 and 17 years old, 2) estimate the number of these males that are attracted to other males, and 3) describe their relationship to their recruiter. Since these questions measure adherence to some of the RDS assumptions, it is important for interviewers to clarify any potentially inaccurate responses to these questions.

### ***1.4.b Facebook sampling***

Recruitment via the Internet for subsequent in-person interviews has been implemented in several studies of adult MSM populations. Data from these studies suggest that it is possible to engage MSM online for subsequent in-person interviews, though with high attrition between first contact and interview (Elford et al., 2004; Fernandez et al., 2004; Grov et al., 2012; Parsons et al., 2013; Raymond et al., 2010). While little is currently known about how this process would function among adolescent MSM, there is reason to believe that online recruitment would be successful. A majority (95% of 12-17 year olds) of adolescents use the Internet for a variety of purposes (Brenner, 2012). In addition, the Internet’s ability to reach “hidden” populations (Heckathorn, 1997) aligns with the description of many

young MSM, who don't have access to adult MSM venues, may not be extensively networked with other MSM, and could be at the earlier phases of their coming-out trajectory.

Facebook, a popular social networking site, was selected as the vehicle for online-recruitment for NHBS-YMSM because 77% of adolescents 12 to 17 years old use Facebook (Brenner, 2012) and unlike many MSM-specific Internet sites (e.g., Manhunt.com, Gay.com), Facebook is accessible and free to adolescents. It is likely that young MSM are using Facebook at rates similar to those of their peers. Given the likely widespread use of Facebook by young MSM, a goal of NHBS-YMSM is to assess the extent to which Facebook may be a viable recruitment tool to reach young MSM for HIV behavioral surveillance. In NHBS-YMSM, banner advertisements will be placed on the Facebook pages of young men potentially eligible for NHBS-YMSM activities that are aged 13 to 17 years and live within the project site boundaries. Potential NHBS-YMSM participants who click on the Facebook banner advertisement will be taken to a landing page that provides a basic overview of the NHBS-YMSM study and a submission form for individuals to provide their contact information. A telephone eligibility screener is then carried out and eligible participants are interviewed at field sites.

#### ***1.4.c Venue-based sampling***

Another sampling option for NHBS-YMSM is venue-based sampling (VBS). VBS is used to conduct a cross-sectional study of young MSM who attend venues within the metropolitan statistical area (MSA). VBS sampling activities include constructing an initial "universe" of young MSM-identified venues through preliminary research. Next, project staff will use the identified venue universe to construct monthly sampling frames of venues and their associated day-time periods (VDTs) that are expected to produce a sufficient number of eligible young MSM. The final stage is conducting interviews and HIV testing with eligible young MSM at VDTs that are randomly selected from constructed sampling frames. During recruitment events, project staff count, approach, and interview eligible young MSM who wish to participate in NHBS-YMSM.

## **1.5 References**

Brenner J. Teens and Technology. Pew Internet & American Life Project; 2012.

Elford J, Bolding G, Davis M, Sherr L, Hart G. The Internet and HIV study: design and methods. BMC Public Health 2004,4.

Fernandez M, Varga L, Perrino T, Collazo J, Subiaul F, Rehbein A, et al. The Internet as recruitment tool for HIV studies: Viable strategy for reaching at-risk Hispanic MSM in Miami? AIDS Care-Psychological and Socio-Medical Aspects of AIDS/HIV 2004,16:953-963.

Grov C, Ventuneac A, Rendina H, Jimenez R, Parsons J. Recruiting Men Who Have Sex With Men on Craigslist.org for Face-to-Face Assessments: Implications for Research. *AIDS and Behavior* 2013,17:773-778.

Heckathorn D. Respondent-driven sampling: a new approach to the study of hidden populations. *Social Problems* 1997; 44(2):174-199.

Heckathorn D. Respondent-driven sampling II: Deriving valid population estimates from chain-referral samples of hidden populations. *Social Problems* 2002; 49(1):11-34.

Heckathorn D. Extensions of respondent-driven sampling: analyzing continuous variables and controlling for differential recruitment. *Sociological Methodology* 2007; 37(1):151-207.

Parsons J, Vial A, Starks T, Golub S. Recruiting Drug Using Men Who Have Sex with Men in Behavioral Intervention Trials: A Comparison of Internet and Field-Based Strategies. *AIDS and Behavior* 2013,17:688-699.

Raymond H, Rebchook G, Curotto A, Vaudrey J, Amsden M, Levine D, et al. Comparing Internet-Based and Venue-Based Methods to Sample MSM in the San Francisco Bay Area. *AIDS and Behavior* 2010,14:218-224.

Salganik M and Heckathorn D. Sampling and estimation in hidden populations using respondent-driven sampling. *Sociological Methodology* 2004; 34(1):193-239.

## Chapter 2

## Staffing, Training and Evaluation

### 2.1 Overview

Staffing, training, and performance evaluations are important to the operational success of NHBS-YMSM. This chapter provides the recommended staffing structure and position descriptions for conducting NHBS-YMSM, as well as information on staff training and evaluation.

### 2.2 Staffing

Project staff must adhere to the ethical principles and standards for HIV surveillance activities when conducting NHBS-YMSM operations. Most importantly, they must respect and protect the privacy, confidentiality, and autonomy of participants. In addition, project staff should conduct themselves in a professional manner when interacting with participants, fellow staff members, and the general public. Recommended staff positions and responsibilities are presented in **Tables 2.1** and **2.2** and are described below.

#### 2.2.a Management staff

Each project site should have the following management positions: principal investigator, project coordinator, and field supervisor. Each position is discussed below. Management staff are responsible for implementing project operations in compliance with all NHBS-YMSM guidance (e.g. *NHBS-YMSM Protocol*, *Preliminary Research Manual*, *Operations Manual* and *Interviewer Guide*) and locally developed policies.

In addition, management staff are in charge of overseeing successful collection and quality assurance of NHBS-YMSM data and monitoring project staff performance. The management staff are also responsible for the safety, security and confidentiality of NHBS-YMSM project staff, participants, and data; as such, they should also ensure that field incidents and adverse events are reported to CDC (within 24 hours of occurrence) and to the IRB(s) per local guidelines and procedures.

#### *Principal investigator*

The principal investigator (PI) at the directly funded health department is responsible for all matters related to NHBS-YMSM and is the primary contact for CDC. When appropriate, a secondary PI may be contracted to assist with PI responsibilities. However, the directly funded PI is ultimately responsible for the project's implementation and success. Principal investigators will spend approximately 10% of their time on the project.

### *Project coordinator*

The project coordinator is responsible for the day-to-day management of the project including providing support for key administrative functions. Project coordinators will spend up to 100% of their time on the project.

A successful project coordinator has considerable knowledge of HIV/AIDS and surveillance activities, excellent leadership skills and attention to detail. In addition, the project coordinator should be familiar with computer programs such as word processing, spreadsheets, file management, and have a willingness to learn additional programs, such as the Questionnaire Development System (QDS™), the Coupon Manager Program (CMP) and/or the VDTS Program. It is highly desirable that the project coordinator has knowledge of the specific sampling methods being implemented at the site as well as an understanding of the target population.

### *Field supervisor*

The field supervisor is responsible for assisting with the day-to-day management of the project, particularly overseeing the field staff, field sites and/or recruitment events. Field supervisors will spend up to 100% of their time on the project. A high-level of supervision for all aspects of NHBS-YMSM is necessary to ensure the success of data collection. The project coordinator and field supervisor positions comprise 1.5-2.0 FTEs.

A successful field supervisor has considerable knowledge of the communities in which NHBS-YMSM is conducted, HIV/AIDS, and surveillance activities. In addition, a field supervisor should have strong leadership skills, excellent attention to detail, high motivation, cultural competence, strong computer skills (e.g., word processing, spreadsheets, and file management), and a willingness to learn additional programs, such as QDS™, the CMP and/or the VDTS Program. It is highly desirable that the project coordinator has knowledge of the specific sampling methods being implemented at the site as well as an understanding of the target population

**Table 2.1 Recommended positions and responsibilities for management staff**

Responsibilities	Principal Investigator (PI)	Project Coordinator	Field Supervisor
<b>Administrative</b>	<ul style="list-style-type: none"> <li>• Responsible for ensuring operations are carried out in compliance with the <i>NHBS-YMSM Protocol and Operations Manual</i>.</li> <li>• Oversee the hiring and supervision of project staff.</li> <li>• Tailor the <i>NHBS-YMSM Protocol</i> per site-specific needs.</li> <li>• Apply for and obtain Institutional Review Board (IRB) approval(s), inform IRB(s) of procedural changes and other revisions, and send IRB approval letters to CDC.</li> <li>• Ensure all subcontracting agencies having contact with human subjects have a Federalwide Assurance (FWA) number. (Health department only)</li> <li>• Review, monitor, and assure compliance with established Notice of Award guidelines to provide fiscal administration and management of federal funds. This includes administrative supervision to investigate and report financial irregularities. (Health department only)</li> <li>• Oversee preparation and submission of annual cooperative agreement reports, including interim or annual progress reports and financial status reports, to CDC Procurement and Grants Office (PGO). (Health department only)</li> <li>• Oversee the development of local use questions.</li> <li>• Respond to CDC’s requests for input on revisions to the NHBS-YMSM questionnaire and other supporting documents.</li> <li>• Participate in CDC site visits, site conference calls, and multi-site calls.</li> </ul>	<ul style="list-style-type: none"> <li>• Manage contracts related to the project (as applicable).</li> <li>• Assist PI with the hiring and supervision of project staff.</li> <li>• Assist PI with IRB-related activities, cooperative agreement reports and other key administrative functions.</li> <li>• Participate in CDC site visits, trainings, site conference calls, and multi-site calls.</li> <li>• Act as the primary point of contact with CDC in matters that relate to the project.</li> <li>• Respond to CDC’s requests for input on revisions to the NHBS-YMSM questionnaire and other supporting documents.</li> <li>• Coordinate the development of local use questions</li> </ul>	<ul style="list-style-type: none"> <li>• Participate in CDC site visits, trainings, site conference calls, and as available, multi-site calls.</li> </ul>
<b>Project management</b>	<ul style="list-style-type: none"> <li>• Serve as back-up for project coordinator in event of absence or appoint a designee.</li> <li>• Collaborate with local stakeholders and disseminate information and data from the</li> </ul>	<ul style="list-style-type: none"> <li>• Provide overall project management.</li> <li>• Maintain inventory of supplies, materials, incentives, and equipment.</li> <li>• Oversee ongoing research activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure adequate preparations, including supplies, materials, and equipment for field sites and/or recruitment events.</li> <li>• Assist with field staff-related issues (i.e., training and</li> </ul>

	project to garner community support.	<ul style="list-style-type: none"> <li>• Serve as back up for the data manager and field supervisor.</li> </ul>	<p>development, scheduling, team building).</p> <ul style="list-style-type: none"> <li>• Coordinate ongoing monitoring and data gathering efforts and implement changes based upon findings.</li> <li>• Manage operations and data collection at field sites and/or recruitment events.</li> <li>• For VBS, direct recruiters to approach potential participants (if applicable).</li> </ul>
--	--------------------------------------	---	--

<b>Training and ongoing evaluations</b>	<ul style="list-style-type: none"> <li>• Ensure required trainings have been successfully completed by all project staff.</li> <li>• Conduct staff evaluations in collaboration with the project coordinator and field supervisor.</li> </ul>	<ul style="list-style-type: none"> <li>• Coordinate and conduct pre-implementation and ongoing trainings for project staff in collaboration with the field supervisor.</li> <li>• Conduct staff evaluations in collaboration with the PI and field supervisor.</li> </ul>	<ul style="list-style-type: none"> <li>• Coordinate and conduct pre-implementation and ongoing trainings for project staff in collaboration with the project coordinator.</li> <li>• Conduct staff evaluations in collaboration with the PI and project coordinator.</li> </ul>
<b>Data collection, management, analysis, and dissemination</b>	<ul style="list-style-type: none"> <li>• Ensure timely submission and entry of data to the DCC data portal.</li> <li>• Responsible for quality control and data integrity.</li> <li>• Supervise the implementation of recommendations from CDC or the DCC to improve data quality.</li> <li>• Oversee development of policies pertaining to analyses and dissemination of data. (Health department only)</li> <li>• Oversee analyses of site data.</li> <li>• Ensure data is released in accordance with local policy and data use agreements. (Health department only)</li> <li>• Present reports and disseminate study findings.</li> <li>• Use study findings for the development, modification, and evaluation of local prevention programs. (Health department only)</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure daily transfer of data from portable computers to the QDS™ Warehouse.</li> <li>• Ensure that QDS™ Warehouse is maintained.</li> <li>• Ensure that Facebook data are collected and reported to CDC project officer (Appendix II)</li> <li>• Ensure that cost data are collected and reported to CDC project officer (Appendix P)</li> <li>• Ensure HIV testing data, data errors, and coupon manager information and/or VDTS information are entered daily into the DCC data portal.</li> <li>• Review Process Monitoring Reports, ensure problems are addressed, and improvement seen.</li> <li>• Coordinate and implement policies pertaining to data analysis and dissemination.</li> <li>• Participate in data analysis and dissemination.</li> <li>• Assess need for ongoing monitoring and data gathering efforts and make changes based upon findings.</li> </ul>	<ul style="list-style-type: none"> <li>• Schedule field site and/or monthly recruitment events.</li> <li>• Review, tabulate, and reconcile forms and logs used in the field. Review errors with interviewers, HIV test counselors, and the coupon manager.</li> <li>• Oversee documentation of data errors.</li> <li>• Supervise entry of HIV testing data, data errors, and coupon manager information and/or VDTS information into the DCC data portal.</li> <li>• Review Process Monitoring Reports, identify issues of concern, and implement changes for improvement.</li> </ul>
<b>HIV testing operations</b>	<ul style="list-style-type: none"> <li>• Develop local HIV testing protocol</li> <li>• Responsible for ensuring HIV testing and counseling activities</li> </ul>	<ul style="list-style-type: none"> <li>• Oversee maintenance of HIV testing supplies.</li> <li>• Ship HIV test specimens.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure proper documentation of HIV testing activities, including assent.</li> </ul>

	are carried out according to protocol and local guidelines	<ul style="list-style-type: none"> <li>• Receive and log HIV test results from lab.</li> <li>• Obtain CLIA waiver (if applicable).</li> <li>• Ensure adherence to HIV testing and counseling procedures.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure adherence to HIV testing and counseling procedures.</li> </ul>
<b>Safety, security, and confidentiality</b>	<ul style="list-style-type: none"> <li>• Responsible for safety, security, and confidentiality of project staff, participants, materials, and data, including the development of local procedures and policies.</li> <li>• Report field incidents and adverse events to CDC within 24 hours of occurrence and to the IRB(s) per local requirements.</li> </ul>	<ul style="list-style-type: none"> <li>• Coordinate development of local procedures for incident reporting, safety, and handling participants known to project staff.</li> <li>• Report field incidents and adverse events to CDC within 24 hours of occurrence and to the IRB(s) per local requirements.</li> </ul>	<ul style="list-style-type: none"> <li>• Assist in the development of local procedures for incident reporting, safety, and handling participants known to project staff.</li> <li>• Implement all locally developed procedures, including safety, incident reporting, and handling participants known to project staff.</li> <li>• Report field incidents and adverse events to CDC within 24 hours of occurrence and to the IRB(s) per local requirements.</li> <li>• Ensure all staff trained and evaluated on safety, security, and confidentiality procedures</li> </ul>

### 2.2.b Field staff

Project sites should designate staff for the following field positions:

RDS: coupon manager, interviewer, and HIV test counselor.

FBS: check-in manager, interviewer and HIV test counselor.

VBS: counter, recruiter, interviewer and HIV test counselor.

Each position is discussed below. Depending on the staff structure and qualifications, some field staff may assume multiple roles. For example, some recruiters may also conduct interviews or some interviewers may also conduct HIV counseling and testing. It is useful for field staff to be trained to perform multiple positions to maximize the flexibility of operations. Field staff are expected to adhere to procedures in accordance with NHBS-YMSM guidance (e.g., *NHBS-YMSM Protocol*, *Preliminary Research Manual*, *Operations Manual*, and *Interviewer Guide*) and locally developed policies. Field staff should be outgoing, welcoming, and comfortable working with the target population. Prior to implementation and throughout the entirety of the project, field staff should participate in all required trainings and evaluations and demonstrate the ability to carry out their role-related activities.



All field operations must be performed by trained and qualified NHBS-YMSM staff members. For VBS, employees of venues should never perform any NHBS-YMSM duties, such as counting venue attendees or recruiting potential participants.

**Table 2.2** shows in more detail the recommended duties and responsibilities for each field staff role. Project sites should tailor this table to reflect their local staffing plan and attach it the NHBS-YMSM Operations Checklist (see **Appendix A**).

### *Check-in manager/Coupon manager (RDS and FBS only)*

The check-in/coupon manager is responsible for participant check-in and check-out for RDS and FBS. For RDS only the check-in/coupon manager also does recruiter training, coupon distribution, distributing recruiter rewards, and monitoring coupon activity using the CMP.

A successful check-in/coupon manager has excellent communication skills, a thorough understanding of RDS and FBS, considerable knowledge of the communities in which NHBS-YMSM is conducted, and a strong grasp of the CMP.

### *Phone screener (FBS only)*

The phone screener is responsible for following up with participants who have provided contact information on the Facebook landing page. This includes contacting participants, carrying out the phone eligibility screener and booking the appointment. The phone screener does not have to be a particular staff member – rather the phone screener duties can be carried out by different staff members who also have other roles as long as these are not in conflict. For example, an interviewer can be a phone screener when not scheduled for interviews. Depending on how busy field sites are for sites that do both RDS and FBS, the check-in/coupon manager could also fulfil the phone screener tasks.

A successful phone screener has excellent communication skills, a thorough understanding of FBS, and considerable knowledge of the communities in which NHBS-YMSM is conducted.

### *Counter (VBS only)*

The counter is responsible for counting all young men attending a venue during a recruitment event. There should only be one counter during each recruitment event to avoid double counting. The field supervisor should not serve as the counter because it may interfere with the field supervisor's management responsibilities. The counter could, if manageable, direct recruiters to approach selected attendees for recruitment if this task is not carried out by another staff member such as the Field Supervisor.

The counter should have excellent attention to detail and a thorough understanding of venue-based sampling.

### *Recruiters (VBS only)*

Recruiters systematically approach potential participants in venues and invite them to participate in the project. It is recommended that the recruiter always be directed to approach a potential participant by another staff member; the recruiter should never approach a potential participant on their own. The recruiter may be directed by the field supervisor or another staff member designated to direct recruitment.

A successful recruiter is highly motivated, has considerable knowledge of the local young MSM community, has excellent communication skills, and to the extent possible, representative of the major racial/ethnic population segments of young MSM. In addition, a recruiter should have a sound understanding of venue-based sampling and the NHBS-YMSM study.

### *Interviewers*

Interviewers are responsible for screening participants for eligibility, obtaining informed assent (for the survey) and consent (for HIV testing), conducting interviews using computers, and providing appropriate health care and social service referrals to participants upon completion of the study.

A successful interviewer has excellent communication skills, experience working with populations at risk for HIV infection, and considerable knowledge of the communities in which NHBS-YMSM is conducted. An interviewer should also have strong interviewing and data collection skills and a thorough understanding of the informed assent/consent process.

### *HIV test counselors*

HIV test counselors must be certified to conduct the specific type of HIV test being used by the project site and are responsible for following local HIV counseling and testing standards and NHBS-YMSM HIV testing guidelines. HIV test counselors are responsible for providing tailored prevention messages to each participant based upon risk behaviors identified during the interview or counseling session. In addition, HIV test counselors must actively linking HIV-positive participants to medical care and supportive services.

An HIV test counselor should have strong counseling skills and a thorough understanding of the informed consent process as well as excellent communication skills, experience working with populations at risk for HIV infection, and considerable knowledge of the communities in which NHBS-YMSM is conducted.

### 2.2.c Data manager

The data manager is responsible for uploading local data files; ensuring data quality, data entry, and submission to the Data Coordinating Center (DCC) data portal; and communicating issues to the DCC, CDC, and other project staff. Data managers must ensure that data are stored in a manner that meets the required security and confidentiality standards for HIV/AIDS surveillance data. Data managers will spend approximately 15% of their time on the project.

A successful data manager has considerable knowledge of the NHBS-YMSM data system, experience in managing data from multiple sources, excellent organizational skills, and attention to detail. In addition, the data manager should have strong computer skills (e.g., word processing, spreadsheets, and file management) and have a willingness to learn additional programs, such as QDS™ and the CMP.

**Table 2.2 Recommended positions and responsibilities for field staff and the Data Manager**

Interviewer	HIV Test Counselor	Data Manager	Phone Screener (FBS Only)
<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Implement local safety procedures and report field incidents and adverse events to the field supervisor immediately.</li> <li>• Accurately document participant information for the eligibility screener, assent form, questionnaire, and Participant Tracking Form.</li> <li>• Maintain data integrity (i.e., all data collected accurately represents the information provided by participants).</li> <li>• Assist with ongoing preliminary research as necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Implement local safety procedures and report field incidents and adverse events to the field supervisor immediately.</li> <li>• Conduct HIV counseling and testing per local and NHBS-YMSM guidelines.</li> <li>• Have knowledge of information in package insert for rapid testing (if applicable).</li> <li>• Document HIV test results.</li> <li>• Accurately document information on lab slips, HIV Test Result Logs, and Specimen Transport/Shipping Log.</li> <li>• For sites with separate interviewers and HIV test counselors: Document communication between interviewer and HIV test counselor to ensure participant assent was provided for HIV testing.</li> <li>• Link participants testing positive to care.</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Implement local safety procedures and report adverse events to the field supervisor immediately.</li> <li>• Ensure upload of data from the portable computers to the QDS™ Warehouse.</li> <li>• Ensure daily receipt of forms/logs and review errors or concerns with the field supervisor or project coordinator.</li> <li>• Enter information from forms/logs into the DCC data portal.</li> <li>• Maintain QDS™ Warehouse and submit weekly to the DCC data portal.</li> <li>• Maintain data integrity (i.e., each record in the database represents the data an individual provided to the field team).</li> <li>• Review data reports from the DCC as soon as they are received, and provide requested data edits and</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Responsible for following up with participants who have provided contact information on the Facebook landing page, using their preferred method and any alternate methods appropriate.</li> <li>• Screening potential participants over the phone where possible. Booking the field site appointment.</li> <li>• Document contacts and responses.</li> </ul>

	<ul style="list-style-type: none"> <li>• Provide all participants with other necessary referrals to a variety of services.</li> </ul>	<p>explanations to resolve data issues via the DCC data portal.</p> <ul style="list-style-type: none"> <li>• Perform data analyses as needed.</li> </ul>	
--	---	--	--

<b>Check-in/Coupon Manager (RDS and FBS only)</b>		<b>Counter (VBS only)</b>	<b>Recruiter (VBS only)</b>
<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Implement local safety procedures and report field incidents and adverse events to the field supervisor immediately.</li> <li>• Responsible for checking in and checking out potential participants, distribute incentives.</li> <li>• RDS only: providing recruiter training or reinforcing recruiter training, and providing recruiter rewards.</li> <li>• RDS only: Manage all operational activities related to the coupon manager station and the Coupon Manager Program (CMP).</li> <li>• RDS only: Daily upload of the CMP data to the DCC data portal.</li> <li>• FBS only: Verifying participants have appointments scheduled in the Facebook Appointment Log.</li> <li>•</li> </ul>		<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality.</li> <li>• Implement local safety procedures and report field incidents and adverse events to the field supervisor immediately.</li> <li>• Maintain counts of young men in eligible age range who are attending the venue.</li> <li>• Direct recruiters to approach potential participants (if applicable).</li> <li>• Assist with ongoing formative research as necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• Comply with guidelines for maintaining safety, data security, and participant confidentiality</li> <li>• Implement local safety procedures and report field incidents and adverse events to the field supervisor immediately.</li> <li>• Recruit young men in accordance with the protocol and as directed by the field supervisor or counter.</li> <li>• Accurately document all intercepts on Intercept Form.</li> <li>• Assist other recruiters will intercepting and recruiting.</li> <li>• Check in with field supervisor if intercepts not successful.</li> <li>• Review all completed Intercept Forms.</li> <li>• Assist with ongoing monitoring and data gathering as necessary.</li> </ul>

## ***2.3 The Importance of Skill Standardization and Quality Assurance***

The quality of NHBS-YMSM data is dependent upon each staff member’s ability to perform their position successfully, consistently, and in the same manner as their NHBS-YMSM colleagues within and across project sites. Standardization of procedures and quality is an important aspect of all data collection efforts. To ensure standardization of NHBS-YMSM operations, CDC provides the following tools: (1) NHBS-YMSM guidance documents, (2) Field Operations Training, (3) project staff evaluation forms with performance recommendations, (4) pre-implementation and ongoing evaluation recommendations, and (5) retraining recommendations. The best way to minimize interviewer effect is to standardize

interviewing within and across sites through performance recommendations, ongoing evaluations, and retraining (**Table 2.3**).

**Table 2.3 Evaluation and retraining recommendations**

Staff Member	Evaluator	Pre-implementation Evaluation and Performance Recommendations	Recommended Ongoing Evaluations Schedule	Retraining Recommendations	Recommended Retraining Evaluation Schedule*
Field Supervisor	PI or PC	Successfully meets NHBS-YMSM performance recommendations.	<b>Project Management:</b> For the first three weeks, one evaluation per week, and then one per month.	Retraining of any skills below standard by PI or PC.	Successfully meets NHBS-YMSM performance recommendations.
			<b>HIV Testing Operations:</b> One evaluation per month.	Retraining of any skills below standard by PI or PC.	
Check-in/Coupon Manager (RDS and FBS only)	PI, PC, or FS	Successfully completes two consecutive check-in/out activities.	Two consecutive check-in/out activities during the first two weeks, and then one evaluation every two weeks.	<b>Minor errors:</b> Retraining or review of any skills below standard by PC or FS.	Successfully completes the <b>next</b> two check-in/out activities. If evaluations are unsuccessful, follow the retraining and evaluation recommendations for major errors (see below).
				<b>Major errors:</b> Complete retraining by PC or FS.	Successfully completes two consecutive <b>mock</b> check-in/out activities.
Counters (VBS only)	PI, PC, or FS	High level of comfort and accuracy counting venue attendees (Note: there is no evaluation form for counters).	For the first 3 events and then once per month, the counter should be evaluated/monitored for 10-15 minutes to ensure all counting procedures are accurately being performed, , and then evaluated once per month.	<b>Minor errors:</b> Retraining/review of necessary skills by FS or PC prior to resuming counting.	Successfully counts venue attendees during another 10-15 minute period at the same event. If evaluation is unsuccessful, follow the retraining and evaluation recommendations for major errors (see below).
				<b>Major errors:</b> Complete retraining by FS or PC prior to resuming counting.	Successfully counts venue attendees during a 10-15 minute period at three consecutive events.
Recruiters (VBS only)	PI, PC, or FS	Successful evaluation of NHBS-YMSM performance recommendations.  High level of comfort and accuracy in response to Recruitment and Participation Barriers (see <b>Appendix U</b> )	First 5 approaches at first 3 events, then first 5 approaches each during 2 events per month.  Recruiters should also be evaluated at events where 5 consecutive men approached refuse intercept.	<b>Minor errors:</b> Retraining/review of necessary skills by FS or PC prior to any more approaches	Successful evaluation of <b>next</b> five approaches.  If evaluations are unsuccessful, follow the retraining and evaluation recommendations for major errors (see below).
				<b>Major errors:</b> Complete retraining by FS or PC prior to any more approaches	Successful evaluation of two consecutive full <b>mock</b> approaches.
Interviewers	PI, PC, or FS	Successfully completes two consecutive full mock interviews (screening, assent, and interview).	Two consecutive interviews during the first two weeks, and then one evaluation every ten interviews.	<b>Minor errors:</b> Retraining or review of any skills below standard by PC or FS prior to resuming interviewing.	Successfully completes the <b>next</b> two full interviews (screening, assent, and interview). If evaluations are unsuccessful, follow the retraining and evaluation recommendations for major errors (see below).
				<b>Major errors:</b> Complete retraining by PC or FS prior to resuming interviewing.	Successfully completes two consecutive full <b>mock</b> interviews (screening, assent, and interview).
HIV Test Counselors	PI, PC, or FS	Successfully completes two consecutive full mock HIV testing sessions.	Two consecutive testing sessions during the first two weeks, and then one evaluation	<b>Minor errors:</b> Retraining or review of any skills below	Successfully completes the <b>next</b> two HIV testing sessions. If evaluations are unsuccessful, follow the retraining and evaluation recommendations for major errors (see below).

		The following counseling scenarios should be practiced prior to the start of data collection: an HIV-negative test result, a preliminary HIV-positive test result (for rapid tests), a confirmed HIV-positive test result, and discrepant preliminary and confirmatory test results (for rapid tests).	every two weeks or, if a part-time counselor, one per month.	standard by PC or FS prior to resuming HIV testing. <b>Major errors:</b> Complete retraining by PC or FS prior to resuming HIV testing.	Successfully completes two consecutive <b>mock</b> HIV testing sessions.
<b>Data Manager</b>	PI or PC	Successfully meets NHBS-YMSM performance recommendations. Successfully uploads data from the portable computers without any data loss. For new data managers, successfully encrypts and submits QDS™ Warehouse containing mock core interviews to the data portal.	One evaluation during the first week of data collection and then one per month.	Retraining of any skills below standard by PC.	Successfully meets NHBS-YMSM performance recommendations.
<b>Phone Screener</b>	PI, PC, or FS	Successfully completes two consecutive full mock phone screeners (introduction, eligibility screening, explanation for survey, booking appointment)	Two phone screeners during the first two weeks, and then one evaluation every two weeks	Retraining of any skills below standard	Successfully meets NHBS-YMSM performance recommendations.

PI= principal investigator, PC= project coordinator, FS= field supervisor

\*It is recommended that project staff successfully complete retraining before re-entering the field to interact with participants.

## **2.4 Project Staff Training**

Project managers are responsible for conducting a field operations training at each site to ensure that all staff members have:

- A thorough understanding of NHBS-YMSM guidance documents, locally developed procedures, and the ethical principles and standards for HIV surveillance.
- Completed all required trainings.
- Successfully demonstrated their job-specific duties and responsibilities in a manner that meets the recommended performance standards prior to the start of data collection.

### **2.4.a Required trainings**

Required trainings for project staff are described below and can also be found in **Table 2.4**. Completed trainings should be documented in the Operations Checklist (**Appendix A**).

#### *Field operations training*

The CDC-sponsored Field Operations Training for NHBS-YMSM is implemented in a series of webinars that are administered using the MS Office Live Meeting interphase. All live webinars are recorded and provided to project sites for use in their local trainings. All webinars should be viewed at a minimum by the project coordinator and the field supervisor (or lead interviewer) during the live sessions. The field supervisor is responsible for incorporating the information from the webinars into local field operations training at their project site

**Required participants:** *Project coordinator and field supervisor to view live webinar sessions. All relevant field staff to view either live or recorded webinar sessions.*

#### *DCC data management training*

Representatives from the DCC will train data managers or other designated project staff on best practices for organizing, editing, and submitting data to the DCC data portal.

**Required participants:** *Data manager, project coordinator, or other designated staff.*

**Table 2.4 Pre-implementation knowledge and trainings**

	Guidance Documents							Required			Trainings		Recommended Trainings	
	NHBS-YMSM Protocol	Operations Manual	Formative Research Manual	Interviewer Guide	Questionnaire	Data Management Training Manual	Site-specific HIV testing documents	Security and confidentiality for HIV/AIDS surveillance data	Emergency procedures, field safety, adverse events, and field incidents	CDC Field Operations Training	Project site and job-specific trainings	DCC Data Management	Cultural diversity course	Human subjects ethical training
<b>Project Coordinator</b>	X	X	X	X	X	X	X	X	X	View live webinars	X	X	X	X
<b>Field Supervisor</b>	X	X	X	X	X	X	X	X	X		X		X	X
<b>Interviewers</b>	X	X	X*	X	X			X	X	view live or recorded webinars	X		X	X
<b>Phone Screener</b>	X	X	X*					X	X		X		X	X
<b>Coupon Manager (RDS only)</b>	X	X	X*			X		X	X		X		X	X
<b>Check-in Manager (FBS only)</b>	X	X	X*					X	X		X		X	X
<b>HIV test Counselors</b>	X	X	X*				X	X	X		X		X	X
<b>Counters (VBS only)</b>	X	X	X*					X	X		X		X	X

<b>Recruiters (VBS only)</b>	X	X	X*					X	X		X		X	X
<b>Data Manager</b>	X	X	X*	X	X	X		X	X		X	X		X

\*if assisting

### *Emergency procedures, field safety, adverse events, and field incidents*

Project staff should be trained in general field safety and emergency situations. They should be taught how to handle challenges involving the general public, field sites (RDS and FBS), weather, and participants (in particular, de-escalation techniques for unruly participants and emergency procedures for participants who have a negative reaction to the questionnaire or their HIV test result). Trainers should also discuss procedures for handling and reporting field incidents and adverse events, as well as a communication plan for alerting project staff in case of an emergency. Throughout the project cycle, the field supervisor should review safety procedures with the project staff at least once a month to ensure that they can successfully handle difficult situations.

**Required participants:** All project staff

### *HIV counseling and testing*

HIV test counselors should be trained according to local and NHBS-YMSM guidelines for HIV risk-reduction counseling, specimen collection, safe handling of specimens, providing test results, and if applicable, giving HIV test results over the phone. HIV test counselors must also hold all locally-required certifications.

**Required participants:** All HIV test counselors

## **2.4.b Recommended trainings**

Recommended trainings for project staff are described below and can also be found in **Table 2.4**. As with the required trainings, completed trainings should be documented in the Operations Checklist (**Appendix A**).

### *Human subjects and scientific ethics training*

This free online training covers the historical background of behavioral and biomedical research, the ethical principles for human subject research, and the role of the Institutional Review Board. Online completion time is approximately 30-90 minutes depending upon an individual's familiarity with the material. Courses can be found at either the Collaborative Institutional Training Initiative (CITI) website (<https://www.citiprogram.org>) or the NIH Protecting Human Research Participants (PHRP) website (<http://phrp.nihtraining.com/users/login.php>). Once registered, project staff can complete the course in multiple sittings.

**Recommended participants:** All field staff

### *Cultural diversity course*

A cultural diversity course is recommended for all project staff who interact with participants. Courses are often offered at local universities, state health departments, medical schools, or companies that specialize in diversity training. The Association of Schools of Public Health also has free online courses: ([http://www.asph.org/userfiles/PHTC\\_FINALCCDiversitybundle.pdf](http://www.asph.org/userfiles/PHTC_FINALCCDiversitybundle.pdf)).

**Recommended participants:** All field staff

## ***2.5 Project Staff Evaluations***

To help project sites evaluate pre-implementation and ongoing staff performance, **Table 2.3** outlines pre-implementation evaluation and performance recommendations, a recommended ongoing evaluation schedule, retraining recommendations, and a recommended retraining evaluation schedule. These evaluation and retraining recommendations can be tailored according to local needs and resources. The ultimate goal of these recommendations is to ensure that project staff are well-trained to carry out NHBS-YMSM activities in a standardized manner prior to implementation and that project staff maintain consistent quality standards throughout the data collection period. Project sites should discuss their plan for conducting staff evaluations and retraining with their CDC project officer. In addition, evaluation forms for each staff position can be found in **Appendices B** thru **I**.

### ***2.5.a Pre-implementation and ongoing evaluation***

Prior to implementation, each staff member should meet all the performance recommendations for their position. Ensuring that all project staff have demonstrated mastery of their position's skillset prior to implementation is important to ensure the standardization of skills within and across project sites from the onset of data collection.

Performance recommendations are the suggested quality standards that each staff position should attain prior to working in the field and should *maintain* throughout the project cycle. When a staff member no longer performs at the recommended skill level, retraining should occur to address the identified deficiency.

All project staff should be evaluated on a regular basis to ensure that standardization and quality data collection are maintained throughout the project cycle.

### ***2.5.b Recommended ongoing evaluation schedule and retraining procedures***

Ongoing evaluations are important for the reliability of NHBS-YMSM data. Retraining should occur each time a staff member has been identified as not having maintained a performance recommendation. It is recommended that project staff successfully complete retraining before re-entering the field to interact with participants.

### ***2.5.c Evaluators***

The principal investigator, project coordinator, or field supervisor should complete pre-implementation and ongoing evaluations for all project staff to ensure thorough job knowledge and successful job performance. Pre-implementation and ongoing evaluation forms should be kept on file as each evaluation is intended to build upon the previous assessment. To protect staff confidentiality, completed evaluation forms should be stored in a secure and locked location.

When evaluating interviewers, it is often helpful to have a portable computer to follow along with the survey.

Recommendations for evaluators:

- To ensure the most accurate assessment of a staff member's skill-level, do not serve as a mock participant and evaluator at the same time.
- Unless a major issue arises (i.e., assent-related, protocol violation, or a data entry error that would result in an entire section of the questionnaire being skipped), do not interrupt a staff member who is with a participant during an interview, HIV counseling session, or at the check-in/coupon manager station. If an evaluator needs to interrupt, it should be done discreetly, with communication directed to the staff member and not the participant.
- Provide positive feedback and recommendations for improvement to the staff member following each evaluation.
- Maintain pre-implementation and ongoing evaluation schedules.
- Discuss staff evaluations and retraining needs with the field supervisor.

#### ***2.5.d Project staff***

Project staff should be evaluated for each position they hold. Prior to their evaluations, they should be familiar with their job-specific evaluation form(s), performance recommendations, and any local requirements. Following each evaluation, the evaluation form should be reviewed with the staff member and positive feedback and recommendations for improvement should be provided.

When a staff member is evaluated during the project cycle, the staff member should follow a locally developed script to explain to the participant why an evaluator would like to sit in on the participant's session. Key points to be discussed with the participant are: (1) an evaluator would like to observe the staff member and **not** the participant, (2) the reason for the evaluation is to ensure quality standards for the project, and (3) it is the participant's **choice** to allow an evaluator to be present.

#### ***2.5.e Interviewer Report***

To help project sites assess the interviewers and provide feedback for improving their techniques, the DCC will produce an Interviewer Report containing the following tables: *Interviewer Capacity*, *Response Validity*, *HIV Test Consent*, and *Coding of "Other" Insurance*. Information on each table is provided in **section 15.3i** of this manual. Project sites should review the report at least once a week and discuss the findings with the interviewers to identify strengths and areas for improvement.

### 3.1 Overview

The purpose of this chapter is to describe the preparations that should be made prior to starting data collection. These preparatory tasks include: 1) developing a project logo and marketing materials, 2) requesting access to the Data Coordinating Center (DCC) data portal, 3) obtaining project supplies, and 4) establishing local safety and field incident reporting procedures. The preparatory work specific to FBS is described in detail in Chapter 6.

### 3.2 Project Logo and Marketing Materials

A project logo and marketing materials can be created for local project identification and to promote community awareness of the project. Preliminary research should guide the development of these materials and members of the community should be asked about the types of logos and marketing strategies that would be most appealing to potential participants. Moreover, marketing materials should be culturally appropriate and respectful of the local community. Once completed, **the logo and marketing materials must be reviewed and approved by the site's CDC project officer before they are printed and distributed.**



Because RDS relies on peer recruitment rather than recruitment by project staff, marketing materials should be used in a limited manner. Marketing materials may not be necessary to encourage participation and could actually hinder recruitment by advertising the project to the wrong target population, resulting in a large influx of self-referred and ineligible individuals. Marketing materials are best used to garner community support by relaying the project's goals and objectives to local stakeholders. Project sites may also find it helpful to add their project logo to their coupons to promote project identity and to benefit from any name recognition the project has generated in the community.

### 3.3 Access to the Data Coordinating Center Data Portal

Project sites will need to regularly submit the QDS™ Warehouse with their core surveys to the DCC data portal (see **section 16.2** of this manual). They will also use the data portal to enter data into the online HIV Test Results Log (see **sections 14.8a and 16.2** of this manual) and the online Data Error Log (see the *NHBS-YMSM Data Management Training Manual*). Project staff that need access to the DCC data portal should first receive approval from the principal investigator of the directly funded health department and then apply for access following the instructions in the *NHBS-YMSM Data Management Training Manual*.

### **3.4 Project Supplies**

This section describes the supplies that project sites should obtain before starting data collection. The Field Site Checklist (**RDS and FBS - Appendix J**) and the Recruitment Event Checklist (**VBS only - Appendix K**) have model lists of project supplies that are needed at field sites and recruitment events; project sites may need to modify the list to meet local needs.

#### **3.4.a Computers and survey software**

NHBS-YMSM must be conducted using computers, such as tablets or laptops. Therefore, project sites should check that their computers are functioning properly and ensure that enough are available for use in the field (including at least one backup).



Paper surveys **cannot** be used for data collection even if the computers are malfunctioning. Data collection must stop if none of the computers are operational.

To prevent erroneous dates or times from being entered in the survey database, interviewers should check the date and time displayed on their computers before conducting their first survey each day. They should also check the date and time periodically throughout the day to verify their accuracy.

Project sites must use QDS modules (version 2.6.1) to collect and manage NHBS-YMSM data. These modules include the Design Studio and Warehouse Manager. QDS modules using version 2.6.1 may not function properly on computers that also contain earlier versions of the modules, such as versions 2.4 and 2.5.

#### **3.4.b Materials**

Project sites should ensure that they have an adequate number of photocopied assent/consent forms, participant tracking forms, recruiter training scripts (RDS only), intercept forms (VBS only), incentives, flashcards, and other materials needed to conduct NHBS-YMSM activities. Flashcards that are laminated and attached to a ring may be easiest for interviewers to use in the field.

#### **3.4.c Forms and logs for project management**

To ensure successful project management and quality data collection, project staff should develop procedures for the day-to-day operations of NHBS-YMSM. Several forms and logs described throughout this manual are used to collect, track, and report information for different operational aspects of NHBS-YMSM. The field supervisor and other project staff will be responsible for completing, reviewing,

correcting, and updating forms in accordance with their local procedures and the *NHBS-YMSM Protocol*. Project sites are encouraged to develop additional forms to manage project activities as needed.

Project staff should use a binder to store forms and logs in a central and easily referenced location. Hard copies of forms that contain confidential information (e.g., logs or lab slips) should be stored in a locked file cabinet and handled in a manner which complies with the *Data Security and Confidentiality Guidelines for HIV, Viral Hepatitis, Sexually Transmitted Disease, and Tuberculosis Programs: Standards to Facilitate Sharing and Use of Surveillance Data for Public Health Action* (available at <http://www.cdc.gov/nchstp/programintegration/docs/PCSIDataSecurityGuidelines.pdf>). In addition to the aforementioned forms and logs, project staff may want to keep other materials and information in the project binder for easy reference, such as memorandums of understanding (MOUs).

**Table 3.1 Summary of forms and logs for project management**

<b>Form or Log</b>	<b>Method</b>	<b>Where Used</b>	<b>Purpose</b>	<b><i>NHBS-YMSM Operations Manual</i></b>
<i>Intercept Form</i>	VBS	Recruitment events	Record information collected during intercept.	Appendices V and W
		Project office	Enter recruitment event outcomes into VDTs Program.	
<i>Participant Tracking Form</i>	ALL	Field sites, recruitment events	Track participant information and record data edits.	Appendix R
		Project office	Enter data edits into the online Data Error Log (DCC Data Portal).	
<i>Rapid Testing Quality Control Log</i>	ALL	Field sites, recruitment events	Record external rapid test control results.	Appendix CC
<i>Rapid Testing Temperature Log</i>	ALL	Field sites, recruitment events	Record temperatures at which rapid tests and quality controls are stored and run.	Appendix DD
<i>Lab Slips</i>	ALL	Field sites, recruitment events	Identify specimens.	
<i>Specimen Transport/Shipping Log</i>	ALL	Field sites, recruitment events or project office	Transport or ship specimens to laboratory.	Appendix BB
<i>Appointment Reminder Call Form (if applicable)</i>	ALL	Field sites, recruitment events	Record information for optional reminder call for HIV test results appointment.	Appendix JJ
		Project office	Make reminder calls to participants.	
<i>HIV Testing Log</i>	ALL	Field sites, recruitment events	Record HIV testing data.	Appendix GG
		Project office	Enter HIV testing data into online HIV Test Results Log (DCC Data Portal).	
<i>Project Staff Evaluation Forms</i>	ALL	Field sites, recruitment events	Observe and evaluate project staff.	Appendices B - I

<i>Cost Evaluation Form</i>	ALL	Project office	Tracks financial information associated with operations	Appendix P
<i>Field Site Checklist</i>	RDS, FBS	Field site and project office	Facilitate preparation,, setup and closing of field sites	Appendix J
<i>Survey ID Log</i>	RDS	Field site and project office	Track survey numbers assigned.	Chapter 8
<i>Survey ID Log</i>	VBS	Recruitment events and project office	Track survey numbers assigned.	Chapter 11
<i>Facebook Data Tracking Form</i>	FBS	Project office	Tracks Facebook data on number of hits etc.	Appendix II
<i>CMP Log</i>	RDS	Field site and project office	Tracks coupon manager data	Appendix N
<i>Recruitment Event Information &amp; Outcomes Form</i>	VBS	Recruitment events	Record recruitment event information, notes, and outcomes.	Appendix S
		Project office	Enter recruitment event outcomes into VDTS Program (DCC Data Portal).	
<i>Recruitment Event Checklist</i>	VBS	Recruitment events and project office	Facilitate preparation for, setup and closeout of recruitment events.	Appendix K

### ***3.4.d Prevention and referral materials***

All participants who complete at least part of the questionnaire should be provided with HIV prevention and referral materials. Project sites should develop or compile these materials and have them readily available at their field sites (RDS and FBS) and with them at venues (VBS only). Examples of prevention and referral materials include:

- **Informational and educational pamphlets.**
  - Data describing the current state of the HIV, STD, and hepatitis epidemics.
  - Modes of transmission for HIV, STD, and hepatitis.
  - Strategies for preventing HIV infection through sex and drug use.
  - HIV testing, hepatitis testing, and other testing services.
  - Alcohol and drug treatment services.
- **List of referral agencies and contact persons.** So that project sites can readily make any necessary referrals, they should maintain a list of the names and contact information of health and social service providers in their communities. This list should include HIV and STD clinics, services for children and youth suffering physical, sexual or emotional abuse, substance abuse treatment centers, homeless services, mental health service providers, and agencies that offer free HIV, STD, and hepatitis testing.
- **Supplies** used to reduce HIV risk, such as condoms and lubricant.



Some project sites have found that packing prevention and referral materials in creative ways increases their appeal to participants.

### ***3.4.e Other supplies and materials***

Project sites should obtain any other supplies needed to carry out project activities. In regard to HIV testing, project sites should have an adequate supply of test kits, specimen collection devices, protective equipment, and package inserts for the rapid test being used as described in chapter 14.

## ***3.5 Local Safety Procedures***

Before starting field work, project sites must develop local safety procedures, document these procedures in the Operations Checklist (**Appendix A**), and train project staff on the procedures. Local safety procedures should include a communication plan for alerting project staff to a general threat, plans for dealing with threatening situations, and procedures for reporting field incidents. Field supervisors should periodically review local safety procedures with project staff to ensure that they stay current on what to do in case of an emergency.

It is important for project staff to prevent problems by using common sense and advance planning. Project staff must be alert to their own safety and to that of their co-workers at all times. A basic awareness of one's surroundings is critical when working in the field. Each staff member is also responsible for maintaining a safe working environment. The field supervisor is generally responsible for crowd control and overall safety. The field supervisor must have emergency contact information for each staff member working in the field and he must have this information readily available at all times.

### ***3.5.a General principles of field safety***

It is important for project staff to prevent problems by using common sense and advance planning:

- Call 911 without hesitation if danger is present.
- Always carry a project or health department identification card.
- Plan ahead, be alert, and use common sense.
- Have a first aid kit available.
- Always have at least 3 staff members at each field site during the hours of operation (RDS and FBS) or at each recruitment event (VBS).

### ***3.5.b Steps for field safety***

Project sites should consider the following steps for field safety:

#### *Plan ahead*

- Have an emergency action plan.
  - Know what you are going to do ahead of time in case things go wrong.
  - Know who to contact in case of emergency.
  - Always know the location of all exits at the field site.
  - Always know the location of all exits at the venue where the recruitment event is being conducted.
- During interviews, always position yourself closest to the door; you do not want an unruly participant between you and the exit.
- Consider developing a code word to call for assistance from a co-worker. For example, you might use the phrase “bring the red folder.” Then, if you are not comfortable interviewing a participant alone or need help with an uncooperative participant, you could ask a co-worker to “bring the red folder” to indicate that you need assistance.

### *Be alert*

- Be aware of your surroundings.
- If a threatening situation arises, remove yourself from the situation immediately. Leave quickly, but do so carefully and in a calm manner.
- Use all of your senses to assess a situation. If your “sixth” sense tells you that the situation is not safe, seek immediate assistance from a co-worker or security person.
- Approach every potential participant as though he is welcoming, but be cautious if you have concerns about him.

### *Use common sense*

- Limit the amount of cash you carry.
- Avoid wearing or carrying articles that look valuable. Jewelry, purses, expensive watches, and cameras invite theft.
- Avoid wearing articles of clothing with political or culturally insensitive images.
- Do not carry illegal weapons.
- Never leave the keys in your car or the doors unlocked.
- Do not use illegal drugs or alcohol while you are working.
- Do not make change or give donations to those asking for money while you are working.
- Do not buy or receive merchandise from participants.
- Do not accept gifts from anyone.
- Do not offer rides to participants or accept rides from them.

### ***3.5.c Techniques for handling dangerous or difficult situations***

***End the interview*** at any point if you feel threatened by the participant.

#### *Aggressive or threatening individuals*

If directly confronted by an individual, employ verbal de-escalation techniques: position yourself at an angle and allow extra space between you and the other person; do not smile; let the participant vent; listen to and acknowledge his concerns; avoid becoming defensive; lower your voice, tone, and tempo; and respond to valid complaints. Local safety officials (police, fire, and rescue) may be able to provide de-escalation training.

### *Sexual harassment*

If a participant is making sexual advances or sexually harassing you, you have the right to terminate the interview. If you feel the participant is behaving inappropriately, you should first remind him that you are only there to interview him and that you are not interested in any sexual offers. If the participant continues, state that you are going to stop the interview if he cannot stay focused on the questions. If this does not work, terminate the interview.

### *Inebriated, high, or drowsy participants*

A participant may not be able to complete the interview or give accurate responses for a variety of reasons. For example, he may be unable to give intelligible answers to the questions or he may nod off during an interview if he has had little sleep or has recently used alcohol or drugs. If the participant is unable to provide coherent answers during eligibility screening, then he should be made ineligible; and if he cannot provide coherent answers during the core survey, his interview should be stopped (see **section 8.6c** of this manual for further guidance).

### **3.5.d Safeguarding portable computers**

Carrying and using portable computers may attract attention and could pose a safety risk to project staff. When in possession of a portable computer, project staff should adhere to the following guidelines:

- Store your portable computer out of view in a secure place when you are not using it.
- Try to be inconspicuous when carrying and using your portable computer. **Never** leave it unattended at the field site or venue.
- Upload data from portable computers to the central database on a secure data drive after each day of field site operation or recruitment event.

## **3.6 Field Incident Reporting Procedures**

Project sites should create field incident reporting procedures and include them in the Operations Checklist (**Appendix A**). These procedures should adhere to all local IRB requirements. A model field incident report is provided in **Appendix L**. In the event that an incident occurs, project staff should notify their field supervisor within 24 hours. The field supervisor or project coordinator should then notify CDC within 24 hours and complete a “Field Incident Report” and send it to their CDC project officer. Project sites should then discuss the field incident with their CDC project officer to determine whether it is an adverse event and should be reported to the local IRB(s) (see Chapter 11 of the *NHBS-YMSM Protocol*).

### **3.7 Operations Checklist**

The Operations Checklist will help get sites ready for data collection and is found in **Appendix A**. Project sites should complete the checklist, along with the requested attachments, and send them to their CDC project officer at least **two weeks** before the planned start of data collection. If they choose, project sites can also send draft sections of the checklist to their CDC project officer as soon as the sections are completed. Once the checklist has been finalized, the CDC project officer will set up a conference call with the project site to review the checklist to ensure that all preparatory activities have been satisfactorily completed. Data collection **cannot** begin until the CDC project officer has given approval. Over the course of data collection, project sites should update the checklist whenever there are any changes to operations (e.g., new staff, new field sites, number of coupons distributed) and they should promptly send the revised version of the checklist to their CDC project officer.

### **4.1 Overview**

Seeds are non-randomly selected members of the target population who initiate the RDS chain-referral process. They are usually chosen by referral from key informants or during outreach by project staff. After a seed completes an interview, he is asked to recruit up to five people he knows who live in the project area who are between the ages of 13 and 17, live in the project area and whom the seed knows identifies as gay or bisexual, or is attracted to or has sex with other guys. A successful recruitment chain may grow from each seed. Project staff should not expect or depend on all seeds to be productive. Because seeds start the recruitment process, they play an important role in RDS studies and should be selected carefully.

### **4.2 Identifying and Recruiting Seeds**

Key informants consulted during preliminary research can be the starting point for identifying and recruiting seeds. Key informants serve as “cultural experts,” providing insight into the characteristics, behaviors, and social networks of young MSM in the project area. Examples of key informants include community leaders, persons doing outreach work in communities, staff from organizations providing services to young MSM, and young MSM themselves. Enlisting the assistance of a diverse group of key informants will help project sites identify a diverse group of seeds.

Key informants should be told what characteristics are desired in a seed (see sections **4.2a** and **4.3**) and what the basic eligibility criteria are for a seed. A seed must:

- be 13-17 years of age,
- live in the participating MSA or Division,
- have been born male and are currently living as a male,
- report being sexually attracted to other males OR
- self-identify as gay, bisexual, queer or same-gender loving OR
- have ever had any sexual contact with another male,
- be able to complete the study in English, and
- not have already completed at least part of NHBS-YMSM

Since seeds who do not meet the eligibility criteria could provide false answers during screening, key informants should be asked to not reveal the eligibility criteria to potential seeds. Initial contact between seeds and project staff members can occur in several ways. Since seeds will be identified through key informants, the informant may set up an appointment for the NHBS-YMSM staff member to meet the seed or the seed can contact the study to make the appointment themselves. In addition, the

seed may provide their contact information (first name or nickname, phone number and/or email address) so that a project staff member can follow-up to schedule an appointment.

When potential seeds are referred or recruited, the project staff should briefly describe the study to them using the information in their local assent/consent form or in the Model Recruiter Training Script (**Appendix M**). Without revealing the eligibility criteria, project staff should also make it clear to potential seeds that their participation is not guaranteed. In prior RDS studies, project staff told potential seeds that a computer would be used to ask them some background questions and then the computer would determine whether they had been selected to participate in the study.

#### ***4.2.a Seed characteristics***

The ideal seed is someone who is motivated to recruit, has a large personal network, and is well respected in the community. These characteristics increase the likelihood that the seed will be able to recruit others to participate in the study. Moreover, seeds should be diverse with respect to factors such as age, race/ethnicity, geography, and any other factors that may create more insular social networks. For example, if young MSM from one part of town do not interact much with young MSM from another part of town, cross-recruitment between these groups would be very limited or non-existent. Accordingly, the project site should select seeds from both areas to ensure that both sub-populations are represented. Similarly, if white young MSM do not interact with Hispanic young MSM, the project site should select some seeds that are white and some that are Hispanic. However, selecting seeds by demographic characteristics alone may not ensure access to diverse social networks. For example, a white seed may be embedded in a Hispanic social network, in which case he may produce a similar recruitment chain as a Hispanic seed that is embedded in a Hispanic social network. An additional consideration is whether young MSM at the younger end of the 13-17 age spectrum interact with young MSM that are a little older – it is likely that seeds from each age group need to be selected. In addition, **Chapter 7** of this manual describes ways to target different populations using field sites.

Seeds should also reflect the sub-populations which contribute most significantly to the local HIV epidemic among young MSM. During preliminary research, project sites should identify those sub-populations from which seeds should be chosen to yield a representative sample of young MSM.

#### ***4.2.b Number of seeds***

There is no specific number of initial seeds that will guarantee project sites reach the sample goal of 300 individuals. However, based on prior RDS studies, it is recommended that project sites start with six seeds and then re-assess whether any more are needed. When selecting seeds project sites should consider how closely sub-populations are networked in their local community – something which should be determined during preliminary research. If two or more sub-populations are **not** closely networked, project sites will need to select a small number of seeds (1-2) from each of the sub-populations (see **Chapter 7** of this manual for ways to target such populations using field sites). On the other hand, if two

or more sub-populations are closely networked, a small number of seeds from any of the closely-networked sub-populations will be sufficient to start recruitment.

It is important that sites do not choose too many seeds because the sample size could be reached before equilibrium is achieved and the RDS method would be undermined. Project sites must consult with their CDC project officer before deciding on the total number of seeds to select and they must obtain their project officer's approval.

#### *4.2.c Selecting additional seeds*

If the initial seeds do not recruit participants or if enrollment is halted because all the recruitment chains, or recruitment chains within a particular sub-population have “dried up” (i.e., stopped recruiting), then additional seeds will need to be selected. With RDS, seeds do not all have to be chosen at the beginning of the study or at the same time. Before selecting additional seeds, project sites should first conduct ongoing research to determine if there are any barriers to study participation that have caused recruitment to stall. All decisions about recruiting more seeds must be made in consultation with the site's CDC project officer and must be documented in the Operations Checklist (**Appendix A**).

### **4.3 Assessing Seeds**

All potential seeds should be assessed by either the key informant who referred them or the staff member who recruited them to determine if they are likely to be “productive” seeds and recruit others. The ideal characteristics of a seed are:

- **Connected to many other people in the community:** A good seed will know many other individuals living in the project area. If one imagines a social network with lines drawn between people to show relationships, a seed is someone with a lot of lines radiating out; that is to say, a focal point of the network.
- **Respected and well-liked:** Young men who are considered “leaders” within their circle of friends or associates will make effective seeds since they can persuade people to participate in the study and to recruit others. A good seed is someone who others in the community come to for information or advice.
- **Communicates well orally:** Seeds should be able to express themselves clearly when engaged in a conversation; this will give an indication of their ability to explain the study to others.

Young men who are extroverted or talkative but not socially connected to others will not make good seeds. The best seeds are people who understand the project and can accurately describe it, who support the project's goals and objectives, and who can enthusiastically encourage others to participate.

Once referred or recruited, potential seeds should be asked questions to assess their suitability to be “productive” seeds. Examples of the types of questions project sites can ask are:

- *Do you have many male friends, relatives or people you associate with who are between the ages of 13 and 17, live in [the project area] and whom you know identify as gay or bisexual, or are attracted to or have sex with other men?*
- *Are you willing to recruit young men between 13 and 17 years of age that you associate with who live in [the project area] for the study?*
- *Of the young men you associate with who live in [the project area], can you think of 3 to 5 you have seen in the past 30 days that you could recruit for the study? Do you think these people would be willing to participate in the study?*
- *Have you been involved in any other health studies before?*

## **4.4 Screening and Interviewing Seeds**

If a potential seed satisfies the assessment criteria, he should be referred for eligibility screening using a referral card (see **section 4.5**). Project sites should use the referral card to make an appointment to screen the potential seed at one of their field sites or they should use the pre-printed number on the referral card as the survey ID when screening the potential seed in the field where he was recruited. If a potential seed is screened and found to be eligible, he will be offered the opportunity to participate in the study and receive an HIV test. Seeds who complete the study will be able to recruit other participants.

### **4.4.a Screening and interviewing by appointment**

If a project site does not screen potential seeds in the field (see **section 4.4b**) or if a potential seed is not available to be screened when he is approached, the project site should make an appointment to screen and interview the potential seed at a field site at a mutually convenient time. Project staff who are recruiting seeds in the field should maintain a list of possible appointment dates and times or they should call the staff at the field site to schedule appointments. The day of the week, the date, and the time of the appointment should be recorded on a referral card. To avoid any confusion, the appointment information should be written out completely (e.g. Monday, June 7, 2014 at 1:00 pm). The day, date, and time of the appointment should also be recorded in an appointment book or log, along with the survey ID (pre-printed number on the referral card).

When giving the referral card to the potential seed, project staff should review the appointment information on the card and the directions to the field site. Project staff should also tell the potential seed that he should call the project phone number on the referral card if he needs to reschedule his appointment. In addition, the seed may provide their contact information (first name or nickname, phone number and/or email address) so that a project staff member can remind them of their appointments or to follow-up with them if they miss their appointments. Project sites may want to include an expiration date on their referral cards to motivate potential seeds to keep their appointments

or to promptly reschedule them. To achieve this goal, expiration dates should be no later than 1 to 2 weeks after a scheduled appointment. Of further benefit, expiration dates ensure that potential seeds enroll at the very beginning of the project cycle when they are needed to initiate recruitment chains.

#### ***4.4.b Screening and interviewing in the field***

If a potential seed is available to be screened when he is approached, project sites may interview him in the field. To do this, project sites must have all the materials and equipment needed to conduct an interview, test for HIV, and provide recruiter training. They will need referral cards, portable computers with the questionnaire, assent/consent forms, HIV test kits, incentives, recruitment coupons, and a computer with the Coupon Manager Program (CMP). To operate in the field, project staff must protect the confidentiality of the potential seed at all times; no one outside of the project should be able to hear or observe any proceedings. If confidentiality cannot be guaranteed in the field, project staff cannot interview potential seeds there. Instead, they will have to schedule an appointment to screen and interview the potential seed at a field site.

### **4.5 Referral Cards**

Referral cards serve as both appointment cards and coupons for seeds. They are given to seeds when they are scheduled for an appointment to be screened at a field site or when they are screened in the field at the time of recruitment. Each referral card should have a pre-printed number on it. Referral card numbers must be **unique** and **sequential**. They should be 4-digits long and range from 0001 to 0888. Project sites should not use numbers greater than 1000 for referral cards because these numbers are reserved for recruitment coupons (see **section 4.2** of this manual). Since the referral card numbers will serve as the survey IDs for the seeds, project sites must strictly adhere to the aforementioned referral card numbering conventions.



Survey IDs are used to distinguish the sampling method used: For RDS, participants who are seeds will have a survey ID ranging from 0001-0888 and participants who are not seeds will have a survey IDs ranging 3000 to 5999. For FBS and VBS, participants will have survey IDs ranging from 6000 to 8999. Survey IDs (referral card numbers) used during practice interviews should range from 9000 to 9999. If project sites only use numbers that begin with a “9” for practice interviews, the Data Coordinating Center (DCC) will be able to easily identify any practice interviews that are inadvertently included in the QDS™ Warehouse.

#### ***4.5.a Making referral cards***

Project sites may have their referral cards professionally printed or they may make the cards themselves. Referral cards may be designed however a project site wishes, but they must contain specific information on their front and back as illustrated in **Figures 4.1** and **4.2**.

Figure 4.1 Example of the front of a referral card

1 → 0001 **Project ASK** ← 2 0001

You have an appointment on

3 → Day: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_ Time: \_\_ : \_\_\_\_

at 7125 Central Avenue, 2nd Floor. ← 4  
(Directions are on back.)

5 → Please call 1-888-865-4327 if you have any questions or if you need to reschedule.

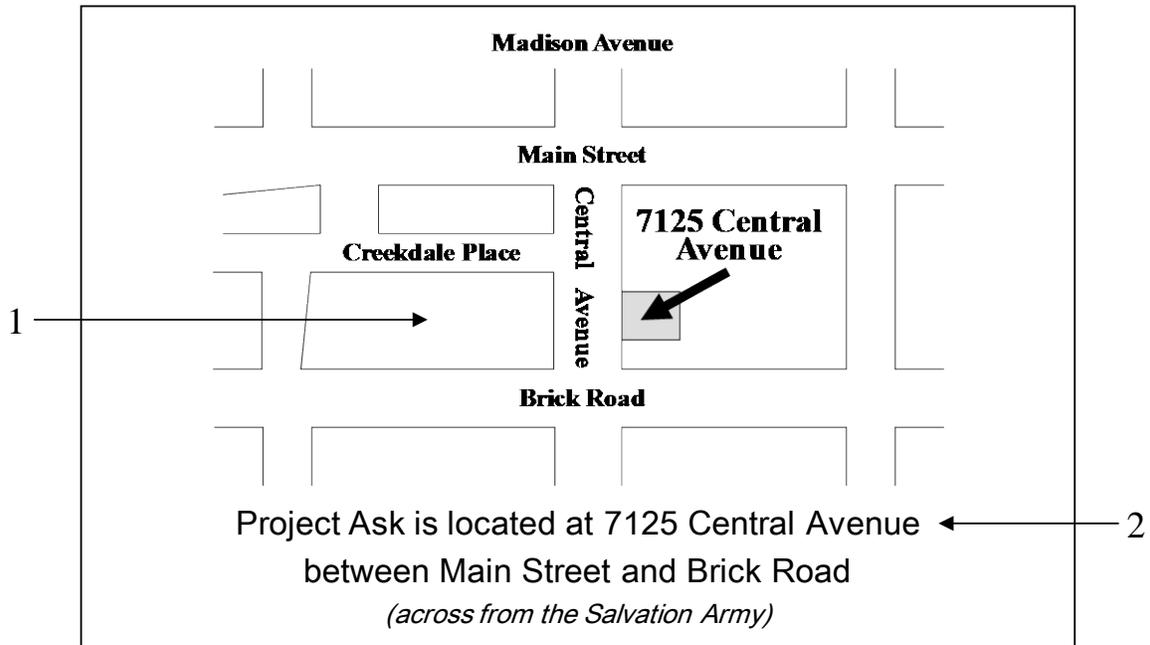
Coupon expires on: \_\_\_ / \_\_\_ / \_\_\_ ← 6

1. Referral card number ranging from 0001 to 0888.
2. Name of the local NHBS-YMSM project.
3. Space to record the day, date, and time of the potential seed's screening appointment.
4. Address of the field site.
5. Phone number to call for project information or to reschedule an appointment.
6. **Optional:** Space to record an expiration date.



If days, times, and addresses of multiple field site locations cannot fit on the front of the referral card, project sites may include this information on the back of the card. The maps and directions normally printed on the back of the referral card can then be placed on a separate flyer that is distributed with each card.

Figure 4.2 Example of the back of a referral card



1. Map showing the location of the field site.
2. Directions to the field site.



“HIV” or “AIDS” should not be included on the referral card because of the stigma associated these terms.

To help project staff distinguish between referral cards (used for seeds only) and recruitment coupons (used for non-seeds only), cards should be printed on different colored paper and have a different size.

### 5.1 Overview

Coupons have an extremely important role in RDS; they are used to identify and keep track of young men recruited for the project. When a participant recruits another person for the project, he will give the recruited person a coupon. The coupon identifies that person as a valid recruit and is required for project participation. The coupon also contains a unique code number that allows the Coupon Manager Program (CMP) to link the recruited person to his recruiter. This recruiter-recruit linkage is an essential component of RDS analysis.

### 5.2 Coupon Number

Each coupon should have a pre-printed number on it. Coupon numbers must be **unique** and **sequential**. They should be 4-digits long. The coupon numbers will correspond to the survey IDs for participants.

- Use coupon numbers ranging from 1-888 for seeds
- Use coupon numbers ranging from 3000 to 5999 for non-seeds (the majority of participants).

Since the coupon numbers will serve as the survey IDs for the participants, project sites must strictly adhere to the coupon numbering conventions.



Survey IDs are used to distinguish the sampling method used:

For RDS, participants who are seeds will have a survey ID ranging from 0001-0888 and participants who are not seeds will have a survey IDs ranging 3000 to 5999. For FBS and VBS, participants will have survey IDs ranging from 6000 to 8999.

### 5.3 Coupon Options

Based on their findings from preliminary research and to a limited extent, experiences from previous NHBS cycles using RDS (IDU and HET), project sites should decide how many coupons to distribute to seeds and other participants. They should also determine whether or not to include an activation date or an expiration date on their coupons. Activation and expiration dates define a period when coupons are valid for project participation.

### *5.3.a Number of coupons distributed*

Project sites should give coupons to each participant who completes the survey and agrees to recruit others (see Chapter 4 and 8 of the *NHBS-YMSM Protocol*). The number of coupons given out should always be decided in consultation with the CDC project officer. The number of coupons given to each recruiter will vary by project site depending on the likelihood that one of the distributed coupons will yield a participant who completes the survey. The lower the likelihood that a coupon will yield a participant, the greater the number of coupons a project site must give out to ensure that enrollment does not decrease with successive recruitment waves and eventually die out. During previous NHBS cycles using RDS (IDU and HET), project sites found that giving 2 or 3 coupons to each recruiter was usually sufficient for enrollment to progress successfully. Giving more coupons than this is likely to negatively impact data quality, as well as any RDS analyses performed on the data. Nevertheless, project sites may want to give the maximum of 5 coupons to seeds, and then reduce the number of coupons given to subsequent participants. Since recruiting seeds requires a considerable investment of time and effort, giving the maximum number of coupons to seeds will optimize the chance that they yield participants. Given that this is the first time that an NHBS supplemental study is using RDS to recruit young MSM, preliminary research will be key in determining the number of coupons distributed.

If participation by a specific sub-population is less than what is expected based on preliminary research, project sites can increase the number of coupons given to recruiters from the underrepresented sub-population to improve their enrollment. Likewise, to help prevent the sample from becoming biased if a specific sub-population starts to dominate enrollment, project sites can decrease the number of coupons given to recruiters from that sub-population or stop giving coupons to them altogether. As mentioned above, this is referred to as differential coupon distribution. Differential coupon distribution is a drastic action, however, and should only be used when the sample would not represent those sub-populations most affected by the local HIV epidemic without intervention. Before increasing the number of coupons given to a select sub-population, project sites must first conduct ongoing monitoring to determine why participation by that sub-population is low and they must address any recruitment or participation barriers identified (see **section 15.6** of this manual). If these actions do not improve enrollment by the underrepresented sub-population, project sites may then distribute more coupons to them. The under- or overrepresentation of a sub-population often requires immediate intervention. Accordingly, project sites should discuss any potential recruitment problems with their CDC project officer as soon as possible to prevent them from escalating into irreversible recruitment problems.

During NHBS cycles using RDS (IDU and HET) project sites are advised to avoid giving more than 2 or 3 coupons to each recruiter to prevent the number of recruits from greatly exceeding the field staff's capacity to interview them. This is unlikely to happen in NHBS-YMSM however.

In previous NHBS studies, some project sites gave fewer or no coupons as the data collection period approached its end date because they were concerned community relations would be harmed if the cycle ended with a large number of recruited individuals who could not be interviewed. This approach may have been helpful at extremely busy project sites, but most others found it unnecessary and it is

not likely to be a problem during NHBS-YMSM. As the end of data collection approached, project sites that continued to give the same number of coupons maintained community relations by emphasizing the project end date both during recruiter training and when describing the project to potential participants.

When deciding how many coupons to distribute, project sites need to balance the ability to enroll participants, which may require giving more coupons, with adherence to the best methodological practice, which necessitates giving fewer coupons. Project sites should decide the exact number of coupons to distribute in consultation with their CDC project officer. If they want to change the number of coupons, they must also obtain approval from their CDC project officer; they may not change the number of coupons on their own. This is especially true for field staff. Field staff should *never* change the number of coupons given out. They must always distribute the number of coupons agreed to by their senior managers and their CDC project officer. In addition, whenever project sites change the number of coupons distributed, they *must* record the change and the reason for the change in both the CMP and the Operations Checklist (**Appendix A**).

### ***5.3.b Coupon activation dates***

A coupon activation date is a date when coupons become valid for participation in the project. On or after the coupon activation date, a potential participant may bring his coupon to one of the field sites to begin the check-in process. Project sites should decide whether or not to include an activation date on their coupons. If they do include an activation date, they will also have to decide how long to wait after a recruiter is given coupons for the coupons to become active. In previous RDS studies, most project sites set an activation date that was one day after the coupon was distributed.

Some project sites have found that activation dates allow them to better control participant flow and prevent their field sites from becoming inundated with large numbers of unplanned participants. It is also possible that activation dates decrease the likelihood that recruiters will recruit “strangers” (i.e., people they do not know personally). For example, if coupons do not become valid for a day, recruiters may be less likely to leave the field site and give their coupons to the first people they see hanging out on the street. Giving coupons to people hanging out on the street that the recruiter does not know is problematic because it violates the RDS assumption that participants only recruit from within their personal networks and do not recruit “strangers.” This is probably less likely to be an issue during NHBS-YMSM, so field sites should consider this carefully as activation dates might also hinder recruitment. This can be the case especially for project sites that have several field sites far apart from one another and only operated in each field site once a week. Even with a short one-day activation period, recruits at these project sites have to wait a week before they can participate in the study at a convenient location. As a result of the long delay between the time between recruitment and participation, recruits may lose interest in the project and never try to participate. In NHBS-YMSM, participants might be traveling to the field site together with a friend who is also a young MSM. Using coupons that are valid right away would facilitate recruitment in this scenario.

### *Changing activation dates*

During the course of data collection, project sites may change the interval for their coupons to become valid if they think it will improve recruitment or operations. Similarly, project sites that do not initially include an activation date on their coupons may later add one and project sites that do initially include an activation date may later eliminate it. Before making any changes to coupon activation dates, however, project sites should discuss the changes with their CDC project officer and obtain the project officer's consent.

### ***5.3.c Coupon expiration dates***

A coupon expiration date is a date when coupons are no longer valid for participation in the project. After the coupon expiration date, participants may not enroll in the project. All project sites must include an expiration date on their coupons. At the very least, this date must be the last day planned for project operations. Project sites may also choose an earlier expiration date if they wish. For example, in previous NHBS cycles using RDS (HET and IDU), some project sites had coupon expiration dates that were 4 to 6 weeks after the coupons were distributed. These project sites felt that an earlier expiration date resulted in faster recruitment. Yet, many project sites found that earlier expiration dates were unnecessary because most recruits returned their coupons within one or two weeks of their recruiter's participation in the project. Moreover, less busy project sites felt that early expiration dates were harmful to enrollment because they excluded potential participants. Another possible problem is that expiration dates may increase non-response bias by creating a selective participation barrier to those with less availability to take part in the project, such as working persons and those who live far from the field site. For these reasons, early expiration dates should be used with caution. Project sites that choose to have their coupons expire within a few weeks of distribution should carefully monitor recruitment and continuously assess participant characteristics for any biases.

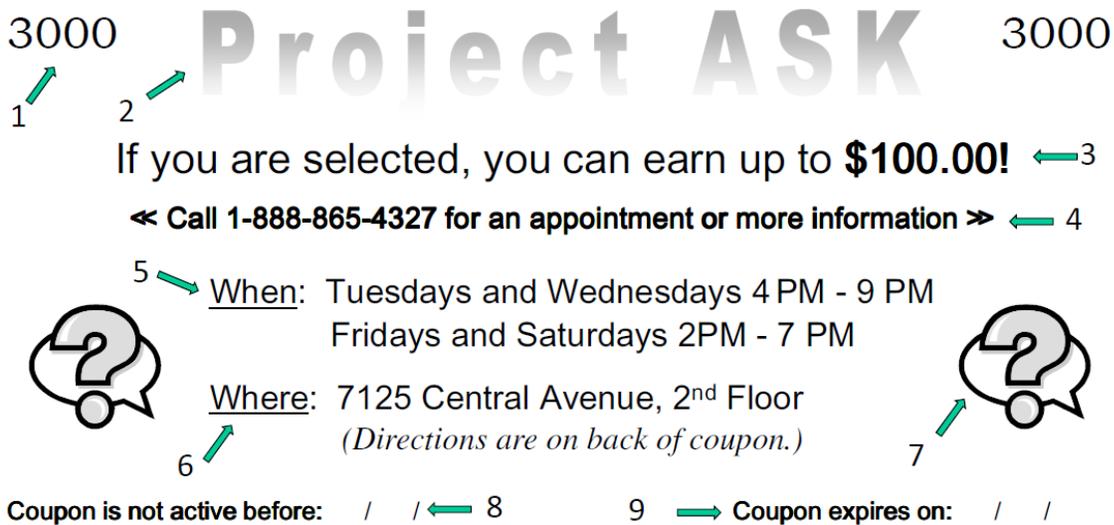
### *Changing expiration dates*

As with activation dates, project sites may change the interval before their coupons become invalid if they think it will improve recruitment or operations. Expiration dates may be made earlier or later, but they may not be eliminated. As mentioned above, at the very least, coupons must expire on the last day planned for project operations. Project sites should discuss any proposed changes to their coupon expiration dates with their CDC project officer and obtain the project officer's approval for the change.

## 5.4 Making Coupons

Coupons can be professionally printed or project sites can make the coupons themselves. Coupons may be designed however a project site wishes, but they must contain specific information on the front and back as illustrated in **Figures 5.1** and **5.2**.

**Figure 5.1 Example of the front of a coupon**

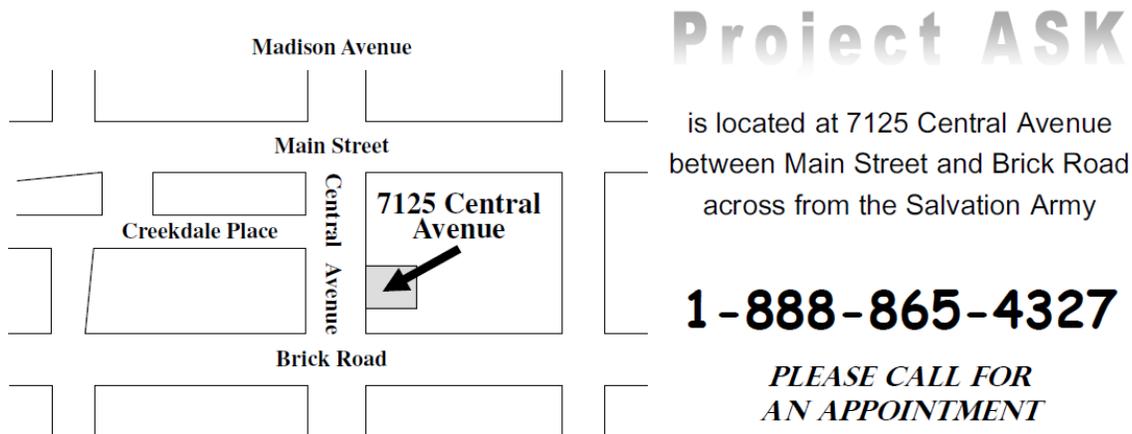


1. Coupon number ranging from 3000 to 5999.
2. Name of the local NHBS-YMSM project.
3. Incentive type and amount for participants who are selected and complete project components. Avoid using 'eligible'.
4. Phone number to call for project information and if applicable, to schedule appointments. It is best to have a toll-free number.
5. Days and hours of field site operations.
6. Address of the field site.
7. Project logo or some other security feature, like a hologram or barcode.
8. **Optional:** Space to record an activation date.
9. Space to record an expiration date.



If the days, times, and addresses of multiple field site locations cannot fit on the front of the coupon, they can be included on the back of the coupon. The maps and directions normally printed on the back of the coupon can then be placed on a separate flyer that is distributed with each coupon.

**Figure 5.2 Example of the back of a coupon**



“HIV” or “AIDS” should not be included on coupons because of the stigma associated with these terms.

To readily distinguish coupons from referral and information cards, they should be printed on different colored paper and have a different size. Furthermore, coupons should be small enough when folded to fit in a pocket, but not so small that they could be easily lost. In other RDS studies, it has been customary to cut coupons to the size of a dollar bill (approximately 6.5 inches by 2.5 inches) to underscore their intrinsic value. One previous study had success printing the coupons on a special gold paper. This signaled value to participants and perhaps they were less likely to lose the coupon. Also, this paper could not be bought in regular stores so it was hard to create counterfeit coupons.

## **5.5 Coupon Tracking System**

As part of records management, project sites should develop a system for tracking the coupons distributed and returned each week.

### **5.5.a Tracking coupons distributed**

Project sites should use a log to keep track of the numbers on the coupons given out. The CMP Log (**Appendix N**), which is used to back up the CMP, can also be used to collect this tracking information. To facilitate tracking and records management, coupons should always be given out in order of their coupon numbers, starting with the smallest number.

### ***5.5.b Tracking coupons returned***

Project sites should keep track of the coupons returned by participants, including coupons from ineligible participants and expired coupons. An easy way to manage returned coupons is to have a set of file folders or envelopes labeled with the dates for each week that data are collected (e.g., Week 1: 7/1 – 7/7, Week 2: 7/8 – 7/14, and so on). When a participant returns a coupon, the coupon should be marked “USED,” “VOID,” “EXPIRED,” or with similar terms to indicate that the coupon is no longer valid and the reason why. The coupon should then be placed in the folder or envelope labeled with the week the coupon was returned.

### **6.1 Overview**

Recruitment via the Internet for subsequent in-person interviews has been implemented in several studies of the adult MSM population. Data from these studies suggest that it is possible to engage MSM online for subsequent in-person interviews, though with high attrition between first contact and interview (Parsons et al., 2013; Fernandez et al., 2004; Elford et al., 2004; Raymond et al., 2010; Grov et al., 2012). While little is currently known about how this process would function among adolescent MSM, there is reason to believe that online recruitment would be viable. Almost all (95% of 12-17 year olds) adolescents use the Internet for a variety of purposes (Brenner 2012). In addition, the Internet's ability to reach "hidden" populations (Duncan et al., 2003) aligns with the description of many young MSM, who do not have access to adult MSM venues, may not be extensively networked with other MSM, and could be at the earlier phases of their coming-out trajectory.

Facebook, a popular social networking site, was selected as the vehicle for online-recruitment for NHBS-YMSM because 77% of adolescents 12 to 17 years old use Facebook (Brenner 2012) and unlike many MSM-specific Internet sites (e.g., Manhunt.com, Gay.com), Facebook is accessible and free to adolescents. It is likely that young MSM are using Facebook at rates similar to those of their peers.

Facebook users will learn about the study through banner advertisements. By clicking on a banner ad, they will be directed to a landing page where information on the study will be provided and contact information collected. The potential participant will be contacted by study staff to be screened for eligibility and to schedule an appointment to one of the study sites.

There are four main activities that make up Facebook Sampling (FBS): 1) placing banner advertisements on Facebook; 2) developing a "landing page" which provides NHBS-YMSM project information and collects contact information; 3) conducting telephone eligibility screenings and scheduling appointments; and 4) completing in-person eligibility screenings and interviewing eligible participants. Steps 1-3 are described in detail in this chapter and step 4 is described in Chapter 8.

This chapter also describes how sites should collect additional data related to FBS.

### **6.2 Making the Banner Advertisements and Targeting the Population**

Facebook allows for the placement of targeted banner advertisements that will only be shown to individuals who meet specific criteria. In NHBS-YMSM, banner advertisements designed by the project sites and reviewed by your CDC project officer will be placed on the Facebook feeds of young men

potentially eligible for NHBS-YMSM activities that are aged 13 to 17 years and live within the project site boundaries. See **Appendix O** for the CDC-cleared images.

### ***6.2.a Banner advertisements***

Landing page language and images will be standard across sites, although each site will setup and manage its own Facebook banner ads and landing page. Sites should periodically change the pictures in the banner ads to promote more clicks, particularly when ad analytics suggest that the ad is not performing well. Changing the images in the ad periodically may also help the ad appeal to different subpopulations of young MSM.

Facebook regularly changes the processes to setup and manage banner advertisements, the most recent procedures can be found by going to this link: [www.facebook.com/advertisement](http://www.facebook.com/advertisement). The details below describe the process for setting up banner ads on Facebook and are current as of 7/10/2014. However, given the frequency of changes to the Facebook interface, consult the Facebook website itself for the most up- to-date procedures.

#### *Creating the ad*

- From your Facebook homepage, go to “create ads” which is found under the “down arrow” icon in the top right of the Facebook homepage.
- On the next page, select “clicks to website” under the options for “what kind of results do you want for your ads?”
- Paste in the URL for your site’s local landing page in the indicated field and click “continue.”
- On the next page, upload the approved images under the “images” panel. (See Figure 6.1)
- Copy in the approved text for the banner ad under “Text and Links.” (See figure 6.2)
- In order to promote more clicks, you should create a Facebook page for the local NHBS-YMSM program, which can be linked to the ad. The advantage of this is that it will allow the ad to appear in the Facebook newsfeed and on mobile versions of the Facebook site. There is a button to create the Facebook page under “Text and Links”. Note that the ad will still link to the landing page and NOT to the Facebook page. The “like” feature of the Facebook page for the local NHBS-YMSM program should be disabled. The page must be reviewed by your CDC project officer before enabling the Facebook page.
- Under audience, specify the NHBS-YMSM demographic targets. For example the location will be the principal city of the MSA, age will be 13-17, and gender will be men. You can try to further target by including “interested in men” as an additional option; however using this option may decrease the target audience to lower than the 1000 person minimum. (See figure 6.3)
- Under interests, type in the list of “likes” elicited through preliminary research activities. (see figure 6.3)
- You may also adjust the settings under “More Categories” and “Behaviors,” but note that adjusting these categories, as previously mentioned, may or may not be useful in targeting potentially eligible young MSM.

- Adjusting the settings in any way will change the “audience definition” panel on the right side of the screen, which displays the magnitude of the reach of ad, which is the number of Facebook users who meet the defined criteria.
- Any changes to the audience definition must be documented on the Facebook Tracking form – see section 6.5 and **Appendix II**.
- Under “account and campaign” set the currency (US Dollar), appropriate time zone, and name for the advertisement. You will also set the daily budget for the ads in this panel and the duration of the ad run. (see figure 6.4)
- Click “review order” and “Finish you ad” to make the ad go live on Facebook. (see figure 6.4)

When finished, the banner ads will appear like these pictured in figure 6.5.

**Figure 6.1 Uploading images**

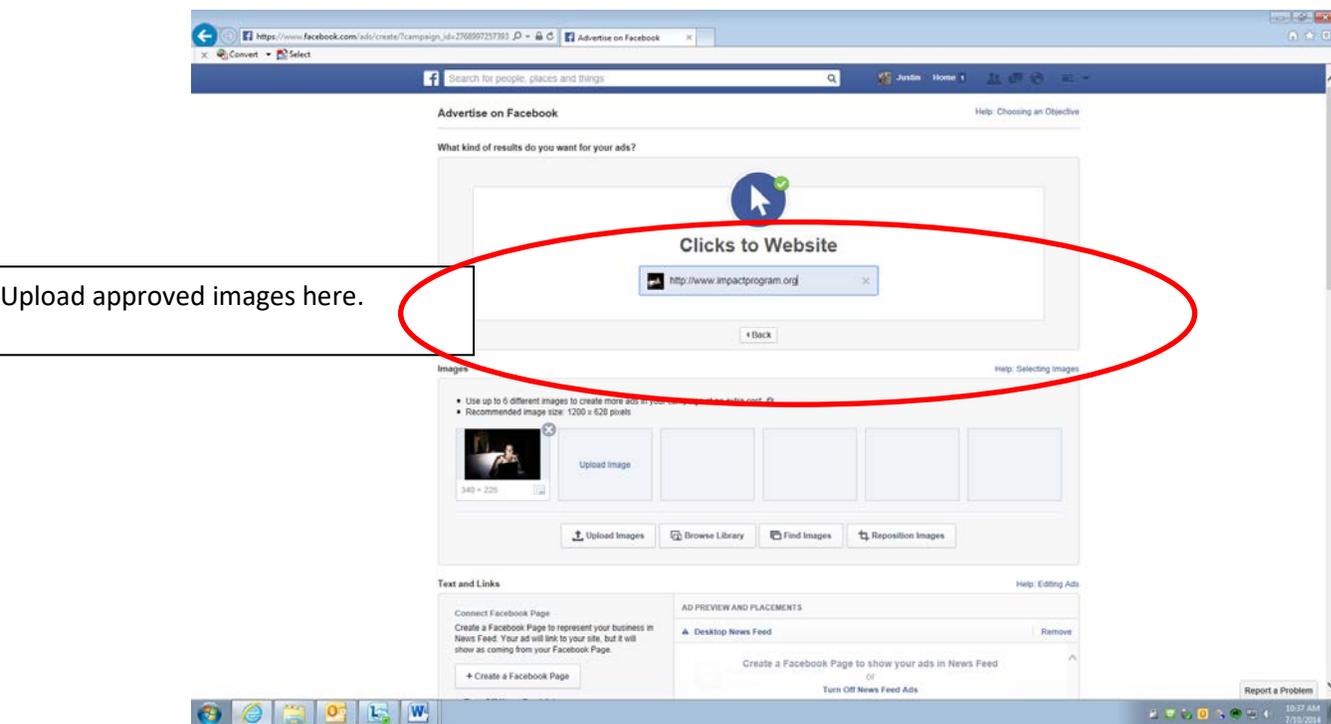


Figure 6.2 Typing in Text for Ads

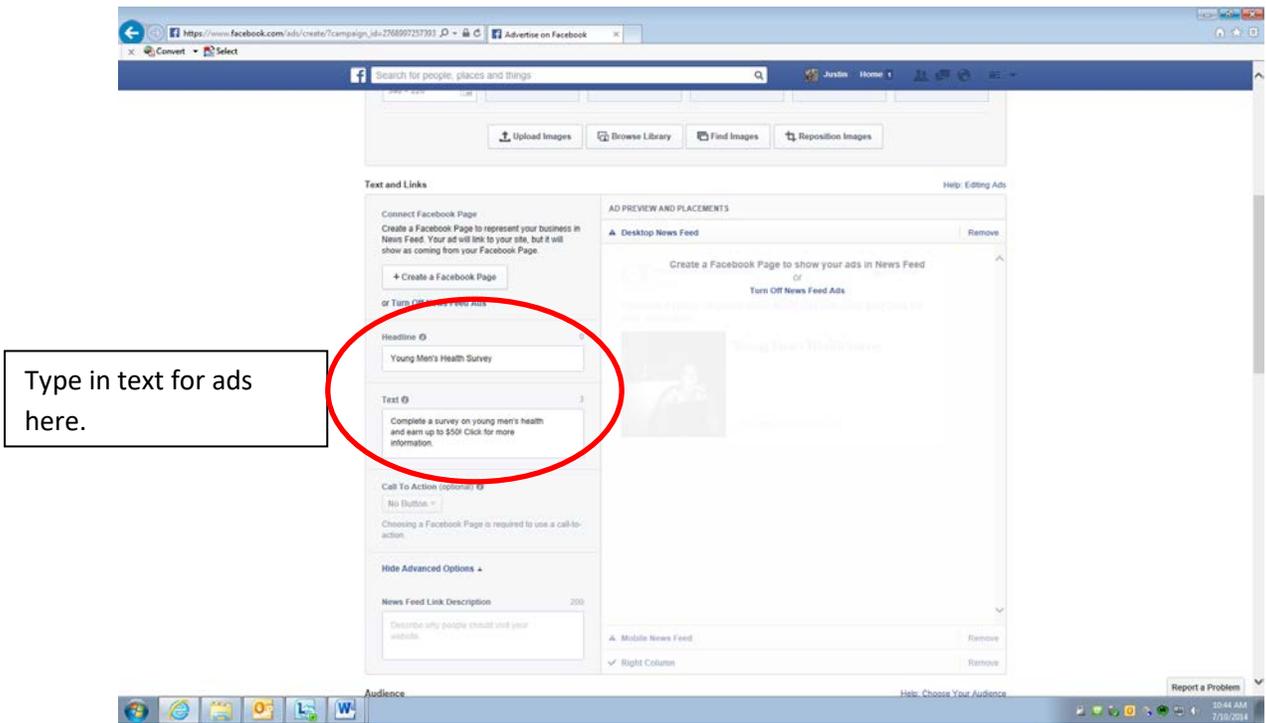
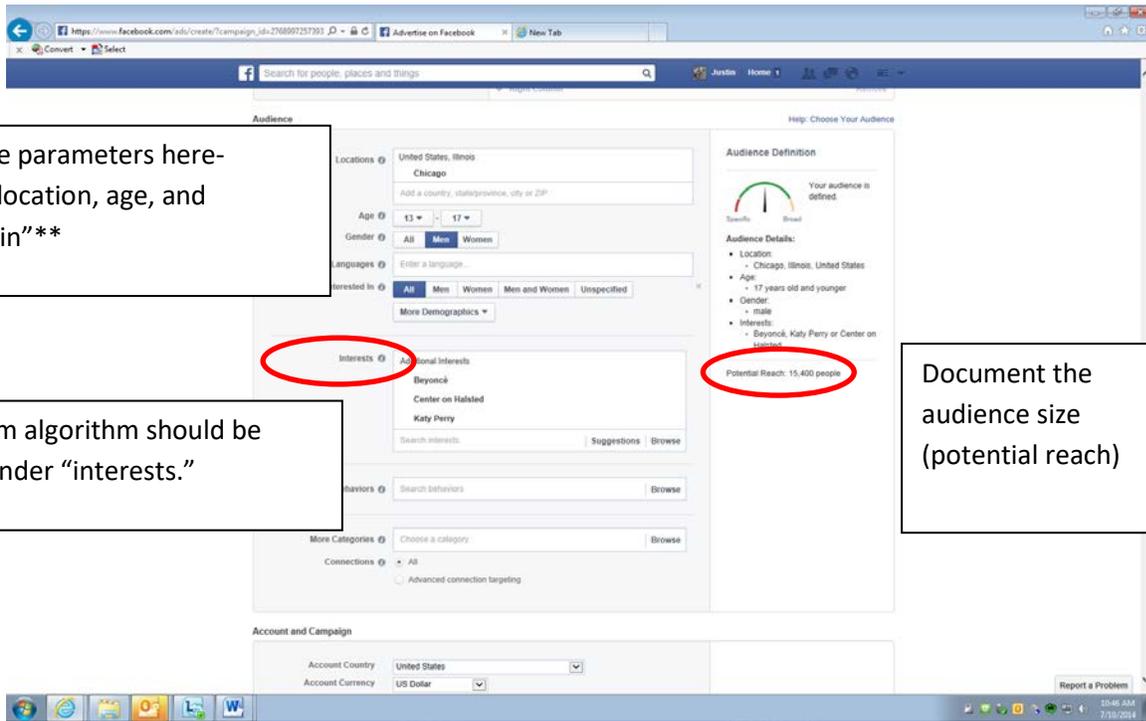
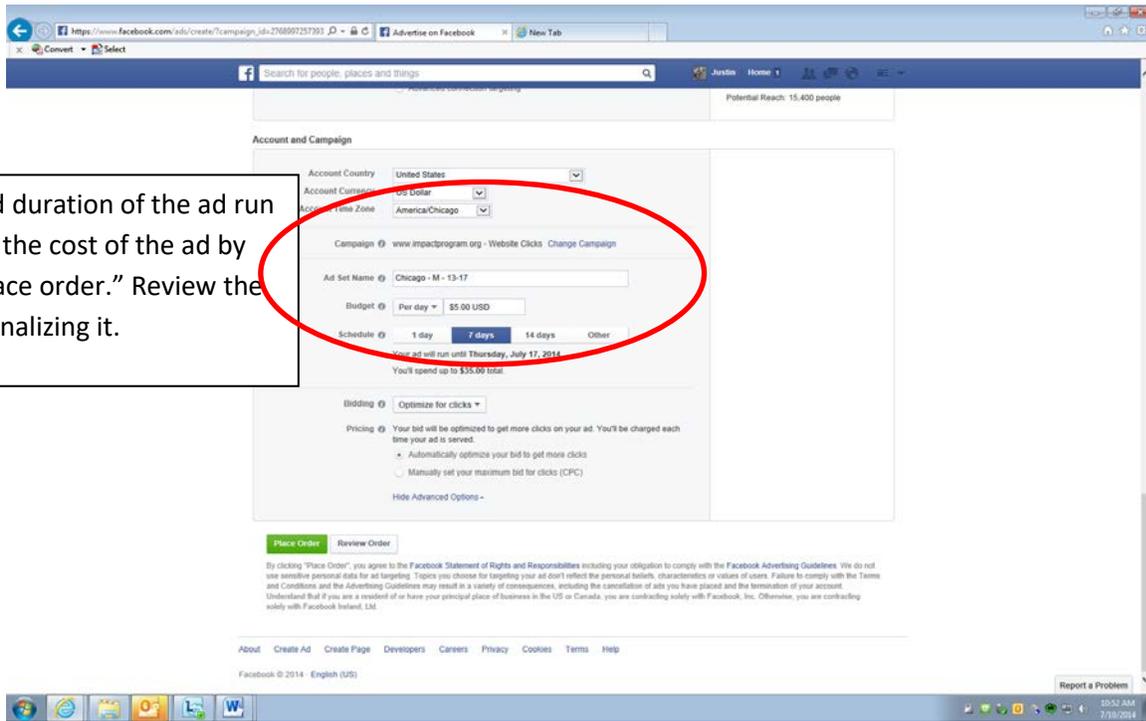


Figure 6.3 Setting audience parameters



\*\*Using the "interested in men" as an audience definition criterion may result in a potential reach <1000 people which will prevent the placement of an ad.

Figure 6.4 Finalizing and paying for ads



Set the desired duration of the ad run here. Approve the cost of the ad by clicking on “place order.” Review the order before finalizing it.

Figure 6.5 Example banner ads



### ***6.2.b Targeting the desired population with the banner advertisement***

The ads will be targeted to potentially eligible young men by using a combination of strategies:

- 1) "Like-based" targeting;
- 2) Facebook's proprietary keyword/demographic targeting;
- 3) "Interested in" targeting.

"Like-based" targeting will display ads to individuals who "Like" specific people, activities, or organizations on their Facebook page. Facebook's proprietary keyword-focused advertising uses web analytics to display ads to individuals based on particular keywords or pre-defined (by Facebook) categories. "Interested in" targeting will display ads to young men who indicate in their profiles, either publicly or privately, that they are interested in other men.

#### ***"Like-based" Targeting***

Through preliminary research activities, sites will elicit a list of people, activities, and organizations commonly "Liked" on Facebook by young MSM in the local area. This list of "Likes" will be used to create algorithms to define a target audience of young MSM with recruitment banner ads. The list of "Likes"

will be entered into the “Audience” panel of the Facebook ad control page. For example, if NHBS-YMSM staff in Chicago find through preliminary research that young MSM in their area commonly “Like” Beyoncé, Lady Gaga, Katy Perry, and Chicago Youth Pride on their Facebook pages then a potential algorithm for targeting would be as follows:

*Beyoncé OR Lady Gaga OR Katy Perry OR Chicago Youth Pride = YMSM targeted for ad*

In this example, the “audience” of the ad would be individuals who “Like” **any** of those categories on their Facebook pages. Other algorithms could be combinations of other “Likes” elicited through preliminary research. Using at least 3 different “Likes” in each of the targeting algorithms is likely to produce a large enough potential audience for targeting; Facebook requires that the potential audience for an ad be at least 1000 people. Each site will determine the algorithms used at the local level in consultation with their CDC project officer. By using different combinations of “Likes” in the targeting algorithm, sites will be able to target diverse groups of young MSM.

The targeting algorithms should be changed periodically; the frequency with which they are changed should be considered a function of how well a given algorithm is reaching the target group as measured by the number of eligible participants who are reached by the ad. Algorithms that result in significant numbers of eligible young MSM being recruited into the study should be modified less frequently than algorithms that do not.

### *Keyword and Facebook-defined Targeting*

Facebook also offers the ability to target ads based on specific demographic characteristics. The targeting algorithm Facebook uses for this process is proprietary, but using a variety of web analytics, Facebook is able to target ads to specific demographic groups. By selecting the keyword and stipulating the age range, gender, and geographic boundaries in the ad purchase, Facebook will be able to display banner ads to young men 13 to 17 years of age who are likely to meet the eligibility criteria for participation in NHBS-YMSM. As of this writing, there were no Facebook-defined groups or keywords (as found in the “Behaviors” and “More Characteristics” fields under the Audience panel on the Facebook ad control panel webpage) that appear to be useful for targeting young MSM. However, these fields are regularly populated with new categories, so sites should periodically check them to see if any new categories may be relevant to reaching young MSM.

### *“Interested in” Targeting*

By selecting “interested in men” as an option under the “Audience” panel, ads will be targeted to young men who indicate that they are interested in other men in their profiles (this information may or may not be shown publicly). While this metric has a high probability of targeting young MSM, using this option may narrow the potential audience below the 1000 person minimum. Sites should experiment with this option in tandem with the other strategies.

Sites should monitor ad performance on at least weekly basis and make adjustments as needed. Metrics of ad performance can be viewed from the ad management section of Facebook. Any changes to the audience definition must be documented on the Facebook Tracking form – see section 6.5 and **Appendix II**.

## **6.3 Landing Page**

### ***6.3.a Creating the landing page***

A local NHBS-YMSM staff member with experience in webpage development should create and manage the project landing page using the approved language for the webpage found in **Appendix Q**. The final landing page design must be reviewed by your CDC project officer before it can go live on the internet.

Potential NHBS-YMSM participants who click on the Facebook banner advertisement will be taken to a landing page that provides a basic overview of the NHBS-YMSM study and a submission form for individuals to provide their contact information through a secure data portal. No other information will be collected on the landing page. The landing page will also have a contact number for the project that participants can call or text directly if they prefer, and hours of operations of the phone line. After the participant clicks on the landing page, they will provide their first name or nickname, telephone number (cell phone and/or landline), email, days and times it is best to reach them, whether or not it is permissible to leave a message for the participant, and preferred mode of contact. This information will be protected through the use of a secured data portal and destroyed after the completion of the individual's participation in the study or by December 31<sup>st</sup>, 2015, whichever is earlier.

## **6.4 Contacting Participants, Telephone Eligibility Screening, and Scheduling Appointments**

### ***6.4.a Contacting the participant***

NHBS-YMSM staff can contact participants using the information collected from the landing page. Their preferred mode of contact should be the method used first by staff to make contact. Multiple attempts may be needed and staff can use any contact method that the participant has indicated is amenable to them. Once contact has been established, staff should arrange a phone call to carry out the eligibility screener. Alternatively, potential participants can contact the study staff directly by telephone or email using the project information provided on the landing page.

After a potential NHBS-YMSM participant recruited through Facebook has been contacted by staff *or* has contacted a NHBS-YMSM field site for an interview, he will complete an initial screener for eligibility over the phone using the model talking points and screening questions found in **Appendix T**. The answers should not be documented or linked to the participant's name or contact details. During the phone screener, staff may use a printed sheet with the eligibility screener questions. If any personal identifiers are written on this paper it must be shredded immediately after the call is finished.

The phone screening can be carried out by a dedicated staff member or by several staff members on the team – for example off-duty interviewers. Depending on how busy sites that do both FBS and RDS, the check-in/coupon manager may be able to carry out the tasks of the phone screener.

Staff should schedule interview appointments or provide the field site's hours of operation for participants who pass the eligibility screener.

If the participant does not wish to be contacted over the phone, setting up the field site interview appointment directly via text message, email or Facebook Chat is allowed. The language that will be used in text message conversations to setup appointments can be created by each site, and should be shared with CDC for review (this is a step on the Operations Checklist- **Appendix A**). During the text conversation, the participant can elect to make an appointment or NHBS-YMSM study staff can give the hours of operation of the field site, notifying the participant that he can come to the field site for a walk-in appointment. Phone screening is the preferred method, as it is more likely to prevent potentially ineligible participants from coming to the field site.

#### ***6.4.b Scheduling appointments***

Sites implementing both FBS and RDS must use an electronic appointment log of their choice which can be accessed from multiple locations simultaneously. This is because a field site may be operating at the same time the phone screener is screening FBS participants over the phone and booking appointments. As the appointment system contains personal information it must be stored on a secure server, with password-protected computers, with appropriate encryption software, that will be kept in a locked office when not in use. While sites set up their own appointment system, the following information must be collected:

1. First name/nickname
2. Any contact details provided on the landing page
3. Total number of times this participant was contacted before *first* responding or whether the participant contacted the project themselves (see section 6.5 in this chapter). Whether the participant passed the phone eligibility screener or was directed to the field site without completing the screener
4. Recruitment method (the same appointment system is used for RDS so it is important to specify which appointments are for FBS participants)



For participants who don't have a specific appointment time, the appointment log should still have a section where their contact information is documented so that the field site staff can verify that the participant was recruited through Facebook when they arrive for an interview.

## 6.5 Data Documentation

Sites are asked to document several metrics during the implementation of Facebook sampling. This includes metrics around how many people are reached by the Facebook ad and how many click through and fill out the contact form on the landing page. Sites will also track each contact attempt to participants (**Appendix KK**). The Facebook Data Tracking form (**Appendix II**) is where this information will be summarized and reported to CDC. The rest of section 6.5 will describe the data that will be used to fill in this form.

### 6.5.a Monitoring and documenting advertisement performance

Whenever a change is made to the targeting algorithm, the number of young men to whom the ad is displayed will likely change. If a banner ad is changed, the appeal of the ad may change and therefore the number of clicks. Even if no changes are made, new people join Facebook and others leave, and the number of people in the target age range may change. Therefore, a new Facebook Data Tracking form (**Appendix II**) should be completed once a month OR whenever a change is made to the banner ad or targeting algorithm. The data should cover the period of time since the last Facebook Data Tracking form was filled out. This could either have been at the last point where the algorithm or advertisement changed OR at the end of the previous month. Sites are asked to document the number of people in the Facebook Universe at the point when the form is filled out. Sites are also asked to document the number of ad impressions, ad clicks, and landing page completions during the time for which the form is filled out.

**Figure 6.6 Facebook Data Tracking form – advertisement performance section (Appendix II).**

# in Facebook universe	
# of ad impressions	
# of ad clicks	
# of landing page screener completions	

# of participant calls to site staff	
# of contact attempts to participants by any method	
# of completed telephone screeners	
# of participants deemed eligible (phone)	
# of participants directed to field site without completing phone screener.	

### ***6.5.b Tracking and documenting contact attempts for each participant***

Sites will also track each attempt to contact participants who complete the landing page information. Collecting this information will serve two purposes. First, it will provide a measure of how much effort was required by sites to reach participants. Second, this information may be used in future analyses to adjust for non-response and other adjustments.

This section will describe how to track each contact attempt and what to do with that information.

#### ***Tracking each attempt to contact participants***

**Appendix KK** contains a model Facebook Contact Tracking sheet that can be used to track contact attempts with potential participants who fill out the information on the landing page. This model tracking sheet is also shown in Figure 6.7. Sites can modify this form as long as the same information is collected.

The Facebook Contact Tracking form will help sites keep track of the information that will be reported to CDC, including 1) total number of monthly contact attempts and eligibility screeners and 2) the total number of contact attempts per participant. How to report this information to CDC is described later in this section.

To complete the Facebook Contact Tracking form (**Appendix KK**), fill in the participant's first name/nickname and contact information provided on the landing page including the preferred method of contact and whether it is ok to leave a message. If the participant contacts you directly, put the date in the 'Date' column, next to the row saying 'Participant contacted office themselves'. Otherwise, if NHBS-YMSM staff contact the participant, write the date and method of contact for each attempt (cell phone, text, landline, email, Facebook). Add more rows if needed. Next to the contact attempt that generates a *first* response, document that it was successful. While there may be more 'back and forth' contact between staff and the participant to establish a time for the phone screener or to arrange a direct visit to the field site, these contacts do NOT need to be documented. We are only interested in how many attempts it took before the participant *first* responded.

Also document whether a phone screener was carried out and, if so, whether the participant was eligible. If the participant does not agree to the phone screener but rather arranges an appointment or drop-in at the field site through text or email, this should be documented in the column 'Direct to field site'.

Figure 6.7 shows an example of how to fill in the form. In this example, Michael's preferred method of contact was a cell phone call so staff started with this. They had to try a few other methods and Michael replied after a total of 4 attempts. He was found to be eligible during the

phone eligibility screener. Staff would enter '4' into the Appointment Log together with Michael's name and phone number.

Eugene called a staff member, completed the phone screener and was also found to be eligible. The staff member would enter 'Participant called' into the Appointment Log together with Eugene's name and phone number.

David preferred to be contacted by text message. He indicated that he was not amenable to messages being left on his cell phone, so staff did not leave messages. David responded after the third attempt, but did not want to speak on the phone in order to do the Phone Screener so staff arranged an appointment for him at the field site via text message. The staff member would enter David's name and number into the Appointment Log together with the total number of contact attempts – three. If a staff member judges that it is best to just give David the opening hours of the field site, rather than book an appointment, they should still enter his name, phone number, and number of contact attempts into the Appointment Log in a section designed for this purpose (for participants without an appointment).

It took eight attempts to reach Marcus, but after completing the phone screener it turned out he was not eligible. Staff did not book an appointment for him. The eight attempts it took to reach Marcus will still be added together with the contact attempts of all other participants and this total number will be reported in the Facebook Data Tracking form (**Appendix II**) as described later.

Figure 6.7 Example Facebook Contact Tracking Sheet (Appendix KK).

#	First Name	Nick-name	Cell Phone	Call ok?	Msg ok?	Landline	Msg ok?	Email	Preferred method	Contact	Date	Method	Msg?	Replied	Phone screener date	Eligible	Direct to field site
1	Michael	Mike	111-222-3	Yes	Yes	444-555-6	No	mike.lewis@	Cell call	Participant called							
										Contact attempts:							
										1	8/5/14	Cell ph. Call	Yes	No			
										2	8/7/14	Text	N/A	No			
										3	8/9/14	Landline	No	No			
										4	8/12/14	Email	N/A	Yes	8/14/14	Yes	
2	Eugene		777-888-9999	Yes				N/A		Participant called	8/9/14			Yes	Yes	Yes	
										Contact attempts:							
										Add rows if needed							
3	David	Dave	123-456-7	No	No			dan99@hotmail	Text	Participant called							
										Contact attempts:							
										1	8/20/14	Text		No			
										2	9/1/14	Cell ph. Call	No	No			
										3	9/3/14	Email		Yes	No	N/A	Yes
3	Marcus		987-654-3	No	No			yolo@gmail	Text	Participant called							
										Contact attempts:							
										1	8/25/14	Text		No			
										2	8/30/14	Text		No			
										3	9/3/14	Cell ph. Call	No	No			
										4	9/4/14	Text		No			
										5	9/7/14	Email		No			
										6	9/10/14	Text		No			
										7	9/11/14	Cell ph. Call	No	No			
										8	9/14/14	Email		Yes	9/15/14	No	

*Documenting total number of monthly contact attempts in the Facebook Data Tracking form (Appendix II)*

Staff should tally the total number of contact attempts made to participants by any method and include this information in the Facebook Data Tracking form (**Appendix II**). The total number of contacts attempts should be tallied for ALL participants, *regardless of whether they responded or were eligible*. The Facebook Contact Tracking Sheet (**Appendix KK**) is itself not sent to CDC although sites should keep it on record for the duration of the project. This form should be stored safely as contains personal information.

In the example in Figure 6.7, for **August** 2014 – the total number of contacts would be six (four for Michael, one for David and two for Marcus). Staff should also tally how many participants contacted the office directly –in the example in Figure 6.7 that would be one participant in August. Finally, sites should tally how many participants completed the phone screener in **August** (two), how many were eligible in **August** (two), and how many participants were directed to the field site without the phone screener (one).

Keep in mind that if the algorithm was changed August 19<sup>th</sup>, one Facebook Data Tracking form (**Appendix II**) should be completed for 8/1/14 – 8/18/14, and a separate form for 8/19/14 – 8/31/14. If no changes are made in the algorithm during September, one form will be filled out for all of September.

**Figure 6.8 Facebook Data Tracking form – contact and eligibility section**

# in Facebook universe	
# of ad impressions	
# of ad clicks	
# of landing page screener completions	
<b># of participant calls to site staff</b>	
<b># of contact attempts to participants by any method</b>	
<b># of completed telephone screeners</b>	
<b># of participants deemed eligible (phone)</b>	
<b># of participants directed to field site without completing phone screener.</b>	

Documenting total number of contact attempts per participant who is directed to the field site in the Appointment Log

For participants who pass the phone screener and those who go directly to the field site, the total number of contact attempts *for that participant only* should be entered into the appointment log – this is the online tool described in section 6.4.b. If the participant called the field site themselves, this should also be documented in the appointment log.

This information (number of contact attempts for a particular participant) is later transferred onto the Facebook Survey ID and Contact form (see Chapter 8, section 8.5a and Figure 8.1).

## **6.6 *In-person eligibility screenings and interviews***

Participants will check-in to the field site by presenting their first name or nickname and/or phone number to study staff at the field site and will then proceed to the eligibility screening and assent/consent process that is described in full detail in Chapter 8.

## **6.7 *References***

Brenner J. Teens and Technology. Pew Internet & American Life Project; 2012.

Duncan, D. F., White, J. B., & Nicholson, T. Using internet-based surveys to reach hidden populations: Case of nonabusive illicit drug users. *American Journal of Health Behavior*, 2003, 27(3), 208-218

Elford J, Bolding G, Davis M, Sherr L, Hart G. The Internet and HIV study: design and methods. *BMC Public Health* 2004,4.

Fernandez M, Varga L, Perrino T, Collazo J, Subiaul F, Rehbein A, *et al.* The Internet as recruitment tool for HIV studies: Viable strategy for reaching at-risk Hispanic MSM in Miami? *Aids Care-Psychological and Socio-Medical Aspects of AIDS/HIV* 2004,16:953-963.

Grov C, Crow T. Attitudes about and HIV risk related to the "most common place" MSM meet their sex partners: Comparing men from bathhouses, bars/clubs and Craigslist.org. *AIDS Education and Prevention* 2012,24:102-116.

Parsons J, Vial A, Starks T, Golub S. Recruiting Drug Using Men Who Have Sex with Men in Behavioral Intervention Trials: A Comparison of Internet and Field-Based Strategies. *AIDS and Behavior* 2013,17:688-699.

Raymond H, Rebchook G, Curotto A, Vaudrey J, Amsden M, Levine D, *et al.* Comparing Internet-Based and Venue-Based Methods to Sample MSM in the San Francisco Bay Area. *AIDS and Behavior*

2010,14:218-224.

### **7.1 Overview**

For RDS and FBS sampling, data collection activities are conducted at one or more fixed locations called field sites. Field sites are usually existing or rented office space or vans parked at specific places. Because all respondents must access a field site to participate in the study, selecting the appropriate number and location of field sites is critical for successful execution of the RDS and FBS methods. Findings from preliminary research will help project sites decide the optimal number and location(s) of their field sites. This chapter provides specific guidance on selecting and managing these field sites.

### **7.2 Field Site Location**

Project sites should consider several factors when selecting a field site location. Ideally, the field site should be centrally located and easily accessible by foot or public transportation as many young MSM will not have access to a car. Multiple field sites may be needed in project sites that have limited public transportation, cover large geographic areas, or have distinct social boundaries (e.g. racial segregation). All major sub-populations of young MSM should have access to at least one field site. If a single field site is used, it should be located in an area where all sub-populations have equal access and would be equally comfortable attending, such as a location that serves as a “bridge” between the major sub-populations of young MSM. Results of preliminary research should be used to determine whether a single field site location is sufficient or whether more than one field site is needed to target certain sub-populations. If preliminary research indicates that confidentiality is a concern among potential participants, project sites should choose a nondescript location for their field site.

#### **7.2.a Restrictions on field sites**

To maintain the integrity of the RDS and FBS methods, project sites must adhere to some restrictions when choosing field sites:

##### *Single-service facilities*

Field sites should *not* be located in facilities that primarily or exclusively provide a specific service, like HIV care, STD treatment, *or* substance abuse counseling. Additionally, the field site should not be located in a facility that primarily provides social services to the target population. Locating a field site in such a facility could bias the sample toward people who receive that service. This problem becomes compounded when there is stigma associated with the particular service offered, as is often the case with HIV care. People with HIV infection may be more likely to go to a field site in an HIV clinic, while

those without HIV infection may be less likely to go there because of a negative perception or fear of HIV.

Nevertheless, there is an exception to the prohibition on facilities with primary or exclusive services. With approval from their CDC project officer, project sites can place a field site in a facility that provides a specific service if there is **no** stigma associated with that service and the field site is able to operate separately from the facility, such as on different days or at different times.

### *Multi-service facilities*

Field sites can be located in facilities that provide multiple services, such as HIV testing, general medical care, mental health counseling, **and** social services. When facilities provide a vast array of services, it is not likely that the sample will become biased toward people who receive any one particular service. Nevertheless, project sites should ensure that the services are not be targeted toward any specific sub-population(s) because this could also result in a biased sample.

### **7.2.b Additional considerations for vans**

Project sites that plan on using a van must identify fixed locations where the van will be parked on each day of project operations. They should also create a set schedule of hours of operation at each location. Fixed locations and schedules are essential for ensuring that people always know where to go to participate in the survey and at what times. Depending on parking regulations and availability, it may be necessary to obtain a parking permit for each location or to reserve the location in advance. As mentioned above, vans should not be parked near facilities or in areas where large numbers of homeless people or IDU congregate, near syringe exchanges or methadone clinics, near facilities that primarily or exclusively provide a specific service, or near any area that would otherwise not comply with the restrictions on field sites. Van must also appear safe and youth-friendly.

## **7.3 Multiple Field Sites**

Since more than one field site may be necessary to reach all the major sub-populations in a large city, project sites may use multiple field sites for conducting operations. However, project sites should not operate an additional field site merely to reach a small, insular sub-population of young MSM or a sub-population that does not contribute substantially to the local HIV epidemic. When deciding whether to use multiple field sites, project sites should consider the resources and logistical issues involved in operating multiple sites.

To avoid participant confusion, the days and hours of operation at each field site, as well as directions to the sites, should be clearly listed on project materials. In addition, project sites should consider how operating multiple field site locations may bias the final composition of the sample. For this reason, project sites should use their best judgment when deciding the total hours of operations for field sites

targeting a specific sub-population; it is recommended that field sites only accessible to a targeted sub-population have operating hours roughly proportional to the size of the sub-population. For example, if a field site targets a sub-population that is estimated to make up 20% of the young MSM population, then only 20% of the total weekly operational hours should be spent at that field site to avoid biasing the sample in favor of this small sub-population. This recommendation does not apply to field sites operating in areas where all sub-populations have equal access and would be equally comfortable attending.

### ***7.3.a Cross-recruitment (RDS only)***

Cross-recruitment means recruitment between two different groups of participants. In regard to field sites, cross-recruitment occurs when a participant from one field site recruits a person who participates at a different field site, and vice-versa. Cross-recruitment is necessary to satisfy two RDS assumptions: Participants are linked by a network composed of a single component. Recruits are randomly selected from the recruiter's network.

During preliminary research, project sites considering multiple field sites must assess whether cross-recruitment is likely to occur among the planned field sites. If cross-recruitment is not likely to occur with a particular field site, it should only be used if preliminary research determines a sub-population of young MSM that contributes substantially to the local HIV epidemic would be significantly under sampled without it.

## ***7.4 Field Site Set-up***

The field site should be welcoming and comfortable for participants while maintaining their safety and privacy. It should have adequate space for the check-in/coupon manager station, 1 to 3 interview areas, and a waiting area for potential participants. Interviews should be conducted in private offices or rooms to provide privacy and protect participant confidentiality. Alternatively, partitions could be used to divide an open space and white noise machines could be used to mask voices. If there is not sufficient space inside the field site for a waiting area, project sites may be able to set up a makeshift waiting area outside the field site using folding chairs. Project sites that have separate interviewers and HIV testing staff will also need space for HIV counseling and testing. Furthermore, the spaces used for specimen collection and rapid test processing must comply with all quality assurance requirements.

### ***7.4.a Talk with neighbors and local police***

Before setting up the field site, project sites should meet with local police officials to explain the study's objectives and methods and to discuss any safety concerns in the area. It is often useful to identify a liaison in the police department who can serve as a point of contact throughout the project cycle and can help resolve any problems that may arise. Project sites should also meet with the owners of

neighboring businesses to inform them of the study. During data collection, it is possible that potential participants might loiter outside the field site or form a line waiting to gain entrance, which could disturb nearby businesses. Business owners may be less likely to complain about this if they are aware of the study and project staff have made a commitment to cooperate with them to minimize any disruptions to their businesses.

#### ***7.4.b Field site safety***

Project sites are responsible for the safety of both their staff and the participants while at the field site. They should develop local safety procedures for their staff and train them how to respond to threatening situations and other field incidents (see **section 3.5** of this manual). To prevent theft, project sites should store incentives, computers, supplies, and other potentially valuable items in safe locations that are not visible to participants. Most importantly, file cabinets that contain data collection forms should be in limited-access areas and must remain locked when not in use. Protecting participant confidentiality should always be a primary objective. Project sites that use a van should have one staff member monitor the area immediately surrounding the van, as well as control who is allowed to enter the van.

### ***7.5 Hours of Operation***

Field sites must have a fixed schedule of hours when they operate. These hours should be clearly listed on all referral cards, coupons, and information cards, and they should be posted on the field site door in case potential participants show up when the field site is closed. Field sites should operate during a broad range of hours, including evening and weekend hours to accommodate participants who work or go to school during standard work/school hours. When setting hours of operation, also consider logistical challenges specific to youth, such as times when they might have restrictions on leaving the home or when transportation may be more difficult. If hours of operation are too restrictive, certain sub-populations may be less likely to participate, which could bias the sample. Project sites should also set a time each day when the field site is closed so that project staff can have lunch or take a break. Once data collection has begun, project sites should not change their hours of operation unless absolutely necessary; but if they do, they should update all their materials immediately and post the new hours so that potential participants do not become confused by the change. It is possible for example that the hours of operation may need to be different during the school year compared to the summer.

#### ***7.5.a Additional considerations for vans***

Project sites using vans should also develop contingency plans in case the van is unavailable due to mechanical or staffing problems. For example, they could send project staff to the van's usual location to greet potential participants and tell them when the van will be available again. If an appointment system is used, the project staff should also re-schedule the appointments that had to be cancelled. For

safety reasons, project sites must send at least two staff members to notify potential participants; project staff should never work in the field alone.

## **7.6 Crowd Control**

In previous NHBS cycles using RDS (HET and IDU), people who were not participants often crowded the field site. For example, potential participants were sometimes accompanied by their family or friends or as the study becomes established in the community and recruitment increases, more and more individuals will be interested in participating and may crowd the field site or line up outside it. This is less likely to happen during NHBS-YMSM, but if it does become problematic, project sites should develop plans for managing large numbers of potential participants. For example, they could employ an appointment system, whereby a participant could only be interviewed at a scheduled time (see **section 7.7**). If project sites do not wish to schedule appointments, they could use a “take-a-number” system to see participants on a first-come, first-served basis. With this system, project staff would determine how many interviews they could conduct each day and then hand out the corresponding number of tickets. For RDS, project staff could also track participants by listing their survey IDs (coupon numbers) in the order that they arrived at the field site. Potential participants should be told how long they will have to wait to be interviewed, and if the wait will be long, they could be told to return at a later time that day.



For RDS, project sites cannot implement any additional sampling strategies to manage enrollment, such as randomly selecting potential participants for each day’s available interview spots. Such a system would undermine the RDS sampling method.

To protect the confidentiality of participants and ensure the reliability of their responses, no one is allowed to sit in on a participant’s interview. Friends or relatives may accompany the participant but project staff should ask these individuals to wait outside.

## **7.7 Appointment System**

Scheduling appointments for interviews allows project sites to better manage enrollment and may reduce crowding and loitering at the field site. Project sites should develop their appointment system based on the number of interviewers and test counselors they have available and the time required for interviewing and testing. Interviewing and HIV testing should take approximately 1 hour, but additional time may be needed (e.g., for processing rapid tests). More time may also be necessary at the beginning of data collection when project staff are less accustomed to operations.

To maximize participant enrollment, project sites with appointment systems should also consider allowing a limited number of participants to “walk-in” for interviews. “Walk-ins” could be seen on a first-come, first-served basis if someone does not show up for an appointment or cancels one at the last minute.

### ***7.7.a Scheduling appointments***

Sites that only do RDS can record all appointments in a single Appointment Log kept at the field site when the field site is open and otherwise kept with the person carrying the phone for appointment booking.

Sites doing both FBS and RDS need an electronic Appointment Log which can be accessed from multiple locations simultaneously. This is because a field site might be operating at the same time as the Phone Screener is screening FBS participants over the phone and booking their appointments. As the appointment system contains personal information it must be secure (e.g., secure server, password-protected computers, locked offices).

The process whereby FBS participants are contacted and screened prior to scheduling an appointment is described in more detail in chapter 6.4 and **Appendix T**.

For RDS, the validity of the coupon must first be verified before an appointment is booked, whether the participants calls in or visits the field site.

To schedule an appointment, you may collect contact information (first name or nickname, phone number and/or email address) so that a project staff member can follow-up.

- 1) Tell potential participants the approximate time required to complete the questionnaire and HIV test.
- 2) Make sure potential participants are aware that they must first answer some background questions to determine if they have been selected to participate in the study. This is the case even if they have completed the FBS phone eligibility screener (Chapter 6.4). They should also understand that if they are not selected for the study or do not complete the interview, they will not be paid an incentive.
- 3) Emphasize that potential participants should be on time for their appointment. If they need to reschedule their appointment, they should call before the scheduled appointment time.
- 4) For RDS, remind potential participants that they must bring their coupon to the appointment or they cannot be interviewed.



Project sites should not reserve appointment spots for members of any specific sub-population or demographic. Denying available appointment spots to individuals who are not members of the specific sub-population would bias the sample.

### ***7.7.b Standby appointments***

Standby appointments allow potential participants to fill in for those who do not show up for their appointments or who cancel them at the last minute. Project sites should consider using standby appointments to address the problem of excessive “no-shows” rather than overbooking appointments.

Standby appointments are less likely to harm relations with participants because those waiting for standby appointments know that they may not be able to be interviewed at their scheduled time.

Guidance to help project sites schedule standby appointments is outlined in the steps below:

- 1) Identify possible standby appointment times by choosing those that generate higher rates of “no-shows” or choosing a few at set intervals throughout the day.
- 2) Highlight the standby appointment times in the appointment book or log, and create a standby column adjacent to these times.
- 3) To schedule a standby appointment, write the potential participant’s contact information (first name or nickname, phone number and/or email address) in the standby column next to his standby appointment time. Explain to the potential participant that he is being scheduled for a standby appointment in the event that someone does not show up for a regularly scheduled appointment.
- 4) Ask the potential participant to call or return to the field site to see whether his standby appointment time has become available and he can be interviewed.

If the standby appointment time did not become available, ask the potential participant if he would like to schedule a different standby appointment time or schedule a guaranteed appointment time.

## Chapter 8      Fieldsite Check-in, Interviewing, and Check-out (RDS and FBS)

### 8.1 Overview

The purpose of this chapter is to provide step-by-step guidance for conducting NHBS-YMSM operations at field sites. Operational activities include checking in potential participants when they arrive at the field site, conducting the survey, administering HIV tests, providing recruiter training (RDS only), and checking out participants (see **Figures 8.1 and 8.2**). Information on identifying and managing field sites is presented in **Chapter 7** of this manual.

Please note that the check-in and checkout process is different for RDS participants and for FBS participants. Read this chapter carefully to learn what steps are done for each sampling type. Unless indicated, the step applies to both RDS and FBS.

For sites that do both RDS and FBS – start by asking the participant: ‘How did you hear about us’ and then proceed to RDS or FBS check-in accordingly.

### 8.2 Participant Tracking

This section describes the tools that should be used to track and record participant information from check-in to check-out: the Participant Tracking Form and the Coupon Manager Program (RDS only).

#### 8.2.a Participant Tracking Form

The Participant Tracking Form (**Appendix R**) should be used by field staff to document and track the operational activities completed by each participant. The form is useful because it provides a hard copy of completed activities in the event of data loss, facilitates communication among field staff, and assists with data management. The Participant Tracking Form should also be used to record information for subsequent entry into the portable computer and the Data Coordinating Center (DCC) data portal. For example, if the check-in/coupon manager (see **section 7.2b**) collects census tract information prior to the participant being screened, this information should be recorded in the “CT” field on the Participant Tracking Form, explained in section 8.6c. The interviewer can later enter this information into the portable computer. For example, interviewers should record data edits on the Participant Tracking Form to be entered into the Data Error Log on the DCC data portal (see **section 16.2**). The Participant Tracking Form can be tailored to add additional fields as necessary for local operations.

### ***8.2.b Coupon Manager Program (RDS Only)***

The Coupon Manager Program (CMP) is a software program that will be used during the check-in and check-out processes for sites that implement RDS. This program has three main functions:

- 1) **Link recruiters with their recruits:** Each participant's data is linked to that of his recruits by their coupon numbers. This link is necessary to monitor the growth of recruitment chains and to analyze data using the RDS Analysis Tool (RDSAT).
- 2) **Manage recruiter rewards:** The CMP tracks the rewards owed to participants for successfully recruiting others and ensures that participants are not paid for recruiting those who are ineligible or do not complete the interview.
- 3) **Collect responses to the Recruiter Questions:** The Recruiter Questions are used to measure non-response bias by asking about the demographic characteristics of individuals who refused to take coupons from the participant and the reasons why they refused. The CMP displays these questions when a participant returns to claim his rewards for recruiting others. The Recruiter Questions will be discussed further in **section 9.3** of this manual.

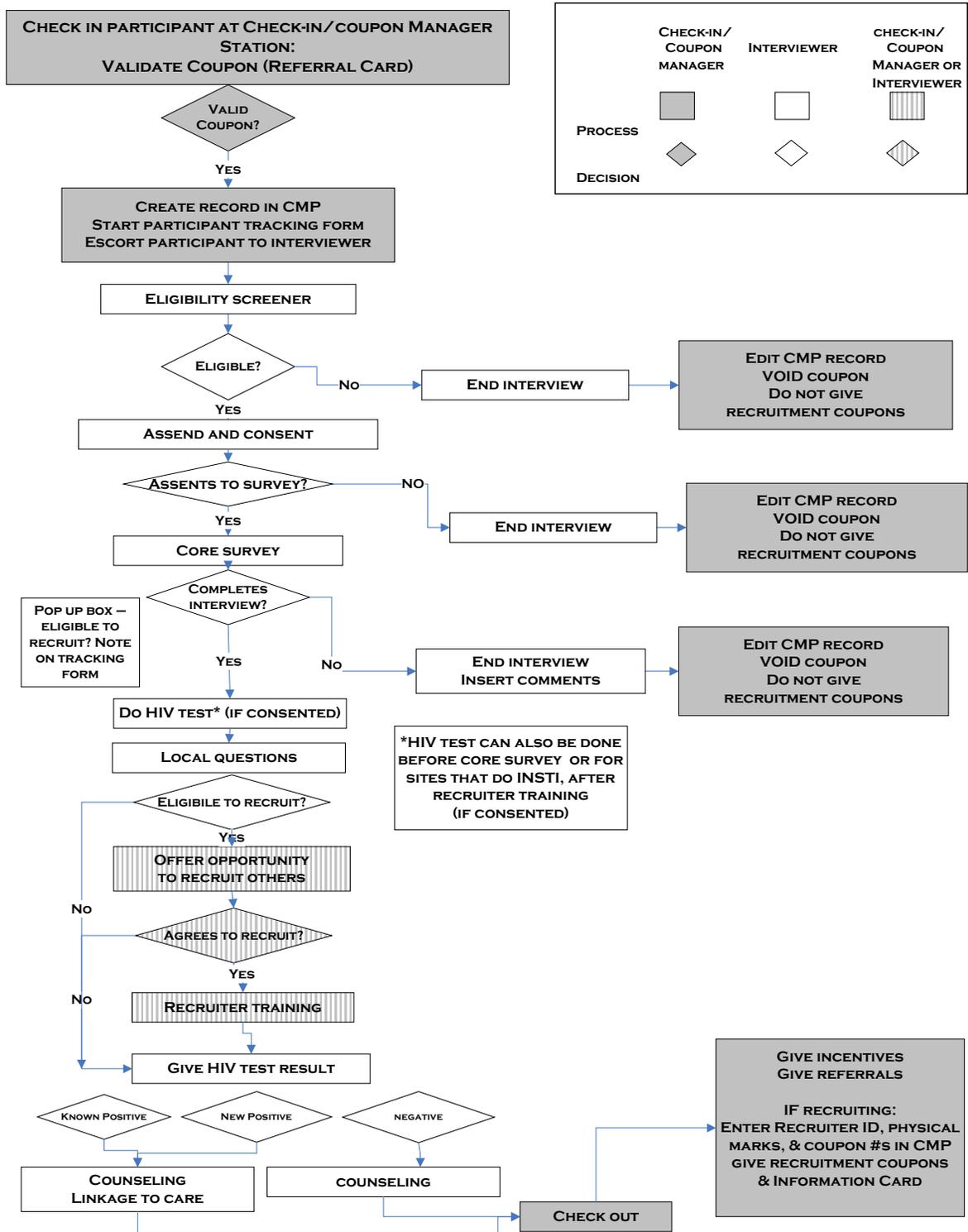
Detailed instructions for using the CMP can be found on the DCC data portal. The CMP should be installed on a laptop or personal computer and kept at the "check-in/coupon manager station," an area of the field site designated for checking in and checking out participants. A staff member should be assigned to operate the CMP and manage all operational activities at the check-in/coupon manager station; this person is referred to as the "check-in/coupon manager." The check-in/coupon manager station should be stocked with all supplies needed for check-in and check-out activities, including an appointment book (if used), a CMP Log (see below), coupons, and incentives (if given by the coupon manager).

Project sites should adhere to the following safety and security measures when operating the CMP:

- The check-in/coupon manager should never be alone or in an isolated area.
- The CMP should never be left open and unattended, and the computer screen should never be visible to participants.
- Only a limited number of project staff should have access to the CMP.

Since all data collection software can experience errors and data loss, project sites should keep a hard copy log of pertinent information entered into the CMP, such as the date of the interview, the participant's coupon (or referral card) number, the interviewer ID, and the numbers on the recruitment coupons given to the participant. Please see **Appendix N** for a model CMP Log.

Figure 8.1 Check-in, interviewing, and check-out procedures for RDS



## 8.3 Check-in with RDS

The enrollment process for RDS begins with the potential participant checking in at the check-in/coupon manager station.

### 8.3.a Validate coupon or referral card, create a record in CMP

The check-in/coupon manager should first greet the potential participant and ask him for his coupon (or referral card). If appointments are used, the check-in/coupon manager should verify the potential participant's appointment date and time in the Appointment Log. The check-in/coupon manager should then check the "Activation Date" (if applicable) and the "Expiration Date" on the coupon.

- **If the coupon has not yet become active**, the check-in/coupon manager should return the coupon to the person and ask him to return after the activation date or on a scheduled appointment date.
- **If the coupon has expired**, the check-in/coupon manager should not return the coupon to the person. Instead, the check-in/coupon manager should search the CMP for the coupon number and once located, record that the "Coupon has expired." He should then mark the coupon "EXPIRED" and file it in the weekly folder or envelope. The check-in/coupon manager should explain to the person that his coupon has expired:  
*"I'm sorry, but your coupon has expired. We can't interview anyone with an expired coupon."*
- **If the coupon has expired but local guidelines allow people with expired coupons to be interviewed**, the check-in/coupon manager should create a CMP record for the person as described in **section 8.3b** below. If the CMP has automatically changed the status of the person's coupon to "Expired," the check-in/coupon manager will first have to change the status back to "Outstanding" in the CMP by checking the "Outstanding" box and saving the change.

Eligibility screening should take place during the interview and not during check-in. However, the check-in/coupon manager can deny enrollment to potential participants in the following situations:

- **If the person does not have a coupon**, he cannot be interviewed under any circumstances. The check-in/coupon manager should make this clear to the person:  
*"I'm sorry, but we can't interview you if you don't have your coupon with you. We'll have to reschedule your interview for another day. Please remember to bring your coupon with you next time."*
- **If the person appears too intoxicated to assent to the interview or to complete it**, the person's coupon should be returned to him and his appointment should be re-scheduled for another day. The check-in/coupon manager should use his own judgment as to how to best handle the situation and avoid confrontation. He could politely reply:

*“I’m sorry, we won’t be able to see you today. Can we re-schedule your appointment for another day?”*

- **If the person is recognized as a previous participant – by any method**, the check-in/coupon manager should confiscate the coupon and tell the person that he cannot participate more than once. The check-in/coupon manager should search the CMP for the coupon number and once located record that the coupon was returned by a “previous participant.” He should then mark the coupon “VOID” and file it in the weekly folder or envelope.

### **8.3.b Create a record in the CMP**

After validating the potential participant’s coupon (or referral card if a seed), the check-in/coupon manager should create a record in the CMP for that person.

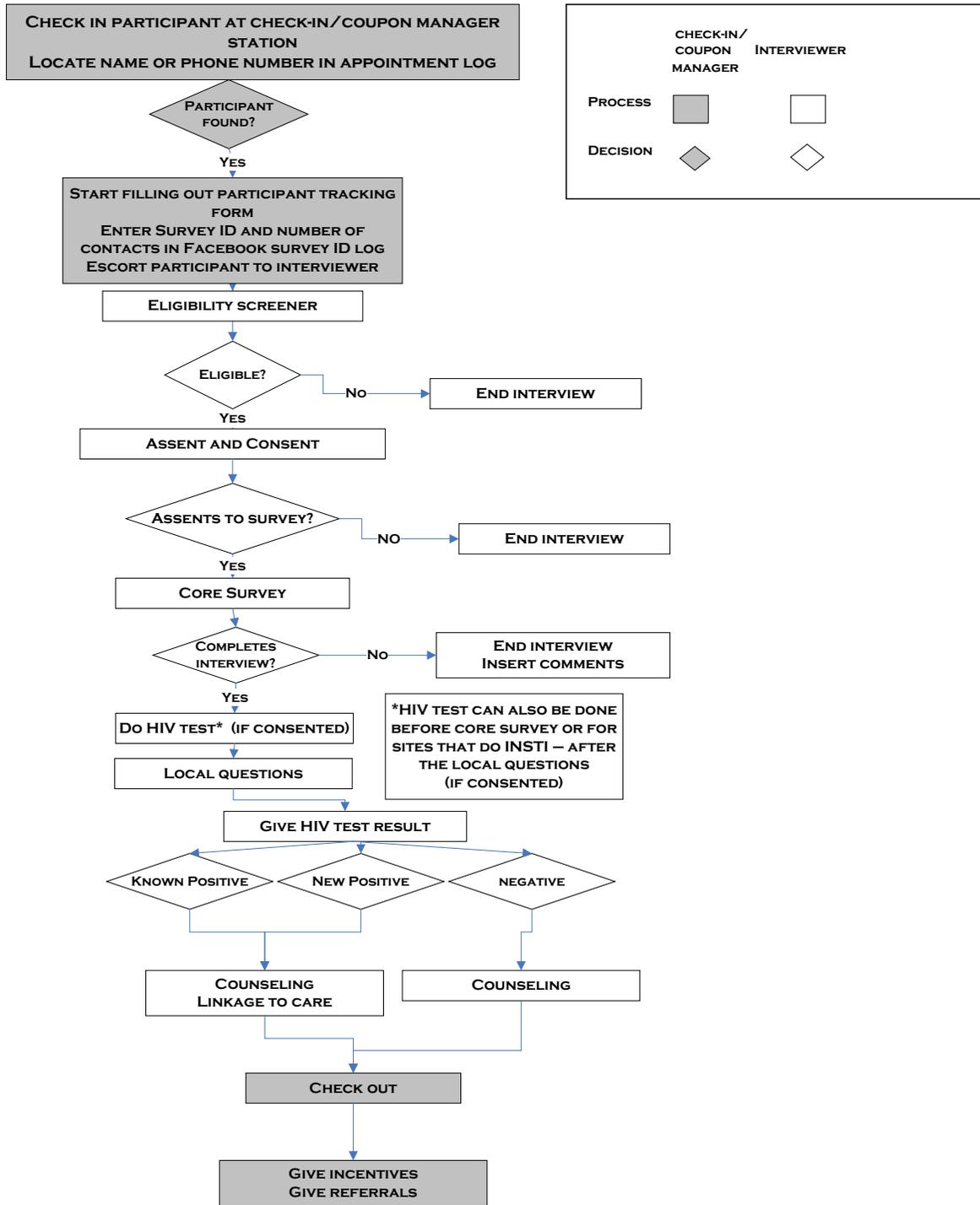
When creating a CMP record, the check-in/coupon manager should enter the following information:

- **Coupon (or referral card) number:** The potential participant’s coupon (or referral card) number will be used to start the record creation process.
- **Survey ID:** The potential participant’s survey ID will be the same as his coupon (or referral card) number.
- **Interviewer ID:** The interviewer ID is the ID of the interviewer assigned to the potential participant. It is also helpful for the check-in/coupon manager to write the interviewer ID on the potential participant’s coupon (or referral card).



It is important to **always** create a record in the CMP before the potential participant is screened by an interviewer. This ensures that there is a corresponding CMP record for each survey record.

Figure 8.2 Check-in, interviewing, and check-out procedures for FBS



## 8.4 Check-in with FBS

If a site is doing both RDS and FBS, the FBS check-in duties are performed by the coupon manager. If a site is only doing FBS, the check-in duties are performed by the person designated as the “check-in manager.” When checking the participant in, the check-in/coupon manager should check the electronic Appointment Log for the participants name or phone number. For participants without an appointment (usually those who did not go through the phone screener as the only contact was via email or text message) the check-in/coupon manager should look at the relevant section of the Appointment Log. This could be a section in the Log set up where names and phone number of participants without appointments are listed.

The in-person eligibility screening should take place during the interview and not during check-in. However, the check-in/coupon manager can deny enrollment to potential participants in the following situations:

- **If it cannot be verified that the person was recruited through Facebook**, he cannot be interviewed. To verify that the participant was recruited through Facebook, check the Appointment Log. Remember to check both for a scheduled appointment as well as the section in the Appointment Log that has the list of participants who did not want to book an appointment, but who have been in touch with project staff (by phone or other means) and were told they could just drop in at a field site. The check-in/coupon manager should make this clear to the person:

*“I’m sorry, but we can’t interview you as we cannot verify previous contact.”*

- **If the person appears too intoxicated to assent to the interview or to complete it**, the person’s appointment should be re-scheduled for another day. The check-in /coupon manager should use his own judgment as to how to best handle the situation and avoid confrontation. He could politely reply:

*“I’m sorry, we won’t be able to see you today. Can we re-schedule your appointment for another day?”*

- **If the person appears too intoxicated to assent to the interview or to complete it**, the person’s appointment should be re-scheduled for another day. The check-in /coupon manager should use his own judgment as to how to best handle the situation and avoid confrontation. He could politely reply:

*“I’m sorry, we won’t be able to see you today. Can we re-schedule your appointment for another day?”*

- **If the person is recognized as a previous participant – by any method**, the check-in manager/ coupon manager should tell the person that he cannot participate more than once.

## **8.5 Completing the Participant Tracking form and escorting participant to interviewer**

### **8.5.a Participant Tracking form and Survey ID Log**

Once the CMP record has been created or the Facebook appointment has been validated, the check-in/coupon manager should fill out the Participant Tracking form (**Appendix R**) with the following items:

- The ID of the interviewer who will interview the participant
- Survey ID
- Field Site ID
- Portable computer number

For RDS – the Survey ID is the same as the coupon number.

**For FBS**, Survey IDs must be assigned by the check-in/coupon manager. To keep track of the numbers that have been assigned, the field supervisor or check-in/coupon manager should maintain a Survey ID log that contains the following information:

- Survey ID
- Interviewer ID
- Interview date
- Total number of contacts made to that participant (from Appointment Log)
- Did participant complete Phone Screener or did they come directly to the field site?
- Comments

**Table 8.1** (below) shows an example of a Survey ID Log. Project sites may customize their logs and include any additional information needed to support their operations. The coupon / check-in manager should complete the required entry fields in the log at the time a Survey ID number is assigned to a prospective participant.

In NHBS-YMSM we do not want to link the participants name with the Survey ID. The Survey ID Log is the only place where the Survey ID is linked with the information from the Appointment Log on the number of contact attempts made before the participant responded. This form will also link the Survey ID with information about whether the participant completed the phone eligibility screener or not. The survey ID Log should be submitted to the CDC project officer monthly. You can leave out the Interviewer ID number when submitting it to CDC.

**Table 8.1 Facebook Survey ID Log**

Survey ID No.	Interviewer ID No.	Interview Date.	Total number of contacts	Completed phone eligibility screener? (Y/N)	Comments
6001	10	8/2/2014			
6002	11	8/2/2014			
6003	10	8/2/2014			
6004	11	8/5/2014			
6005	12	8/5/2014			
6006	10	8/6/2014			



Survey IDs are used to distinguish the sampling method used:

For RDS, participants who are seeds will have a survey ID ranging from 0001-0888 and participants who are not seeds will have a survey IDs ranging 3000 to 5999. For FBS and VBS, participants will have survey IDs ranging from 6000 to 8999.

### ***8.5.b Escorting participant to interviewer***

The check-in/coupon manager introduces the participant to his assigned interviewer. He should also give the participant’s tracking form to the interviewer as well as the coupon (RDS only). If the interviewer knows the person, the check-in/coupon manager should assign a different interviewer.

## **8.6 NHBS-YMSM Interview**

This section describes the interview process and the activities that should be completed by the interviewer. The NHBS-YMSM interview is composed of three main sections: the eligibility screener, the assent/consent, and the questionnaire. The interview is conducted using a portable computer and the entire process takes approximately 1 hour to complete. All interviews must be conducted in a quiet area that affords privacy and protects the participant’s confidentiality. Other individuals should not be able to hear the interviewer’s questions nor the participant’s responses.

### ***8.6.a Eligibility screener***

The eligibility screener is designed to ensure that participants meet the NHBS-YMSM eligibility criteria. To start the eligibility screener, the interviewer should open the survey file on the portable computer and enter the survey ID and his interviewer ID. The portable computer will automatically determine whether someone is eligible to participate based on the following criteria:

### *NHBS-YMSM eligibility:*

- Has not previously participated in NHBS-YMSM
- Lives in the participating MSA or Division
- Is able to complete the interview in English
- Is between 13 and 17 years of age
- Was born male and is living as a male
- Has ever had any sexual contact with another male, OR self-identifies as gay, bisexual, queer or same-gender loving OR reports same-sex sexual attraction

The interviewer then documents on the Participant Tracking Form whether the participant passed the eligibility screener or not. Individuals who do not meet the eligibility criteria will be told “the computer has not selected you to participate in the health survey.” If someone is ineligible, the interviewer should end the interview and thank the person for his time. After the person leaves the field site, the interviewer should tell the check-in/coupon manager that the person was ineligible.

For RDS only, the interviewer should also give the check-in/coupon manager the person’s coupon. The check-in/coupon manager should enter “Not eligible” in the person’s CMP record, mark the coupon “VOID,” and file the coupon in the weekly folder or envelope.



Interviewers should not share the eligibility criteria with participants nor tell them that they are being screened for eligibility. Participants should always be told that the computer will determine if they have been selected to participate in the survey.

### *Previous participants*

The coupon manager/check-in manager can prohibit previous participants (who have completed all or part of the NHBS-YMSM survey, regardless of the method by which they were recruited) from enrolling again if he recognizes them during check-in. Yet, sometimes previous participants are not recognized until after they have been checked in. When this occurs, project staff should report their suspicions to the field supervisor. If the field supervisor concurs, the field supervisor should tell the person’s interviewer to make him ineligible if he denies previous participation during eligibility screening. If the person responds “No” when asked “During 2014, did you already complete at least part of the health survey that <project name> is conducting? It could have been here or at another location,” the interviewer should select the “Known previous participant” response option so that the portable computer will automatically make the previous participant ineligible.



Only the field supervisor, in consultation with project staff, can make the final determination that a person is a previous participant and should be made ineligible; project staff should not decide this on their own.

### *Participants thought to be too young or too old (under 13 years or older than 17 years)*

Some young men may try to participate in NHBS-YMSM by reporting a date of birth that is not consistent with what would be expected based on their appearance. When an interviewer believes that someone is of an ineligible age, the interviewer should report their suspicions to the field supervisor. If the field supervisor concurs, the field supervisor should tell the person's interviewer to make him ineligible by selecting "No" in the portable computer when asked "Is this person alert and able to complete the Interview in English?" The portable computer will instruct the interviewer to specify why the person was not able to complete the survey, and the interviewer should select "Thought to be too young" or "Thought to be too old". The portable computer will automatically make the person ineligible.



Only the field supervisor, in consultation with project staff, can make the final determination that someone is of an ineligible age and should be made ineligible; project staff should not decide this on their own.

If the field supervisor and the staff member(s) **disagree** that the person is younger than 13 or older than 17 years of age, the person's interviewer should **not** make him ineligible based solely on his suspected age. However, when administering the NHBS-YMSM survey, the interviewer could ask the participant questions about his age during some important event (such as graduating from high school) to verify his reported age. If the interviewer strongly suspects that the participant is of an ineligible age, he can express his concerns using the validity question at the end of the survey (see "Core questionnaire" in **section 8.6c**).

Project sites that identify a pattern of younger (< 13 years old) or older (> 17 years old) individuals attempting to participate in NHBS-YMSM should discuss the matter with their CDC project officer.

### *Intoxicated participants*

During screening, if an interviewer determines that a participant is too intoxicated with alcohol or drugs to competently assent/consent to participate in NHBS-YMSM or to complete the survey, the interviewer should check "No" in the portable computer when asked, "Is this person alert and able to complete the health survey in English?" After checking "No," the portable computer will instruct the interviewer to specify why the person was not able to complete the survey, and the interviewer should check "Not alert." As with previous participants, the portable computer will automatically make the person ineligible. Before closing the survey file, the interviewer should also add a note to the final comment field that the person was "too intoxicated to assent/consent and complete the survey."

### **8.6.b Assent/Consent**

The interviewer should read the assent/consent form to each eligible participant and answer any questions the participant may have. Depending on local IRB requirements, project sites may choose to

have the interviewer paraphrase the information in the assent/consent form rather than reading it verbatim. If the local IRB requires informed assent/consent to be obtained before a potential participant is screened for eligibility, project sites must do so. Assent/consent to participate in NHBS-YMSM should be obtained verbally and recorded in the portable computer (some local IRBs may also require project sites to maintain written documentation of assent/consent). Participants can assent/consent to participate in either: 1) the NHBS-YMSM questionnaire, or 2) the NHBS-YMSM questionnaire and an HIV test. Participants can also consent to having their blood stored for future tests. Further details of the assent/consent process are provided in the *NHBS-YMSM Interviewer Guide*.



It is critically important for interviewers to accurately record assent/consent in the portable computer. If assent/consent is not recorded in the portable computer, the participant's data will be deemed void and cannot be used for NHBS-YMSM, even if the participant verbally assented/consented.

All participants in NHBS-YMSM **must** remain anonymous, meaning their names or other personal identifiers cannot be linked in any way to their NHBS-YMSM data.

If a person chooses **not** to participate in the questionnaire or is unable to provide assent/consent, the interviewer should end the interview and thank the person for his time. The interviewer should tell the coupon manager/check-in manager that the person has not provided assent.

For RDS, the interviewer should also give the check-in/coupon manager the person's coupon. The check-in/coupon manager should enter "Did not assent/consent" in the person's CMP record, mark the coupon "VOID," and file the coupon in the weekly folder or envelope.

The interviewer shall document on the Participant Tracking Form whether the participant:

- Assented to the interview
- Consented to HIV testing
- Consented to blood storage

### *Participants who change their mind about HIV testing*

Participants who initially decline HIV testing will have another opportunity to consent to testing at the end of the core questionnaire. Before the core questionnaire closes out, participants who did not initially consent to HIV testing will be asked, "Did you want the HIV test that is part of today's survey?" This will give the participant a second chance to consent to HIV testing if he initially declined testing but then changed his mind during the survey.

### *8.6.c NHBS-YMSM Questionnaire*

The interviewer should use a portable computer to administer the NHBS-YMSM questionnaire to eligible men who assent to participate. The survey takes approximately 30-40 minutes to conduct and will consist of the core questionnaire, and if applicable, local questions developed by the project site. To minimize the burden on participants, any local questions should not take more than 10 minutes to administer.

#### *Interviewing skills*

Interviewers and project managers should read the *NHBS YMSM Interviewer Guide* for explanations of the survey questions and guidance on interviewing. Major areas of focus include:

- **Reading instructions, questions and definitions as written:** To help ensure standard data collection among interviewers and across project sites, interviewers must read survey instructions, questions and definitions completely as written. If a participant does not understand a term or phrase used in the survey, the interviewer should first repeat the item verbatim. If the participant still does not understand, the interviewer should allow the participant to interpret the term or phrase himself (e.g., “whatever it means to you”). The only exceptions are for definitions of sexual behaviors and drug use. If, after repeating a sexual behavior or drug use term, the participant still does not understand, the interviewer may use colloquial language or local terminology.
- **Using flashcards (Appendix Y):** Flashcards help participants understand the intent of a question or its responses, thereby facilitating the interview and improving data quality. Interviewers should always use flashcards when indicated by a question and they should read the responses on the cards in case a participant has a low literacy level.
- **Probing:** Interviewers should probe with additional questions whenever a participant cannot remember the answer to a question, gives an unclear response, or gives a response that cannot be coded with one of the available response options. Most often, participants have trouble remembering dates. When this occurs, the interviewer should try to help the participant remember the date by starting with a broad period and then narrowing the period down. For example, if a participant cannot remember the month that he had his most recent HIV test, the interviewer could start by asking what season he had the test. Once the interviewer has determined what season the participant was tested, he could try to identify the month by anchoring it to a holiday or a special event (i.e., was it before or after the holiday or special event).
- **Creating rapport.** Interviewers must make every effort to help the participant feel comfortable, and act in a friendly, welcoming and non-judgmental manner.

### *Census Tract Information*

The questionnaire contains a question on census tract. The question is “Please take a look at this map. Can you point to the area where you live?” The interviewer is then asked to enter a 6-digit census tract #. As a project site, you will need to determine a standard operating procedure for obtaining this information which could include using electronic or paper maps. You should review this procedure with your CDC project officer.

Some sites have found it useful to have the check-in/coupon manager collect census tract information during the check-in process before the interview even begins.

You will notice an area to write down the census tract number on the Participant Tracking form where it says CT number with 6 spaces after it. If your site elects to have the check-in/coupon manager identify the census tract number before the interview begins, the check-in/coupon manager could record it here on the form before the participant is assigned to an interviewer. Then, when it gets to this question in the eligibility screener, the interviewer would enter the 6 digits from the form into the portable computer. We want to emphasize the importance of the six digit number. Some tract numbers end with two zeros, which are not displayed on some maps. Because the computer requires that all six digits be entered, it is important for the maps you use to display all six digits for every tract.

### *Network questions – RDS only*

RDS studies must meet certain assumptions to generate unbiased population estimates (see **section 1.4** of this manual). Project sites will assess three of these assumptions with the *Network Questions*:

- ***Participants know one another as members of the target population:*** The first *Network Question* asks the participant to classify his relationship to the person who gave him his recruitment coupon to determine whether the participant and his recruiter know one another or are “strangers” (see **Box 8.1**).
- ***Participants randomly recruit other participants from their personal networks:*** The second *Network Question* asks the participant to estimate the number of friends, relatives or people he associates with and has seen in the past 30 days who are male between the ages of 13 and 17 and, of these men, how many are attracted to men (see **Box 8.2**).
- ***Participants can accurately report their personal network size:*** The third *Network Question* asks him to confirm the number reported in question 2 (see **Box 8.3**). This is his personal network size. During RDS analysis, participants with smaller networks are given more weight than participants with larger networks to compensate for their having a lower probability of being recruited (participants with smaller networks know fewer people who could potentially recruit them).

Because the *Network Questions* are critical to RDS analysis, it is important that the interviewers ask them accurately and probe if participants provide vague or dubious responses. Some responses, if given, require clarification and the portable computer will automatically instruct the interviewer to follow-up. The first of these responses is recruitment by a stranger and the second is a small personal network size.

**Recruitment by a stranger:** Recruitment by a stranger violates the RDS assumption that “participants know one another.” For the first *Network Question*, if a participant responds that the person who gave him his coupon was a stranger, the interviewer should probe to determine whether the participant was truly recruited by a “stranger” or by a distant acquaintance. The portable computer will instruct the interviewer to ask:

*“When and where did you first see this person?”*

If the participant responds that he **first** saw his recruiter in a situation related to the project, such as when he received his coupon or when hanging around the field site, the interviewer should indicate that the “Recruiter is a stranger.” On the other hand, if the participant responds that he had seen or interacted with his recruiter before he was given his coupon, the interviewer should indicate that that “Recruiter is not a stranger.” When the interviewer selects “Recruiter is not a stranger,” the portable computer will automatically go back to the first *Network Question* so that the interviewer can enter the correct relationship between the participant and his recruiter. The interviewer may also use his own discretion to probe further if he needs more information to determine whether the participant was recruited by a stranger or a distant acquaintance.

**Small personal network size:** Since data from participants with extremely small personal network sizes are given considerably more weight in RDS analysis, interviewers should confirm a participant’s response whenever he reports that he does not associate with any other male friends, relatives or people he hangs out with or he just knows 1 to 3 people. If a participant responds that he does not associate with any other friends, relatives or people, the portable computer will instruct the interviewer to ask:

*“You said you haven't seen anyone in the past 30 days in [project area] who is a male friend, relative, or someone you hang out with who is between 13 and 17 years old and it attracted to other males. Is this correct?”*

Whereas, if a participant responds that he knows just 1 to 3 other people, the portable computer will instruct the interviewer to ask:

*“Is there anyone else you know in [project area] who is a male friend, relative, or someone you hang out with who is between 13 and 17 years old, who is attracted to other males, and who you've seen in the past 30 days?”*

Note that if the participant is a seed, neither question will ask him to include the person who gave him his coupon. When a participant responds that he knows more people than he originally reported, the portable computer will automatically go back to the second *Network Question* so that the interviewer can enter the correct number of male friends, relatives or people that the participant hangs out with.

**Box 8.1 – First Network Question**

**[GIVE RESPONDENT FLASHCARD B.1.]** Which of the following describes how you know the person who gave you this coupon? You can choose more than one answer. **[READ CHOICES. CHECK ALL that apply.]**

A relative or family member .....  1

A person you have sex with.....  2

A friend.....  3

An acquaintance (that is, a person you know, but  
do not consider a friend).....  4

A stranger (you don't know the person/just met them)..  5

Refused to answer.....  77

**Box 8.2 – Second Network Question**

Please tell me how many male friends, relatives or people you hang out with that you have seen in the past 30 days, are between 13 and 17 years old, and live in *[insert project area]*.

Of these \_\_\_\_\_ males, how many are attracted to other males?

**Box 8.3 – Third Network Question**

So in the past 30 days you've seen \_\_\_\_\_ male friends, relatives, or people you hang out with that live in *[insert project area]* and are between 13 and 17 years old, and who are attracted to other males. Would you say that \_\_\_\_\_ people is about right?

Yes, about right.....  0

No, you actually know less people .....  1

No, you actually know more people .....  2

### *Core Questionnaire*

The core questionnaire consists of several sections: demographics, network characteristics and social support, mental health, sexual behaviors, alcohol and drug-use history, HIV testing experiences, health conditions, experiences with violence and bullying, experience of stigma and discrimination, and assessment of exposure to prevention activities. Participants are asked all sections of the questionnaire.

At the end of the core questionnaire (and before the start of the local questions), the interviewer will be instructed to record his confidence in the validity of the participant's responses using the following scale: "confident," "some doubts," or "not confident at all." Validity refers to whether the participant understood the questions and answered them truthfully and accurately. If an interviewer records that he is "not confident at all" in a participant's responses, then that participant will not be eligible to recruit others.

Additional guidance and explanations of the core survey questions are contained in the *NHBS-YMSM Interviewer Guide*.

### *Ending an interview early*

If a participant does not want to continue the survey, is too intoxicated to continue, or is behaving inappropriately, the interviewer should end the interview and escort the participant to the coupon /check-in manager station. The participant should not be paid an interview incentive. Project sites that are required to provide an interview incentive by their local IRB may do so. When an incentive must be given, the coupon manager/check-in manager should add a note to the CMP record (RDS) or Facebook ID Log (FBS) indicating that the "participant did not complete the interview, but the IRB requires that an incentive be paid."

For RDS, the interviewer should also give the check-in/coupon manager the person's coupon. The check-in/coupon manager should enter "Interview not completed" in the person's CMP record, mark the coupon "VOID," and file the coupon in the weekly folder or envelope. The participant should not be given coupons to recruit others, even if he is given an incentive because of IRB requirements.

For documentation, the interviewer should record the reason for stopping the interview in the data edits section of the Participant Tracking Form (**Appendix R**). When entering this information into the Data Error Log on the DCC data portal, the data manager should instruct the DCC to add the reason for stopping the interview to the "Comments" field of the participant's survey record (variable= INTTXT).

## 8.7 Data Errors

The Data Error Log on the DCC data portal provides documentation of any corrections that need to be made to the data (please see the *NHBS-YMSM Data Management Training Manual*). If mistakes are made or problems occur during an interview, the interviewer should record the variable name with its old and new values in the data edits section of the Participant Tracking Form. At the end of each day, the field supervisor should collect the Participant Tracking Forms, review the data edits with the interviewers, and make sure the forms are complete. If the same errors are made repeatedly, additional training should be provided to the interviewers to help them avoid future occurrences.

Data edits information from the Participant Tracking Form should be entered into the online Data Error Log on the DCC data portal on a **daily** basis. Immediate entry of this information will help the data manager clarify data errors and corrections when an interviewer or the field supervisor needs to recall a specific problem.

## 8.8 HIV Counseling and Testing

This section describes the process for conducting HIV counseling and testing and referrals to care as part of NHBS-YMSM. Detailed guidance on HIV counseling and testing is presented in **Chapter 14** of this manual.

### 8.8.a Counseling and testing

Project sites must conduct all HIV counseling and testing in accordance with the *NHBS-YMSM Protocol* and their local testing policies. Most importantly, a participant **cannot** receive HIV counseling or his test result before he finishes the core questionnaire. Some project sites are not required to provide pre-test counseling before they collect a specimen for HIV testing. If these project sites adhere to the prohibition on counseling and providing results before the end of the core questionnaire, they may collect a specimen for rapid HIV testing prior to starting the survey. This will allow these project sites to run a participant's rapid HIV test while he is being interviewed. When the participant completes his interview, he would then receive HIV counseling and his rapid test result. Sites can otherwise collect the sample after the core survey but before the local questions, or at the end of the local questions.



Participants who do not assent to an NHBS-YMSM questionnaire **cannot** receive an HIV test through NHBS-YMSM. Project sites should refer these individuals to HIV counseling and testing agencies in their communities.

### ***8.8.b Active linkage to care and services***

All participants who test positive for HIV should be actively linked to appropriate medical care and HIV case management services at the time they receive their test results (see **section 14.7b** of this manual). NHBS-YMSM project areas performing rapid testing should make an active linkage to care for participants with preliminary positive results at the time of the NHBS-YMSM encounter during post-test counseling.

## ***8.9 Recruiter Training (RDS only)***

Recruiter training can be provided by the interviewers or the coupon manager. In previous RDS studies, some project sites had the interviewers provide the recruiter training and then the check-in/coupon manager reviewed the instructions with the participant to reinforce them. If project sites prefer, they can provide recruiter training after conducting the interview but before administering the HIV test.

### ***8.9.a Eligibility to recruit others***

At the end of the core questionnaire, the portable computer will display a message to the interviewer indicating whether or not the participant can receive coupons to recruit others. The interviewer should note this on the Participant Tracking Form. Participants can recruit others if: 1) they were eligible and completed the core questionnaire, 2) they provided valid responses during the interview (i.e., the interviewer did not record his confidence in the participant's responses as "not confident at all").



The message displayed on the portable computer uses the phrases "eligible to recruit others" and "not eligible to recruit others." However, project staff should **never** use the term "eligible" with participants because they may try to ascertain what the criteria are to be a recruiter. Project staff should tell participants that the computer determined whether or not they were selected to recruit others.

### ***8.9.b Offering the chance to recruit others***

When offering participants the chance to recruit others for the project, project staff should emphasize the following points:

- Recruiting is completely **voluntary**. Participants do not have to recruit others if they do not want to, and they will still be paid for completing the interview and testing for HIV.
- Recruiting is **important** to the project. The success of the project depends on people recruiting others to accrue a large sample of people from throughout the city.
- They have a chance to **earn \$10** per person recruited, up to a maximum number of people recruited.

If the interviewer provides the recruiter training and the participant decides not to recruit others, the interviewer will have to tell the check-in/coupon manager that the participant does not want to be a recruiter. This can be communicated through the Participant Tracking Form.

### ***8.9.c Conducting recruiter training***

During recruiter training, project sites should explain to participants how to properly recruit others and how to obtain their recruiter rewards. To motivate recruiters and promote community buy-in, project sites should also underscore the benefits of the project to participants and the community. Recruiter training is key to the success of RDS. If training is incomplete or unclear, recruiters will be less effective and recruitment chains may not grow. A model recruiter training script is included in **Appendix M**, but project sites may prefer to use talking points instead (also see **Appendix M**). Project sites should tailor the script or talking points to match their local operations. When the interviewers provide the recruiter training, it is helpful to have the check-in/coupon manager ask the participants questions about the recruitment process to ensure that they understand what is required.



During recruiter training, project staff should emphasize that participants should only recruit people they know and **not** strangers. One of the assumptions of RDS is that participants know one another as members of the target population.

The number of coupons given to each recruiter may vary throughout the course of the project cycle (see **section 5.3a** of this manual). Accordingly, the recruiter training script may have to be updated to let recruiters know the current number of coupons being distributed. Toward the end of data collection, project sites should also tell recruiters when they will stop giving coupons out and when they plan on ending enrollment.

#### ***Site experience:***

*The IRB at one of the NHBS-YMSM sites expressed concern about recruiter coercion and bullying in RDS. Site staff developed some steps to ensure this would not happen:*

The recruiter will not be told which of their referred participants has contacted NHBS-YMSM staff or completed a survey. Participants who arrive with a new coupon will be told that the person who recruited them has recruited other people too, and that they will not find out who completed the survey and who did not.

Both parties will also be notified that all participants must be 'selected by the computer,' and NHBS-YMSM staff will not divulge the eligibility criteria. The effect

of these measures will be twofold. Privacy will be strictly maintained for potential participants who choose not to complete the survey after recruitment, eliminating the possibility that recruiters will directly obtain knowledge to blame their ineligibility to redeem one of their recruitment incentives on the actions of a specific peer. Participants who come for a survey appointment will understand their privacy rights, and thus those who do not want to participate but were pressured into doing so will be able to have more confidence and comfort in choosing to opt out, and can attribute it to the computer not selecting them, if they wish.

Youth focus-group participants have stated that bullying would be unlikely and that the above privacy policy would further decrease the likelihood of recruiters coercing the participation of peers. Training will be provided to recruiters through talking points or a script which has been successfully used in the past in the NHBS Core Study. Training will emphasize the following talking points:

- Emphasis to recruiters that they will only receive incentives for people they recruit who complete the survey.
- Recruiters will be given their recruitment incentives when someone completes the survey and the recruiter returns to collect the recruitment incentive.
- Recruiters will not be notified of who has or who has not made an appointment or completed the survey, or the reason a survey was not completed, as it would be a violation of privacy.
- Surveys may not be completed for a variety of reasons, including that the person was not selected by the computer to participate.

These measures are expected to reduce the risk of bullying and coercion by proactively managing recruiter expectations, and emphasizing NHBS-YMSM's commitment to preserve the anonymity of all participants and potential participants.

## **8.10 *Check-out***

The interview ends with check-out at the coupon manager/check-in manager station. This section describes the steps that should be taken to complete the check-out process.

### **8.10.a *Participant Information***

When a participant is ready to check out, the interviewer or test counselor should escort him to the coupon manager/check-in manager station, and the staff member should relay the following information to the coupon manager/check-in manager through the Participant Tracking Form:

- Whether the participant was eligible for the survey
  - Whether the participant assented to the survey
  - Whether the participant completed the survey
  - Whether the participant consented to an HIV test
  - Whether the participant received an HIV test
  - Whether the participant consented to blood storage
  - Whether a DBS sample was collected
- RDS only:
- Whether the participant is eligible to recruit others and agreed to do so
  - The number of coupons the participant should receive (if applicable)

### ***8.10.b Coupon manager/check-in manager duties***

The coupon manager/check-in manager's responsibilities during the check-out include editing the CMP record (RDS only), distributing coupons (RDS only), distributing incentives, and provide prevention materials and referrals. The Facebook Survey ID and Contact Log (Table 8.1) should also be completed.

#### *Editing the CMP record (RDS only)*

Once the check-in/coupon manager has received the participant information listed above, he should collect the participant's coupon and use the coupon number to search for the participant's record in the CMP. The check-in/coupon manager should then edit the participant's CMP record:

***If the participant was not eligible, did not assent to the survey, or did not complete the survey***, the check-in/coupon manager should check the "Interview not completed" box in the participant's CMP record. The check-in/coupon manager should mark the coupon "VOID" and file it in the weekly folder or envelope. A project site's IRB may require that the recruiter receive a reward if the participant was eligible and started the interview, but did not complete it. In this case, the check-in/coupon manager should check the "Eligible" box in the participant's CMP record instead of the "Interview not completed" box so that the participant's recruiter will be paid a reward. The check-in/coupon manager should also add a note to the CMP record indicating that the "participant did not complete the interview, but the IRB requires that the recruiter be paid a reward." Participants who are not eligible, do not assent to the survey, or do not complete the survey **cannot** recruit others and should not be given coupons.

***If the participant completed the survey but did not agree to recruit others***, the check-in/coupon manager should check the "Eligible" box in the participant's CMP record. The check-in/coupon manager should mark the participant's coupon "USED" and file it in the weekly folder or envelope.

***If the participant completed the survey and agreed to recruit others***, the check-in/coupon manager should check the "Completed interview" box in the participant's CMP record. The check-in/coupon manager should mark the participant's coupon "USED" and file it in the weekly folder or envelope. Since

the participant agreed to recruit others, the check-in/coupon manager should enter the participant's recruiter information into his CMP record:

Step 1) The check-in/coupon manager should explain to the participant that he needs to collect some additional information that will be used to identify the participant when he returns for his recruiter rewards. This information will help ensure that no one else can claim the participant's rewards.

Step 2) The check-in/coupon manager should create a recruiter ID for the participant based on the questions in **Table 8.2** and enter the ID in the participant's CMP record. Since the smallest data entry error can make participant identification difficult or impossible, the check-in/coupon manager should be extremely careful entering recruiter IDs in the CMP and he should double-check the entries. Similarly, the check-in/coupon manager should ask participants to be consistent in their responses to the recruiter ID questions, especially if they have multiple aliases. It may be helpful to show the participants a flashcard with the list of questions used to create the recruiter ID to improve the accuracy of their responses.

Step 3) The check-in/coupon manager should ask the participant to show him any distinguishing "physical marks," like tattoos or birthmarks, that could be used for future identification (see **Table 8.3** for instructions on collecting and recording physical marks). He should also examine the participant's face, neck, and arms for any other obvious "physical marks." Relevant "physical marks" should be entered in the participant's CMP record.

Step 4) The check-in/coupon manager should determine how many coupons the participant should be given to recruit others and enter the numbers on the assigned coupons in the participant's CMP record.

Step 5) If necessary, the check-in/coupon manager can add comments to the participant's CMP record that could help with participant identification or project management.

**Table 8.2 Recruiter ID questions**

<ol style="list-style-type: none"><li>1) <b>What are the FIRST 2 letters of YOUR LAST name?</b></li><li>2) <b>What is the FIRST letter of YOUR FIRST name?</b></li><li>3) <b>What is the FIRST letter of YOUR MOTHER'S FIRST name?</b></li><li>4) <b>In which MONTH were you born? (2 digits)</b></li><li>5) <b>What are the LAST 2 digits of your YEAR of birth?</b></li><li>6) <b>What is your gender?</b></li><li>7) <b>What racial/ethnic group do you consider yourself to be in?</b></li></ol>
--



### *Distribute coupons (RDS only)*

If the participant agrees to recruit others, the check-in/coupon manager should give him coupons and reiterate that he will only receive rewards for the people he recruits who are selected to take the survey (i.e. eligible) and who complete the survey. The check-in/coupon manager should also give the participant an information card with the hours, location(s), and phone number of the field site(s). Participants can call the field site to see if they are owed any recruiter rewards (the check-in/coupon manager can use the participant's survey ID to locate his CMP record). Please see **Figure 8.3 for a model information card**. Project sites should keep track of the coupons given out using the CMP Log (**Appendix N**).



Some participants may know fewer people than the number of coupons being distributed. For example, a participant may report that in the past 30 days he has only seen 2 friends, relatives or people that he associates with, but the project site is giving 3 coupons to each recruiter. Regardless of how many friends, relatives or people they associate with, **all** participants should be given the maximum number of coupons to which they are entitled because their pool of potential recruits may actually be larger than the number of people he associates with and have seen in just the past 30 days.

Figure 8.3 Model information card (front and back)

# Project ASK



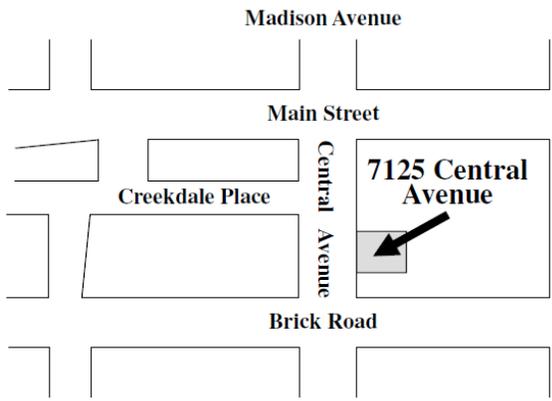
**Recruiter Reward up to \$50.00!**

Call 1-888-865-4327 for more information

When: Tuesdays and Fridays  
9am-6pm

Where: 7125 Central Avenue, 2<sup>nd</sup> Floor  
East of Main Street, West of Brick Road  
across from Salvation Army





## Project ASK

is located at 7125 Central Avenue  
between Main Street and Brick Road  
across from the Salvation Army

### 1-888-865-4327

***PLEASE CALL FOR AN APPOINTMENT***  
(IT'S A FREE CALL FROM ANY PAYPHONE)

Survey ID \_\_\_\_\_

### *Reinforce recruiter training*

The check-in/coupon manager should verify that the participant understands how to use his coupons to recruit others for the project. It is best to ask the participant open-ended question such as:

*“Can you explain to me what you need to do with these coupons?”*

*“Can you tell me who you need to give these coupons to?”*

The coupon manager should ask additional questions, if necessary, to ensure that the participant fully understands the recruitment process and knows that coupons should only be given to people he knows and **not** to strangers. The check-in/coupon manager should also remind the participant of any coupon activation or expiration dates.

**Table 8.3 Collecting and recording physical marks**

<p>The check-in/coupon manager should explain to the participant why it is important to collect his physical marks:</p> <p><i>“So that I can identify you when you come back to get paid for giving out your coupons, I need to ask if you have any tattoos or other physical marks, such as scars or birthmarks. Like the ID we just created, this information will prevent someone else from claiming your money.”</i></p> <p>Project sites should develop a protocol for collecting physical marks in a systematic manner. For example, the check-in/coupon manager could start with the face, then check the neck, the right arm, and the left arm. The check-in/coupon manager should also ask if the participant has any physical marks in other areas of his body that are not readily visible. However, the check-in/coupon manager should only examine and note physical marks that are in areas of the body that are not considered “private.” For example, it would be appropriate to view a tattoo on a male participant’s ankle, but not on his buttocks. A simple rule of thumb is that if an area is not visible when the participant is wearing a bathing suit, it should <b>not</b> be viewed.</p> <p>Useful physical marks for identifying participants are mostly permanent and include:</p> <ul style="list-style-type: none"><li>● Tattoos</li><li>● Scars (other than from injecting)</li><li>● Visible birthmarks</li><li>● Height</li><li>● Eye color</li></ul> <p>In contrast, physical marks that can be temporary, such as hair color, facial hair, and piercings, are not reliable and should not be recorded. Physical marks that the check-in/coupon manager has not actually viewed should also not be recorded. When entering physical marks in the CPM, the check-in/coupon manager should describe the physical mark in as much detail as possible, noting its</p>
--

color(s), shape, and location on the body. For example, “Red ‘I ♥ MOM’ tattoo on inner left forearm.”

### *Distribute incentives*

The check-in/coupon manager (or field supervisor) should then pay the participant the incentive for completing the survey and if applicable, the incentives for receiving the HIV test. Participants do not have to agree to recruit others to receive their incentives. After the participant is paid, the check-in/coupon manager should document payment of each incentive in the participant’s CMP record.



Some local IRBs may require that project sites provide incentives to participants who are eligible and start the survey, but do not complete it.

### *Provide prevention materials and referrals*

Providing participants with prevention materials and referrals is an important component of NHBS-YMSM; it facilitates rapport with participants and trust with local communities. Project sites should provide participants with prevention materials such as informational pamphlets on HIV, STD, and hepatitis prevention, as well as condoms and lubricants. Participants in need of health care or social services should be referred to the appropriate providers in the community.

Based on their preliminary research, project sites should identify those health care and social service providers most commonly used by young MSM in their community. Project sites should maintain a list of the names of these providers and their contact information so that they can readily make any necessary referrals. This list should include HIV and STD clinics, agencies that offer free HIV tests, health clinics, mental health service providers, agencies that help children and youth who suffer physical, sexual or emotional violence and abuse, substance abuse treatment centers, housing agencies and shelters, and other social service organizations that provide financial assistance or assistance with food, clothing, or utilities.

## **8.11 *Wrap-up at the field site and office***

At the end of each day at the field site, it is useful to hold a post-event debriefing with project staff to discuss how well the day went and to identify any problems that may have occurred. This debriefing can take place in a meeting with all project staff or in one-on-one conversations with individual staff members. Some topics for discussion may include:

- In general, how well did the day go?

- Were there any unusual events during the day (e.g., a participant ended the survey early or a participant initially consented to an HIV test but changed his mind)?
- Were there any problems with the portable computers?
- Were there any issues with the coupon manager program or Appointment Log?
- Were there any errors with the survey data?
- *For project sites conducting rapid testing*, were there any young men newly diagnosed with HIV? Were their results returned? Were they actively liked to care?
- Were there any problems with HIV test specimen collection or test kits?
- Any issues with previous participants?
- Any safety concerns?

### *8.11.a Forms and logs*

At the end of the day, the field supervisor should collect all forms and logs used by the project staff, review them for accuracy, and make any necessary corrections. Tasks to be performed on the principal forms and logs are described below.

#### *Participant Tracking Forms*

The field supervisor should gather any outstanding Participant Tracking Forms (**Appendix R**) from the interviewers or HIV test counselors. The field supervisor should then check all the forms to verify that a response has been recorded for each question. If notes or data edits are recorded on the form, the field supervisor should review them with the interviewer or HIV test counselor to ensure that the issue or problem is clearly communicated without ambiguity. The field supervisor should also check to see if the same data errors are occurring repeatedly, which may indicate the need for additional staff training.

#### *HIV Testing Log*

The field supervisor should collect all hardcopy HIV Test Results Logs from the HIV test counselors and ask if there were any problems with the test specimens or with specimen collection. Any problems should be noted on the log. The field supervisor should review the logs to make sure that a specimen was collected for each entry on the form and conversely, that an entry was made on the log for each specimen collected. For each standard or confirmatory HIV test conducted, the field supervisor should compare the Lab ID labeled on the test specimen to the Lab ID recorded on the HIV Testing Log to confirm that they are the same. For each rapid HIV test conducted, the field supervisor should make sure that there is either a negative test result or a preliminary positive test result documented on the log, and, for each of the preliminary positive rapid tests, that a confirmatory specimen was collected.

The field supervisor should also make sure that a DBS card was completed for each participant who consented to blood storage (and for testing by the local lab if using DBS for confirmatory testing) and that the DBS cards are labeled with the survey ID and documented in the HIV testing log. If sites are using DBS for confirmatory testing, the field supervisor should check that each section of the pre-cut DBS card of the participants who had a rapid positive test is labeled with the Survey ID. Lastly, the field

supervisor should check the Appointment Log to verify that appointments have been scheduled for returning HIV test results.

### *Staff evaluation forms*

If any project staff were evaluated during the day (see **Appendices B – I**), the field supervisor should review the completed forms with those staff members. If any project staff were scheduled for evaluations that did not occur, the field supervisor should note this so that the evaluations can be rescheduled for another day.

### **8.11.b Closeout at the Project Office**

Activities for closing out the day at the project office include handling HIV test specimens, managing data, and entering data in the NHBS-YMSM Data Coordinating Center (DCC) Data Portal.

#### *HIV test specimens*

The field supervisor should ensure that all HIV test specimens are transported and stored according to the specifications in the package insert for the test and in a manner that preserves the integrity of the specimens. As soon as possible after the end of interviews, the field supervisor should complete the Specimen Transport/Shipping Log (**Appendix BB**) and transport or ship the HIV test specimens to the local laboratory using the procedures agreed upon with the laboratory. Dried blood spot (DBS) cards must be allowed to dry before they are packaged for shipping, but the drying time should not exceed 24 hours. Within 24 hours, the DBS cards must be packaged with desiccants and a humidity indicator as described in Section 14.5b of this manual.

#### *Data management*

After the last interview is completed, the data manager or other designated staff member should upload the NHBS-YMSM core interview files and the local survey files from the portable computers into their respective QDS™ Warehouses. After uploading the data, the portable computers should be charged and locked up in the project office. If the portable computers are not returned to the project office after the day's interviews, they should be charged and stored in compliance with the project site's data security and confidentiality guidelines (see **Chapter 11** of this manual). When forms and logs that contain participant data are not being used by project staff, they must be stored in a locked filing cabinet in a secure area of the project office.

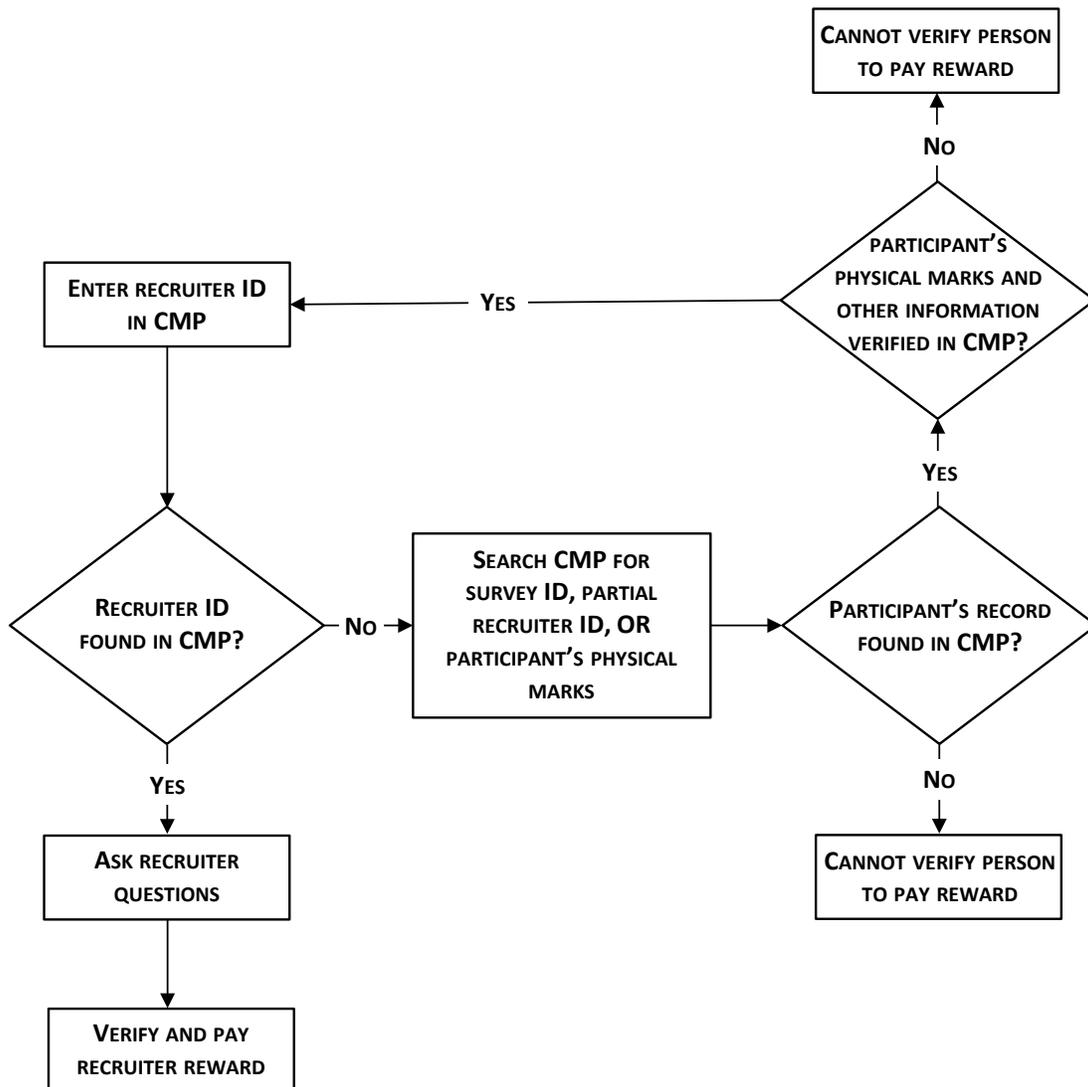
For RDS, the data manager or other designated staff member should send the CMP data to the data portal using the automatic upload function in the CMP on a daily basis. Any data edits recorded on the Participant Tracking Forms should be entered into the online Data Error Log on the portal; and data from the hardcopy HIV Testing Log should be entered into the online HIV Test Results Log on the portal. Data management is described in more detail in **Chapter 16**.

## Chapter 9 Recruiter Reward Process (RDS Only)

### 9.1 Overview

The process for asking the *Recruiter Questions* and paying recruiter rewards is shown in Figure 9.1. These activities are performed by the check-in/coupon manager using the Coupon Manager Program (CMP). The CMP identifies unique participants, collects their responses to the *Recruiter Questions*, and determines if they are owed recruiter rewards.

Figure 9.1 Recruiter Questions and recruiter reward process



## 9.2 Verify Participant's Identity

The first step in the process of asking the *Recruiter Questions* and paying recruiter rewards is to verify the participant's identity. The check-in/coupon manager should enter the recruiter ID into the CMP by asking the series of questions used to initially create the ID (see **Table 8.2** of this manual). The CMP will then locate the participant's record and the check-in/coupon manager can ask the *Recruiter Questions* (see **section 9.3**).

### 9.2.a Unable to locate recruiter ID in the CMP

The CMP may not be able to locate a record associated with a recruiter ID because:

- the participant is now providing responses that are different from those he provided when his recruiter ID was originally created (e.g., using an alias),
- the person trying to claim the recruiter reward is not the participant, *or*
- the recruiter ID was initially entered in the CMP incorrectly.

When a recruiter ID cannot be found in the CMP, the check-in/coupon manager should first try to re-create the recruiter ID by asking the questions again. Showing the participant a list of the questions can improve accuracy and is often helpful. If the record still cannot be located, the check-in/coupon manager should search the CMP for the participant's survey ID (coupon number) or a partial recruiter ID that contains information the participant is most likely to remember, such as his month of birth, year of birth, gender, and race/ethnicity. For example, instead of using the full recruiter ID "JOMJ1075MW" to search for the participant's record, the check-in/coupon manager could just use "1075MW." Alternatively, the check-in/coupon manager could search the CMP for the participant's physical marks.

Whenever a record is located by searching for a survey ID, partial recruiter ID, or physical marks, the check-in/coupon manager should confirm the participant's identity by checking the rest of the information in the participant's record, including his date of interview, month and year of birth, gender, race/ethnicity, and physical marks. The check-in/coupon manager should also correct the recruiter ID in the record.

If a recruiter or survey ID cannot be located in the CMP or the person's physical marks or demographic information do not match those listed in the record, the check-in/coupon manager should tell the person claiming the recruiter reward that there is not enough information to verify his identity, and as a result, he cannot be paid.

## 9.3 Ask recruiter questions

The *Recruiter Questions* are used to measure non-response bias by asking the participant about any individuals who refused the coupons they were offered (see **Table 9.2**). Keep in mind that even if a

participant managed to give out all his coupons, he might have encountered people who refused them before he found enough people to accept them all.

Once the CMP has located the participant’s record, the check-in/coupon manager should ask the *Recruiter Questions* and enter the participant’s responses in the CMP. The *Recruiter Questions* should be asked or confirmed **every** time a participant returns to the field site to collect his recruiter rewards or calls the field site to see if he is owed any rewards. Many participants only return to collect their rewards once, so it is important for the check-in/coupon manager to always try to ask the *Recruiter Questions* whenever he has the opportunity.

**Table 9.1 Recruiter Questions**

No.	Question
1	How many of the coupons did you give out?
2	Has anyone refused the coupons?
3	What is the race or ethnic background of those who refused coupons? That is, how many were white, black, Hispanic, Asian, or another race?
4	What is the age of those who refused coupons? That is, how many were 13, 14, 15, 16, or 17?
5	<p>Which of the following are reasons that people who refused gave you about why they did not take a coupon? <i>(The check-in/coupon manager should read each response and check all that apply.)</i></p> <p>They didn’t have time</p> <p>They didn’t live in the area</p> <p>They didn’t trust you (recruiter)</p> <p>They don’t like research/surveys</p> <p>They already participated in this survey</p>

	<p>They didn't want to be identified as gay or bisexual</p> <p>Some other reason (Specify : _____)</p>
--	--



If previous responses to the *Recruiter Questions* show that the participant gave out all his coupons and **NO ONE** refused any of the coupons, then the *Recruiter Questions* do not need to be asked again.

When asking the *Recruiter Questions* a subsequent time, the check-in/coupon manager should explain that he may be repeating questions he asked before. If the participant has not given out all his coupons when he is first asked the *Recruiter Questions*, he will be asked if he has given out any more coupons the next time he returns for his recruiter rewards. He will also be asked about people who refused any coupons. The check-in/coupon manager can help the participant remember his previous responses by telling him what has already been recorded in the CMP. For example, the first time a participant answers the *Recruiter Questions*, he states that he has given out 2 coupons. When he returns for a second time, the check-in/coupon manager could say:

*“The last time you were here, you said you gave out 2 coupons. Have you given out any more coupons since that time?”*

If the participant responds that he has given out more coupons, the check-in/coupon manager should then ask the remainder of the *Recruiter Questions*. Any inconsistencies in the participant's responses should also be clarified.

## 9.4 Verify and Pay Reward

Participants will receive a reward for each eligible recruit who completes the NHBS-YMSM survey. After the check-in/coupon manager asks the *Recruiter Questions*, the CMP will indicate the amount of the reward owed to the participant. The reward can be paid by either the check-in/coupon manager or the field supervisor. The participant's CMP record can then be updated to show that a reward has been paid for the applicable coupon(s). If a participant is not owed a reward, \$0 amount owed will be displayed. To determine why a reward is not owed, the check-in/coupon manager can check the status of a participant's coupons by examining his CMP record.

Project sites should consider the following when paying recruiter rewards:

- Reward payments can only be made directly to the participant.
- For safety reasons, rewards should be stored in a locked file cabinet or drawer.
- Participants may call the field site to find out whether they are owed a reward. They can identify themselves by their recruiter ID or their survey ID.

- Participants cannot receive replacement coupons for ineligible recruits or for lost or stolen coupons.

Some local IRBs may require that the participant still receive a reward when his recruit is unable to complete the survey or chooses to end the interview early.

## Chapter 10 Monthly Recruitment Calendar (VBS Only)

### 10.1 Overview

The purpose of this chapter is to provide guidance in creating the monthly recruitment calendar. Each month, project sites will create a recruitment calendar listing the upcoming month's recruitment events. The venues, days, and times (VDTs) for the recruitment events will be selected using a two-stage sampling method in the VDTs Program supplied by the Data Coordinating Center (DCC); the first stage of sampling selects venues and the second selects days and times. The recruitment calendar for an upcoming month should be made at least one week prior to the start of that month so that CDC project officers can review the calendar and project sites can begin to contact the management of the selected venues.

### 10.2 Sampling Venues and Day-Time Periods

The VDTs Program will allow project sites to create and randomly sort sampling frames of venues and their associated day-time periods. The program will output a list of these randomly selected VDTs that project sites, in turn, will use to construct their monthly recruitment calendars.

#### 10.2.a Constructing the initial sampling frames

To begin sampling frame construction, project sites should review the Venue Universe they created during preliminary research to identify those venues that are *eligible* venues. *Eligible* venues are venues where a sufficient number of young men attending the venue meet the criteria for participation in NHBS-YMSM:

- 13-17 years of age,
- Live in the participating MSA or Division,
- Born male and currently living as a male,
- Ever had any sexual contact with another male, OR
- Self-identify as gay, bisexual, queer or same gender loving, OR
- Report same-sex sexual attraction, AND
- Able to complete the survey in English.

The decision of what constitutes a 'sufficient' number of eligible YMSM should be determined together with your project officer based on your findings from preliminary research activities.

Once all the *eligible* venues have been identified, they should be entered into the VDTs Program. Next project sites should use the information collected in the Venue Universe to determine whether each

*eligible* venue is an *accessible* venue, which is a venue where it is logistically feasible to conduct recruitment events. An *accessible* venue has a safe environment, cooperative management who has agreed to allow recruitment events to be held at their venue, and sufficient attendance to make it *worthwhile* to conduct events. When necessary, an *accessible* venue should also have adequate space for recruitment, interviewing, and HIV testing, and, if applicable, parking for a van.

Project sites should also use the information collected in the Venue Universe to determine which days and times (day-time periods) are best for conducting recruitment event at each *accessible* venue. Sites should base this decision on venue attendance, project staff availability, permission from venue management, and willingness of venue attendees to participate in the survey. The day-time periods for each *accessible* venue should then be entered into the VDTs Program (see the *Data Management Training Manual* for instructions on entering day-time periods). All the *accessible* venues and day-time periods entered in the VDTs Program comprise the initial sampling frame, and are the venues where recruitment events can be conducted and the days and times when the events can occur.

### ***10.2.b Constructing subsequent sampling frames***

Based on their ongoing monitoring and data gathering, project sites should update the VDTs listed in the VDTs Program prior to sorting an upcoming month's sampling frame. New eligible venues should be added to the sampling frame, and the eligibility and accessibility of the prior month's venues should be modified as necessary. For example, if an eligible venue closes, it should be made **not** eligible. Similarly, if the managers of an accessible venue no longer allow access to their venue, the venue should be made **not** accessible. Day-time periods should be revised too. As attendance patterns at accessible venues change, their day-time periods should be adjusted accordingly. Maintaining an up-to-date sampling frame is critical to ensuring efficient operations and productive recruitment.

### ***10.2.c Reviewing and editing a sampling frame***

Before sorting their sampling frame each month, project sites should review it for accuracy. The VDTs Program will allow project sites to view any sampling frame they have created, as well as print a hard copy of it. If any errors are noted, they should be corrected in the VDTs Program. It is important to ensure that a sampling frame is correct before sorting occurs because once a frame has been sorted, it cannot be changed. If errors are detected in a sampling frame that has been sorted, a new version of the frame will have to be created with the necessary changes. This revised frame can then be sorted as described in **Section 10.2d** below.

### ***10.2.d Sorting a sampling frame***

With venue-based sampling, project sites must randomly select the venues where recruitment events will take place and the days and times when these events will occur. The VDTs Program will automatically perform this random selection for project sites by sorting and ordering the venues and

day-time periods on their monthly sampling frames. The program will first randomly sort all the venues on the sampling frame and list them by their selection order. The program will then randomly sort all the day-time periods available for each venue and lists them by their selection order. As shown in Figure 10.1 on the next page, the final product is a line-listing of randomly sorted venues and associated day-time periods that the VDTS Program will use to select the VDTs for a project site's monthly recruitment events.

### ***10.2.e Selecting VDTs for recruitment events***

To use the VDTS Program to select VDTs for an upcoming month's recruitment events, project sites should first decide how many events they need to conduct that month. Once project sites have decided on the planned number of recruitment events, they should classify the events as either random or non-random based on how the VDTs for the events will be selected. VDTs selected for random events will be randomly chosen from the sorted sampling frame by the VDTS Program, whereas VDTs selected for non-random events will be purposefully chosen by project sites.

Non-random events can be used to capture special events or to increase representation of important sub-populations, but they should be used sparingly. To be able to conduct non-random events, project sites must first gain approval from their CDC Project Officer by providing written justification for adding the events. For example, the added non-random events may help a project site enroll an important sub-population that the project site is having difficulty reaching.

Project sites must enter the VDT for a non-random event in the VDTS Program so that it is available for scheduling, but the program will not include the non-random VDT on the sampling frame. Therefore, the venue selected for a non-random event cannot also be used for a random event.

Figure 10.1 Sorted sampling frame

<b>Sorted Frame for July 2011</b>						
<u>Venue Pick Order</u>	<u>Venue Code</u>	<u>Venue Name</u>	<u>VDT Pick Order</u>	<u>Day</u>	<u>Start Time</u>	<u>End Time</u>
1	D001	Club 2000	1	SAT	10:00 PM	2:00 AM
-----						
2	B002	Amsterdam's	1	FRI	6:00 PM	10:00 PM
			2	THU	6:00 PM	10:00 PM
-----						
3	C001	Woodfire Grill	1	TUE	11:00 AM	2:00 PM
			2	FRI	5:00 PM	9:00 PM
			3	MON	11:00 AM	2:00 PM
-----						
4	B001	ESPN Zone	1	SAT	1:00 PM	5:00 PM
			2	SUN	6:00 PM	10:00 PM
			3	SUN	2:00 PM	6:00 PM
-----						
5	F002	Fitness Factory	1	THU	4:00 PM	8:00 PM
			2	TUE	4:00 PM	8:00 PM
-----						
6	S005	Main ST & 2nd AVE	1	WED	10:00 AM	2:00 PM
-----						
7	P002	Piedmont Park	1	SUN	10:00 AM	2:00 PM
			2	SAT	2:00 PM	6:00 PM
			3	Fri	4:00 PM	8:00 PM
			4	SAT	10:00 AM	2:00 PM
			5	SUN	2:00 PM	6:00 PM



Figure 10.1 may look different in the VDTS Program.

Project sites will start the VDT selection process by choosing VDTs for any planned non-random events. Ordinarily, in a given month, non-random events should not be held at the same venue as another non-random event. However, under rare circumstances, sites may repeat a non-random event at a venue if they obtain prior approval from their CDC project officer. After sites have selected VDTs for non-random events, they will then enter the anticipated number of random events in the VDTS Program (see the *VDTS Program User Manual* for instructions on selecting VDTs). The VDTS Program will also allow project sites to select a certain number of venues to serve as reserve venues. These reserve venues can, if needed, replace any venues that cannot be scheduled on the monthly recruitment calendar because of conflicts with event days or times.

Once project sites have chosen the number of random events and the number of reserve venues, the VDTS Program will display a table of the VDTs selected from the sorted sampling frame (**Figure 10.2** on the next page). The top section of this table of selected VDTs will list any VDTs purposefully chosen for non-random events, the middle section will contain VDTs randomly selected from the monthly sampling frame for random events, and the bottom section will list possible reserve VDTs. Project sites will use the table of selected VDTs to construct their monthly recruitment calendars.

### ***10.3 Constructing a Monthly Recruitment Calendar***

The monthly recruitment calendar lists the venues, dates, and times when recruitment events will occur during a month. Sites will construct their calendars by using the VDTS Program to schedule an upcoming month's non-random and random events. For each recruitment event scheduled on the calendar, project sites will also need to identify one or two alternate venues where they could hold the event if it cannot be held at the originally scheduled primary venue.

#### ***10.3.a Determining staff availability***

Before project sites begin scheduling recruitment events on their monthly calendars, they should first determine which dates and times the field staff will not be available to conduct recruitment events because of holidays, vacations, or other planned absences. These dates and times should then be blocked-off the calendar. Sites should also block-off other dates and times when recruitment events cannot occur, such as weekly office hours.

Figure 10.2 Table of selected VDTs.

<b>Selected VDTs for July 2011</b>							
<u>Venue Code</u>	<u>Venue Name</u>	<u># of VDTs</u>	<u>VDT Pick Order</u>	<u>Day</u>	<u>Start Time</u>	<u>End Time</u>	
<b>Non-random Events:</b>							
Z001	Auburn Street Fest	--	--	SUN	12:00 PM	5:00 PM	
<b>Random Events:</b>							
D001	Club 2000	1	1	SAT	10:00 PM	2:00 AM	
B002	Amsterdam's	2	1	FRI	6:00 PM	10:00 PM	
			2	THU	6:00 PM	10:00 PM	
C001	Woodfire Grill	3	1	TUE	11:00 AM	2:00 PM	
			2	FRI	5:00 PM	9:00 PM	
			3	MON	11:00 AM	2:00 PM	
B001	ESPN Zone	3	1	SAT	1:00 PM	5:00 PM	
			2	SUN	6:00 PM	10:00 PM	
			3	SUN	2:00 PM	6:00 PM	
<b>Reserve Venues:</b>							
F002	Fitness Factory	2	1	THU	4:00 PM	8:00 PM	
			2	TUE	4:00 PM	8:00 PM	
S005	Main ST & 2nd AVE	1	1	WED	10:00 AM	2:00 PM	



Figure 10.2 may look different in the VDTS Program.

To prevent burnout, project sites may want to establish work limits for their field staff--for example, limiting the number of recruitment events that can be scheduled on consecutive days so that staff can have a day off or not scheduling a morning recruitment event the day after a night event. On the other hand, some sites may have more than one team of field staff. In these cases, if staff are available and burnout can be avoided, project sites could conduct more frequent recruitment events (up to a maximum of two events in a single day).

### ***10.3.b Scheduling non-random recruitment events***

Because non-random events have the highest priority for scheduling, project sites should place them on the monthly recruitment calendar first. VDTs available for non-random events are listed in the top section of the table of selected VDTs that is produced by the VDTS Program.

### ***10.3.c Scheduling random recruitment events***

Project sites should schedule random events on the monthly recruitment calendar after any non-random events have been scheduled. VDTs available for random events are listed in the middle section of the table of selected VDTs. The venues for these VDTs are arranged in order from venues with the fewest number of day-time periods to venues with the most. Venues with the same number of day-time periods are ranked in the order that they were randomly selected by the VDTS Program. Project sites should schedule the venues for their random events in the order that they are listed on the table. By starting with venues with the fewest number of day-time periods, project sites will minimize any irreconcilable scheduling conflicts with days or times.

The scheduling of random events should begin with venues with one day-time period. Sites can schedule these venues on any date that can accommodate their day-time periods. Once this has been completed, project sites can start scheduling those venues with more than one day-time period. Before sites can do this, however, they must first randomly select a day-time period for each venue. To facilitate this process, the table of selected VDTs lists all the day-time periods for each venue in the order that they were randomly chosen by the VDTS Program (*i.e.*, the first day-time period randomly selected is listed first, the second randomly selected is listed second, *etc.*). For each venue, sites should therefore pick the first day-time period listed for that venue and schedule it on any date that can accommodate this day-time period. If no dates are available to schedule the first day-time period listed for a venue, sites should choose the second day-time period listed. If a date cannot be found for this day-time period either, sites should move down the list of the venue's day-time periods until they find one that can be scheduled on the recruitment calendar. In some rare cases, none of a venue's day-time periods can be scheduled. If this happens, sites should exclude the venue and after they have finished scheduling the remaining random events, replace it with a reserve venue.

#### ***Repeat venues***

Sometimes a site plans on conducting more random events than there are venues on its sampling frame. When this happens, a second event must be held at one or more of the venues. Because second events at any venues are scheduled **after** first events for all the venues have been scheduled, the VDTS Program displays the venues to be repeated at the end of the random events section of the table of selected VDTs. Venues to be repeated, like other venues selected for random events, are arranged in order from

those with the fewest number of day-time periods to those with the most, and they are scheduled accordingly.

### ***10.3.d Scheduling reserve venues***

Because of scheduling conflicts, a venue selected for a random event may sometimes have to be excluded and replaced with a reserve venue. Possible reserve venues are listed in the bottom section of the table of selected VDTs. The table lists both the reserve venues and their day time-periods in the order that they were randomly selected by the VDTS Program. If a venue selected for a random event must be replaced, project sites should pick the first reserve venue listed as the replacement. Sites will then have to choose a day-time period for this venue and schedule it on the recruitment calendar. As was described above in **Section 10.3c**, sites should pick the first day-time period listed for the venue and schedule it on any date that can accommodate this day-time period. If a date cannot be found for the first day-time period, the second one should be picked, and so on. If dates cannot be found to accommodate any of the venue's day-time periods, sites should move to the next reserve venue on the list. This process should continue until project sites are able to schedule a replacement venue on the recruitment calendar.



Sites should not schedule any reserve venues as replacements until all the venues selected for random events have been scheduled on the recruitment calendar.

### ***10.3.e Assigning alternate venues***

Occasionally, a recruitment event cannot be conducted at a scheduled venue because of unforeseen circumstances like inclement weather or a lack of eligible participants. Accordingly, sites should schedule at least one alternate venue as a back-up for each planned recruitment event. Under most circumstances, one alternate venue is sufficient. However, because recruitment events are moved to alternate venues at the last minute, it is often prudent to also schedule a second alternate venue in case the first is not available.

Possible alternate venues should have day-time periods that begin up to one hour before the scheduled recruitment event or up to two hours later. In addition, possible alternate venues should not be the same as any venues already scheduled as the primary venue for a recruitment event or the same as any venues already assigned as alternates. Nevertheless, the restriction on repeating venues can be lifted if there are no other possible alternate venues available for a particular recruitment event. If project sites must repeat venues, they should repeat venues assigned as second alternates before they repeat any venues assigned as first alternates, and they should repeat venues assigned as first alternates before they repeat any primary venues. Sites can schedule the same venue as an alternate multiple times in a single month, but if they end up actually using the same alternate venue more than two or three times

they should consider not using that particular venue again as an alternate that month. This is best discussed with the CDC project officer.

When choosing possible alternate venues, project sites should also consider potential logistical and weather problems. For example, project sites with venues widely dispersed throughout the city may want to limit possible alternate venues to those located a reasonable travel distance from the scheduled recruitment event. If a recruitment event is scheduled at an outdoor venue, project sites may want to choose at least one alternate at an indoor venue in case of inclement weather.

For each recruitment event that has been scheduled on the monthly calendar, the VDTS Program will display a list of possible alternate venues ranked by their random selection order and their scheduling priority (first, unscheduled venues; second, venues scheduled as second alternates; third, venues scheduled as first alternates; and last, venues scheduled as primaries). Starting at the top of the list of possible alternate venues, project sites should choose the first one that can practicably serve as the first alternate venue. After all the scheduled recruitment events have had a first alternate venue selected, project sites can use the VDTS Program to choose a second alternate venue for each event. The monthly recruitment calendar is complete when all non-random and random events have been scheduled and at least one alternate venue has been assigned for each event. Because the days and times of some scheduled recruitment events may not overlap with any other venue's day-time periods, project sites may not be able to assign alternate venues for all recruitment events.

## ***10.4 Revising a Monthly Recruitment Calendar***

Sometimes project sites may have to revise the monthly recruitment calendar after it has been submitted to their CDC Project Officer. Because of staffing or logistical difficulties, project sites may have to select a new date for a scheduled recruitment event, choose a new day-time period for a venue, or replace a venue. If a problem with a scheduled recruitment event can be addressed by modifying the calendar, project sites should do so and not rely on alternate venues (project sites should only use alternate venues for last-minute changes, like inclement weather). Ideally, whenever project sites need to revise their recruitment calendar, they should first discuss the proposed changes with their CDC Project Officer. In cases where it is not feasible to discuss a required change beforehand, project sites should report the change to their CDC Project Officer as soon as possible. Moreover, any revisions to the recruitment calendar must be recorded in the VDTS Program.

### ***10.4.a Scheduling a new date for a recruitment event***

When a recruitment event cannot be held on the date that it was originally scheduled, project sites should re-schedule the event on any available date that can accommodate the event's day-time period. For example, a recruitment event scheduled on a Monday night could be moved to another Monday night. Any previously scheduled alternate venues should also be moved to the new date. If a date that can accommodate a random event's day-time period is not available, project sites will have to randomly

select another day-time period for the event's venue (**Section 10.4b** below). If a date cannot be found to re-schedule a non-random event, project sites can purposefully choose another VDT for a non-random event or choose a reserve venue for a random event (**Section 10.4c** below).

#### ***10.4.b Selecting a new day-time period for a venue***

To select a new day-time period for a venue chosen for a random event, project sites should first locate the venue and its originally scheduled day-time period on the table of selected VDTs. Then starting with the originally scheduled day-time period, sites should move down the list of the venue's day-time periods until they find one that can be accommodated on the monthly recruitment calendar. Once sites have selected and scheduled a new day-time period for the venue, they should choose new alternate venues as well.

For example, when the project staff at Site A constructed their June recruitment calendar, they scheduled a random event at Venue B on Friday, June 10 from 6 PM to 10 PM. Subsequently, the project staff learned that Venue B would be closed for maintenance on June 10. Because recruitment events were already scheduled on the remaining Fridays in June, the project staff needed to select a new day-time period for Venue B. On the table of selected VDTs, the first day-time period listed for Venue B was the previously scheduled "Friday 6PM-10PM." Since this day-time period could no longer be accommodated on the recruitment calendar, the project staff moved to the second day-time period listed for Venue B and tried to schedule this day-time period on the calendar. This day-time period could not be accommodated on the recruitment calendar either so the project staff continued to move down the list of Venue B's day-time periods until they found one that could be scheduled.

If none of a venue's day-time periods can be accommodated on the recruitment calendar, project sites should replace the venue with a reserve venue (**Section 10.4c** below) or they can purposefully choose another VDT for a non-random event.

#### ***10.4.c Selecting another venue***

To replace a venue scheduled for a recruitment event, project sites should use the first reserve venue listed on the table of selected VDTs that has not already been scheduled on the monthly recruitment calendar. Project sites should start at the top of the list of day-time periods for this reserve venue and then move down the list until they find a day-time period that can be accommodated on the recruitment calendar. If none of the venue's day-time periods can be accommodated, project sites should move to the next reserve venue listed on the table of selected VDTs and try to schedule one of that venue's day-time periods. This process should continue until a replacement venue and its day-time period have been scheduled on the recruitment calendar. Project sites will also have to assign alternate venues for the newly scheduled replacement venue.

# Chapter 11 Recruitment Event Preparation and Management (VBS Only)

## 11.1 Overview

The purpose of this chapter is to provide guidance on preparing for and managing recruitment events. The chapter describes the forms needed to prepare for and manage recruitment events, the tasks required to plan and set up events, and the methods used to effectively manage events. Procedures for closing out recruitment events are discussed in **Chapter 13** of this manual. The project coordinator or field supervisor should perform the activities described in this chapter. Project sites are responsible for ensuring that activities at recruitment events are well-organized, comply with the protocol, are safe, and that participants are treated with respect.

## 11.2 Recruitment Event Information and Tracking Forms

To successfully conduct NHBS-YMSM activities, project sites must track and document specific recruitment event information. Three model forms are provided for this purpose: the Recruitment Event Checklist, the Recruitment Event Information & Outcomes Form, and the Participant Tracking Form.

### 11.2.a Recruitment Event Checklist

The field supervisor should use the Recruitment Event Checklist (**Appendix K**) to guide the preparation for, setup, documentation, and closeout of recruitment events; this form should be used in conjunction with the Recruitment Event Information & Outcomes Form (**Section 11.2b**). Tasks on the checklist are organized by sections according to when and where they should be completed: 1-2 weeks prior to the recruitment event, right before the event, while setting up at the event, while closing out the event, and at the project office after the event. **Sections 11.3** and **11.4** (below) provide detailed information about the tasks to prepare for and setup at recruitment events.

### 11.2.b Recruitment Event Information & Outcomes Form

The field supervisor should use the Recruitment Event Information & Outcomes Form (**Appendix S**) to record information about each specific recruitment event. The first three sections of the form collect pre-event information needed for setup: the primary and alternate venues that are scheduled, the project staff that are scheduled, and the four different code numbers that will be used for the recruitment event (Interviewer ID, Survey ID, Venue Code, and Event Number). The last two sections of the form collect post-event information: notes about the recruitment event and the outcomes of the event. The recruitment event outcomes information on this form will be entered into the VDTs Program

on the Data Coordinating Center (DCC) data portal at a later time by the data manager or other designated project staff

### ***11.2.c Participant Tracking Form***

The Participant Tracking Form (**Appendix R**) should be used by project staff to document and track the operational activities completed by each participant. The form is useful because it provides a hard copy of completed activities in the event of data loss, facilitates communication among field staff, and assists with data management. The Participant Tracking Form should also be used to record information for subsequent entry into the portable computer and the DCC data portal. For example, the field supervisor should record the four different code numbers (see **Section 5.3d** below) in the appropriate fields on the Participant Tracking Form. The interviewer will later enter this information into the portable computer at the start of an interview. Finally, interviewers should record data edits on the Participant Tracking Form to be entered into the Data Error Log on the DCC data portal. The Participant Tracking Form can be tailored to add additional fields as necessary for local operations.

## ***11.3 Preparing for Recruitment Events***

The following are tasks that should be completed before the recruitment event.

### ***11.3.a Recruitment event and calendar information***

Prior to going into the field, field supervisors should record the name, address, and contact information for the primary and alternate venues on the Recruitment Event Information & Outcomes Form.

### ***11.3.b Notify venue owner or manager***

Using local discretion, project sites may want to contact the venue owner or manager about 2 weeks before the scheduled recruitment event to confirm that the project staff have permission to conduct field operations at their venue. In addition, it is helpful to ask the venue owner or manager about any changes to the venue since the last time a recruitment event or observation was conducted at the venue. Noting the date and name of the person contacted on the Recruitment Event Information & Outcomes Form may also be useful.

### ***11.3.c Schedule project staff***

Recruitment calendars are created each month as described in **Chapter 10** of this manual. The field supervisor and a minimum of 2 staff members with defined roles must be present at each recruitment event. The number of project staff needed for a recruitment event may vary depending on the volume of people attending a venue, the size of a venue (i.e., space available for interviewing), the use of a van,

or the use of designated recruiters. Project staff should be provided with a work schedule as soon as the monthly recruitment calendar is created. The field supervisor should also determine whether project staff evaluations should be scheduled for the recruitment event.

In addition, the field supervisor should consider the dynamics of the venues when scheduling project staff.

### ***11.3.d Gather code numbers***

At the start of each interview, the interviewers will enter four different code numbers into their portable computer:

- Interviewer ID
- Survey ID
- Venue Code
- Event Number

To ensure that interviewers enter the correct numbers, the field supervisor should provide the interviewers with a written copy of the four code numbers on the Participant Tracking Form. The field supervisor can refer to the Recruitment Event Information & Outcomes Form to obtain the needed code numbers for the Participant Tracking Form.

#### *Interviewer ID*

The Interviewer ID is a unique 1- to 2-digit number assigned to each interviewer. Interviewer IDs are assigned when completing the NHBS-YMSM Operations Checklist (**Appendix A**) and should not be exchanged among different interviewers or re-used during the same project cycle.

#### *Survey ID*

The Survey ID is a unique 4-digit number that is assigned to a prospective participant when he is going to be screened for eligibility. Survey ID numbers for VBS should begin with 6000 and then increase sequentially by 1 with each additional participant (i.e., the first young man who agrees to be screened for eligibility should be assigned 6000, the second young man screened should be assigned 6001, and so forth). No breaks should occur in the sequence of Survey ID numbers and numbers cannot be re-used or repeated. No participant should be assigned a Survey ID larger than 8999.



Survey IDs are used to distinguish the sampling method used:

For RDS, participants who are seeds will have a survey ID ranging from 0001-0888 and participants who are not seeds will have a survey IDs ranging 3000 to 5999. For FBS and VBS, participants will have survey IDs ranging from 6000 to 8999.

If project sites plan on offering appointments for prospective participants to complete the interview at a later time or date (i.e., post-event appointments, (PEAs)), they must decide whether they will assign Survey ID numbers when the prospective participant is recruited at the venue or when he returns for his appointment to be interviewed (see **Section 12.3g** of this manual). Sites may choose whichever method is most suitable to meet their local needs. Assigning Survey ID numbers at the time of recruitment can help sites keep track of their appointments, but the drawback is that their database will contain gaps in the sequence of Survey ID numbers if prospective participants do not return for their appointments.

Survey ID numbers must be assigned by the field supervisor. The field supervisor should refer to the Recruitment Event Information & Outcomes Form regarding the next sequential Survey ID that should be used for the first interview of the recruitment event. To keep track of the numbers that have been assigned, the field supervisor should maintain a VBS Survey ID log that contains the following information:

- Survey ID
- Interviewer ID
- Interview date
- Event Number
- *If project sites plan on assigning Survey ID numbers for post-event appointments (PEAs) at the time of recruitment:* Documentation that a Survey ID number was assigned for a PEA
- Comments

**Table 11.1** (below) shows an example of a VBS Survey ID log. Project sites may customize their logs and include any additional information needed to support their operations. The field supervisor should complete the required entry fields in the log at the time a Survey ID number is assigned to a prospective participant. If the Survey ID number is assigned for an appointment, the field supervisor should also record the Survey ID number on the prospective participant’s appointment card.

**Table 11.1 VBS Survey ID Log**

Survey ID No.	Interviewer ID No.	Interview Date	Event No.	PEA?	Comments
6001	10	6/4/2011	1		
6002	11	6/4/2011	1		
6003	10	6/4/2011	1		
6004	11	6/4/2011	1		
6005	12	6/7/2011	2		
6006			2	YES	Appointment- Mon 6/9- 2:00PM
6007	10	6/7/2011	2		
6008	10	6/7/2011	2		
6009	12	6/7/2011	2		

### *Venue Code*

The Venue Code is a unique 4-character alphanumeric code assigned to each venue on the monthly sampling frame and recorded in the VDTs Program. The Venue Code indicates the primary or alternate venue where participants were recruited during a recruitment event. Venue codes are fixed; new venues may not be given identification codes of venues that have been deleted from sampling frames. As described below, the four-character alphanumeric incorporates a letter for the venue category and a unique three-digit number for the specific venue.

**Venue category.** The first value of the code identifies the venue category according to the following scheme:

- C Cafes and restaurants
- D Dance clubs
- E House ball events
- F Fitness club or gymnasium
- G Gay Pride and similar events
- O Social organizations
- P Parks and beaches
- R Retail businesses
- S Street locations
- V Raves, circuit parties, and similar events
- X Sex establishments or environments
- Z Other

**Specific venue.** The remaining three digits of the code identify the specific venue.

## *Coding Venue Categories*

Most categories are self-explanatory; definitions are provided below to help project sites classify their venues and assign the appropriate codes. If a venue could fit multiple categories, choose the one that best describes the venue, the main purpose of the venue, or its primary activity.

**Cafés and restaurants (C)** Cafés and restaurants are establishments whose primary activity is serving coffee or food. Many restaurants have a small bar and some may have a dance floor. Code these venues as restaurants if their primary activity is preparing and serving meals.

**Dance clubs (D)** Dance clubs are establishments that have as the primary structural feature large dance areas and a stage for musicians or a booth for disc jockeys. Many dance clubs have bars or serve food. Code these venues as dance clubs if the primary activity is dancing.

**House ball events (E)** A "house" is a social group that functions much like an extended family, and is comprised of predominantly African-American and Latino GLBT persons. These groups are best known for sponsoring fashion and dance competitions called "balls," and as a result, they are often referred to as the house ball community. House ball events are any social events designed specifically for members of the house ball community, such as house meetings, parties, and balls.

**Fitness club or gymnasium (F)** Fitness clubs or gymnasiums are establishments that are visited by most patrons for the purpose of exercising and maintaining or improving personal fitness. Bathhouses that might have exercise equipment or facilities such as pools should not be coded as fitness clubs.

**Gay Pride and similar events (G)** Gay Pride events are large community celebrations of gay, bisexual, lesbian, or transgender persons that often include parades, and artistic, educational and trade exhibits and entertainments.

**Social organizations (O)** Social organizations include any type of eligible club of MSM and LGBT youth-serving organization (including school-based LGBT organizations, if applicable). These organizations might include religious, artistic, sport, educational, or other clubs composed of MSM. HIV-positive support groups or groups of MSM that meet for HIV/AIDS clinical or prevention purposes are not eligible social organizations.

**Parks and beaches (P)** Parks and beaches are city designated outdoor locations that are visited by MSM for socialization purposes and for outdoor entertainments. Some parks and beaches may have locations that are used to engage in sex with other men (e.g., public sex environments). These venues should be classified as sex establishments and environments (see below).

**Retail businesses (R)** Retail businesses are establishments in which goods such as books and clothing are bought and sold. Businesses that sell sexual paraphernalia should also be coded as retail businesses unless the establishment serves as a location in which men routinely have sex with other men.

**Street locations (S)** Street locations are corners or other areas of sidewalks that are well-attended by young MSM and that are not associated with any one particular type of venue such as cafés, dance clubs, etc. For example, a street location may be the main thoroughfare or a busy intersection in a gay neighborhood. Since young MSM cannot legally attend bars, sites can recruit young MSM outside bars and consider these street locations.

**Raves, circuit parties, and similar events (V)** Raves and circuit parties are typically small- or large-scale dance events for MSM that occur on a single night or over the course of a weekend or week. Raves and circuit parties may or may not have fixed locations. Code the venue as a rave, circuit party, or similar event even though it is conducted at a known dance club, bar, or other venue category.

**Sex establishments or environments (X)** Sex establishments or environments are locations which are attended by MSM primarily for the purpose of engaging in sex with other men. These locations include sex clubs and bathhouses, as well as cruising areas such as parks, beach locations, and adult bookstores.

**Other (Z)** Venues that do not meet any of the criteria above should be classified as 'Other'. This code should be used only in rare circumstances for venues where no other category fits and sites should consult their Project Officer before using this category.

### *Event Number*

The Event Number is a unique 1- to 3-digit number that is assigned to each recruitment event conducted by a project site. Event Numbers should begin with 1 and then increase sequentially by 1 with each additional recruitment event (i.e., the first recruitment event should be assigned 1, the second recruitment event should be assigned 2, and so on). No breaks can occur in the sequence of Event Numbers and numbers cannot be repeated. To determine the next sequential Event Number to be used for a recruitment event, the field supervisor can check the VDTs Program for the Event Number that was entered for the last recruitment event conducted. The field supervisor should then record the next sequential Event Number on the Recruitment Event Information & Outcomes Form.

Because recruitment is the first step in the process of enrolling participants in NHBS-YMSM, a recruitment event officially starts when a recruiter approaches the first young man for recruitment. Therefore, an Event Number should be assigned whenever counting is **attempted**, even if no venue

attendees accept the approach. On the other hand, if no young men are approached for recruitment, then a recruitment event has not officially started and an Event Number should not be assigned.

### ***11.3.e Check portable computers***

Project staff should ensure that all portable computers are charged and working properly before each recruitment event. Power cords and one or two backup portable computers should be available if possible. Field supervisors should ensure that all data from the previous recruitment events have been uploaded from the portable computers. Interviewers should check that the correct date and time are displayed on the portable computers before conducting the first survey of each recruitment event; it is also useful for interviewers to check the date and time periodically throughout the event.

### ***11.3.f Gather supplies for the field***

The Recruitment Event Checklist (**Appendix K**) has a list of equipment, survey materials, forms/logs, prevention and referral materials, and HIV testing supplies that are needed to conduct recruitment events. Project sites should modify this list to meet local needs.

## ***11.4 Setting up at Recruitment Events***

Upon arriving at each scheduled venue, project staff should check in with the venue owner or manager, hold a pre-event meeting, and identify spaces for interviewing and HIV testing. In addition, project staff should count young men (those who appear between 13 and 17) who are present at the venue prior to the start of the recruitment event, determine where young men who enter the venue during the event should be counted, identify where and how recruitment will occur, and decide whether a post-event appointment (PEA) system is appropriate. **Chapter 12** of this manual provides detailed guidance on procedures for counting, recruitment and scheduling PEAs.

### ***11.4.a Check in with venue owner or manager***

Upon arrival at the venue, the field supervisor should check in with the venue owner or manager. Although venue owners or managers should be notified of the scheduled recruitment event one to two weeks prior to its occurrence, it is possible that a different person will be in charge at the venue when the event actually takes place. If this occurs, the project staff should refer to the Memorandum of Understanding (MOU) or other documentation of agreement to prevent any confusion regarding permission to operate in the venue.

### ***11.4.b Identify and set up interview and HIV testing spaces***

Project staff should consider the unique circumstances of the venue when setting up interview and HIV testing spaces for the recruitment event. Specific circumstances include weather, safety, noise levels, privacy, venue owner preferences, foot traffic and available space. The optimum interviewing and HIV testing spaces provide privacy, safety, and comfort for participants.

#### *Inside venues*

For some recruitment events, it is optimal to conduct both interviews and HIV counseling and testing activities inside venues. Venue attendees who are approached may be more willing to participate if they do not have to leave the venue. However, venue owners or managers must approve of the activities and provide appropriate space for interviewing and HIV counseling and testing. This may not be possible at all venues. For example, the collection of blood specimens for HIV testing may not be allowed at certain venues or space may not be available for conducting rapid tests. In addition, project staff must ensure that private spaces are available for providing HIV test counseling and if applicable, delivering rapid test results.

#### *Outside venues*

Project staff should consider conducting operations outside the venue if space inside the venue is very limited or if the venue owner is not willing to allow interviewing or HIV testing inside the venue. For activities conducted outside of venues, project staff should consider setting up seating for participants, such as bringing folding chairs or using park benches where available. If HIV testing is conducted outdoors, project staff should also consider bringing a folding table or other stable surface for collecting blood specimens and running rapid tests. Furthermore, project staff should bring lanterns or flashlights to provide sufficient overhead lighting for reading rapid test results and should store HIV test kits in a cooler or in such a manner that keeps the kits at a temperature within the range indicated in the package insert. Interviewing and HIV testing should be conducted far enough away from other people to ensure the confidentiality of the participants' responses and conversations. The field supervisor, interviewers, and HIV test counselors should also be aware of anyone attempting to interrupt an interview or HIV test and deal with the situation accordingly.

#### *Vans*

Project sites that have access to a van may find it practical to use the van instead of space inside a venue for all or some operations. For instance, interviewing could be conducted inside the venue and HIV counseling and testing could be conducted in the van. If interviews are conducted inside a van, project staff can screen potential participants inside the venue or on the sidewalk, and then escort eligible young men to the van to complete the interview. This strategy may improve the willingness of the young men approached to participate in the project. However, project staff must ensure that the

eligibility screener is conducted with the CAPI™ core survey on the portable computer; the screener **cannot** be conducted with another computer program or with a paper questionnaire. Note that the participants screened on the sidewalk must still have been counted and recruited in accordance with the methods outlined in 12.2b and 12.3b.

As with interviewing and HIV testing inside a venue, participant confidentiality must be maintained in a van at all times. The van should have a stable surface for collecting blood specimens and running rapid tests. The van should also have adequate overhead lighting for reading rapid test results, as well as storage for biohazard containers and bags so that hazardous materials will not spill when the van is moving.

Project staff should attempt to park the van near the venue so that walking to the van does not create a participation barrier. Depending on parking regulations and availability, it may be necessary to obtain a parking permit for each location or to reserve the location in advance. Some health departments have been able to obtain free parking for their van. If it is necessary to park the van farther away from the venue, a communication system should be in place (e.g., walkie-talkies or cell phones) and the field supervisor must be able to provide adequate monitoring of all staff members. Project sites may want to consider having one staff member monitor the area immediately surrounding the van, as well as control who is allowed to enter the van. Sites using vans should also develop contingency plans in case the van is unavailable due to mechanical or staffing problems. For instance, recruitment events may need to be conducted outside of the venue or may need to be re-scheduled if the van is not available.



Project sites using a van must indicate this in the Operations Checklist (**Appendix A**).

#### ***11.4.c Hold pre-event meeting***

Before the recruitment event begins, the field supervisor should hold a meeting with project staff to discuss roles and responsibilities; distribute materials; review Survey ID, Venue Code, and Event Number information; identify the recruiting, interviewing, and HIV testing areas; and observe the environmental and social characteristics of the venue. If recruitment events have previously taken place at the venue, project staff should also discuss what contributed to the success or failure of recruitment. To assist with recruitment, field supervisors may want to assign recruiters who have demographic characteristics that are similar to those of the venue attendees. These meetings are also a good time to build enthusiasm and raise the energy level of the staff.

Prior to starting the recruitment event, the positioning of project staff at the venue should be discussed. Project staff should be positioned strategically to accurately count, effectively recruit, and safely and the efficiently operate.

## **11.5 General Guidance for Managing Recruitment Events**

### **11.5.a Assurance of Confidentiality and field operations**

NHBS-YMSM data are covered under the *Assurance of Confidentiality for HIV/AIDS Data (Appendix V of the NHBS-YMSM Protocol)*. Field operations for data collected under the Assurance of Confidentiality are restricted in a number of ways; these restrictions should be taken into consideration when developing local procedures. The restrictions include, but are not limited to:

- Data must be secured as soon as possible after each recruitment event. These include questionnaire data, HIV testing data, Participant Tracking Forms, and any other participant-level data. If data cannot be secured in the project office right after an event, plans should be in place to lock up all forms and equipment.
- Electronic data are to be stored on a secure server.
- Paper data are to be stored in a locked file cabinet in a locked room.
- Once data are secure, they must not go back out into the field. (If you are planning to return HIV test results in the field, you must get permission from your CDC Project Officer and document the procedures in the *NHBS-YMSM Operations Checklist*.)
- All data transfers must be conducted in a secure manner.

Each NHBS-YMSM directly funded health department has a designated Overall Responsible Party for maintaining data security for HIV/AIDS surveillance data. This person should be consulted if questions arise regarding operations.



Interview and HIV testing activities should take place in a quiet area that affords privacy for the participant and the interviewer. Other participants should not be able to hear any conversations or observe someone receiving his HIV test results. Confirmatory HIV testing for reactive rapid tests should also be conducted in a private area out of view of others.

### **11.5.b Recruiting and interviewing venue attendees known to project staff**

During a recruitment event, project staff may “know” some of the young men attending the venue. “Know” means that the project staff member knows the young man’s name, sees him on a regular basis, or has previously met him in a social or professional setting. When project staff encounter a young man they “know,” they should adhere to the guidance listed below for each type of staff member. Project sites should develop local procedures for implementing this guidance and training their staff on it.

#### *Recruiters*

Recruiters may intercept a young man they “know” and invite him to participate in NHBS-YMSM.

### *Interviewers*

Interviewers may **not** interview a young man they “know.” If an interviewer “knows” a prospective participant, they must have another staff member interview him. Furthermore, during the assent process, the newly assigned interviewer should underscore the confidential nature of NHBS-YMSM and emphasize that participant information is never shared among staff members. In the rare event that all the interviewers at a recruitment event know a prospective participant, he could be offered a PEA to be interviewed by a project staff member who is not at the event. If the project site does not offer PEAs, the prospective participant cannot be interviewed (the Intercept Form should be completed as usual and a note should be added to the “Comments” field indicating that the prospective participant could not be interviewed because he was known to all interviewers).

### *Recruiters/interviewers*

If a staff member is a recruiter and an interviewer, they may approach a young man they “know” and invite him to participate in NHBS-YMSM, but they cannot interview him. Another interviewer who does not “know” the prospective participant must conduct the interview as described above for “Interviewers.”

### *HIV test counselors*

As with interviewers, HIV test counselors may not collect specimens from, provide counseling to, or return preliminary rapid or confirmatory test results to a young man they “know.” If an HIV test counselor “knows” a prospective participant, they must have another staff member certified in counseling and testing provide counseling and administer the HIV test.

### ***11.5.c Alternate venues***

Alternate venues should only be used for unforeseen circumstances such as inclement weather, venue closure, denied access to a venue, or a safety incident. Very rarely, alternate venues can be used if recruitment events at the primary venue have low yield. In this latter circumstance, project staff should begin the event and attempt to recruit attendees at the primary venue. If project staff are unable to enroll any participants after one hour, they have the option of moving to the scheduled alternate venue if they wish. However, if at least one participant is enrolled within the first hour, project staff should complete the event scheduled at the primary venue and should not move to an alternate venue. Enrollment occurs when the recruited venue attendee has been screened, determined to be eligible, and consented to participate in the survey; the interview does not have to be completed. See **Chapter 10** of this manual for information on scheduling alternate venues.

### ***11.5.d Length of recruitment events***

Most recruitment events should have a standard length of 4 hours. Standardizing the length of recruitment events helps ensure that a similar number of young men are enrolled at each venue.

Nevertheless, some events may be planned for less than 4 hours. For example, an event held at the meeting of a social organization may only last a couple of hours. Project staff should also plan on spending an extra 40 minutes after the scheduled end time to interview and HIV test anyone who may have been recruited at the end of the event.

### ***11.5.e Target sample size***

The target sample size for each project site is to have completed interviews with 300 eligible young MSM per sampling method. The eligibility criteria for NHBS-YMSM are the following:

- have not previously participated in NHBS-YMSM
  - are 13-17 years of age
  - live in the participating MSA or Division
  - were born male and are currently living as a male
  - ever had any sexual contact with another male
- OR
- self-identify as gay, bisexual, queer or same gender loving
- OR
- Report same-sex sexual attraction
- AND
- Are able to complete the survey in English

### ***11.5.f Field supervision***

Strong supervision is crucial during each recruitment event. Critical components of field supervision is knowing what occurs when young -men are approached for recruitment, monitoring trends in recruitment refusals and successes, and realizing each staff member's strengths and weaknesses. Other supervisory components are as follows:

- Before going to a venue for a recruitment event, the field supervisor should meet with project staff and discuss specific logistical, teamwork, and recruitment strategies needed for the particular event. Always plan ahead; don't wing it.
- The field supervisor should monitor recruitment and enrollment throughout the event to determine individual as well as team performance. The field supervisor should make changes to the recruitment area or system, recruitment techniques, team operations, and appointment systems when necessary.
- The field supervisor should observe recruiters to assess whether standard responses to recruitment barriers are being used appropriately and how well the recruiter engages

potential participants. The field supervisor should continuously provide feedback to recruiters.

- Project staff should learn recruitment techniques from the field supervisor and benefit from the field supervisor's expertise.

The field supervisor should maximize staff members' strengths. The field supervisor should identify the best recruiters by reviewing recruitment data and observing recruitment. With this information, the field supervisor should decide who works best at which venues and with which populations.

- The field supervisor should know the protocol and operations manual like "the back of their hand," and know when to follow methods exactly and when local adaptations are allowed.
- The field supervisor should build team morale by recognizing a job well done and encouraging the project staff to support one another.

### ***11.5.g Teamwork***

The success of each recruitment event is dependent upon each staff member's commitment to the event as well as to each other. Things to incorporate and monitor are as follows:

- When recruitment is occurring, all project staff should remain alert to what is going on. By monitoring what occurs, other staff can lend a hand when necessary.
- Develop communication cues (e.g., hand positioning) to alert staff members that assistance is needed with recruitment. Using the cues, develop and practice appropriate segues (e.g., timing, language, positioning) into existing recruitment methods. Understand how each recruiter approaches a potential participant and develops rapport to assess whether help is needed and when to intervene.
- Project staff should check-in to discuss what is working and what is not working throughout the event. They should continually assess the successes and failures of recruitment and brainstorm ways to improve techniques and opportunities for success. Recruiters should learn from one another as well as encourage each other.
- Be alert for indications that staff members may be in danger.

### *11.5.h Recruitment techniques*

The keys to successful recruiting are effective communication, strong belief in the value of NHBS-YMSM, demonstrated motivation, and high energy. How well the project staff operate as a group and how well each staff member demonstrates this positive affect should be continually assessed and improved upon. The field supervisor should work with the project staff to brainstorm new ways to improve recruitment and increase participation; additional information on strategies for overcoming recruitment and participation barriers can be found in **Appendix U** of this manual. To be successful, recruiters should adopt the following methods for approaching young men for recruitment:

- The recruiter should incorporate the best style and show enthusiasm for **each** young man rather than quickly moving onto the next one. The quality of the approach is much more important than the quantity of approaches.
- The recruiter should maintain a high level of energy and salesmanship (e.g., introduce yourself with a warm and sincere smile). Young men approached and offered participation should feel a level of energy, enthusiasm, and commitment commensurate with the importance of NHBS-YMSM for improving HIV prevention for young MSM in the local community.
- The recruiter should spend sufficient time with each person approached. It is difficult to build rapport during a 30 to 60 second approach but it is absolutely necessary to increase enrollment. When engaging a young man, the recruiter should identify and address any barriers to participation. All this takes time, but is most often worth it.
- The recruiter should approach young men as soon as they have been directed. The earlier the recruiter approaches a potential participant, the more time there is to engage him and encourage him to participate in the survey.
- The recruiter should anticipate common reasons for refusal and apply classic and innovative responses to recruitment barriers. The field supervisor and project staff should brainstorm new responses to refused intercepts and declined participation.

The recruiter should apply the "5 Refusal Rule." When there is a series of 5 refusals to accept the approach or to participate in NHBS-YMSM, the project staff should stop recruitment, re-group, analyze the problem to determine its cause, and develop a plan to correct the problem. The field supervisor should also evaluate the recruiter's performance (see **Chapter 2** of this manual). Once a solution has been developed and implemented, recruitment can resume. If the event does not result in a single young man enrolled after one hour, the field supervisor has the option of ending the recruitment event and moving to a scheduled alternate. However, before doing this, the field supervisor should first try all possible solutions to address the problem.

## **Chapter 12 Counting, Recruitment, and Interviewing (VBS Only)**

### **12.1 Overview**

Project sites will recruit and interview NHBS-YMSM participants at the venues scheduled on their monthly recruitment calendars. At these recruitment events, project staff will perform four main duties: 1) count venue attendees, 2) intercept attendees and recruit them to participate in NHBS-YMSM, 3) screen, obtain assent and interview participants, and 4) provide HIV counseling and testing to those who consent and are interviewed. The field supervisor will manage the recruitment event and three or more additional project staff will be needed to perform all the required duties. One staff member will count all young men attending the venue to determine the level of attendance. Other staff members will approach the young men attending the venue, tell them about NHBS-YMSM, and invite them to participate in the project. Young men who wish to participate in NHBS-YMSM will be screened for eligibility, and, if eligible, assented/consented, interviewed, tested for HIV infection, compensated for their time, given HIV prevention materials, and, if necessary, provided with referrals for HIV prevention and health-care services.

### **12.2 Counting**

Project sites must count venue attendees during all recruitment events. Since the attendance counts are used to weight the NHBS-YMSM data during analysis, it is extremely important that sites obtain accurate attendance counts. These weights are based on the assumption that the count represents the total number of young men attending the venue during a recruitment event.

#### **12.2.a Counter**

During each recruitment event, a member of the project staff should serve as the counter and count venue attendees with a tally counter. The same staff member should serve as the counter for an entire recruitment event so that they can keep track of venue attendees and avoid counting them more than once. Because counting may interfere with the field supervisor's management and oversight responsibilities, the field supervisor should not take on the added role of counter unless a venue has very low attendance and the recruitment event can be easily managed. In contrast, a staff member assigned to be a recruiter or an interviewer cannot also serve as the counter during a recruitment event under any circumstances.

## *12.2.b Where to count*

The location and method of counting depends on whether or not a venue has an entrance for accessing the venue, such as a doorway, gate, or similar structural entry. Venues with an entrance are generally indoor venues, such as bars and clubs, whereas venues without an entrance tend to be outdoor venues, such as street corners or parks.

### *Venues with an entrance*

Two counts will be obtained for recruitment events conducted at venues with an entrance: 1) the Pre-Event Count and 2) the Entry Count. For the Pre-Event Count, the counter will count all the young men **inside** the venue immediately **before** the recruitment event begins; and for the Entry Count, the counter will count all the young men who **enter** the venue **during** the recruitment event. Together these two counts will represent the total number of young men who attended the venue during the recruitment event.

### **Pre-Event Count**

The Pre-Event Count is the number of potentially eligible young men present inside the venue when the recruitment event begins. After project staff have made their operational plans and have set up at a venue, the counter should obtain the Pre-Event Count immediately before recruitment is ready to begin. Project sites must collect a Pre-Event Count inside the venue even if they conduct recruitment, interviewing, or HIV testing outside the venue. Once the counter has obtained the Pre-Event Count, the field supervisor should promptly record it in the outcomes section of the Recruitment Event Information & Outcomes Form (**Appendix S**). If sites are unable to obtain the Pre-Event Count at a venue, they must document the reason why in this same form.



The counter must obtain all Pre-Event counts. Project sites **cannot** obtain Pre-Event counts from venue managers or venue staff, like bouncers, doormen, cashiers, or attendants.

To obtain the Pre-Event Count, the counter should start counting young men at the point farthest away from the primary entrance (i.e., the entrance where most attendees enter the venue). Starting from this farthest point, the counter should count as they move across the venue towards the primary entrance, ending the count at the primary entrance. For example, the counter could begin in the back of a club and then count young men as they move toward the doorway at the front of the club. By starting at the farthest point from the primary entrance, the counter will be able to capture any young men who enter the venue during the Pre-Event Count. If there are multiple floors in a venue, the counter should begin counting on the floor farthest away from the floor with the primary entrance; and if there are multiple rooms, the counter should begin counting in the room farthest away from the room with the primary entrance.



Regardless of the number or arrangement of rooms in a venue, the counter should always count the young men in the room with the primary entrance last.

In rare cases, the number of young men attending a venue may be so large at the start of a recruitment event that it is difficult to obtain the Pre-Event Count. If this occurs, the counter may divide the venue into equally-sized sections, count all the young men in one of the sections, and then multiply this count by the number of sections to estimate the total Pre-Event Count. For example, the counter could divide a busy dance club into quadrants, count the young men in one quadrant, and then multiply this count by four to estimate the Pre-Event Count for the entire dance club. This method should only be used when the entire venue is extremely crowded and it would otherwise be impossible to obtain the Pre-Event Count. On the other hand, some venues may not become crowded until a certain time. For example, a House-Ball event becomes busy at 11 PM when the DJ starts spinning. At these venues, it may be helpful to set up for the recruitment event before the venue becomes crowded. This will make it easier to obtain the Pre-Event Count, as well as to plan and set up for the event.

If a venue where sites plan on conducting a recruitment event has restricted or paid access, these sites will have to establish a relationship with the owner or manager of the venue to gain permission to briefly enter the venue to collect the Pre-Event Count. If the venue owner or manager will not grant permission to enter the venue without paying a fee, sites can use project funds to pay the entrance fee for one staff member to enter the venue before the start of the recruitment event to obtain the Pre-Event Count.

### **Entry Count**

The Entry Count is the number of potentially eligible young men who enter the venue during the recruitment event. This count should be obtained at the primary entrance to the venue (i.e., the entrance where most attendees enter the venue). The same counter who obtained the Pre-Event Count should obtain the Entry Count. When the project staff are ready to begin recruitment, the counter should **clear the tally counter to zero** and start counting young men who enter the venue. The counter should stop counting when the last young man is approached for recruitment. Counting should be uninterrupted between these start and end points. The counter should continue to count even when all the interviewers are busy with participants. Once the counter has finished counting, the field supervisor should record the Entry Count in the outcomes section of the Recruitment Event Information & Outcomes Form (**Appendix S**).

The counter may be positioned either inside the venue or outside the venue, but the counter should only count young men entering the venue. Young men exiting the venue should **never** be counted. Some venues may have multiple entrances. If the counter is able to monitor multiple entrances simultaneously and accurately count young men entering the venue through these entrances (e.g., two entrances next to one another), the counter may do so. However, if the counter cannot monitor multiple entrances simultaneously, the counter should only count young men entering at the primary entrance. When a venue has additional entrances where young men were not counted, the field

supervisor should document this in the outcomes section of the Recruitment Event Information & Outcomes Form.

### *Venues without an entrance*

Just one count will be obtained for recruitment events conducted at venues that do not have an entrance. This will be the Entry Count. Since these venues do not have an entrance, the counter will count young men entering the recruitment area (see **Section 12.3b** below). The methods for collecting the Entry Count at venues without an entrance are similar to those for collecting the Entry Count at venues with an entrance. When the project staff are ready to begin recruitment, the counter should start counting young men who enter the recruitment area. The counter should stop counting when the last young man is approached for recruitment. Counting should be uninterrupted between these start and end points. The counter should continue to count even when all the interviewers are busy with participants. Once the counter has finished counting, the field supervisor should record the Entry Count in the outcomes section of the Recruitment Event Information & Outcomes Form (**Appendix S**). The field supervisor should also note that the Pre-Event Count was not obtained because the venue did not have an entrance.

The counter should only count young men who enter or cross the recruitment area. The counter should not count young men who are already in the recruitment area when counting begins. If a man is in the recruitment area when counting begins, leaves the recruitment area, and re-enters it at a later time during the recruitment event, he should then be counted.

### **12.2.c Who to count**

The counter should count all venue attendees who appear to be male and between the ages of 13 and 17. These men are potentially eligible to participate in NHBS-YMSM. If the counter is unsure of the gender or age of a venue attendee, they should give the attendee the benefit of the doubt and count them. Venue attendees should only be counted once during a recruitment event, even if they enter the venue or recruitment area multiple times.



The counter should count venue attendees who have previously participated in NHBS-YMSM. These attendees should also be approached for recruitment just like any other attendee who has been counted. When a recruiter approaches an attendee, the recruiter will ask the attendee whether he previously participated in NHBS-YMSM (see **Section 12.3e** below).

Some venue attendees should not be counted even if they appear eligible for NHBS-YMSM and have entered the venue or recruitment area for the first time. The counter should never count venue employees. Venue employees are working at the venue and are not “attending” it. Similarly, men

whose jobs require them to attend a venue, like police officers, delivery persons, and postal workers, should not be counted either.

## **12.3 Recruitment**

During recruitment, the recruiter will briefly describe NHBS-YMSM to a prospective participant and determine whether he previously participated in the survey. Venue attendees who have not previously participated in NHBS-YMSM (regardless of which sampling method) will be invited to do so.

### **12.3.a Recruitment plan**

At each recruitment event, the project staff should develop a plan for consecutively recruiting young men to participate in the survey. Consecutive recruitment means that the recruiter successively approaches one young man after another until one of the young men agrees to participate in the survey. Recruitment continues as long as there are interviewers available. If there are no interviewers available, recruitment temporarily stops and does not resume until an interviewer becomes available.

At venues without an entrance (usually outdoor venues), the project staff **must** set up a recruitment area where young men entering the area are consecutively approached for recruitment. At venues with an entrance, project staff have more options. They could set up a recruitment area where young men entering the area are consecutively approached for recruitment or they could establish an alternative plan for consecutively approaching young men attending the venue. Employing an alternative recruitment plan may be helpful at venues with low attendance where there would be few young men entering the recruitment area. An example of an alternative recruitment plan is consecutively approaching young men standing along a wall. If project staff establish an alternative recruitment plan, the recruiters must follow the prescribed recruitment plan; they cannot arbitrarily recruit any young man they want.

If necessary, project staff can adjust their recruitment plan during the event to accommodate changes in the level of attendance at the venue or to address operational challenges. For example, project staff could switch from using an alternative recruitment plan at a poorly-attended venue to using a recruitment area if the level of attendance at the venue increases; or as another example, the project staff could move the recruitment area from one location in a venue to another if the flow of attendees is greater at the new location.

### **12.3.b Recruitment area**

The recruitment area is a defined space at the venue where venue attendees who enter or cross the space are consecutively approached and recruited to participate in NHBS-YMSM. At the start of each recruitment event, the field supervisor should consult with the project staff and designate a space at the

venue as the recruitment area. The recruitment area can be of any size and it can be situated in any location of the venue. However, because a requirement of venue-based sampling is that participants have to be venue attendees, the recruitment area must be defined to ensure that only young men attending the venue are recruited to participate in the project.

### *Size of recruitment area*

The recruitment area should be large enough to have a sufficient number of venue attendees who could be recruited to participate in NHBS-YMSM. A simple rule of thumb is smaller recruitment areas for venues with a high flow of venue attendees and larger areas for venues with a low flow. During an event, the size of the recruitment area can be adjusted to match changing numbers of attendees. If the flow of venue attendees through the recruitment area is higher than initially anticipated, the size of the recruitment area can be decreased, and if the flow is lower, the size can be increased. When the flow of venue attendees is extremely high, like at a busy street corner, it may also be necessary to restrict recruitment to just those venue attendees who enter or cross the recruitment area from a single direction.

At venues without an entrance (i.e., venues where attendees are counted in the recruitment area), project sites should also consider how the size of the recruitment area impacts counting. The recruitment area should not be so large that the counter becomes overwhelmed and cannot accurately count.

### *Location of recruitment area*

The field supervisor should select a location for the recruitment area based on the logistics of operations at the recruitment event. The location should allow the field supervisor (or other staff member) to effectively direct recruitment and it should also be convenient to the spaces used to interview participants and provide HIV tests.

At venues with an entrance (i.e., venues where attendees are **not** counted in the recruitment area), the recruitment area can be located either inside the venue or outside. Usually, the recruitment area is located inside the venue when interviewing and HIV testing occur inside and it is located outside the venue when interviewing and HIV testing occur outside. Yet, this does not always have to be the case. For example, venue attendees could be recruited inside the venue and then brought outside for interviewing and HIV testing. During previous NHBS-MSM cycles, some project sites that interview and HIV test outside found that recruiting inside increased participation rates.

### *12.3.c Intercept*

The process of approaching a venue attendee and attempting to recruit him to participate in NHBS-YMSM is called the “intercept.” The field supervisor or another staff member will direct a recruiter to

intercept a particular young man. The field supervisor or another staff member always decides who the recruiter should intercept; the recruiter should *never* decide who to intercept on his own. The counter can direct recruiters at venues without an entrance (i.e., venues where attendees are counted in the recruitment area), but at venues with an entrance (i.e., venues where attendees are counted entering the venue), the counter can only direct recruiters when the recruitment area is the primary entrance to the venue or is near the primary entrance.



Self-referrals should not be recruited. Self-referrals are people who purposefully try to enroll in NHBS-YMSM by approaching the recruiter or entering the recruitment area. Self-referrals may learn about the project from another venue attendee or they may be attracted by the activity generated by recruitment event operations.

During most recruitment events when there are no recruiters or interviewers free, recruitment should stop and venue attendees should not be intercepted. Recruitment should not resume until both a recruiter and an interviewer become free again. During recruitment events at venues where the flow of attendees is extremely slow, a recruiter may intercept a venue attendee when an interviewer is not free so that there is a prospective participant available when the interviewer does become free. This helps to avoid extended periods when the interviewers are not working. If project sites choose to have prospective participants wait to be interviewed, they should not have them wait for more than 5 or 10 minutes. Furthermore, project sites should have no more than one prospective participant waiting per interviewer (i.e., if one interviewer is working at the recruitment event, project sites can have one prospective participant waiting to be interviewed; if two interviewers are working at the recruitment event, project sites can have two prospective participants waiting; and so on).

### ***12.3.d Recruiter***

Project sites may choose to have interviewers serve as recruiters or they may choose to have one staff member serve solely as a recruiter. When project sites assign one staff member to be the recruiter, they should pick someone who is outgoing and affable. Sometimes it is also helpful to match the demographic characteristics of the recruiter, like their race/ethnicity, with the characteristics of the venue's attendees. For example, project sites could use an African-American recruiter at a venue attended predominantly by African-Americans. Usually, recruiters should wear a shirt with the project logo or have a clearly visible project ID so that venue attendees immediately recognize that the recruiter is a representative of the local NHBS-YMSM project. Yet, if sites believe this will impede recruitment, the recruiter may dress to blend in with the venue attendees.

### ***12.3.e Intercept methods***

Once directed by the field supervisor or another staff member, recruiters should approach venue attendees in a friendly and confident manner. They should always approach attendees from the front or side so that they do not startle the attendee. Some recruiters find it helpful to extend their hand in

greeting; this is a welcoming gesture and often causes the prospective participant to reflexively stop to shake hands. If a venue attendee does not stop, the recruiter should walk with him to continue the intercept. During all intercepts, recruiters should begin with a verbal greeting and a brief statement of purpose:

*Hi, I work for (project name or sponsoring agency's name). We're conducting an important community health survey today/tonight.*

Some recruiters like to introduce themselves with their first names (e.g., *Hi, I'm Lance and I work for...*) because they feel it establishes a better rapport with the potential participant, whereas other recruiters avoid using their names because they want to maintain professional boundaries. If a venue attendee is engaged in another activity, such as talking to friends or listening to an iPod, the recruiter should first excuse themselves when they intercept the attendee (*Excuse me...*). Furthermore, the introduction should avoid any questions that would allow the prospective participant to readily walk away by answering a quick "no." For example:

*Hi, can I ask you some questions?*

*Hi, do you mind answering some questions?*

Immediately after the recruiter greets the venue attendee, they should begin asking the previous participation question on the Intercept Form (**Section 12.3f** below):

*During 2014, did you already complete at least part of the health survey that (project name or sponsoring agency's name) is conducting? It could have been here or at another location.*

To differentiate NHBS-YMSM from other local surveys or outreach activities, the recruiter should show the venue attendee the project logo and explain that the survey was conducted with a computer. If the attendee already participated in NHBS-YMSM (through either RDS or FBS), the recruiter should thank him for helping with the project and end the intercept. If the attendee has not previously participated, the recruiter should invite him to take part in the project. The recruiter should briefly explain NHBS-YMSM to the prospective participant, describing its purpose, interview procedures, privacy protections, and incentives. For example:

- *Survey is designed to help improve health and HIV prevention services for young men in the community.*
- *Survey asks questions about your health and risk behaviors.*
- *Survey is anonymous, which means you won't have to give your name.*

- *Survey will be conducted in a private area to protect your confidentiality.*
- *An optional HIV test is offered with the survey.*
- *You will be compensated 25 dollars for your time taking the survey, and if you agree to receive an HIV test, you will be compensated an additional 25 dollars.*

To help the recruiters and to ensure standardization during intercepts, project sites may want to outline these points in a recruiter script or on a flashcard. The script or flashcard could also contain a greeting and the previous participation question.

When inviting the intercepted attendee to participate in the survey, the recruiter should be up-beat and encouraging:

*It would be great if you could help the community by participating in our survey.*

A positive request with an appeal to altruism makes it more difficult for the intercepted attendee to decline participation than with unmotivated invitations like:

*You can participate if you want.*

*If you're interested, you can participate.*

If a venue attendee declines to participate in NHBS-YMSM, the recruiter should encourage him to do so, but the recruiter should never coerce him. A recruiter will be much more likely to be successful encouraging participation if he determines why the venue attendee does not want to participate and then addresses the attendee's specific concerns. To assist recruiters in this effort, **Appendix U** contains strategies for overcoming some common recruitment and participation barriers.

Individuals always have the right to decline participation in NHBS-YMSM. Efforts to encourage young men to participate must respect this right.



Young men who decline to participate in NHBS-MSM when they are intercepted – after project staff has addressed participation barriers – may not return later to NHBS-YMSM staff and ask to be screened. Their initial refusal may not be overturned; in other words, “no” means “no” throughout the recruitment event.

If a venue attendee agrees to participate in NHBS-YMSM, the recruiter should escort him to the field supervisor to obtain a Survey ID and to be assigned an interviewer if the recruiter does not interview participants. It is also useful to introduce the prospective participant to other project staff so that they

can identify him if he is a previous participant or will be able to recognize him if he tries to participate again.



Recruiters should **never** pre-screen intercepted young men for any of the NHBS-YMSM eligibility criteria (age, MSA residence, male gender, or ability to complete the survey). Screening should only be performed by an interviewer using the eligibility screener programmed in the computer so that eligibility statistics and data weights can be calculated.

### ***12.3.f Intercept Form***

Recruiters should record all information collected during an intercept on the Intercept Form. A copy of this form and detailed instructions for completing it are included in **Appendices V and W**. To ensure that recruitment data are accurate, recruiters must make an entry on the Intercept Form for every venue attendee they attempt to intercept, even if the attendee ignores them and does not stop. In addition, each recruiter should have his own Intercept Form when recruiting. After a recruitment event ends, data from all the Intercept Forms used during the event should be tabulated and entered in the VDTs Program.

Project sites may customize the Intercept Form to meet their own needs, but if they do, they must include all the data elements collected on the model form provided by CDC. Sites may also want to list the previous participation question at the top of the form if they have not included this question in a recruiter script or on a flashcard.

### ***12.3.g At-event appointments***

Ordinarily, a venue attendee is interviewed immediately after he is intercepted and agrees to participate in the project. Occasionally, however, a venue attendee would like to participate, but cannot do so until a later time **during** the recruitment event. In these cases, projects sites have the option of scheduling a time for the prospective participant to return to be interviewed. This is referred to as an at-event appointment. These appointments are informal and can be tracked using the “Comments” field on the Intercept Form. In the “Comments” field, sites should indicate the time that the prospective participant will return for screening and they may want to note the prospective participant’s characteristics or manner of dress to help identify him. If the prospective participant does not return for his appointment, sites must update the prospective participant’s data on the Intercept Form. The response in the “Agreed to Screening” field should be changed from “Y” (yes) to “N” (no).

Alternatively, if project sites plan on using at-event appointments frequently during a recruitment event, they could keep track of a prospective participant by including a code number or letter in the “Comments” field on the Intercept Form and giving the prospective participant an appointment card with the corresponding code. The card should list the project name and have fields to record the date of

the event, the time that the prospective participant is supposed to return for his interview, and the code assigned to him. On the card, sites should also include any other information that will help them manage and track appointments.

Project sites that offer at-event appointments **cannot** pre-screen prospective participants for NHBS-YMSM eligibility. Prospective participants can only be screened for eligibility when they return for their appointments. Sites must therefore make it clear to young men scheduled for appointments that their participation in NHBS-YMSM is not guaranteed.

### ***12.3.h Post-event appointments***

In some circumstances, a venue attendee can be interviewed after a recruitment event has been completed (either at a later time or date). This is referred to as a post-event appointment (PEA). The NHBS-YMSM protocol does not require project sites to offer appointments; project sites should decide on their own whether or not to offer them.

PEAs may be particularly useful in instances where YMSM venues would otherwise deny accessibility, at venues where the flow of attendees starts out high, but then slows or ceases, and at venues where attendees may not have sufficient time to participate in NHBS-YMSM. For example, at the meeting of a social organization, attendees might all arrive at the venue around the time the meeting starts. If a recruitment event were conducted at this meeting, recruiters would only have a very brief period during which they could recruit prospective participants. Moreover, venue attendees who agreed to participate in the project might not have enough time to complete the survey before the meeting begins. Accordingly, appointments could be used to interview prospective participants on another day.

As with at-event appointments, project sites that offer appointments **cannot** pre-screen prospective participants for NHBS-YMSM eligibility. Prospective participants can only be screened for eligibility when they return for their appointments. Sites must therefore make it clear to young men scheduled for appointments that their participation in NHBS-YMSM is not guaranteed.

### ***Scheduling post-event appointments***

When scheduling a PEA, the field supervisor or the recruiter should give the prospective participant an appointment card that lists the following information:

- Date of the appointment
- Time of the appointment
- Location of the project office where interviews are conducted
- Project phone number in case the prospective participant needs to change his appointment or needs directions to the project office

- *If the project site plans on assigning Survey ID numbers for appointments at the time of recruitment:* Survey ID number
- Venue Code of the venue where the prospective participant was recruited
- Event number of the recruitment event during which the prospective participant was recruited
- Date of the recruitment event when the prospective participant was recruited

A model appointment card is shown in figure 12.1 below that project sites can modify to meet their local needs.

**Figure 12.1 Model Appointment Card**

<b>[PROJECT NAME]</b>	
Your appointment is scheduled for:	
_____	_____
day	date
at _____ AM PM	
time	
If you need to reschedule your appointment or have any questions, please call us at <b>[project phone number]</b> .	
Our office is located at:	
<b>[address of project office]</b>	
and is open <b>[days of operation]</b> from <b>[opening time]</b> to <b>[closing time]</b> .	
Venue Code: _____	Survey ID: _____
Event Number: _____	Date of Recruitment Event: _____

To keep track of their PEAs, project sites should maintain a log that contains the following information on each appointment:

- Event date
- Event Number
- Venue Code
- *If the project site plans on assigning Survey ID for appointments at the time of recruitment:* Survey ID
- Date of the appointment
- Time of the appointment
- *If appointments will be conducted at more than one location:* Location where the interview is scheduled

- An indication whether the appointment was kept
- Comments

**Table 12.1** shows an example of an Appointment Log. Project sites may customize their logs and include any additional information needed to support their operations. Sites that carry out FBS or RDS in parallel with VBS, and who plan to carry out PEAs at field sites need to have a system whereby the staff at a recruitment event is aware what appointment slots are free at the field site(s).

**Table 12.1 Appointment Log**

Event Date	Event No.	Venue Code	Survey ID	Appointment			Returned for Appt.	Comments
				Date	Time	Location		
6/4	1	B003	6009	6/9	10:00 AM	Field Office	Yes	
6/7	3	O002	6025	6/8	9:00 AM	Field Office	No	
6/7	3	O002	6029	6/11	2:00 PM	Health Dept.	Yes	

The field supervisor or the recruiter should complete the required entry fields in the log at the time the PEA is scheduled. They may want to record the information in pencil so that changes can be readily made if a PEA needs to be rescheduled. Project sites should use the information collected on the Appointment Log to fill in the PEA field listed on the event outcomes section of the VDTs Program.

Project sites can conduct PEAs at a field site (if simultaneously doing RDS or FBS), a local NHBS-YMSM project office, such as their field office, the health department, or the office of a local collaborator. If absolutely necessary, project sites may conduct an appointment in the field before or after a recruitment event, but they should **never** conduct one during an event. When a participant is interviewed via an appointment, at least 3 staff members must be present, including the field supervisor or another senior manager.

## 12.4 Interviewing

This section provides a brief overview of the interview process and the activities that should be completed by the interviewer. All interviewers and project managers should also review the *NHBS-YMSM Interviewer Guide* for complete information on conducting NHBS-YMSM interviews. The NHBS-YMSM interview is composed of three main sections: the eligibility screener, the assent/consent, and the survey. The interview is conducted using a portable computer and the entire process takes approximately 1 hour to complete. All interviews must be conducted in a quiet area that affords privacy and protects the participant’s confidentiality. Other individuals should not be able to hear the interviewer’s questions nor the participant’s responses.

### ***12.4.a Screening for eligibility***

The eligibility screener is designed to ensure that participants meet the NHBS-YMSM eligibility criteria. To start the eligibility screener, the interviewer should open the survey file on the portable computer and enter their interviewer ID, the survey ID, the venue code, and the event number. The portable computer will then automatically determine whether the prospective participant is eligible to participate based on the criteria listed below.

- have not previously participated in NHBS-YMSM,
  - 13-17 years of age,
  - live in the participating MSA or Division,
  - born male and are currently living as a male,
  - ever had any sexual contact with another male, OR
  - self-identify as gay or bisexual, queer or same-gender loving OR
  - Report same-sex sexual attraction
- and***
- able to complete the survey in English

Young men who meet the above criteria will be assented and invited to participate in NHBS-YMSM. Those who do not meet at least one of the criteria will be told that “the computer has not selected you to participate in the health survey” and should be thanked for their time.

#### ***Previous participants***

Some young men who already participated in NHBS-YMSM may try to take the survey again by denying previous participation when asked about it during the intercept and during eligibility screening. When project staff believe that a young man is a previous participant, they should report their suspicions to the field supervisor. If the field supervisor concurs, the field supervisor should tell the man’s interviewer to make him ineligible if he denies previous participation during eligibility screening. If the young man responds “no” when asked “During 2014, did you already complete at least part of the health survey that <project name> is conducting?” the interviewer should **not** accept this answer and check “No” in the computer. Instead, the interviewer should check “Known previous participant” and the computer will automatically make the young man ineligible.



Only the field supervisor, in consultation with project staff, can make the final determination that a young man is a previous participant and should be made ineligible; project staff should not decide this on their own.

### *Participants thought to be too young or too old (under 13 years or older than 17 years)*

Some young men may try to participate in NHBS-YMSM by reporting a date of birth that is not consistent with what would be expected based on their appearance. When an interviewer believes that a young man is of an ineligible age, the interviewer should report their suspicions to the field supervisor. If the field supervisor concurs, the field supervisor should tell the young man's interviewer to make him ineligible by selecting "No" in the portable computer when asked "Is this person alert and able to complete the Interview in English?" The portable computer will instruct the interviewer to specify why the person was not able to complete the survey, and the interviewer should select "Thought to be too young" or "Thought to be too old". The portable computer will automatically make the person ineligible.



Only the field supervisor, in consultation with project staff, can make the final determination that a man is of an ineligible age and should be made ineligible; project staff should not decide this on their own.

If the field supervisor and the staff member(s) **disagree** that the person is younger than 13 or older than 17 years of age, the person's interviewer should **not** make him ineligible based solely on his suspected age. However, when administering the NHBS-YMSM survey, the interviewer could ask the participant questions about his age during some important event (such as graduating from high school) to verify his reported age. If the interviewer strongly suspects that the participant is of an ineligible age, he can express his concerns using the validity question at the end of the survey (see "Core questionnaire" in **section 8.6c**).

Project sites that identify a pattern of younger (< 13 years old) or older (> 17 years old) individuals attempting to participate in NHBS-YMSM should discuss the matter with their CDC project officer.

### *Intoxicated participants*

During screening, if an interviewer determines that a young man is too intoxicated with alcohol or drugs to competently assent/consent to participate in NHBS-YMSM, the interviewer should check "No" in the computer when asked, "Is this person alert and able to complete the health survey in English?" After checking "No," the computer will instruct the interviewer to specify why the person was not able to complete the survey and the interviewer should check "Not alert." As with a previous participant, the portable computer will automatically make the young man ineligible. Before closing the survey file, the interviewer should also add a note to the final comment field that the person was "too intoxicated to assent/consent and complete the survey."

### ***12.4.b Obtaining informed assent/consent***

The interviewer will read the NHBS-YMSM assent/consent form to each eligible young man and answer any questions he may have. Depending on local institutional review board (IRB) requirements, project sites may choose to have the interviewer paraphrase the information in the form instead of reading it verbatim. If the local IRB requires informed assent to be obtained before a potential participant is screened for eligibility, project sites must do so. Assent to participate in NHBS-YMSM should be obtained orally and recorded in the computer (some local IRBs may also require project sites to maintain written documentation of assent). Young men can assent/consent to participate in either 1) the NHBS-YMSM survey or 2) the NHBS-YMSM survey and an HIV test. Young men will also be asked to consent to have their blood stored for future tests.



It is critically important for interviewers to accurately record assent/consent in the computer. If a participant's assent/consent is not recorded in the portable handheld computer, the participant's data will be deemed void and cannot be used for NHBS-YMSM even if the participant verbally assented/consented.

#### *Participants who change their mind about HIV testing*

Participants who initially decline HIV testing will have another opportunity to consent to testing at the end of the core questionnaire. Before the core questionnaire closes out, participants who did not initially consent to HIV testing will be asked, "Did you want the HIV test that is part of today's survey?" This will allow a participant to obtain an HIV test if he initially declines testing but changes his mind during the survey.

### ***12.4.c NHBS-YMSM questionnaire***

The interviewer should use a portable computer to administer the NHBS-YMSM survey to eligible young men who assent to participate. The NHBS-YMSM survey will take approximately 30-40 minutes to conduct and will consist of the questionnaire, if applicable, local questions developed by the project site. To minimize the burden on participants, any local questions should not take more than 10 minutes to administer.

#### *Interviewing skills*

Interviewers and project managers should read the *Interviewer Guide* for explanations of the core survey questions and guidance on interviewing. Major areas of focus include:

**Reading instructions, questions, and definitions as written.** To help ensure standard data collection among interviewers and across project sites, interviewers must read survey instructions, questions, and definitions completely as written. If a participant does not understand a term or phrase used in the survey, the interviewer should first repeat the item verbatim. If the participant still does not

understand, the interviewer should allow the participant to interpret the term or phrase himself (e.g., “whatever it means to you”). The only exceptions are for definitions of sexual behaviors and drug use. If, after repeating a sexual behavior or drug use term, the participant still does not understand, the interviewer may use colloquial language or local terminology.

**Using flashcards.** Flashcards help the participant understand the intent of a question or its responses. Interviewers should always use flashcards when indicated by a question and they should read the responses on the cards in case a participant has a low literacy level.

**Probing.** Interviewers should probe with additional questions whenever a participant cannot remember the answer to a question, gives an unclear response, or gives a response that cannot be coded with one of the available response options. Most often, participants have trouble remembering dates. When this occurs, the interviewer should try to help the participant remember the date by starting with a broad period and then narrowing the period down. For example, if a participant cannot remember the month that he had his most recent HIV test, the interviewer could start by asking what season he had the test. Once the interviewer has determined what season the participant was tested, they could try to identify the month by anchoring it to a holiday or a special event (i.e., was it before or after the holiday or special event).

**Creating rapport.** Interviewers must make every effort to make the participant feel comfortable, and act in a friendly, welcoming and non-judgmental manner.

### *Census Tract Information*

The questionnaire contains a question on census tract. The question is “Please take a look at this map. Can you point to the area where you live?” The interviewer is then asked to enter a 6-digit census tract #. As a project site, you will need to determine a standard operating procedure for obtaining this information which could include using electronic or paper maps. You should review this procedure with your CDC project officer.

We want to emphasize the importance of the six digit number. Some tract numbers end with two zeros, which are not displayed on some maps. Because the computer requires that all six digits be entered, it is important for the maps you use to display all six digits for every tract.

### *Core Questionnaire*

The core questionnaire consists of several sections: demographics, network characteristics and social support, mental health, sexual behaviors, alcohol and drug-use history, HIV testing experiences, health conditions, experiences with violence and bullying, experience of stigma and discrimination, and assessment of exposure to prevention activities. Participants are asked all sections of the questionnaire.

At the end of the core questionnaire (and before the start of the local questions), the interviewer will be instructed to record his confidence in the validity of the participant's responses using the following scale: "confident," "some doubts," or "not confident at all." Validity refers to whether the participant understood the questions and answered them truthfully and accurately.

Additional guidance and explanations of the core survey questions are contained in the *NHBS-YMSM Interviewer Guide*.

### *Ending an interview early*

If a participant does not want to continue the survey, is too intoxicated to continue, or is behaving inappropriately, the interviewer should end the interview. The participant should not be paid an interview incentive. For documentation, the interviewer should record the reason for stopping the interview in the data edits section of the Participant Tracking Form (**Appendix R**). When entering this information into the Data Error Log on the Data Coordinating Center (DCC) data portal, the data manager should instruct the DCC to add the reason for stopping the interview to the "Comments" field of the participant's survey record (variable= INTTXT).

## **12.5 HIV Counseling, Testing, and Referral**

This section summarizes the process of conducting HIV counseling, testing, and active referral to care as part of NHBS-YMSM. More detailed guidance on this process is provided in **Chapter 14** of this manual.

### **12.5.a Counseling and testing**

After the interview is completed, participants who have consented to HIV testing should receive counseling and an HIV test. Project sites must conduct all HIV counseling and testing in accordance with the NHBS-YMSM protocol and their local testing policies. Most importantly, a participant **cannot** receive HIV testing or prevention counseling before he finishes the core questionnaire. Some project sites are not required to provide pre-test counseling before they collect a specimen for HIV testing. . If these sites adhere to the prohibition on counseling and providing results before the end of the core questionnaire, they may collect a specimen for rapid HIV testing prior to starting the survey. . This will allow these sites to run a participant's rapid HIV test while he is being interviewed. When the participant completes his interview, he would then receive HIV counseling as well as his rapid test result.



Participants who do not assent to an NHBS-YMSM interview **cannot** receive HIV tests through NHBS-YMSM. Project sites should refer these individuals to HIV counseling and testing agencies in their local communities.

### ***12.5.b Active linkage to care and services***

All participants who test positive for HIV should be actively linked to appropriate medical care and HIV case management services at the time they receive their test results (see **Section 14.7b** of this manual). Sites should make active linkage to care for participants with preliminary positive results as part of their post-test counseling.

## ***12.6 Participant Compensation***

Participants who complete the entire NHBS-YMSM survey should be compensated for their time and effort. Those who also test for HIV should receive additional compensation. The NHBS-YMSM protocol recommends a payment of \$25 cash for participants who just complete the survey and \$50 cash for those who complete the survey and take an HIV test. Nevertheless, local project sites are free to adjust these levels of compensation based on standards in their local communities. Furthermore, if project sites are prohibited from providing cash payments to participants, they may provide an alternative form of remuneration like a gift card or a gift check. Any alternative form of remuneration must protect participant anonymity (e.g., participant names cannot be collected or recorded) and it must have an intrinsic value to members of the community (e.g., gift cards should only be from stores that are locally accessible and well-regarded).

When a prospective participant who travels to the project office for a PEA is found to be ineligible, project sites may wish to provide a small thank you gift, such as bus or subway fare. In addition, project sites that have local funds available (i.e., funds that do not come from the NHBS cooperative agreement) may compensate participants who return for their HIV test results. Project sites should specify the amount of compensation in their assent form and they must obtain approval from both their local IRB and their CDC project officer.

## ***12.7 HIV Prevention Materials and Service Referrals***

### ***12.7.a Provide prevention materials and referrals***

Providing participants with prevention materials and referrals is an important component of NHBS-YMSM; it facilitates rapport with participants and trust with local communities. Project sites should provide participants with prevention materials such as informational pamphlets on HIV, STD, and hepatitis prevention, as well as condoms and lubricants. Participants in need of health care or social services should be referred to the appropriate providers in the community.

Based on their preliminary research, project sites should identify those health care and social service providers most commonly used by young MSM in their community. Project sites should maintain a list

of the names of these providers and their contact information so that they can readily make any necessary referrals. This list should include HIV and STD clinics, agencies that offer free HIV tests, health clinics, mental health service providers, agencies that help children and youth who suffer physical, sexual or emotional violence and abuse, substance abuse treatment centers, housing agencies and shelters, and other social service organizations that provide financial assistance or assistance with food, clothing, or utilities.

## Chapter 13 Recruitment Event Closeout (VBS Only)

### 13.1 Overview

The purpose of this chapter is to provide guidance on closeout at the end of a recruitment event. The first part of the chapter describes closeout tasks that should be completed at the venue, while the second part of the chapter describes tasks that should be completed at the project office. Project sites can use the *Recruitment Event Checklist (Appendix K)* to help manage their closeout activities.

### 13.2 Closeout at the Venue

Activities for closing out the recruitment event at the venue include holding a post-event debriefing, recording notes summarizing the event, and collecting and reviewing all the forms and logs used during the event.

#### 13.2.a Post-event debriefing

At the end of each recruitment event, it is useful to hold a post-event debriefing with project staff to discuss how well the recruitment event went and to identify any problems that may have occurred. This debriefing can take place in a meeting with all project staff or in one-on-one conversations with individual staff members. Some topics for discussion may include:

- In general, how well did the recruitment event go?
- Were there any venue-related issues that affected project operations?
- Were there any barriers to recruitment or participation? What strategies were successful for overcoming these barriers?
- Were there any unusual occurrences during the event (e.g., a participant ended the survey early or a participant initially consented to an HIV test but changed his mind)?
- Were there any problems with the portable computers?
- Were there any errors with the survey data?
- *For project sites conducting rapid testing*, were there any young men newly diagnosed with HIV? Were their results returned? Were they actively linked to care?
- Were there any problems with HIV test specimen collection or test kits?
- Any issues with previous participants?
- Any safety concerns?

The information collected through these debriefings can help project sites more effectively plan and conduct future recruitment events. The field supervisor should record the findings from the debriefing in the Recruitment Event Information & Outcomes Form (**Appendix S**) and in any other relevant forms, such as the HIV Testing Log or the Participant Tracking Form.

### ***13.2.b Recruitment event notes***

The field supervisor should also record notes summarizing the recruitment event in the Recruitment Event Information & Outcomes Form (**Appendix S**). The main purpose of these notes is to describe the areas in the venue where project activities were conducted, to document any barriers to operations at the venue, to identify changes in venue attendance or in the demographic characteristics of venue attendees, to collect information on new venues and day-time periods for updating the monthly sampling frame, and if applicable, to explain why the event was moved to an alternate venue. Much of the information collected in the recruitment event notes will be specific to the venue where the event was conducted. Project sites can therefore use this information to better manage operations the next time they conduct a recruitment event at that venue or to assess the utility of continuing to include the venue on their sampling frames. Sites should consider collecting the following information:

- Description of the counting, recruitment, interviewing, and testing areas at the venue.
- Barriers to project operations at the venue and strategies for overcoming these barriers.
- Significant changes in the level of attendance at the venue or in the demographic characteristics of venue attendees since the preliminary research report was prepared or since the venue was last visited.
- New venues or day-time periods that were suggested during the recruitment event.
- *If applicable*, reason(s) for removing the venue from the sampling frame.
- *If applicable*, reason(s) for modifying the day-time periods for the venue.
- *If applicable*, reason(s) for moving the recruitment event to an alternate venue.
- *If applicable*, reason(s) for not obtaining the pre-event count.

### ***13.2.c Forms and logs***

At the end of the recruitment event, the field supervisor should collect all forms and logs used by the project staff, review them for accuracy, and make any necessary corrections. Tasks to be performed on the principal forms and logs are described below.

#### ***Intercept Forms***

The field supervisor should collect the completed Intercept Forms (**Appendices V and W**) from each recruiter and review the forms for completeness and the proper coding of participant responses. As described in **Appendix W** the field supervisor should also calculate the column sub-totals for each variable and record them at the bottom of each form. If the project site is using post-event appointments (PEAs), the field supervisor should cross-check the Intercept Forms with the Appointment Log to ensure that all PEAs have been scheduled and, if scheduled at a field site, are not in conflict with RDS or FBS appointments

### *Participant Tracking Forms*

The field supervisor should gather any outstanding Participant Tracking Forms (**Appendix R**) from the interviewers or HIV test counselors. The field supervisor should then check all the forms to verify that a response has been recorded for each question. If notes or data edits are recorded on the form, the field supervisor should review them with the interviewer or HIV test counselor to ensure that the issue or problem is clearly communicated without ambiguity. The field supervisor should also check to see if the same data errors are occurring repeatedly, which may indicate the need for additional staff training.

### *HIV Testing Log*

The field supervisor should collect all hardcopy HIV Test Results Logs from the HIV test counselors and ask if there were any problems with the test specimens or with specimen collection. Any problems should be noted on the log. The field supervisor should review the logs to make sure that a specimen was collected for each entry on the form and conversely, that an entry was made on the log for each specimen collected. For each standard or confirmatory HIV test conducted, the field supervisor should compare the Lab ID labeled on the test specimen to the Lab ID recorded on the HIV Testing Log to confirm that they are the same. For each rapid HIV test conducted, the field supervisor should make sure that there is either a negative test result or a preliminary positive test result documented on the log, and, for each of the preliminary positive rapid tests, that a confirmatory specimen was collected.

The field supervisor should also make sure that a DBS card was completed for each participant who consented to blood storage (and for testing by the local lab if using DBS for confirmatory testing), and that the DBS cards are labelled with the survey ID and documented in the HIV testing log. If sites are using DBS for confirmatory testing, the field supervisor should check that each section of the pre-cut DBS card of the participants who had a rapid positive test is labelled with the Survey ID. Lastly, the field supervisor should check the Appointment Log to verify that appointments have been scheduled for returning HIV test results.

### *Staff evaluation forms*

If any project staff were evaluated during the recruitment event (see **Appendices B – I**), the field supervisor should review the completed forms with those staff members. If any project staff were scheduled for evaluations that did not occur, the field supervisor should note this on the Recruitment Event Information & Outcomes Form (**Appendix S**) so that the evaluations can be rescheduled for the next recruitment event.

## **13.3 Closeout at the Project Office**

Activities for closing out the recruitment event at the project office include handling HIV test specimens, managing data, and entering data in the Data Coordinating Center (DCC) Data Portal.

### ***13.3.a HIV test specimens***

The field supervisor should ensure that all HIV test specimens are transported and stored according to the specifications in the package insert for the test and in a manner that preserves the integrity of the specimens. As soon as possible after the recruitment event, the field supervisor should complete the Specimen Transport/Shipping Log (**Appendix BB**) and transport or ship the HIV test specimens to the local laboratory using the procedures agreed upon with the laboratory. Dried blood spot (DBS) cards must be allowed to dry before they are packaged for shipping, but the drying time ***should not*** exceed 24 hours. Within 24 hours, the DBS cards must be packaged with desiccants and a humidity indicator as described in **Section 14.5b** of this manual.

### ***13.3.b Data management***

As soon after the recruitment event as possible, the data manager or other designated staff member should upload the NHBS-YMSM core interview files and the local survey files from the portable computers into their respective QDS™ Warehouses. After uploading the data, the portable computers should be charged and locked up in the project office. If the portable computers are not returned to the project office after the recruitment event, they should be charged and stored in compliance with the project site's data security and confidentiality guidelines (see **Chapter 11** of this manual). When forms and logs that contain participant data are not being used by project staff, they must be stored in a locked filing cabinet in a secure area of the project office.

### ***13.3.c Data Coordinating Center Data Portal***

The data manager or other designated staff member should enter the recruitment event data into the DCC Data Portal on a daily basis or as soon after the recruitment event as possible. Any data edits recorded on the Participant Tracking Forms should be entered into the online Data Error Log on the portal; and data from the hardcopy HIV Testing Log and the self-reported HIV-positive (SRP) data from the Participant Tracking Forms should be entered into the online HIV Test Results Log on the portal. In addition, the column sub-totals from each Intercept Form and the recruitment event outcomes information from the Recruitment Event Information & Outcomes Form should be entered into the Outcomes Section of the VDTs Program on the portal.

# Chapter 14 HIV testing

## 14.1 Overview

This chapter provides guidelines for conducting HIV testing as part of NHBS-YMSM. Before data collection can begin, project sites must document procedures for testing, returning results, and active linkage to care in the *Operations Checklist (Appendix A)*. Any locally-developed testing forms or logs (e.g., lab slips, risk assessment forms) should be included in the checklist as well. Project sites are also responsible for following local laws, guidelines, or requirements for testing and counseling.

## 14.2 Testing

In all project sites, individuals who agree to participate in NHBS-YMSM will be offered HIV testing. Testing is voluntary—those who choose to participate in the survey are not required to provide a specimen for testing. Project sites are required to offer HIV testing as part of NHBS-YMSM. If HIV test kits or specimen collection devices are unavailable, data collection **must** be suspended until these items become available.

All rapid and laboratory-based testing specimens must be collected, tested, and stored anonymously. Project sites unable to perform anonymous HIV testing will not be allowed to participate in NHBS-YMSM. Study staff may not report the participant's name or other personally identifying information to the state or local health department HIV surveillance unit. The HIV test result may only be used for NHBS-YMSM analysis purposes. Prior to the start of data collection, project sites must develop procedures for active linkage to care for participants who are newly diagnosed with HIV. Lastly, because testing in NHBS-YMSM is anonymous, NHBS-YMSM test results cannot be used for HIV case reporting or any other surveillance system.

Information about NHBS-YMSM methods, including the questionnaire and testing, is provided to individuals during the assent/consent process. Assent/consent for participation in each activity must be obtained separately and recorded in the portable computer. If consent is not recorded in the portable computer for an HIV test that was conducted, that test result will not be included in the NHBS-YMSM data set.



Project staff are not able to change the HIV test consent variable in the Data Error Log on the Data Coordinating Center (DCC) data portal. Consent for HIV can only be recorded in the portable computer.

Project sites should work closely with the staff of their designated laboratory to identify any special requirements for specimen type, storage, processing, transport, and shipping to ensure good specimen

quality and the timely return of test results. Project sites should also contact their laboratory to find out what types *and* trade names of tests will be performed on each type of specimen and *document* this information in the Operations Checklist. Sites will need this information for entering HIV test results into the HIV Test Results Log on the DCC data portal.

### ***14.2.a Purpose and type of HIV testing***

The purpose of HIV testing is to determine the prevalence of HIV infection among NHBS-YMSM participants and to describe behavioral risk factors associated with infection. Even participants who report that they have previously been diagnosed with HIV should be offered an HIV test. HIV counseling should only be conducted after the core and local questionnaires are completed so as not to bias participant responses. For RDS it is also advisable to conduct recruiter training prior to disclosing HIV test results. Project sites can choose from a number of HIV testing options, but they must select their testing method, including the test(s) and specimen type(s), before data collection begins. Since data from NHBS suggests that blood-based HIV tests have greater sensitivity than oral tests, blood-based tests should be used for NHBS-YMSM whenever possible. The lower sensitivity of oral tests could result in missed infections. Moreover, assays that can detect early HIV infection (e.g., 4<sup>th</sup> generation immunoassays, NAAT) only use blood specimens.

Participants who initially decline HIV testing will have another opportunity to consent to testing at the end of the core questionnaire. Before the core questionnaire closes, participants who did not initially consent to HIV testing will be asked, “Did you want the HIV test that is part of today’s survey?” This will give the participant a second chance to consent to HIV testing if he changed his mind during the survey. It will also allow the interviewer to make a correction if he erroneously recorded that the participant declined testing. The HIV testing consent at the end of the core questionnaire is the last opportunity for the participant to provide consent for an HIV test. If the participant did not give consent during the core questionnaire but decides that he wants an HIV test after the core questionnaire has been completed, project sites may still perform the test, but it will not be considered an NHBS-YMSM test. Therefore, the HIV test result will not be included in the NHBS-YMSM data set and the participant should not receive an incentive for the test.

#### ***Rapid HIV testing***

Project sites are encouraged to conduct rapid testing if possible. Experience with NHBS cycles has shown that many participants do not return for their laboratory-based test results since these are usually not available for one to two weeks. Although a reactive rapid test result is considered preliminary (i.e., a specimen must be collected for confirmatory testing), participants with preliminary positive test results can be immediately actively linked to care (see **Section 14.7b**). In addition, receipt of a preliminary positive test result may increase a person’s likelihood of seeking additional testing or care, even if he does not return for his final NHBS-YMSM test result. Project sites offering rapid HIV

testing must be prepared to collect confirmatory test specimens from participants with preliminary positive test results.

To perform rapid testing, a project site must first obtain a Clinical Laboratory Improvement Amendments (CLIA) certificate of waiver:

<http://www.cms.gov/CLIA/downloads/HowObtainCertificateofWaiver.pdf>.

Alternatively, project sites may operate under an existing waiver already held by their organization. There are five rapid tests that are currently CLIA-waived for use in field settings by non-laboratory staff : Clearview COMPLETE, Clearview STAT-PAK, INSTI, OraQuick, and Uni-Gold. The package insert for each of the five rapid tests contains specific instructions for conducting that test as well as running test controls. The insert lists the materials included in the test kit, required materials that are not included in the kit, specimen collection procedures, and testing requirements. Prior to the start of HIV testing, project staff who are administering or overseeing tests must carefully read and understand the package insert, and a copy of the insert should always be available at each field site for reference. Rapid testing must be conducted in an appropriate environment with respect to temperature and lighting. These requirements can be found in the package insert and should be adhered to at all times. Rapid testing should also be conducted in an area with adequate work space.



All rapid test kits should be stored in accordance with the package insert provided with the kits, and project staff should always check the date on the kits before using them to ensure that they have not expired.

Before specimen collection begins, the participant's survey ID number should be recorded on the rapid test device. Project staff for sites conducting rapid testing on oral fluid specimens should explain to participants how to appropriately swab their mouths and they should monitor the participants to assure that the specimens are collected appropriately. Although food or drink consumption has **not** been found to interfere with the oral test, food particles (e.g., gum, candy) can prevent the test collection device from being placed flat against the gums for appropriate oral fluid collection. Therefore, if a participant has recently eaten something or is chewing gum, project staff should have him rinse his mouth to remove the food particles or have him throw out his gum before oral specimen collection. For project sites conducting rapid testing on whole blood specimens collected by fingerstick, some helpful hints for fingerstick blood collection can be found in section 14.4b.

During rapid test development, the test face of the device should not be visible to the participant. This is best achieved by conducting testing in an area that is separate from the interview space. If testing is conducted in the same space as the interview, the test face should be turned away from the participant or it should be covered; otherwise, having the test face visible to the participant may cause anxiety or misinterpretation of the test result. Shielding the test face from the participants is particularly important for project sites that collect the specimen before beginning the survey or between the core survey and local questions, and run the test in the same room as the interview. In these cases, having

the test face visible to the participant could also disrupt the interview. Because counseling cannot be conducted until the core and local questionnaires are completed, test results cannot be disclosed to participants until the end of this section of the survey. For RDS it is also advisable to conduct recruiter training prior to disclosing HIV test results.



Rapid and confirmatory counseling and testing should be conducted in a private area to maintain the participant's confidentiality and to avoid identifying those who are receiving confirmatory testing for a preliminary positive test result. For example, operations could be set up so that all participants receive incentives and confirmatory testing in the same private area.

### *Quality assurance for rapid HIV testing*

Project staff should be knowledgeable of the instructions in the package insert for the specific rapid test being used. Rapid tests are CLIA-waived, which allows non-laboratory project staff to conduct HIV testing by following the instructions in the package insert. However, any deviation from the package insert instructions can negatively affect the accuracy of test results. Therefore, project sites should conduct quality assurance monitoring, including the running of controls, to identify any potential issues with rapid HIV testing. Project sites should maintain logs to monitor the following activities:

- 1) Onsite testing records for individual test results, follow-up testing, and follow-up appointments. The *NHBS-YMSM HIV Testing Log* (**Appendix GG**) can be used for this purpose.
- 2) Scheduled supervisor observed counseling and testing session ensuring the HIV test counselor correctly follows the entire testing process according to protocol instructions. The *HIV Counseling and Testing Evaluation Form* (**Appendix H**) can be used to document staff performance.
- 3) External test control results recorded with each new test kit lot or other additional intervals determined by site protocols and the test package insert. It is important to note that external rapid test controls should be run in the environment in which testing will occur to ensure the tests are working and conditions are appropriate (e.g., overhead lighting). For example, if a site is doing all the testing in a mobile unit, the external controls should be run in the mobile unit. A model *Rapid Testing Quality Control Log* can be found in **Appendix CC**.
- 4) Temperatures at which the tests and quality controls are stored and run. A model *Rapid Testing Temperature Log* can be found in **Appendix DD**.

Rapid test results must be read within the timeframe indicated in the package insert for the specific test being used. In addition to monitoring the activities listed above, project sites should develop a system for recording the time the test was started and the time the test result was read. For example, these times could be recorded on the *HIV Test Results Log* (**Appendix GG**) or the *Participant Tracking Form* (**Appendix R**).

A good reference guide for Rapid Testing Quality Assurance can be found at [http://www.cdc.gov/hiv/pdf/testing\\_QA\\_Guidelines.pdf](http://www.cdc.gov/hiv/pdf/testing_QA_Guidelines.pdf)

### ***14.2.b DBS and future testing***

Sites are required to collect dried blood spot (DBS) specimens from all individuals who consent to blood storage. These specimens will be sent to CDC for additional tests. Additional testing on HIV positive specimens will include testing to distinguish between recent and older HIV infections, identifying transmitted HIV drug resistance, and quantifying HIV viral load. This additional testing on HIV positive specimens can be used to estimate HIV incidence among young MSM and characterize patterns of transmission, monitor the prevalence and transmission of HIV containing drug resistance mutations, and assess age-specific community HIV viral load. HIV-negative specimens will be tested with a more sensitive RNA assay to ensure that acute HIV infections are not missed.



Consent for blood storage must be documented to permit any laboratory (including CDC) to conduct additional testing. If consent is not documented, the specimen should be discarded. As with the HIV test consent, participants will be given a second chance to consent to blood storage at the end of the core questionnaire.

If participants ask questions about the tests that will be performed on their stored specimens, project sites can use the following talking points:

- *The tests that may be performed on your stored blood sample are for research purposes only and the results will not be returned to you.*
- *An example of a test that may be performed is a test for detecting recent HIV infection.*
- *No information that identifies you will be linked to your blood sample; the laboratory staff performing the tests will not know that the sample is from you.*

## ***14.3 Staffing and Training***

Project sites are responsible for hiring, training, and certifying project staff in testing and counseling for HIV testing and DBS. When providing training and certification in testing and counseling, project sites must follow local policies and guidelines; CDC will not conduct a national training on testing and counseling procedures.

Project sites that choose to collect blood by venipuncture are required to have a phlebotomist on staff since any person who collects blood via venipuncture must be certified in phlebotomy. Project sites should check their local policies to determine how many hours of phlebotomy training are required for certification. Most states do not have specific phlebotomy regulations. Instead, regulations are

developed by the organization overseeing the blood collection (e.g., health department, clinic, or hospital). Project sites are responsible for ensuring that their staff members' phlebotomy training is current.

Unless state and local regulations require phlebotomy training in order to perform a fingerstick, project staff do not have to be certified phlebotomists to collect blood via a fingerstick. Many health departments, hospitals, and community-based organizations that perform HIV testing provide training on how to properly perform fingersticks and can train project staff. As another option, the manufacturers of rapid tests often offer fingerstick training.

Project sites collecting blood specimens by venipuncture or fingerstick must adhere to the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard for universal precautions, personal protective equipment, and syringe disposal. The OSHA standards are available at: [http://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=STANDARDS&p\\_id=10051](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051). Project sites are responsible for training their staff in these standards, and may be able to get training support from health departments, hospitals, and community-based organizations that perform HIV testing.



In addition to training local staff in universal precautions, biohazard waste must be disposed of properly. Biohazard waste should not be discarded in regular trash. Items used for blood collection such as gloves, absorbent paper, and cotton balls, for example, should be disposed of in biohazard bags; sharp items such as needles or lancets, should be disposed of in sharps containers. Sites should work with local entities such as health department clinics, hospitals, or CBOs to ensure proper disposal of biohazard bags and sharps containers.

The project coordinator should provide overall management of NHBS-YMSM testing activities and serve as the primary point of contact for CDC. The project coordinator should work with the field supervisor to determine the most feasible means of testing. Project sites should consult with their local laboratory staff to create a plan for specimen processing, storage, transport, and shipping that ensures good specimen quality. Ideally, project sites should identify a point person in the laboratory to oversee the processing, testing, and storage of NHBS-YMSM specimens.

## **14.4 Specimen Collection**

Specimens for HIV testing can be collected with venipuncture, dried blood spots (DBS), or the oral mucosal transudate (OMT) device. In addition, sites are required to collect dried blood spot (DBS) specimens from all individuals who consent to blood storage.



All testing specimens must be collected from participants during the same recruitment event or appointment as their interviews; specimens cannot be collected at a later date.

### ***14.4.a Venipuncture***

Using standard venipuncture procedures, blood specimens should be collected in blood collection tubes appropriate for the type of testing that will be performed. Project sites should check with their local laboratory to determine which collection tubes are indicated for the types of tests they will offer. For example, serum “red top” tubes or EDTA “purple top” tubes are commonly used for HIV testing. To ensure an adequate specimen volume for testing, blood collection tubes should be filled completely.



If the phlebotomist is not available or a blood draw cannot be performed on the participant, an alternate form of specimen collection must be used, such as DBS or OMT. The alternate testing plan should be documented in the Operations Checklist.

The date and survey ID number should be recorded on the collection tubes before blood collection begins. If the tubes contain any type of additive, like EDTA, they should be inverted several times immediately after collection to mix the additive with the blood.

### ***14.4.b Dried blood spots***

A list of supplies needed to collect DBS can be found in **Appendix EE**. Project sites should begin the DBS collection process by recording the date and the participant’s survey ID number on the DBS card.

Prior to specimen collection, project sites using DBS for laboratory-based HIV testing should partially cut a section of the card containing no more than 2 blood collection circles. Sites should only cut the top part of the card with the blood collection circles. They should not cut the bottom part of the card with the area for recording the date and Survey ID; this section should remain intact to hold the card together during DBS collection. After the DBS have been collected and the card dried, the bottom part of the card should then be cut to separate the card in two. The cards can be cut with a clean pair of office scissors. To clean the scissors, use dish soap and water; DO NOT use alcohol. Make sure the scissors are completely dry before pre-cutting the cards. The date and survey ID should be recorded in two places on the card: 1) the part of the card for the CDC laboratory (3 circles), and 2) the part of the card for the local laboratory (two circles). If the local laboratory uses a separate laboratory ID, that ID may also be included on the part of the card that will be sent to the local laboratory. The laboratory ID should not be written on the part of the card that will be sent to the CDC laboratory.

If the DBS cards that sites order only have 4 circles, sites should use two separate cards – one card for CDC with three circles filled and one for the local lab with two circles filled.

***To enable the CDC laboratory to distinguish between the same survey ID numbers from different project sites, a 3-letter code indicating the project site must be added to the beginning of the survey ID. The 3-letter codes have been assigned as follows:***

<b>Chicago</b>	YCH
<b>New York City</b>	YNY
<b>Philadelphia</b>	YPH

*For example, survey ID “2475” from Chicago would be labeled as “YCH2475” on the DBS card.*

### *DBS from fingerstick*

CDC recommends collecting DBS with Whatman cards containing 5 circles.

To obtain a sufficient quantity of blood, the lancets used for fingersticks should be blades rather than needles (see **Appendix EE** for recommended lancets). Some helpful hints for fingerstick blood collection are listed below:

- The best location for the fingerstick is either the 3<sup>rd</sup> (middle) or 4<sup>th</sup> (ring) finger of the non-dominant hand. These fingers tend to be used less often and are thus less likely to have calluses or tough skin.
- Warm the participant’s hands and fingers to increase blood flow if possible (an instant hand warmer can be used). To further increase blood circulation and flow, it sometimes helps to massage the whole hand and finger to be stuck, not just the fingertip.
- While the tester is organizing the specimen collection materials, they can also have the participant open and close (“pump”) his hand or squeeze and release a stress ball several times to increase blood circulation. Having the participant hold his hand below the level of his heart before performing the stick increases blood circulation as well.
- Prior to the stick, clean the fingertip with a 70% isopropanol swab and allow it to air dry completely for a few seconds.
- Using a sterile, disposable lancet, make the puncture just off the center of the finger pad at right angles to the ridges of the fingerprint so that the blood does not run down the ridges. Avoid the tip and center of the finger, as well as the edge of the nail bed and the side of the finger where there is less soft tissue. The participant’s hand should be laid flat against a hard surface to ensure a deeper stick.
- Wipe away the first drop of blood, which tends to contain excess tissue fluid, with a sterile gauze or cotton ball. Allow a new drop of blood to form before using the specimen collection device.
- Hold the finger downward. If necessary, the finger can be massaged at the base or pressure can be applied next to the puncture point to increase blood flow. When massaging the base of the finger, provide intermittent pressure rather than constant pressure; apply pressure in

a “squeeze, release, squeeze, release” pattern. Massaging the whole hand is also effective to increase blood flow

- A reference guide for fingerstick blood collection can be found in **Appendix X**.

After making the fingerstick, place the blood collection card close to the puncture site but **DO NOT** touch it to the puncture site at any time during the collection process. Approach the first circle and allow a large drop of blood to form on the tip of the finger. Without touching the tip of the finger to the card, allow the large drop of blood to barely touch the card inside the first circle; the filter paper will wick the drop of blood away from the finger. Allow the blood to completely fill the circle before moving on to the next circle. If the circle is not completely filled with one drop, allow a second large drop to fall onto the same circle before moving to the next circle. Moving from one circle to the next, fill the remaining circles in the same way. When finished, apply cotton to the puncture site until bleeding stops.



It is very important that a circle be filled completely before moving onto the next circle. If the participant does not bleed for very long and there is only enough blood to fill one circle, then only one circle should be completely filled instead of partially filling multiple circles.

After the DBS have been collected, avoid touching the part of the blood collection card with the spots. Cards should be dried at least 4 hours in a suspended horizontal position. Nevertheless, since the DBS must be dry before packaging, overnight drying is sometimes required. The drying rack manufactured by Whatman can be used to hold the cards while drying, or the cards can be clipped to test tube racks for drying. If necessary, the Whatman drying racks or test tube racks can be placed in a cardboard box to transport the cards from the field site to the project office for drying and eventual packaging. The cards should remain in the racks until they are dry and ready to be packaged.



Dried blood will appear dark red as opposed to the bright red seen when first collected. Drying times will vary depending on the humidity in the project area. Nevertheless, the drying time should not exceed a 24-hour period, and the spots must not be left unpackaged for multiple days.

### *DBS from blood tubes*

Project sites collecting venipuncture specimens for laboratory-based HIV testing can prepare DBS cards from the blood in a collection tube that contains the anticoagulant EDTA, which prevents blood from clotting. The DBS can be made by either the project staff or the laboratory staff before the blood specimen is spun down and separated into plasma. Prior to making the DBS, the blood collection tube should be inverted several times to ensure adequate mixing of the EDTA. A disposable, non-sterile transfer pipette should then be used to remove the blood from the tube. As with making DBS from a fingerstick, place the pipette tip close to the blood collection card but **DO NOT** touch the tip to the card at any time during the collection process. Gently squeeze the pipette bulb to allow a drop of blood to

fall onto the surface of the card inside the circle. Allow the blood to completely fill the circle before moving on to the next circle. If the circle is not completely filled with one drop, allow a second large drop to fall onto the same circle. After all the circles on the card have been filled, the card should be dried as described above in the “DBS from fingerstick” section.

#### ***14.4.c Oral***

Oral specimens for laboratory-based testing are collected via the OraSure Oral Mucosal Transudate (OMT) device. The OMT devices should be stored and used in accordance with the manufacturer’s package insert. Before specimen collection begins, the date and the participant’s survey ID number should be recorded on the OMT device. Project staff should explain to participants how to appropriately swab their mouths and they should monitor the participants to ensure that the specimens are collected appropriately. The participant should not speak during specimen collection. As with the oral rapid test, food or drink consumption has **not** been found to interfere with the OMT test, but food particles (e.g., gum, candy) can prevent the test collection device from being placed flat against the gums for appropriate oral fluid collection. Therefore, if a participant has recently eaten something or is chewing gum, project staff should have him rinse his mouth to remove the food particles or have him throw out his gum before oral specimen collection.

### ***14.5 Specimen Storage and Processing***

#### ***14.5.a Venipuncture***

Blood specimens should be transported to the laboratory and processed within 24 to 48 hours of specimen collection. The time of year the specimens are collected affects the temperature and humidity in which the specimens are stored and transported. Usually, blood collection tubes should remain at ambient temperature (< 86° F) prior to processing. All precautions should be taken to ensure the quality of the specimens collected. No blood specimen, regardless of type, should ever be subject to extreme hot or cold temperatures during temporary storage or transport to the local laboratory. In addition, all blood specimens should be transported or shipped in containers appropriately labeled according to OSHA guidelines to protect staff and public safety.

#### ***14.5.b Dried blood spots***

The DBS cards should be dry or close to dry before packaging. Once they do become dry (this should not exceed 24 hours), the flaps on the recommended Whatman cards can be closed. For project sites using DBS for local laboratory-based HIV testing, the section of the card that was not cut prior to specimen collection should be cut to completely divide the card into the specimen that will be sent to the local laboratory and to the CDC laboratory. The cards from HIV-positive (i.e., preliminary positive from rapid tests, positive from lab-based testing, and self-reported positive) participants should be

packaged separately from the cards of HIV-negative and status unknown participants, and the zip-lock bags should be labeled accordingly (e.g., “HIV pos” or “HIV neg/unk”). The cards should then be placed in low-gas permeable zip-lock bags. The zip-lock bags can be stuffed with as many cards as possible as long as the bag can be sealed tightly and there is no excessive bulging of the bag.



Every effort should be made to package the DBS within 24 hours of collection. If the DBS cannot be packaged within 24 hours of collection, project sites should record that on the zip-lock bag, indicating the number of hours between collection and packaging. Note that the time of packaging can never exceed 48 hours.

Each zip-lock bag should also contain a handful of (a minimum of 10) desiccant packs to remove any residual moisture from the cards and one humidity indicator card to monitor the humidity in the bag. If the humidity level is high in a project area, more desiccant packs should be added to the zip-lock bag. Press as much air out of the bag as possible and seal it shut. Humidity indicator cards and desiccant packs have a color indicator which changes from blue to pink as humidity within the bag becomes unacceptably high. It is important to monitor the humidity indicator cards in the bags on a **daily** basis and to replace the desiccant packs if the indicator cards change from blue to pink to ensure the humidity remains low. The used desiccant packs and indicator card should be discarded, and a new indicator card should be added to the bag along with the new desiccants.



The desiccant packs and humidity indicator cards should be stored in air-tight containers. It is also helpful to add a couple of desiccant packs to the indicator card storage container to help keep it dry.

Once properly packaged, the DBS cards can remain at ambient temperature in a climate controlled area until they are sent to the laboratory for testing. While awaiting shipment, they should be stored away from direct sunlight and they must be monitored closely for excess humidity.

### ***14.5.c Oral***

Specimens collected via the OraSure OMT device should be temporarily stored and transported according to the manufacturer’s package insert. The insert lists the temperature requirements for storage and the kit lists the expiration date for the OMT devices.

## 14.6 Specimen Transport and Shipping

### 14.6.a Local transport of venipuncture specimens

As mentioned previously, blood specimen collection and transport should be timed so that specimens arrive at the laboratory and are processed within 24 to 48 hours of specimen collection. Project sites should develop transport procedures in conjunction with their local laboratory. When developing these procedures, they should consider transport time to the laboratory, the days and hours of laboratory operation, specimen intake procedures, and the days and hours of field site operation. The *Local Specimen Transport/Shipping Log (Appendix BB)* should be included with the batches of specimens sent to the laboratory.

### 14.6.b Shipping DBS

Unlike liquid or frozen blood samples, DBS do not require special labeling or mailing. The low-gas permeable zip-lock bags containing the DBS can be shipped at ambient temperature by overnight UPS mail or FedEx, whichever is most practical for project sites. It is important to check the humidity indicator cards in the bags immediately before mailing them and to replace the desiccant if necessary. Place the bags containing the DBS inside a high-quality bond, anti-tear envelope, such as Tyvek, and seal it for mailing. The bond envelope provides an extra barrier of protection for the specimens during shipping. The sealed, bond envelope should then be placed in a regular UPS mailing or FedEx envelope.



Biohazard labels should not be placed on the envelope or inner DBS packaging since DBS are not considered infectious once dry.

The Specimen Transport/Shipping Log (**Appendix BB**) should be used as a shipping manifest and be included in the envelope sent to the laboratory.

### *Shipping DBS to CDC*

Project staff are responsible for mailing the DBS cards for ALL participants (not just those testing positive) to the CDC, labeled as outlined in section 14.4b. They should not be transported to the local laboratory or frozen for storage before shipment to CDC. Additional tests on these specimens will include testing to identify recent HIV infections, and may include testing for HIV drug resistance and testing to quantify HIV viral load.

The DBS must be shipped to the CDC on a **weekly** basis and no more than 10 days after the spots are made. The DBS should be packaged as mentioned above and the Specimen Transport/Shipping Log (**Appendix BB**) should be used as a CDC shipping manifest and included in the envelope sent to the CDC. On the day the DBS are shipped to the CDC, an email should be sent to Silvina Masciotra ([svm6@cdc.gov](mailto:svm6@cdc.gov)), Michele Owen ([smo2@cdc.gov](mailto:smo2@cdc.gov)), Wei Luo ([wfl9@cdc.gov](mailto:wfl9@cdc.gov)), Lina Nerlander ([vif7@cdc.gov](mailto:vif7@cdc.gov)) and Lexi Balaji ([dvi7@cdc.gov](mailto:dvi7@cdc.gov)) to notify them of the shipment. Sites should also include the UPS or FedEx tracking number in the notification email. Overnight mailing should be used and the

packages should be timed to arrive at CDC Monday through Thursday. Shipments should be sent to the attention of Wei Luo:

ATTN: Wei Luo  
Centers for Disease Control and Prevention  
1600 Clifton Rd NE MS A-25 Room 3017A  
Atlanta, GA 30329  
Phone: 404-639-0778

Project staff should devise a shipping schedule and record scheduled shipments on a monthly calendar. After arrival at the CDC, the DBS specimens will be stored at the Division of HIV/AIDS (DHAP) laboratory in temperature-controlled freezers until all testing is completed.

## ***14.7 Test Results and Active Linkage to Care***

### ***14.7.a Test results***

Project sites must make final HIV results available to participants, and they should keep track of the provision of results. After the NHBS-YMSM survey is completed, project sites offering rapid testing should provide counseling and return negative and preliminary positive test results to participants. Each box of rapid HIV tests comes with a set of “subject information” pamphlets that should be given to the participants when they receive their rapid test results. For those participants with preliminary positive test results, project sites should also collect specimens for laboratory-based confirmatory testing. Participants must receive laboratory-based test results in person.

To properly schedule appointments for returning laboratory-based test results, project sites should check with their local laboratory to find out the test turnaround time. Appointments for returning test results should be made with an *Appointment for Results Card* (**Appendix FF**).

Project sites have the option of offering participants a phone call reminder of their appointment to get their laboratory-based test results. The participant’s phone number is collected on an Appointment Reminder Call Form so that project staff can call him to remind him of the day and time of his appointment. When using appointment reminders, project sites can *never* link the participant’s survey ID or laboratory ID to his phone number, and they cannot require that participants use this service. Appointment Reminder Call Forms must be stored in a locked file or file box to keep the participants’ confidential information secure. Furthermore, appointment reminder procedures must be approved by the project site’s CDC project officer before this service can be provided.

Because only about 30% of participants obtained their laboratory-based test results during previous NHBS cycles, project sites are strongly encouraged to use rapid tests so that participants will at least get a preliminary positive test result and an active referral to care. Alternatively, project sites could try to increase the number of participants who return for their laboratory-based test results by scheduling appointments for participants to get the results or by using phone calls to remind participants of their test result appointments.

As discussed in Chapter 7 of the *NHBS-YMSM Protocol*, test counselors should target prevention messages to specific risks identified during the survey, as long as this is in compliance with local policy. Project sites that have separate interviewers and testing staff should develop procedures for communicating risk information between staff. For example, test counselors could administer a separate risk assessment or the interviewer could confidentially pass risk information to the test counselor. The collection of any risk information for test counseling must comply with the Assurance of Confidentiality for HIV/AIDS Surveillance data (see **Appendix V** of the *NHBS-YMSM Protocol*).



Project staff should only return test results in a private area to protect participant confidentiality and should never discuss test results publicly.

Participants have the right to refuse receipt of their rapid test results. Nonetheless, it is still very important to collect a confirmatory specimen from participants with preliminary positive test results since only the final test result will be included in the NHBS-YMSM dataset. If a participant states that he does not want to receive his rapid test result before he provides a specimen for rapid testing, the project site should not conduct a rapid test. Instead, they should collect a specimen for laboratory-based testing. In situations where the participant declines receipt of his rapid test result after a specimen for rapid testing has been collected, project sites should request that the participant provide a specimen for laboratory-based testing so that he can receive his testing incentive (project sites should consult their local IRBs to find out if they can withhold testing incentives from participants who refuse to provide a specimen for confirmatory testing).

### ***14.7.b Active linkage to care and services***

All participants who test positive for HIV should be actively linked to appropriate medical care and HIV case management services at the time they receive their test results. Active linkage to care in NHBS-YMSM will involve assistance by project staff members (e.g., scheduling appointments, providing transportation) to link HIV-positive participants to medical care and other supportive services. Project areas performing rapid testing should link participants with preliminary positive results to care during post-test counseling and after a confirmatory specimen has been collected. Study staff may not report the participant's name or other personally identifying information to the state or local health department HIV surveillance unit. The HIV test result may only be used for NHBS-YMSM analysis purposes.

At each NHBS-YMSM site, local protocols must be developed for active referrals and linkage to HIV care. These protocols must consider that HIV-positive youth may need additional assistance and support above and beyond protocols for referrals and linkage to HIV care developed for adult populations. At a minimum, linkage protocols must specify active processes for referral and linkage to care and identify appropriate local support services for HIV positive young MSM. Sites are strongly encouraged to consider the following in their protocols:

- Establish coordination with linkage to care programs at the health department or CBO's who have experience working with youth. Active linkage to care procedures may vary between sites and could range from having a program staff member at the study site (so immediate linkage to care can be done) to scheduling an appointment for a participant and arranging transportation.
- Assure that linkage to care for HIV-positive participants includes a referral to a case manager with experience working with HIV-infected youth in order to help participants address issues such as insurance implications for medical care and access to HIV medications.
- Identify specific youth-friendly HIV care providers in their area who are willing to provide services for NHBS-YMSM participants who test positive. Consider having dedicated provider(s) available to quickly schedule any young MSM for an initial HIV care visit after receiving a positive HIV test result, preferably within 72 hours of diagnosis.
- Identify specific supportive services for HIV-positive young MSM in the local area, including HIV-positive youth support groups and youth-friendly mental health providers.
- Because many NHBS-YMSM participants will be minors who may reside at home with their parent(s)/guardian(s), sites should ensure that services have expertise in helping youth navigate disclosure of HIV status to these individuals.
- Sites should partner with CDC-funded MSM testing initiatives in their local area to leverage additional resources these programs may have with regard to supporting HIV-positive youth in their area.

Sites should work closely with CDC staff in developing these enhanced HIV linkage to care procedures.

Counselors who will be delivering positive HIV test results to young MSM should be familiar with the unique challenges faced by young HIV-positive MSM and should be able to provide support to these youth when giving the result and while actively linking them to care. This should offer participants the number of suicide prevention or other crisis counseling hotline in case of distress about preliminary positive or confirmed positive HIV test results.

It is important that the services to which the youth are referred are also familiar with the unique challenges faced by young HIV-positive MSM and are able to provide support accordingly. This could be

operationalized through flexible contact policies, such as having a dedicated phone line that youth can call for support during the days following their initial diagnosis, scheduling specific times to check in with young HIV-positive MSM in the days and weeks following the initial test result, and provide additional support to youth who do not present for their first clinical visit. Services should acknowledge that youth may be unable to talk to friends or family members about their experience and provide support accordingly.

NHBS-YMSM counselors should work with the identified local HIV care provider(s) to assess whether or not the linkage to care has occurred (i.e., attendance at the first clinical visit).

All referrals to care, support services, case management, or partner notification services must not be associated with any NHBS-YMSM code numbers, such as survey IDs or laboratory IDs, which could link participants to their NHBS-YMSM data.

## **14.8 Data Management**

### **14.8.a HIV testing**

While in the field, project sites should record HIV test results on a hard copy of the *HIV Testing Log* (**Appendix GG**). The hard copy of the *HIV Testing Log*, as well as any other HIV testing forms or logs, must be secure and in the possession of project staff at all times when in use in the field; otherwise, the forms and logs should be kept locked in a file or file box.

Data from the hard copy of the *HIV Testing Log* should be entered into the online HIV Test Results Log on the DCC data portal on a **daily basis**. It is important for project sites to enter these data daily so that the process monitoring reports generated by the DCC are up-to-date and reflect each project site's latest data. Project sites should refer to the *NHBS-YMSM Data Management Training Manual* for specific instructions on data entry, a listing of required variables, and a data dictionary. Any data collected solely for local use do not have to be entered into the DCC data portal. Accordingly, project sites should consider developing their own electronic systems for storing these data.

At a minimum, all HIV positive test results data should be validated against the laboratory reports before making the final data submission to the DCC. This can be accomplished by downloading the HIV Test Results Log on the DCC data portal to an Excel spreadsheet, sorting by "Final Result" to group the different results together, and then checking all the positive results against the laboratory reports. Checking against the laboratory reports will not only allow project staff to ensure that the result was entered correctly but also if any participant records were not entered at all.

## Chapter 15

# Process Monitoring and Ongoing Data Gathering

### 15.1 Overview

Process monitoring and ongoing data gathering enable project sites to maintain the highest standards for data collection and will help them meet the overall project objectives. The information project sites obtain through these assessment methods will complement the information they gathered during the preliminary research conducted at the start of the project.

### 15.2 Process Goals

The NHBS-YMSM process goals help project sites monitor and evaluate recruitment and enrollment. CDC has established the following goals for the project:

- 85% of those who are screened for eligibility meet the eligibility criteria.
- 90% of those who complete a questionnaire consent to an HIV test.
- A minimum of 300 individuals per sampling method who meet the NHBS-YMSM eligibility criteria complete an interview.
- 90% of those who complete an interview agree to recruit other participants (RDS only).
- 80% of the young men approached accept the intercept (VBS only);
- 80% of those who accept the intercept agree to be screened for eligibility (VBS only);
- For FBS, sites are also requested to monitor the proportion of those who enter contact information into the landing page who then present themselves at a field location for eligibility screening.

Achieving these process goals is critical to the success of NHBS-YMSM. Failure to meet the goals would jeopardize the external validity of NHBS-YMSM data and would thereby undermine the generalizability of project findings and recommendations. Project sites should continuously monitor their recruitment and enrollment data. If any of the data fall below their target goals, project sites should conduct ongoing monitoring and data collection to identify the operational problems responsible (see **Section 15.5** for information on ongoing monitoring and data collection).

### 15.3 Process Monitoring Reports

The Data Coordinating Center (DCC) will produce the process monitoring reports for project sites to assess recruitment and enrollment, coupon distribution (RDS only), sample characteristics, HIV testing, seeds (RDS only), previous participants, and interviewer skills. The reports will be posted on the DCC data portal and should be reviewed by project sites weekly. Project sites should then discuss the findings in the reports with their CDC project officer at least every two weeks. If a problem is identified in the reports, the site's CDC project officer may recommend that they adjust their operations or provide additional staff training to address the problem or that they conduct ongoing monitoring and data collection to further evaluate it. If they wish, project sites may also create their own reports to monitor any issues of local interest.

The various process monitoring reports are described below and examples of each are provided in **Appendix Z**.

### ***15.3.a Recruitment Monitoring Report – RDS and non-RDS***

The *Recruitment Monitoring Report* (**Appendix Z**) consists of two tables; one for the RDS sample and one for the non-RDS sample. The report provides information on eligibility, enrollment, and recruitment:

- The number of seeds screened (RDS only)
- The number of participants screened.
- The number and proportion of participants who were eligible.
- The number and proportion of participants who completed the interview.
- The number and proportion of participants who consented to HIV testing.
- The number and proportion of participants who agreed to blood storage.
- The number and proportion of participants who were eligible to recruit others (RDS only)

This report should be reviewed to identify problems such as low or declining enrollment, a low proportion of eligible participants, a low proportion of participants consenting to HIV, and a low proportion of participants eligible to recruit others.

### ***15.3.b Coupon Manager Program Report – RDS only***

The *Coupon Manager Program Report* (**Appendix Z**) consists of three tables:

- Coupon Tracking
- Number of Coupons Distributed to Recruiters
- Number Refused Coupons

Project sites should use this report to monitor recruitment, manage coupon distribution, and evaluate participation barriers. The Coupon Tracking table shows the specific number of coupons distributed to

each participant, as well as the total number of coupons distributed and the total number returned. The number of coupons distributed less those returned indicates how many coupons are circulating in the community. This information can help project sites manage coupon distribution, including differential coupon distribution and the phasing out of coupons at the end of the project cycle. The proportion of distributed coupons that are returned is a critical measure; a low value signals a barrier to recruitment or participation.

The Number of Coupons Distributed table can also help project sites track and manage coupon distribution. It lists the number of coupons given to each recruiter and the date any changes were made to this number.

The Number Refused Coupons table displays the information provided by recruiters regarding whether coupons were refused or not. These questions can help monitor the number of people in the community refusing coupons and why. They can also be used to monitor whether these questions are being asked.

### ***15.3.c Sample Characteristics – Screened Report – RDS and non-RDS***

The *Sample Characteristics – Screened Report (Appendix Z)* shows the characteristics of participants who were screened for eligibility stratified by whether or not they were eligible to take the survey. These are presented in two sets of tables; RDS and non-RDS. The characteristics examined are:

- Age
- Race/ethnicity
- MSA Resident
- Known Previous Participant
- Able to Participate (i.e., able to complete the survey in English)

Project sites should review this report to monitor the proportion of participants screened who were ineligible based on key demographic variables and each eligibility criterion.



Because RDS relies on peer recruitment, schemes to fraudulently enroll in the survey can rapidly spread from one person to another and inundate a local project.

### ***15.3.d Test Results Report – one report for all sampling methods***

The *Test Results Report (Appendix Z)* consists of two tables that contain data for both the RDS and non-RDS samples:

- HIV Rapid Test Result
- HIV Self-reported Test Result

Using this report, project sites can monitor their HIV test results. The HIV Rapid Test Result table shows rapid test results compared to final test results, and the HIV Self-reported Test Result table shows whether or not the participant self-reported being HIV-positive compared to his final test result. A lack of concordance between rapid and final HIV test results in the HIV Rapid Test Result table may indicate improper specimen collection or the over-reading of rapid test results, necessitating additional staff training. The lack of concordance could also be due to the lower sensitivity of some laboratory-based confirmatory tests, especially those used for oral specimens. In such cases, the additional testing of specimens may be required. Important information provided by the HIV Self-reported Test Result table is the proportion of participants with undiagnosed infection (i.e., did not report being HIV-positive, but had a final HIV test result that was positive), and the proportion of possible false-negative HIV test results (i.e., did report being HIV-positive, but had a final HIV test result that was negative or indeterminate).

All pending test results will be coded as “Unknown” in the tables, and project sites that do not conduct rapid HIV tests will have those test results coded as “Not done.”

### ***15.3.e Seed Report – RDS only***

The *Seed Report* (**Appendix Z**) contains one table:

- Seed Characteristics

The Seed Characteristics table indicates the race/ethnicity, age, sexual identity, and eligibility to be a recruiter for each seed. If the *Sample Characteristics – Interviewed Report* (**section 15.3h**) shows underrepresentation of any sub-populations, project sites should review the Seed Characteristics table to determine whether this lack of sample diversity could be due to a lack of seed diversity.

## ***15.4 Possible Previous Participant Report – one table includes all sampling methods***

To help project sites identify participants who may have taken or tried to take the survey more than once, the *Possible Previous Participant Report* (**Appendix Z**) contains a table listing participants who have the same date of birth and race/ethnicity. The table shows all participants with matching data even if the interviewer identified the person as a previous participant during eligibility screening or determined that he was not providing honest answers during the interview (i.e., the interviewer coded his confidence in the validity of the participant’s responses as “3 – Not confident at all”). By including all

participants, regardless of their eligibility and the validity of their responses, project sites can evaluate how well their interviewers are able to identify previous participants.

To further assess whether participants with the same date of birth and race/ethnicity are the same person, project sites should check the participants' physical marks and recruiter IDs in the Coupon Manager Program (CMP) if the participant was recruited by RDS. The participants' educational levels and zip codes listed in the *Possible Previous Participant Report* may help with this assessment. When project sites identify two participants with valid, completed interviews who have the same or similar information, they should discuss their findings with their CDC project officer and decide whether the second record should be treated as that of a previous participant and excluded from the final NHBS-YMSM dataset.

### ***15.4.a Interviewer Report – one report for all sampling methods***

The *Interviewer Report* (**Appendix Z**) consists of the following tables:

- Interviewer Capacity
- Response Validity
- HIV Test Consent
- Coding of "Other" Insurance

Project sites should review the tables in this report to identify possible interviewer deficiencies or areas for improvement. Whenever an interviewer performs below acceptable standards, project sites should provide him with any additional training needed and closely monitor his progress. If the interviewer fails to show improvement, project sites should remove him from his position until he can demonstrate sufficient competence.

The Interview Capacity table shows the number of interviews completed by each interviewer and the amount of time each spent on eligibility screening, the assent/consent process, and the core questionnaire. Project sites should compare each interviewer's screening, assent/consent, and survey times to the overall times to check for any extreme values which may indicate a need for further training or more frequent monitoring. Interviewers who spend more time completing a section of the survey may be having difficulty administering that section, whereas interviewers who spend less time may be administering the section too hastily or incompletely.

The Response Validity table lists the interviewers' responses to the validity question ("How confident are you of the validity of the respondent's answers?"). Project sites should monitor how often each interviewer selects the response options "2 – Some doubts" and "3 – Not confident at all." A high proportion of interviews with questionable validity, especially the option "3 – Not confident at all," may indicate that an interviewer is not adequately screening out potential participants who are intoxicated or high or that people are providing fraudulent answers so that they can enroll in the survey.

For those participants who completed the questionnaire and had a final HIV test result, the HIV Test Consent table shows whether the interviewer documented HIV test consent in the portable computer. Since HIV test data cannot be used for analysis if the appropriate consent is not documented, it is extremely important for interviewers to properly record test consent in the portable computer.

Whenever an interviewer selects “Some other health plan” for the type of health insurance that a participant has, the specific name of that “other” plan will be listed in the Coding of “Other” Insurance table. Project sites should review this table to ensure that interviewers are not selecting “Some other health plan” for a type of insurance that could be coded as one of the existing response options. If project sites find “other” health plans that should have been coded as one of the existing response options, they should make the necessary corrections in the Data Error Log on the DCC data portal. Moreover, they should provide their interviewers with a refresher training on the principal health insurance plans in their locality and give the interviewers instructions on how to properly code these plans as one of the available response options.

## ***15.5 Sample Characteristics – Interviewed Report – 1 report for all methods***

The Sample Characteristics – Interviewed Report (**Appendix Z**) shows the characteristics of participants who completed the interview. There is one set of tables that are presented by RDS and non-RDS samples. The characteristics listed are:

- Behavior, Identity, Attraction
- Age
- Race/ethnicity
- Field Site Enrollment – (RDS and FBS only)
- Recruited by a Stranger – (RDS only)

Project sites should review the tables in this report to monitor the demographic characteristics of participants who successfully completed the interview, as well as to determine whether recruitment is occurring outside of personal networks (i.e., participants are being recruited by strangers). The demographic characteristics of participants should reflect those of local young MSM as described in the project site’s preliminary research reports.

The Behavior, Identity, Attraction table describes the prevalence of oral/anal sex, other sexual contact with a male besides oral/anal sex, identifying as gay/bisexual without reporting any sexual contact, and reporting being attracted to men but not identifying as gay/bisexual or reporting any sexual contact. Young men are eligible to complete the NHBS-YMSM questionnaire if they report having oral or anal sex with a man, report any other sexual contact with a man, report identifying as gay or bisexual, OR report

being attracted to other men. This report will allow the sites to monitor the make-up of the interviewed sample by which eligibility criteria was met.

For RDS, if participants are being recruited by strangers, project sites may need to improve their recruiter training so that participants only recruit people they know personally, or they may need to provide additional interviewer training so that interviewers accurately follow-up when a participant responds that he was recruited by a stranger. Interviewers should be able to help participants differentiate between recruitment by a stranger and recruitment by an acquaintance. A high level of recruitment by strangers may also indicate that a “recruitment scheme,” like selling coupons or receiving kick-backs from recruits, is occurring in the community.

## ***15.6 Other data not sent DCC or presented in the process monitoring reports***

### ***15.6.a FBS Data Tracking***

To help evaluate FBS for future use as a sampling method to reach MSM between 13 and 17 years of age for behavioral surveillance, project sites will use the Facebook data tracking form (**Appendix II**) to collect data associated with the Facebook banner advertisement, landing page, email and phone contact with potential participants, and resulting in-person NHBS-YMSM project activities involving young men sampled from Facebook.

Sites should collect this data monthly and whenever changes are made to the banner ads or the algorithm for who receives the banner ads. These Facebook data tracking forms should be shared with CDC when completed. Please refer back to Chapter 6 for details of how to tally the total number of contacts made.

### ***15.6.b Cost Evaluation***

For each sampling method implemented during NHBS-YMSM, an important component of ascertaining feasibility is cost. Therefore, the costs associated with each sampling technique will be assessed using budget forms generated throughout the study period.

These forms will collect pre-implementation, implementation, and operational/maintenance costs (**Appendix P**). Each month, fill in the form with the costs that have been incurred that month. For some items, you might purchase them infrequently (HIV testing equipment for example) so that section will be empty for most months except for the month(s) where you make the purchase. With regards to staff time, we ask that sites fill in a table for each method and attempt to estimate what portion of staff time is spent on either method. This section should be filled in monthly.

## ***15.7 Ongoing Monitoring and Data Gathering***

Ongoing monitoring and data gathering is the collection and assessment of additional quantitative and qualitative data to improve project operations. Project sites should use ongoing monitoring and data gathering to evaluate and address operational problems that have been identified through process monitoring or reported by field staff. Ongoing monitoring and data gathering may involve examining existing recruitment and enrollment data, observing the target population in the community or around field sites, observing attendance at venues, adding questions about participation barriers or potential venues for recruitment to the local use survey, having informal conversations with participants, or discussing operational issues with key informants or focus groups. Project sites should refer to the *NHBS-YMSM Preliminary Research Manual* for additional information on ongoing monitoring and data gathering and for instructions on preliminary research methods.

When conducting ongoing monitoring and data gathering, project sites should begin with the least labor-intensive and time-consuming methods (e.g., the review of existing recruitment and enrollment data, observations, and informal conversations) and then, if simpler methods do not yield results, they should proceed to more labor-intensive and time-consuming methods (e.g., key informant interviews or focus groups). Project sites should also assess whether an operational problem is associated with a particular demographic sub-population, field site, or staff member. **Table 15.1** provides examples of some operational problems and the methods that could be used to evaluate them.

Project sites should only use ongoing monitoring and data gathering to investigate operational problems that have been identified. They should not use it to conduct sub-studies or to evaluate new research questions. Before starting ongoing monitoring and data gathering, project sites should always discuss their plans with their CDC project officer.

**Table 15.1 Operational problems and potential evaluation methods**

Operational Problem	Potential Evaluation Methods
<p>RDS - Low or declining enrollment</p>	<p><b>Quantitative:</b>                      Project sites should review the Coupon Tracking table in the <i>Coupon Manager Program Report</i> to determine how many coupons have been distributed and the number and proportion of coupons returned. The number of coupons distributed less the number returned equals the number of coupons currently in circulation, a measure of how many potential participants there are in the community. A low proportion of coupons returned indicate a barrier to recruitment or participation, which should be further assessed using the “refusals” tables in the <i>Coupon Manager Program Report</i>.</p> <p><b>Qualitative:</b>                      Project sites should use observation and informal conversations with participants to determine whether enrollment is being hindered by such factors as the field site location or hours of operation, the incentive amount or type, a poor reputation for the project, safety or confidentiality concerns, or the time commitment required.</p>

**Table 15.1 – Operational problems and potential evaluation methods (continued)**

Operational Problem	Potential Evaluation Methods
<p>RDS - Demographic characteristics of participants do not match those of young MSM (i.e., a sub-population(s) of young MSM are being underrepresented)</p>	<p><b><i>Quantitative</i></b></p> <p>Project sites should review the <i>Sample Characteristics – Screened Report</i> to determine whether members of the underrepresented sub-population are more likely to be ineligible, and they should check the “refusals” tables in the <i>Coupon Manager Program Report</i> to find out if members of the underrepresented sub-population are more likely to refuse coupons. They should also review the Seed Characteristics table in the <i>Seed Report</i> to assess whether a lack of sample diversity could be due to a lack of seed diversity.</p> <p>Sites can use RDSAT to check the affiliation matrix to see if members of the underrepresented sub-population are substantially less likely to be recruited by members of other sub-populations and they should check the recruitment count to see if members of the underrepresented sub-population are less likely to recruit other participants.</p> <p><b><i>Qualitative</i></b></p> <p>If members of the underrepresented sub-population are more likely to be ineligible, project sites should observe the recruiter training provided by project staff and conduct exit interviews with participants from the underrepresented sub-population to see if they understand who should be recruited. Project sites should also use key informant interviews to determine whether there are misperceptions in the community regarding the eligibility criteria.</p>

**Table 15.1 – Operational problems and potential evaluation methods (continued)**

Operational Problem	Potential Evaluation Methods
<p>VBS – Demographic characteristics of participants do not match those of YMSM</p>	<p>The first month of recruitment recently ended; the field staff has interviewed about 100 young MSM. The project coordinator reviews the process monitoring reports on the DCC Data Portal to assess the racial characteristics of the sample in the resulting dataset. In reviewing the Sample Characteristics Report of those screened, she learns that fewer black young MSM have been recruited, relative to what was expected based on preliminary research.</p> <p>What ongoing monitoring and data collection activities should the project coordinator conduct to explore this issue?</p> <p>First, the project coordinator should examine the existing survey data to determine the number of black young MSM that have been screened and have completed the interview. This information is also available on the Sample Characteristics Report; however reports on the Data Portal may reflect a lag of a few weeks since data submission. The project coordinator should also to determine which venues have been successful for recruiting eligible black young MSM; the Venue-based Sampling Report available on the Data Portal will provide this information by venue. If none of the venues which were expected to yield black young MSM were selected for sampling, the project coordinator may consider conducting non-random events at these venues to boost the number of black young MSM in the sample.</p> <p>If a venue which was expected to yield black young MSM failed to do so, the project coordinator may want to speak with the venue owner or other gatekeepers to investigate potential reasons why the field staff was unable to recruit black young MSM. For example, if black young MSM only attend a venue on certain nights of the week, the project coordinator should consider splitting the venue into two venues; i.e. a separate Venue Code for the day-time periods at this venue when black young MSM are mostly in attendance and a separate Venue Code for the day-time periods at this venue when attendance is more mixed. Creating two distinct venues will increase the odds that the day-time periods when black young MSM are more likely to attend the venue are randomly selected.</p>

	<p>The project coordinator should also discuss with the team to see if black young MSM at venues decline participation, and whether the recruitment messages or recruiter characteristics need to be improved. A focus group or brief interviews with young black MSM could provide insights as to what needs to change.</p> <p>Based on the findings from her ongoing monitoring and data collection activities, the project coordinator may determine that she needs to identify additional venues where black young MSM socialize. An efficient strategy might be to ask NHBS-YMSM participants to identify venues or social events (that are not on the current sampling frame) where other black MSM congregate. These questions may be added to the local survey or may be asked separately as an exit interview. If asking NHBS-YMSM participants does not yield much information about additional venues, the project coordinator should consider interviewing key informants who may have information about where black young MSM socialize.</p> <p>In addition to asking NHBS-YMSM participants or key informants about additional venues, the project coordinator should also ask how black young MSM in the local area learn about social events. For example, black young MSM in the local area may be more likely to attend organized social events in less traditional venues, and the timing and location of these social events may vary. If the project coordinator has information about these types of social events, she may be able to work with the event's organizers to gain permission to conduct NHBS-YMSM activities.</p>
--	---

**Table 15.1 – Operational problems and potential evaluation methods (continued)**

Operational Problem	Potential Evaluation Methods
<p>FBS – Too few people click on the ad</p>	<p><b>Quantitative</b></p> <p>Try different algorithms of ‘Likes’ to see if other combinations generate more clicks per display (in which case it is likely that they are targeting young MSM more efficiently).</p> <p><b>Qualitative</b></p> <p>Conduct ongoing research with young MSM in focus groups to ask for feedback on how to improve the attractiveness of the ads. If young MSM identify new images that are more attractive to them than those currently featured in the ad, those images should be forwarded to CDC for clearance and potential future use.</p>
<p>FBS – Too few people fill out the landing page information</p>	<p><b>Qualitative</b></p> <p>Conduct ongoing research with young MSM in focus groups or key informant interviews to ask for feedback on how to improve the landing page.</p>
<p>FBS – Young MSM fill out the landing page information but do not answer calls, emails or text messages.</p>	<p><b>Quantitative</b></p> <p>Make sure staff attempt different contact methods – as long as the youth have indicated that a given mode of contact is acceptable to them.</p> <p>Try calling/texting at different times of the day.</p> <p><b>Qualitative</b></p> <p>Conduct ongoing research with young MSM in focus groups and key informant interviews to ask for feedback on how to improve contact with potential participants.</p>

<p>FBS – Very few of the young men who complete the phone screener are eligible</p>	<p><b>Quantitative</b></p> <p>Try different algorithms of ‘Likes’ to see if other combinations generate more eligible participants (in which case it is likely that they are targeting young MSM more efficiently).</p> <p><b>Qualitative</b></p> <p>Conduct ongoing research with young MSM in focus groups and key informant interviews for feedback on how to improve the specificity of the ads.</p>
<p>FBS – Eligible young MSM who complete the phone screener do not show up at the field site</p>	<p><b>Qualitative</b></p> <p>Conduct ongoing research with young MSM in focus groups and key informant interviews to ask for feedback on field site opening hours, location, transportation options, and general impressions of the project.</p> <p>Also elicit feedback from young MSM on phone screening talking points, the explanation of the project, and incentives.</p>

# Chapter 16 Data Submission and Management

## 16.1 Overview

The purpose of this chapter is to briefly describe NHBS-YMSM data submission and management procedures. Project sites will submit their local NHBS-YMSM data to the ICF International Data Coordinating Center (DCC), which manages all NHBS-YMSM data at the multi-site level. Specific instructions on how to submit data to the DCC are described in the *NHBS-YMSM Data Management Training Manual*. The DCC will also provide an in-person training that the data manager from each project site is required to attend.

## 16.2 Data Submission

The DCC is responsible for managing NHBS-YMSM data at the multi-site level, including the review and editing of all data. The DCC will also produce the process monitoring reports described in **Chapter 15** of this manual. Project sites are responsible for submitting or entering the following data via the DCC data portal:

- QDS™ Warehouse containing the NHBS-YMSM core interview files
- Coupon Manager Program (CMP) data (RDS only)
- Recruitment Event Information & Outcomes Form (VBS only)
- Participant Tracking Form
- HIV Test Results Log
- Data Error Log

On a **weekly** basis:

- Project sites should submit the QDS™ Warehouse containing the NHBS-YMSM core interview files through the data portal.

On a **daily** basis project sites should:

- Enter HIV test results in the *HIV Test Results Log* on the data portal
- Send the CMP data to the data portal using the automatic upload function in the CMP (RDS only).
- Enter recruitment event outcome information into the VDTTS Program **after each event (VBS only)**.

If data in the QDS™ Warehouse need to be corrected, the project site should enter the changes in the Data Error Log on the data portal as soon as the site's data manager becomes aware of them. Project

sites should refer to the *NHBS-YMSM Data Management Training Manual* for additional information on using the data portal to submit and enter their data.

Sites should also submit some data directly to the CDC project officer on a **monthly** basis:

- Cost evaluation form (**Appendix P**). Described in more detail in 15.4b
- Facebook data tracking form (**Appendix II**). Described in more detail in Chapter 6 and Chapter 15.
- Facebook Survey ID Log (Chapter 8, section 8.5a. Table 8.1)

### **16.3 Data Management**

Project sites must develop a local data management plan that outlines the activities necessary for ensuring the systematic, complete, and timely submission of NHBS-YMSM data. The local plan should also identify the specific staff member(s) (and back-ups) who will submit the QDS™ Warehouse and CMP data, enter the HIV test results and data corrections, and serve as the DCC's point-of-contact. Another essential element of the local plan is a system for tracking surveys and data corrections. Project sites should use the *Participant Tracking Form* (**Appendix R**) to track key survey information (e.g., survey ID, interview date, eligibility status), as well as to record any needed data edits. Project sites should always review and process their data in accordance with their local plan and the *NHBS-YMSM Protocol*.

Moreover, project sites should **promptly** respond to all DCC communications with either the requested information or a date when the requested information will be sent.

## Appendix A: All Methods - Operations Checklist

Initial Approval Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

mm / dd / yyyy

Updated Version Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

mm / dd / yyyy

**Project sites should send the FINAL completed checklist to their CDC Project Officer at least two weeks before the planned start of data collection. They may want to send a draft of the checklist earlier in case revisions need to be made. They may also send draft sections of the checklist as each is completed.**

**Project sites must complete all applicable sections of the checklist. If any information in the checklist changes after it has been submitted (e.g., new staff added), project sites must update the checklist and resubmit it to their CDC Project Officer. Updated versions of the checklist should be tracked using the “Updated Version Date” (see field above).**

**Once a project site’s CDC Project Officer has approved their checklist, they will receive an email stating that they can begin data collection. They cannot begin data collection until they receive this email.**

**Project sites should contact their CDC Project Officer if they have any questions about the checklist.**

## I – IRB Review

- a. Was preliminary research submitted as a separate package to your local Institutional Review Board(s) (IRBs)?

Yes     No

- a1. **If Yes:** Complete the following table on your IRB submission for preliminary research:

	<b>Funded Health Department IRB</b>	<b>Other Local IRB (if applicable)</b>	<b>Other Local IRB (if applicable)</b>
<b>Name of IRB</b>			
<b>Date PR IRB Package Submitted</b>			
<b>Date PR IRB Approval Received</b>			

### **Instructions for completing the table:**

**Name of IRB:** List the name of each IRB that reviewed your preliminary research package (do not list an IRB that is deferring to another one).

**Date PR IRB Package Submitted:** For each applicable IRB, list the date you sent the preliminary research package to the IRB.

**Date PR IRB Approval Received:** For each applicable IRB, list the date you received approval to conduct preliminary research.

- b. Complete the following table on your IRB submission for NHBS-YMSM:

	<b>Funded Health Department IRB</b>	<b>Other Local IRB (if applicable)</b>	<b>Other Local IRB (if applicable)</b>
<b>Name of IRB</b>			
<b>IRB FWA Number</b>			
<b>FWA Expiration Date</b>			
<b>Date IRB Package Submitted</b>			
<b>Expedited or Full IRB Review</b>			

<b>Date IRB Approval Received</b>			
<b>Date Amendment Approval Received (if applicable)</b>			

**Instructions for completing the table:**

**Name of IRB:** List the name of each IRB that reviewed your NHBS-YMSM package (do not list an IRB that is deferring to another one).

**IRB FWA Number:** For each applicable IRB, list the human subjects Federal Wide Assurance (FWA) number.

**FWA Expiration Date:** For each applicable IRB, list the expiration date for the FWA. This information can be found on: <http://ohrp.cit.nih.gov/search/fwasearch.aspx?styp=bsc>

**Date IRB Package Submitted:** For each applicable IRB, list the date you sent the NHBS-YMSM package to the IRB.

**Expedited or Full IRB Review:** Record *Expedited* or *Full* to indicate whether the NHBS-YMSM package underwent an expedited or full IRB review.

**Date IRB Approval Received:** For each applicable IRB, list the date you received approval to conduct NHBS-YMSM.

**Date Amendment Approval Received:** If you submitted an amendment to any of your IRBs, list the date when approval was received for the amendment.

c. Did any of your local IRBs defer to another?

Yes     No

c1. **If Yes:** Specify which IRBs were involved:

c2. **If Yes:** Attach letter(s) or other documentation for each IRB deferral.

d. Attach the letter(s) of approval from your IRB(s).

e. Attach your local assent/consent forms (including parental consent if applicable).

f. According to your IRB requirements, how will interviewers read the assent/consent to participants? (check all that apply)

Read assent/consent form verbatim

Read summary of assent/consent form (attach summary)

- Read bulleted list of key assent/consent elements (*attach bulleted list*)
- Read highlighted excerpts from the assent/consent form (*attach highlighted form*)

g. Will participants provide verbal assent/consent or written assent/consent?

- Verbal assent/consent     Written assent/consent

g1. **If written assent/consent:** Describe how you will protect the confidentiality of participants:

*(e.g., by having the participant sign the assent/consent form with his survey ID instead of his name, by having the interviewer sign the assent/consent form, by not recording a survey ID or any other linkages to NHBS-YMSM data on a signed assent/consent form)*

h. Will parental consent be required?

- Yes     No

h1. **If Yes:** describe the process of how parental consent will be obtained:

## II – Project Identification

- a. Record your NHBS-YMSM project name:
- b. Insert or attach your NHBS-YMSM project logo:

## III – Field Sites (RDS and FBS)

a. List your field site location(s) in the following table (add rows as necessary):

Name & Address	Dates of Lease or MOU	Project Staff	Days & Hours	Field Site ID	Population(s) Targeted with Field Site

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

**Instructions for completing the table:**

**Name & Address:** List the name of any organization housed in the field site and the address of the field site. If using a van, list the address(es) where the van will be parked.

**Dates of Lease or MOU:** List the dates of your lease or memorandum of understanding (MOU) for the field site.

**Project Staff:** List the project staff that will be working at each field site (e.g., field supervisor, coupon manager, number of interviewers, number of test counselors, security, etc.).

**Days & Hours:** List the days and hours of field site operation.

**Field Site ID:** List the 2-digit ID code for each field site.

**Population(s) Targeted with Field Site:** List subpopulations expected to have easy access to this field site.

- b. Attach a map with the field site(s) indicated.
- c. Describe the setup of your field site (waiting area, coupon manager/check-in manager station, rooms for interviewing and HIV testing, etc.) and the planned flow of participants:

## IV – Van

a. Indicate whether you will use a van for any sampling method:

- Yes (Method[s]:        )                       No

**If Yes:**

- Will use a van for interviewing **only**
- Will use a van for HIV testing **only**
- Will use a van for **both** interviewing and HIV testing
- Will **not** use a van for interviewing or HIV testing

Describe your contingency plans if the van is not available due to mechanical problems:

## V - Census Tract Identification

- a. Name the type of your field maps:
- Hardcopy field maps
  - Electronic map application
  - Other (specify): \_\_\_\_\_
- b. Name the source of your field maps (e.g., MarketMaps.com, created in ArcGIS):
- c. Describe step by step your process to identify and collect census tract information:

## VI – RDS only

### Seeds

- a. What is the total number of seeds you plan on recruiting: \_\_\_\_\_
- b. Use the following table to list the characteristics of each seed you plan on recruiting (add rows as necessary and only complete a field if it is relevant to seed selection):

#	Race/Ethnicity	Age	Geographic Area*
1			
2			
3			
4			
5			

\*Geographic area of residence, such as neighborhood, zip code, etc.

c. Insert or attach a copy of your referral card.

## Coupons

a. How many coupons will you distribute to each recruiter at the start of data collection?

Number of coupons distributed to seeds: \_\_\_\_\_

Number of coupons distributed to non-seeds: \_\_\_\_\_

b. Will you use coupon activation dates?

Yes  No

b1. **If Yes:** What is the coupon activation period (e.g., 1 day): \_\_\_\_\_

c. Will you use coupon expiration dates?

Yes  No

c1. **If Yes:** What is the coupon expiration period (e.g., 4 weeks): \_\_\_\_\_

d. Insert or attach a copy of your coupon.

## Recruiter training

a. Attach a copy of your recruiter training script and talking points (if applicable).

b. Insert or attach a copy of your information card.

## VII – Facebook

a. Attach a screenshot of the Facebook ads you are using

b. Attach a screenshot of the Landing Page

c. Insert the language you will use when arranging for a youth to go directly to a field site without the telephone screener:

## VIII – Phone

a. List your project phone number(s) (write *pending* if a phone number has not been obtained yet):

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

b. Is voicemail activated on your project phone?

Yes    No

b1. **If Yes:** Describe your procedures for protecting participant confidentiality if they decide to leave a voicemail message (e.g., how long a message will be saved):

b2. **If Yes:** Insert the script for the outgoing message that participants will hear when they call the study telephone line.

## IX – Interview Appointment System

a. Will you use an appointment system to schedule interviews?

Yes    No

a1. **If Yes:** Describe how interview appointments will be scheduled:

*(Include whether “walk-ins” will be accepted and whether standby appointments will be used. If there are differences between interview appointment systems based on sampling method, please describe here, including whether you will use an electronic system and how you will ensure it is secure).*

a2. **If No:** Describe how you will manage interviews:

b. Post-event Appointments (VBS only) - Will your project site be using post-event appointments (PEAs)?

Yes    No

b1. If Yes: Describe how PEAs will be scheduled (including how to avoid scheduling conflicts at field sites):

b2. If Yes: Please describe circumstances in which PEAs will be utilized:

b3. Please list all locations where PEAs will take place (including any locations using a mobile unit):

Location	Project Staff	Days & Hours

**Location:** Street address or name of location where PEAs will take place. If using a van, list the address(es) where the van will be parked.

**Project staff:** Indicate staff at each location (*at least 1 field supervisor and 2 project staff members are needed to conduct PEAs*).

**Days & Hours:** Indicate the days and hours PEAs will be conducted.

**Field Site ID:** List the 1- or 2-digit ID code for each field site where PEAs will be conducted.

- c. Insert the language you will use when contacting participants by:
  - a. Phone
  - b. Email
  - c. Text Message
- d. Describe your procedures for deleting information collected by the following methods. Please note how and when scheduling information collected by each of these methods will be destroyed.
  - a. Phone
  - b. Email
  - c. Text Message

## X – Incentives

a. What is the amount and type of *standard* compensation that each participant will receive?

a1. Interview– Amount: \_\_\_\_\_ Type: \_\_\_\_\_

a2. HIV testing– Amount: \_\_\_\_\_ Type: \_\_\_\_\_

a3. Recruitment (RDS only) Amount: \_\_\_\_\_ (per recruit) Type: \_\_\_\_\_

b. In the following table, list the amount and type of additional *local* compensation that each participant will receive. If not applicable to your local compensation policy, enter “N/A” in the corresponding fields.

Local compensation for...	Amount	Type
Ineligibles ( $\leq$ \$5 or other minor amount)		
<i>Participant</i> who passed screener but completed only part of the interview		
<i>Recruiter (RDS)</i> whose recruit passed screener but completed only part of the interview		
Returning for HIV test result ( <b>NOTE: only non-NHBS-YMSM funds can be used, and if approved by IRB</b> )		
Other activity or test ( <i>specify</i> ):		
Other activity or test ( <i>specify</i> ):		
Other activity or test ( <i>specify</i> ):		

c. In total, what is the maximum amount of compensation that each participant could potentially receive: \_\_\_\_\_

## XI – Project Staff Training and Evaluation

a. In the following table, list the project staff and the trainings they have completed:

<b>Name of Staff Member</b>					
<b>Position</b>					
<b>ID Code (if applicable)</b>					
<b>Received Confidentiality Training?</b>					
<b>Date Signed Confidentiality Agreement</b>					
<b>Read NHBS-YMSM Operations Manual?</b>					
<b>Read NHBS-YMSM Interviewer Guide?</b> <i>(for field supervisor and interviewers)</i>					
<b>Read Package Insert for Rapid HIV Test</b> <i>(for test counselors conducting rapid tests)</i>					
<b>Date HIV Counseling and Testing Certification Expires</b> <i>(for test counselors)</i>					
<b>Viewed FOT Webinar: Human Subjects</b>					
<b>Viewed FOT Webinar: Preliminary Research</b>					
<b>Viewed FOT Webinar: HIV Testing Operations</b>					
<b>Viewed FOT Webinar: Interviewer Training/Monitoring Interviewer Process</b>					

<b>Viewed FOT Webinar: Managing Field Sites</b>					
<b>Attended DCC Data Management Training</b>					
<b>Other Training</b> ( <i>specify type and dates</i> ):					
<b>Other Training</b> ( <i>specify type and dates</i> ):					
<b>Evaluated and Met Performance Criteria for Position(s)?</b>					

**Instructions for completing the table:**

**Name of Staff Member:** List the name of each staff member. Add more columns to the table if necessary or make a second copy of the table.

**Position:** List each staff member’s position(s).

**ID Code:** If applicable, list the 2-digit ID code for the staff member.

**Received Confidentiality Training:** Prior to the start of data collection, all project staff must receive confidentiality training and they must sign a confidentiality agreement. Record *Yes* to indicate that a staff member received confidentiality training.

**Date Signed Confidentiality Agreement:** List the date that each staff member signed the confidentiality agreement.

**Read the NHBS-YMSM Operations Manual:** Prior to the start of data collection, all project staff must read the *NHBS-YMSM Operations Manual*. Record *Yes* to indicate that a staff member read the manual.

**Read the NHBS-YMSM Interviewer Guide:** Prior to the start of data collection, the field supervisor and all interviewers must read the *NHBS-YMSM Interviewer Guide*. Record *Yes* to indicate that these staff members read the guide.

**Read Package Insert for Rapid HIV Test:** All HIV test counselors conducting rapid HIV tests must read the information in the package insert for the test being used. Record *Yes* to indicate that an HIV test counselor read the test package insert.

**Date HIV Counseling and Testing Certification Expires:** All HIV test counselors must have valid HIV counseling and testing certification. List the date that each HIV test counselor’s certification expires.

**Viewed NHBS-YMSM Field Operations Training Webinars:** Record Yes for each webinar training that each staff member viewed either as a live or recorded session. Project coordinators and field supervisors must attend the live sessions. The list of webinars include: Human Subjects, Preliminary Research, HIV Testing Operations, Interviewer Training/ Monitoring Interviewer Process, and Managing Field Sites.

**Attended DCC Data Management Training:** Record Yes to indicate that a staff member attended this training.

**Other Training:** Using a separate row, list each local or CDC-sponsored training that project staff have completed. Include the name of the training and the date(s) that it was conducted. Add more rows to the table if necessary.

**Evaluated and Met Performance Criteria for Position(s):** Prior to the start of data collection, all project staff must be evaluated and meet the performance criteria for their position(s). See **Appendices B** thru **I** of the *NHBS-YMSM Operations Manual* for evaluation forms listing the performance criteria for each position. Record Yes to indicate that a staff member was evaluated and met these criteria.

- b. Based on the evaluation recommendations in **Table 2.3** of the *NHBS-YMSM Operations Manual*, describe your plans for evaluating project staff during data collection (specify who will conduct the evaluations and estimate their weekly time commitment for this task):
- c. Since the field supervisor will be busy managing operations during data collection, the principal investigator or project coordinator should ideally conduct staff evaluations. If the field supervisor will also evaluate staff, describe how you will ensure that this added responsibility does not interfere with the field supervisor's ability to manage operations:

*(e.g., assign an experienced staff member to serve as acting field supervisor when the field supervisor is conducting evaluations)*

## XII – VBS Code Numbers (VBS only)

- a. At each recruitment event, the field supervisor should provide the interviewers with a written copy of four code numbers: Interviewer ID, Survey ID, Venue Code and Event Number.

Will your project site be using the Participant Tracking Form for this purpose?

Yes       No

- a1. If No: please describe the system the field supervisor will use to provide a written copy of the code numbers to the interviewers:
- b. Describe the system your project site will use to keep track of Survey IDs assigned during a recruitment event. If a Survey ID Log will be used, please attach an example:

## XIII – HIV Testing

### *a. Rapid HIV Testing*

a1. Will you conduct rapid HIV testing?

- Yes    No

**If Yes:** Complete the remainder of section XIIIa (Rapid HIV Testing).

a2. Type of specimen collected:

- Blood from fingerstick  
 Blood from venipuncture  
 Oral

a3. Trade name of rapid HIV test: \_\_\_\_\_

*(e.g., Clearview Complete, Unigold)*

a4. Do you have a CLIA certificate of waiver?

- Yes    No

a5. Describe the procedures you will use to ensure that rapid test results are read during the time frame indicated in the test package insert:

a6. Will you run the rapid test in a different room than the one where the participant is being interviewed?

- Yes    No

**If No:** Describe the steps you will take to ensure that the interview will not be disrupted and that the participant will not be able to see the test results:

### *b. Laboratory-based HIV Testing: Standard Testing and Confirmatory Testing for Rapid Tests*

b1. Type of specimen collected:

- Blood from venipuncture
- Dried blood spot (DBS)
- Oral

b2. **If collecting blood via venipuncture**, will an alternative specimen collection method be offered if venipuncture is not possible (i.e., phlebotomist is not available, venipuncture is not possible on participant)?

- Yes    No    N/A

**If Yes:** Describe your alternative testing plan:

b3. Trade name of laboratory-based screening assay: \_\_\_\_\_  
(e.g., Abott Architect Ag/Ab Combo, Avioq HIV-1 Microelisa, Bio-Rad GS HIV-1/HIV-2 Plus O EIA, Bio-Rad GS HIV Combo Ag/Ab EIA.)

b4. Trade name of laboratory-based confirmatory test: \_\_\_\_\_  
(e.g., Fluorognost HIV-1 IFA, Gen-Probe APTIMA HIV-1 RNA, GS HIV-1 Western Blot, Multispot HIV-1/HIV-2 Rapid Test, OraSure HIV-1 Western Blot.)

b5. If applicable, trade name of 2<sup>nd</sup> laboratory-based confirmatory test:  
\_\_\_\_\_  
(e.g., Fluorognost HIV-1 IFA, Gen-Probe APTIMA HIV-1 RNA, GS HIV-1 Western Blot, Multispot HIV-1/HIV-2 Rapid Test, OraSure HIV-1 Western Blot.)

b6. If applicable, trade name of 3<sup>rd</sup> laboratory-based confirmatory test:  
\_\_\_\_\_  
(e.g., Fluorognost HIV-1 IFA, Gen-Probe APTIMA HIV-1 RNA, GS HIV-1 Western Blot, Multispot HIV-1/HIV-2 Rapid Test, OraSure HIV-1 Western Blot)

b7. Name and contact information for the laboratory performing testing:

b8. Attach your laboratory specimen slip or form.

### ***c. Specimen Storage, Transport, and Processing***

- c1. Describe how you will dispose of biohazard materials in the field, including where biohazard bags and sharps containers will be discarded once full:
  
- c2. Describe how and where specimens will be stored before they are sent to the laboratory:
  
- c3. Describe the schedule for sending specimens to the laboratory:
  
- c4. Describe how the specimens will be sent to the laboratory:  
(e.g., courier, project staff, FEDEX)
  
- c5. Describe how project staff will communicate to the laboratory which specimens are from participants who are self-reported HIV-positive:  
**NOTE: Regardless of the results of any screening tests performed, specimens from self-reported HIV-positive participants must receive confirmatory testing.**
  
- c6. Describe how project staff will communicate to the laboratory which specimens should be stored because the participants gave consent and which should be destroyed because the participants did not give consent:

***d. HIV Counseling and Testing Procedures***

- d1. Stepwise, describe your HIV counseling and testing procedures:
  
- d2. Attach any other HIV testing forms or logs that you plan on using (e.g., specimen transport/shipping log, risk assessment forms).

***e. Test Results and Active Linkage to Care***

- e1. Describe your procedures for returning confirmatory laboratory test results:
  
- e2. Will you use the optional phone reminder system (see **Section 14.7a** of the *NHBS-YMSM Operations Manual*)?  
 Yes    No  
**If Yes:** Attach your Appointment Reminder Call Form.

- e3. Describe your procedures for actively linking HIV-positive participants to care and any local partners that provide youth friendly services:
- e4. Describe your jurisdiction’s policy on reporting disclosure of child abuse that may arise during the NHBS-YMSM interview encounter or during HIV testing.
- e5. Describe your protocol for handling disclosures of child abuse that may arise during the NHBS-YMSM interview encounter or during HIV testing, including your process for active linkages to appropriate supportive services.
- e6. Describe your protocol for addressing other social service needs that may be identified during the NHBS-YMSM interview encounter or during HIV testing. These services may include, but are not limited to, substance abuse services, housing assistance, violence prevention, and general mental health services.

## XIV – Local Questions

- a. Will you ask participants local use questions after they have completed the NHBS-YMSM core questionnaire?
  - Yes    No
  - a1. **If Yes:** Attach the QDS™ interviewer version of your local use questionnaire. This is an **.rtf** file that you can create with the QDS™ Design Studio [under the “Build” tab, select “Questionnaire (Interviewer)”].

## XV – Data Management

- a. List the name(s) and contact information for your data manager(s):

Name	Phone	E-mail

- b. List the name(s) and contact information for the staff member(s) responsible for submitting NHBS-YMSM data to the DCC data portal. Also indicate the type of data that each will submit (Coupon

Manager Program [CMP] (RDS only), Recruitment event outcomes (VBS only), Data Edits, Surveys, or Test Results):

Name	Phone	E-mail	Data Type

c. Attach the following documents:

- c1. Data security policy
- c2. Data confidentiality policy
- c3. Data transfer protocol (i.e., how data are transferred from the point of collection to the point of upload to the DCC data portal)

d. Attach the following documents:

d1. Describe your plan for protecting personally identifying information (PII) that will be collected as part of NHBS-YMSM activities. This plan should detail the specific PII that will be collected, who is responsible for collecting it, who will have access to it, how it will be stored and encrypted (describe encryption software), how long it will be stored, and who will be responsible for destroying it at the designated time.

d2. Has the local NHBS-YMSM Principal Investigator reviewed and approved the data security plan outlined in c1 and the plan for protecting PII outlined in d1?

Yes  No

d3. Does the local NHBS-YMSM Principal Investigator accept responsibility for the proper destruction of PII at the close of data collection?

Yes  No

PI Initials: \_\_\_\_\_

## XVI – Local Safety and Field Incident Reporting Procedures

- a. Attach the following documents:
  - a1. Local safety protocol
  - a2. Field incident reporting procedures

## XVII – Prevention and Other Informational Materials

- a. Attach any written prevention or informational materials that will be distributed to participants.

## XVIII – Public Health Insurance Plans

- a. List your local public health insurance plans and indigent care programs. This could be a local name for a national plan, such as Medicaid being called MediCal in California, or it could be a plan administered by your state, city, or county, such as the Texas Gold Card. You should include all plans that are administered or subsidized by the local, state, or federal government and have income, age, or disability as an eligibility criterion. You should also include any HIV-related care programs, like Ryan White.

This information should be used to train your interviewers how to properly code responses to the health insurance question in the core questionnaire. In addition, CDC data analysts will use the information to classify a participant’s health insurance as either “public,” “private,” or “other.”

Name of Insurance Plan or Indigent Care Program	Administered By	Eligibility Criteria	Comments

**Instructions for completing the table:**

**Name of Insurance Plan or Indigent Care Program:** Specify the name of the local insurance plan or care program. Add more rows to the table if necessary.

**Administered By:** Indicate whether the plan or program is administered by the *federal, state, or local* government, or another entity. If administered by another entity, specify what that entity is.

**Eligibility Criteria:** Indicate what general criteria are used to determine eligibility for the plan, such as *income, age, disability, or HIV infection*. There is no need to provide detailed eligibility criteria, like income cutoffs.

**Comments:** Include any additional information that may help identify or categorize a health insurance plan or care program. For example, *MediCal is the name for Medicaid in California*.

## XVIII – Updates to Previously Approved Operations Checklist

Please use this section to document any information that has been updated after the initial Operations Checklist was approved by your CDC Project Officer. In addition, please change the version date at the top of the document to reflect the date these changes are effective.

a. IRB amendments:

	<b>Funded Health Department IRB</b>	<b>Other Local IRB (if applicable)</b>	<b>Other Local IRB (if applicable)</b>
<b>Date Amendment Approval Received</b>			
<b>Date Amendment Approval Received</b>			
<b>Date Amendment Approval Received</b>			

b. Updated field site location information (attach updated map with field site location(s) indicated):

<b>Name &amp; Address</b>	<b>Dates of Lease or MOU</b>	<b>Project Staff</b>	<b>Days &amp; Hours</b>	<b>Field Site ID</b>	<b>Population(s) Targeted with Field Site</b>

c. Additional seeds identified (RDS only):

#	Race/Ethnicity	Age Range	Geographic Area*
1			
2			
3			
4			
5			

d. Updated coupon information (RDS only):

Recruiter Type	No. coupons	Date Implemented	Reason for Change

e. Updated project staff training and evaluation information:

<b>Name of Staff Member</b>				
<b>Position</b>				
<b>ID Code (if applicable)</b>				
<b>Received Confidentiality Training?</b>				
<b>Date Signed Confidentiality Agreement</b>				
<b>Read NHBS-YMSM Operations Manual?</b>				
<b>Read NHBS-YMSM Interviewer Guide? (for field supervisor and interviewers)</b>				

<b>Read Package Insert for Rapid HIV Test</b> <i>(for test counselors conducting rapid tests)</i>				
<b>Date HIV Counseling and Testing Certification Expires</b> <i>(for test counselors)</i>				
<b>Viewed FOT Webinar: Human Subjects</b>				
<b>Viewed FOT Webinar: Preliminary Research</b>				
<b>Viewed FOT Webinar: HIV Testing Operations</b>				
<b>Viewed FOT Webinar: Interviewer Training/Monitoring Interviewer Process</b>				
<b>Viewed FOT Webinar: Managing Field Sites</b>				
<b>Attended DCC Data Management Training</b>				
<b>Other Training</b> <i>(specify type and dates):</i>				
<b>Other Training</b> <i>(specify type and dates):</i>				
<b>Evaluated and Met Performance Criteria for Position(s)?</b>				

f. Other NHBS-YMSM project updates (please be specific):

## Appendix B: All Methods - Field Supervisor, HIV Testing Operations Evaluation Form

<b>General Instructions</b>		
<ul style="list-style-type: none"> <li>• To be conducted by the principal investigator or project coordinator.</li> <li>• Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>		
<b>Field Supervisor:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box. <input type="checkbox"/> <b>Pre-implementation Evaluation</b> <input type="checkbox"/> <b>Ongoing Evaluation</b>	
<b>Evaluation Date:</b>		
<b>Evaluator:</b>		
<b>Specimen Collection, Storage, and Disposal</b>		<b>Rating</b>
1. Maintains a paper log (e.g., HIV Test Results Log) with no personal identifying information that links the Survey ID and the Lab ID. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
2. Only uses specimen processing and tracking forms approved as part of the Operations Checklist.	1 No	5 Yes
3. Blood tube specimens are stored in and transported by coolers that are appropriately labeled according to OSHA regulations. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
4. DBS are handled, transported, packaged, and stored per the <i>Operations Manual</i> . N/A <span style="float: right;"><input type="checkbox"/></span>	1 No	5 Yes
5. All blood collection devices are disposed of in appropriate biohazard containers. N/A <span style="float: right;"><input type="checkbox"/></span>	1 No	5 Yes
6. Collects all required HIV testing variables per HIV Test Results Log, Specimen Shipping Log, etc.	1 No	5 Yes
7. Tracks whether participants have returned for their results	1 No	5 Yes
8. Monitors which specimens can be stored and, for the specimens from participants' who don't provide consent to for storage, are disposed of properly. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
<b>Security and Confidentiality</b>		
9. HIV testing forms, logs, lab results, and print outs are kept in a locked cabinet when not in the immediate possession of a staff member.	1 No	5 Yes
10. Ensures that data from the hard copy of the HIV Testing Log are entered into the HIV Test Results Log on the DCC data portal as soon as the test results are available.	1 No	5 Yes
11. Sensitive information, such as Appointment Reminder Call Forms, are stored and shredded according to the NHBS-YMSM protocol.	1 No	5 Yes
<b>Rapid Testing</b>		
12. HIV test package inserts are available for reference at the field site or recruitment event	1 No	5 Yes
13. Monitors and records temperature at which test kits are stored on quality assurance logs.	1 No	5 Yes

14. Monitors and records temperature at which testing is conducted per package insert on quality assurance logs.	1 No	5 Yes
15. Runs external controls in accordance with the test package insert and records results on quality assurance logs.	1 No	5 Yes
16. Monitors data for discordant test results (i.e., reactive rapid test and non-reactive confirmatory test).	1 No	5 Yes
17. Conducts evaluations for all new testing staff and then every 2 weeks thereafter.	1 No	5 Yes

Criterion #	Skill Description, Recommendations, Accolades, and Additional Comments

**Evaluator: Please ensure that the following steps are completed with the field supervisor.**

- Reviewed evaluation form with the field supervisor.
- Provided time for the field supervisor to ask questions.
- Provided the field supervisor with recommendations for improvement.
- If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.

## Appendix C: All Methods - Data Manager Evaluation Form

<b>General Instructions</b>		
<ul style="list-style-type: none"> <li>To be conducted by the principal investigator or project coordinator.</li> <li>Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>		
<b>Data Manager:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box.	
<b>Evaluation Date:</b>	<input type="checkbox"/> <b>Pre-implementation Evaluation</b>	
<b>Evaluator:</b>	<input type="checkbox"/> <b>Ongoing Evaluation</b>	
<b>Data Management</b>	<b>Rating</b>	
1. Ensured daily receipt of the Participant Tracking Form (including data edits), the HIV Test Results Log, and other logs, if applicable. (Recruitment Event Information & Outcomes Form, Intercept Forms for VBS).	1 No	5 Yes
2. Successfully uploaded data from each portable computer to the desktop computer.	1 No	5 Yes
3. Reviewed QDS™ data files from each portable computer and compared the Survey IDs with the Survey IDs recorded on the Participant Tracking Forms or similar forms.	1 No	5 Yes
4. Transferred records from QDS™ data files (e.g., files with *.QAD extension) to the QDS™ Warehouse successfully.	1 No	5 Yes
5. Did not delete QDS™ data files on the portable computer until after confirming the records were added to the QDS™ Warehouse.	1 No	5 Yes
6. Reviewed data discrepancies and concerns with the field supervisor or project coordinator to determine resolutions.	1 No	5 Yes
7. Documented data discrepancies and their resolution on the Participant Tracking Form. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
8. Entered data edits from the Participant Tracking Form into the online Data Error Log on the DCC data portal daily. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
9. Successfully entered HIV testing data into the online HIV Test Results Log on the DCC data portal.	1 No	5 Yes
10. Successfully encrypted NHBS-YMSM data using PGP software.	1 No	5 Yes
11. Successfully enters recruitment event outcomes, into VDTS Program on the DCC Data Portal after each event (VBS only). <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
12. Successfully monitors and records Facebook banner and landing page hit data (FBS only) <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
<b>General</b>		
13. Knows how to ask the DCC questions and understands how to access information on the DCC data portal.	1	5 Yes

	No	
14. (Weekly) Submits QDS™ Warehouse containing core interview files to the DCC data portal. (Note: Please contact the DCC before sending a mock data warehouse to test this procedure.)	1 No	5 Yes
15. (Weekly) Reviews Process Monitoring Reports and communicates discrepancies with DCC.	1 No	5 Yes
16. (Monthly) Reviews DCC Data Management Reports and responds to inquiries on a timely basis.	1 No	5 Yes
17. Responds to DCC communications on a timely basis.	1 No	5 Yes
<b>Criterion #</b>	<b>Skill Description, Recommendations, Accolades, and Additional Comments</b>	
	<p><b>Evaluator: Please ensure that the following steps are completed with the data manager.</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reviewed evaluation form with the data manager.</li> <li><input type="checkbox"/> Provided time for the data manager to ask questions.</li> <li><input type="checkbox"/> Provided the data manager with recommendations for improvement.</li> <li><input type="checkbox"/> If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.</li> </ul>	

## Appendix D: RDS and FBS Only – Check-in/Coupon Manager Evaluation Form

<b>General Instructions:</b>		
<ul style="list-style-type: none"> <li>• To be conducted by the principal investigator, project coordinator, or, if necessary, field supervisor.</li> <li>• Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>		
<b>Coupon Manager/Check-in Manager:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the “N/A” box.  <input type="checkbox"/> <b>Pre-implementation Evaluation</b>  <input type="checkbox"/> <b>Ongoing Evaluation</b>	
<b>Evaluation Date:</b>		
<b>Evaluator:</b>		
<b>Check-In</b>	<b>Rating</b>	
1. Greeted potential participant appropriately.	1 No	5 Yes
2. Established rapport with potential participant.	1 No	5 Yes
3. Checked the validity of potential participant’s RDS coupon, including activation/expiration dates (RDS only). <span style="float: right;"><input type="checkbox"/></span> N/A	1 No	5 Yes
4. Checked the Appointment Log for potential participant’s name and contact information (FBS only) <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
5. Created record in Coupon Manager Program (CMP) for potential participant with a valid RDS coupon (RDS only) <span style="float: right;"><input type="checkbox"/></span> N/A	1 No	5 Yes
6. Filled in Participant tracking form with Survey ID, Interviewer ID, Field Site ID, computer number and (FBS only – Number of contact attempts as recorded in the Appointment Log). <span style="float: right;"><input type="checkbox"/></span> N/A	1 No	5 Yes
7. Transferred potential participant with validated identity information to interviewer (FBS only) or transferred potential participant with a valid RDS coupon to interviewer and gave coupon to interviewer (RDS only Handed Participant tracking form to interviewer).	1 No	5 Yes
8. Handled ineligible participant in a professional manner. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
9. Voided and filed invalid coupons appropriately (RDS only). <span style="float: right;"><input type="checkbox"/> N/A</span>	1 No	5 Yes
<b>Recruiter Training (RDS only)</b> <input type="checkbox"/> N/A (To be filled in if check-in/coupon manager does the recruiter training)		
10. Ensured participant was eligible to receive recruitment coupons.	1 No	5 Yes
11. Successfully trained recruiter: <i>Instructions were given regarding whom to recruit.</i>		
a. Male friends, relatives and other young men you hang out with whom you know identify as gay or bisexual, or are attracted to or have sex with other men	1 No	5 Yes
b. Males who are between 13 and 17 years old.	1 No	5 Yes
c. Males who live in the project area.	1 No	5 Yes

d. Males who have <u>not</u> already participated in the study.	1 No	5 Yes
e. Do <u>not</u> give coupons to strangers.	1 No	5 Yes
12. Successfully trained recruiter: <i>Instructions were given on what to say to person receiving the coupon.</i>		
a. Call for an appointment or visit the field site before the expiration date.	1 No	5 Yes
b. The process will take about an hour.	1 No	5 Yes
c. Coupons can't be replaced if lost or stolen.	1 No	5 Yes
13. Successfully trained recruiter: <i>Rewards.</i>		
a. Rewards will be paid for each person recruited who is selected to participate and completes the interview.	1 No	5 Yes
b. Rewards will not be paid for someone who is not selected to participate.	1 No	5 Yes
c. Rewards will not be paid for recruiting someone who has already participated.	1 No	5 Yes
d. Rewards will not be paid for someone who does not complete the interview.	1 No	5 Yes

e. Each coupon can only be given to one person.	1 No	5 Yes
f. A unique identification number will link the recruiter, coupon(s), and reward(s).	1 No	5 Yes
g. Recruiter can call the office to check on any rewards due.	1 No	5 Yes
14. Asked questions to recruiter to ensure he understands who to recruit and what to do with coupons.	1 No	5 Yes
15. Asked recruiter if he had any questions.	1 No	5 Yes
<b>Check-Out</b>		
16. Ensured participant had completed all applicable steps of the enrollment process (i.e., eligible, provided assent for interview consent for HIV testing and blood storage, completed interview/HIV testing and blood storage, and, if applicable (RDS only), eligible and willing to recruit).	1 No	5 Yes
17. Collected participant's RDS coupon (RDS only) and Participant Tracking Form from interviewer.	1 No	5 Yes
18. Marked and filed the RDS coupon (RDS only) and Participant Tracking Form appropriately.	1 No	5 Yes
19. Created Recruiter ID and collected physical marks (RDS only). <input type="checkbox"/> N/A	1 No	5 Yes
20. Distributed correct number of RDS coupons and recorded RDS coupon numbers (RDS only). <input type="checkbox"/> N/A	1 No	5 Yes
21. Distributed incentive. <input type="checkbox"/> N/A	1 No	5 Yes

22. Distributed local HIV prevention materials and referrals. N/A	<input type="checkbox"/>	1 No	5 Yes
<b>General</b>			
23. Demonstrated adherence to the <i>NHBS-YMSM Protocol</i> including RDS/FBS methods.		1 No	5 Yes
24. Maintained an organized Station (e.g., CMP hard copy, coupons, referral cards, information cards, and incentives).		1 No	5 Yes
25. CMP was never left open or unattended (RDS only). N/A	<input type="checkbox"/>	1 No	5 Yes
26. Ensured participant was never able to view the CMP on the computer screen (RDS only) N/A	<input type="checkbox"/>	1 No	5 Yes
27. Was knowledgeable of safety procedures.		1 No	5 Yes
<b>Criterion #</b>	<b>Skill Description, Recommendations, Accolades, and Additional Comments</b>		
<b>Evaluator: Please ensure that the following steps are completed with the coupon manager/check-in manager.</b>			
<input type="checkbox"/> Reviewed evaluation form with the coupon manager/ <b>check-in manager</b> . <input type="checkbox"/> Provided time for coupon manager/ <b>check-in manager</b> to ask questions. <input type="checkbox"/> Provided the coupon manager/ <b>check-in manager</b> with recommendations for improvement. <input type="checkbox"/> If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.			

## Appendix E: VBS Only - Field Supervisor Project Management Evaluation Form

<b>General Instructions:</b> <ul style="list-style-type: none"> <li>To be conducted by the principal investigator or project coordinator.</li> <li>Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>					
<b>Field Supervisor:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box. <input type="checkbox"/> <b>Pre-implementation Evaluation</b> <input type="checkbox"/> <b>Ongoing Evaluation</b>				
<b>Evaluation Date:</b>					
<b>Evaluator:</b>					
<b>Management of Staff</b>	<b>Rating</b>				
1. Has trained staff members as back-ups for field supervisor, counter, recruiter, and data manager.	1 No	5 Yes			
2. Has adhered to evaluation schedule for counter.	1 No	5 Yes			
3. Has adhered to evaluation schedule for recruiters.	1 No	5 Yes			
4. Has adhered to evaluation schedule for interviewers.	1 No	5 Yes			
5. Has adhered to evaluation schedule for HIV test counselors.	1 No	5 Yes			
<b>Recruitment Event Operations Setup</b>					
6. All supplies were prepared and tasks completed per Recruitment Event Checklist.	1 No	5 Yes			
7. Information for recruitment event was documented on Recruitment Event Information & Outcomes Form.	1 No	5 Yes			
8. Field site was adequately staffed (a minimum of 2 staff members in addition to the field supervisor).	1 No	5 Yes			
9. Checked-in with venue owner/manager upon arrival. <span style="float: right;"><input type="checkbox"/></span> N/A	1 No	5 Yes			
10. Identified and set up spaces for interviewing and HIV testing.	1 No	5 Yes			
11. Identified and set up counting area and recruitment area.	1 No	5 Yes			
12. Conducted a staff meeting before recruitment event.	1 No	5 Yes			
<b>Recruitment Event Management</b>					
13. Maintained a log of non-duplicated and sequential Survey IDs.	1 No	5 Yes			
14. Provided interviewers with a written copy of the four code numbers (Interviewer ID, Survey ID, Venue Code, and Event Number) for each participant screened.	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always

15. Ensured PEAs were scheduled and appointment card provided with Venue Code, Event Number, and, if applicable, Survey ID. <input type="checkbox"/> N/A	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
16. Managed recruitment by monitoring when an interviewer was available for the next participant.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
17. Checked in with recruiters periodically to assess recruitment success and, if necessary, made adjustments.	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
18. Met with recruiter when five consecutive approaches were unsuccessful. <input type="checkbox"/> N/A	1 No		5 Yes		
19. Met each potential participant prior to the interview.	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
20. Checked in with interviewers after each interview.	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
21. Managed participant flow by monitoring when the HIV counselor was available for the next participant. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
22. Ensured participants' privacy was protected at all times.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
23. Handled attempts by outsiders to interrupt an interview or testing session. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
24. Remained aware of each team member's whereabouts.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
25. Maintained security of staff and study materials.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
26. Monitored staff interactions with participants, venue staff, and the general public.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
27. Assisted field staff when necessary. <input type="checkbox"/> N/A	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
28. Treated participants and staff with courtesy and respect.	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
29. Distributed and documented participants' reimbursements.	1 No		5 Yes		
30. Ensured counting continued until the last participant was approached.	1 No		5 Yes		
31. Ensured staff were knowledgeable of safety procedures.	1 No		5 Yes		
32. Has emergency contact information for each staff member.	1 No		5 Yes		
33. Maintained Phone Results Log. <input type="checkbox"/> N/A	1 No		5 Yes		
<b>Post Recruitment Event Management</b>					
34. Held debriefing at completion of field site activities.	1 No		5 Yes		
35. Reviewed Participant Tracking Forms including data edits.	1 No		5 Yes		
36. Collected, reviewed, and tabulated Intercept Forms.	1		5 Yes		

		No				
37. Recorded recruitment event notes and outcomes in the Recruitment Event Information & Outcome Form.		1 No		5 Yes		
38. Reviewed assent/consent forms for each participant. <input type="checkbox"/> N/A		1 No		5 Yes		
39. Reviewed HIV Test Results Log.		1 No		5 Yes		
40. Reviewed staff evaluation forms from PI or PC. <input type="checkbox"/> N/A		1 No		5 Yes		
41. Verified that all participants who consented to HIV testing had either an HIV rapid test conducted or a laboratory specimen collected.		1 No		5 Yes		
42. Portable computers and forms that contain confidential information (i.e., HIV Test Results Log, Phone Results Log, Appointment Reminder Call Forms, and Participant Tracking Forms) were kept in a locked file cabinet.		1 No		5 Yes		
43. Demonstrated adherence to the protocol including VBS methods.		1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
<b>Criterion #</b>	<b>Skill Description, Recommendations, Accolades, and Additional Comments</b>					
<b>Evaluator: Please ensure that the following steps are completed with the field supervisor.</b>						
<input type="checkbox"/> Reviewed evaluation form with the field supervisor. <input type="checkbox"/> Provided time for field supervisor to ask questions. <input type="checkbox"/> Provided the field supervisor with recommendations for improvement. <input type="checkbox"/> If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.						

## Appendix F: VBS Only - Recruiter Evaluation Form

<b>General Instructions:</b>					
<ul style="list-style-type: none"> <li>To be conducted by the principal investigator, project coordinator, or, if necessary, the field supervisor</li> <li>Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>					
<b>Recruiter:</b>	<b>Rating instructions:</b> Rating instructions: Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the 'N/A' box.  <input type="checkbox"/> <b>Pre-implementation Evaluation</b>  <input type="checkbox"/> <b>Ongoing Evaluation</b>				
<b>Evaluation Date:</b>					
<b>Evaluator:</b>					
<b>Introduction</b>			<b>Rating</b>		
1. Approached venue attendees ONLY when directed.	1 No		5 Yes		
2. Approached attendees in a calm and friendly manner.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
3. Introduced self appropriately.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
4. Stated the name and objective of the project.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
<b>Intercept</b>					
5. Recorded each approach in the number (#) column on the Intercept Form, even for those who did not stop.	1 No		5 Yes		
6. Asked the <i>Previous Participation Question</i> of those who stopped. <input type="checkbox"/> N/A	1 No		5 Yes		
7. For each approach, recorded a response to the <i>Previous Participation Question</i> on the Intercept Form, even for those who did not stop.	1 No		5 Yes		
8. Did not pre-screen participants based upon eligibility criteria.	1 Pre-screened		5 Did not pre-screen		
<b>Invitation to Participate</b> <input type="checkbox"/> N/A					
9. All participants who answered "No" or "Don't Know" to the <i>Previous Participation Question</i> were invited to participate in the project. <input type="checkbox"/> N/A	1 No		5 Yes		
10. Clearly explained purpose and benefits of the project. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
<b>Recruitment Technique</b>					
11. Appeared enthusiastic about the study.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
12. Addressed barriers to <u>recruitment</u> in an appropriate and effective manner. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well

13. Addressed barriers to <u>participation</u> in an appropriate and effective manner. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
14. Demonstrated effective interaction conducive to encouraging enrollment (e.g., walked with person, neither coercive nor meek).	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well

Criterion #	Skill Description, Recommendations, Accolades, and Additional Comments

**Evaluator: Please ensure that the following steps are completed with the recruiter**

- Reviewed evaluation form with the recruiter.
- Provided time for recruiter to ask questions.
- Provided the recruiter with recommendations for improvement.
- If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.

## Appendix G: RDS and FBS Only - Field Supervisor, Project Management Evaluation Form

<b>General Instructions:</b> <ul style="list-style-type: none"> <li>• To be conducted by the principal investigator or project coordinator.</li> <li>• Shaded areas are NHBS-YMSM performance recommendations.</li> </ul>					
Field Supervisor:	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box. <input type="checkbox"/> Pre-implementation Evaluation <input type="checkbox"/> Ongoing Evaluation				
Evaluation Date:					
Evaluator:					
<b>Management of Staff</b>	<b>Rating</b>				
1. Has trained staff members as back-ups for field supervisor, data manager and check-in/coupon manager .	1 No	5 Yes			
2. Has adhered to evaluation schedule for check-in/coupon manager	1 No	5 Yes			
3. Has adhered to evaluation schedule for interviewers.	1 No	5 Yes			
4. Has adhered to evaluation schedule for HIV test counselors.	1 No	5 Yes			
<b>Field Site Operations Setup</b>					
5. All supplies were prepared and tasks completed per Field Site Checklist.	1 No	5 Yes			
6. Field site was adequately staffed (a minimum of 2 staff members in addition to the field supervisor).	1 No	5 Yes			
7. Conducted a staff meeting before opening the field site.	1 No	5 Yes			
<b>Field Site Management</b>					
8. Managed participant flow by monitoring when the interviewer was available for the next participant.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
9. Managed participant flow by monitoring when the HIV counselor was available for the next participant. <span style="float: right;"><input type="checkbox"/> N/A</span>	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
10. Managed participant flow by monitoring when the check-in/coupon manager was available for the next participant.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
11. Ensured participants' privacy was protected at all times.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
12. Remained aware of each team member's whereabouts.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
13. Maintained security of staff and study materials.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
14. Monitored staff interactions with participants and the general public.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well

15. Met each potential participant prior to the interview.		1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
16. Checked in with interviewers after each interview.		1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
17. Assisted field staff when necessary. N/A	<input type="checkbox"/>	1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
18. Treated participants and staff with courtesy and respect.		1 Never	2 Rarely	3 Sometime	4 Usually	5 Always
19. Ensured staff were knowledgeable of safety procedures.		1 No		5 Yes		
20. Has emergency contact information for each staff member.		1 No		5 Yes		
21. Adhered to established hours of operation.						
<i>The tasks below should be asked by the staff member carrying these out, if not the Field Supervisor</i>						
22. Ensured staff scheduled and recorded appointments in the Appointment Log. N/A	<input type="checkbox"/>	1 No		5 Yes		
23. Maintained Appointment Reminder Form. N/A	<input type="checkbox"/>	1 No		5 Yes		
24. Made scheduled appointment reminder calls. N/A	<input type="checkbox"/>	1 No		5 Yes		
25. Maintained Phone Results Log. N/A	<input type="checkbox"/>	1 No		5 Yes		
Post Operations Management						
26. Held debriefing at completion of field site activities.		1 No		5 Yes		
27. Reviewed Participant Tracking Forms including data edits.		1 No		5 Yes		
28. Reviewed assent/consent forms for each participant. N/A	<input type="checkbox"/>	1 No		5 Yes		
29. Reviewed HIV Test Results Log.		1 No		5 Yes		
30. Reviewed staff evaluation forms from PI or PC. N/A	<input type="checkbox"/>	1 No		5 Yes		
31. Verified that all participants who consented to HIV testing had either an HIV rapid test conducted or a laboratory specimen collected.		1 No		5 Yes		
32. Synched CMP data to the data portal using the CMP automatic upload function (RDS only).		1 No		5 Yes		
33. Portable computers and forms that contain confidential information (i.e., Appointment Reminder Call Forms, HIV Test Results Log, Phone Results Log, and Participant Tracking Forms) were kept in a locked file cabinet.		1 No		5 Yes		
34. Demonstrated adherence to the protocol including RDS and/or FBS methods.		1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well

Criterion #	Skill Description, Recommendations, Accolades, and Additional Comments
<p data-bbox="61 457 998 483">Evaluator: Please ensure that the following steps are completed with the field supervisor.</p> <ul style="list-style-type: none"> <li data-bbox="110 499 673 525"><input type="checkbox"/> Reviewed evaluation form with the field supervisor.</li> <li data-bbox="110 546 673 571"><input type="checkbox"/> Provided time for field supervisor to ask questions.</li> <li data-bbox="110 592 868 617"><input type="checkbox"/> Provided the field supervisor with recommendations for improvement.</li> <li data-bbox="110 638 1437 663"><input type="checkbox"/> If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.</li> </ul>	

## Appendix H: All Methods - HIV Counseling and Testing Evaluation Form

<b>General Instructions</b> <ul style="list-style-type: none"> <li>To be conducted by the principal investigator, project coordinator, or, if necessary, the field supervisor.</li> <li><b>Permission must be obtained from the participant before an evaluator joins the HIV testing session.</b></li> <li>The evaluator should only interrupt the session for major issues, be discreet, and only direct questions to the counselor.</li> <li>Shaded areas are NHBS-YMSM performance recommendations.</li> <li>This form may be modified to reflect local counseling and testing regulations.</li> </ul>					
<b>HIV Test Counselor:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box. <input type="checkbox"/> <b>Pre-implementation Evaluation</b> <input type="checkbox"/> <b>Ongoing Evaluation</b>				
<b>Evaluation Date:</b>					
<b>Evaluator:</b>					
<b>Test Preparation</b>	<b>Rating</b>				
1. Prepared all necessary materials prior to starting (HIV testing kit, phlebotomy and DBS materials, HIV Testing Log, referrals, information handouts, personal protective equipment, etc.).	1 Not at all	2	3 Some	4	5 Fully
2. Verified on Participant Tracking Form that consent for HIV testing was provided.	1 No		5 Yes		
3. Verified with participant that he is interested in getting tested and has provided appropriate consent(s), including specimen storage and other tests.	1 No		5 Yes		
4. Discreetly obtained relevant behavioral risk information from interviewer. <input type="checkbox"/> N/A	1 No		5 Yes		
<b>Testing Procedures</b>					
5. Conducted test in an appropriate environment (temperature, lighting, adequate work space, etc.).	1 No		5 Yes		
6. Labeled all specimens or test devices with survey ID or lab ID.	1 No		5 Yes		
7. Did not record any personal identifiers, other than for reminder call if applicable.	1 Collected identifiable info		5 Did not collect identifiable info		
8. Adequately counseled participant on what to expect during specimen collection.	1 No		5 Yes		
9. Collected DBS from fingerstick according to procedures in the <i>NHBS-YMSM Operations Manual</i>	1 No		5 Yes		
10. Adhered to OSHA regulations for universal precautions (gloves) and for proper waste disposal in approved biohazard and sharps containers.	1 No		5 Yes		
11. Provided a phone number or scheduled appointment to obtain HIV test result. <input type="checkbox"/> N/A	1 No		5 Yes		
12. Provided appointment card and counseled participant that card must be presented to obtain HIV test result. <input type="checkbox"/> N/A	1 No		5 Yes		

13. Offered an appointment reminder call to the participant. <input type="checkbox"/> N/A	1 No	5 Yes			
<b>Rapid Testing</b>					
14. When opening pouch with test cassette, checked for desiccant pack. Discarded test if no desiccant pack was present	1 No	5 Yes			
15. Demonstrated knowledge of information in the package insert, including critical elements such as the storage and testing temperature ranges.	1 No	5 Yes			
16. Performed test <u>exactly as directed by the package insert</u> . ( <b>Critical element:</b> To ensure consistency, evaluator must use the package insert for every evaluation of tester's performance.)	1 No	5 Yes			
17. Read rapid test result within the appropriate time frame for test performed (INSTI: immediately, Unigold: 10-20 min, Clearview: 15-20 min, Oraquick 20-40 min).	1 No	5 Yes			
18. Participant could not view rapid test during test development.	1 No	5 Yes			
19. Read test result under adequate lighting.	1 No	5 Yes			
20. Knew how to read a positive, negative, or invalid test result and what steps to take when returning these test results.	1 No	5 Yes			
21. Recorded test result and properly completed all steps for returning result.	1 No	5 Yes			
22. Gave participant the subject information pamphlet from test kit.	1 No	5 Yes			
<b>Test Counseling</b>					
23. Conducted pre-test counseling <i>after</i> the survey was completed. <input type="checkbox"/> N/A	1 No	5 Yes			
24. Collected self-reported HIV status according to the guidance in the <i>NHBS Operations Manual</i> .	1 No	5 Yes			
25. Provided HIV information regarding transmission, risk factors, etc.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
26. Clarified misconceptions of HIV and corrected false information. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
27. Assessed barriers to risk reduction and explored methods to reduce or remove those barriers.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
28. Developed risk reduction steps that were participant-driven, appropriate for participant's situation, explicit, and achievable.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
29. Targeted prevention messages to specific risks identified during the survey and risk assessment.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
30. Returned test result in a manner that preserved participant's privacy. <input type="checkbox"/> N/A	1 No	5 Yes			
31. Ensured participant fully understood the HIV test result. <input type="checkbox"/> N/A	1 No	5 Yes			
32. Discussed disclosure of HIV status to partner(s) and learning partner(s) HIV status.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
33. Provided and explained referral to medical care and case management. <input type="checkbox"/> N/A	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
34. Provided information materials for prevention, testing resources, medical services, and other support services, and provided referrals to these services as appropriate.	1 No	5 Yes			

35. Allowed participant to ask questions and raise concerns, and answered them appropriately.	1 No		5 Yes		
36. Spoke at the participant's level of understanding.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well

Criterion #	Skill Description, Recommendations, Accolades, and Additional Comments

**Evaluator: Please ensure that the following steps are completed with the HIV test counselor.**

- Reviewed evaluation form with the HIV test counselor.
- Provided time for HIV test counselor to ask questions.
- Provided the HIV test counselor with recommendations for improvement.
- If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.

## Appendix I: All Methods - Interviewer Evaluation Form

### General Instructions

- To be conducted by the principal investigator, project coordinator, or, if necessary, field supervisor.
- It is recommended that the evaluator have a portable computer to follow along during the interview.
- **Permission must be obtained from the potential participant before an evaluator joins an interview.**
- The evaluator should only interrupt the interview for major issues, be discreet when doing so, and direct questions to the interviewer.
- Shaded areas are NHBS-YMSM performance recommendations.

<b>Interviewer:</b>	<b>Rating instructions:</b> Circle the number that corresponds with your evaluation for each criterion. For criteria that do not apply, check the "N/A" box. <input type="checkbox"/> <b>Pre-implementation Evaluation</b> <input type="checkbox"/> <b>Ongoing Evaluation</b>				
<b>Evaluation Date:</b>					
<b>Evaluator:</b>					
<b>Time to Complete Survey</b>	<b>Time</b>				
1. Eligibility screener	<b>Start:</b> _____	<b>End:</b> _____	<b>Length:</b> _____		
2. Assent/Consent process	<b>Start:</b> _____	<b>End:</b> _____	<b>Length:</b> _____		
3. Core questionnaire	<b>Start:</b> _____	<b>End:</b> _____	<b>Length:</b> _____		
4. Local questionnaire <span style="float: right;"><input type="checkbox"/> N/A</span>	<b>Start:</b> _____	<b>End:</b> _____	<b>Length:</b> _____		
<b>Set-up</b>	<b>Rating</b>				
5. Checked date and time on portable computer before starting.	1 No				5 Yes
6. All materials needed were prepared & organized before starting (flashcards, assent/consent forms, prevention materials, referral information, pens, etc.).	1 No				5 Yes
7. Was knowledgeable of safety procedures.	1 No				5 Yes
<b>Assent/Consent Process</b>					
8. No personal identifiers (e.g., name, address) were recorded.	1 Recorded				5 Not recorded
9. <u>All</u> aspects of informed assent/consent were followed per local IRB requirements (i.e., read as written if required; covered all relevant points if summarized).	1 No				5 Yes
10. Provided the participant a copy of assent/consent form to follow along.	1 No				5 Yes
11. Offered the participant a copy of the assent/consent form to keep.	1 No				5 Yes
12. Provided an opportunity for questions about the project and assent/consent process.	1 No				5 Yes
13. Ensured participant understood that participant names are never linked to interviews or test results).	1 Not at all	2 Poorly	3 Okay	4 Well	Ver
14. Obtained a <u>separate</u> assent for the interview.	1 No				5 Yes
15. Obtained a <u>separate</u> consent for HIV testing.	1 No				5 Yes

16. Obtained a <u>separate</u> consent for specimen storage.	1 No		5 Yes		
17. Pace of reading the consent was...	1 Too slow	1 Too fast		5 Just right	
<b>Survey Administration</b>					
18. Oriented the participant by reading introductory statement for core survey.	1 No		5 Yes		
19. Read questions, definitions, & transition statements as written.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
20. Followed survey instructions to read or not read response options.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always

21. Reread and clarified instructions, questions, and responses, when needed. <input type="checkbox"/> N/A	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
22. Recognized inconsistent responses, clarified with participant, and corrected data in the portable computer or on the Participant Tracking Form. <input type="checkbox"/> N/A	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
23. Probed incomplete, unclear, and, as appropriate, "don't know" responses. <input type="checkbox"/> N/A	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
24. Used <u>neutral</u> probes (i.e., probed without influencing response).	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
25. Ensured participant was never able to view the portable computer screen.	1 No		5 Yes		
26. The amount of time given for responses was...	1 Too short	1 Too long		5 Just right	
27. Pace of reading the screener was...	1 Too slow	1 Too fast		5 Just right	
28. Pace of reading the questionnaire was...	1 Too slow	1 Too fast		5 Just right	
<b>Flashcards</b>					
29. Used flashcards when instructed.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
30. Oriented the participant to the flashcard response options (i.e., pointed to responses as being read).	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
31. Read the flashcards as written.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
<b>Establishing and Maintaining Rapport</b>					
32. Established and maintained a good yet neutral rapport with participant (i.e., demonstrated interest, empathy, appropriate tone, and, if needed, refocused participant).	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
33. Maintained eye contact with participant throughout interview.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
34. Provided neutral feedback throughout the interview.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
35. Remained engaged with participant and his responses throughout the survey.	1 Not at all	2 Poorly	3 Okay	4 Well	5 Very well
36. Demonstrated a professional demeanor.	1 Never	2 Rarely	3 Sometimes	4 Usually	5 Always
<b>Recruiter Training (RDS only) <input type="checkbox"/> N/A (To be filled in if interviewer does the recruiter training)</b>					
37. Ensured participant was eligible to receive recruitment coupons.	1 No			5 Yes	
38. Successfully trained recruiter: <i>Instructions were given regarding whom to recruit.</i>					
f. Male friends, relatives and other young men you hang out with whom you know identify as gay or bisexual, or are attracted to or have sex with other men	1 No			5 Yes	
g. Males who are between 13 and 17 years old.	1 No			5 Yes	
h. Males who live in the project area.	1 No			5 Yes	
i. Males who have <u>not</u> already participated in the study.	1 No			5 Yes	
j. Do <u>not</u> give coupons to strangers.	1 No			5 Yes	

39. Successfully trained recruiter: <i>Instructions were given on what to say to person receiving the coupon.</i>			
d. Call for an appointment or visit the field site before the expiration date.	1 No	5 Yes	
e. The process will take about an hour.	1 No	5 Yes	
f. Coupons can't be replaced if lost or stolen.	1 No	5 Yes	
40. Successfully trained recruiter: <i>Rewards.</i>			
h. Rewards will be paid for each person recruited who is selected to participate and completes the interview.	1 No	5 Yes	
i. Rewards will not be paid for someone who is not selected to participate.	1 No	5 Yes	
j. Rewards will not be paid for recruiting someone who has already participated.	1 No	5 Yes	
k. Rewards will not be paid for someone who does not complete the interview.	1 No	5 Yes	
Criterion #	Skill Description, Recommendations, Accolades, and Additional Comments		
<b>Evaluator: Please ensure that the following steps are completed with the interviewer.</b>			
<input type="checkbox"/> Asked the interviewer how any unclear responses were entered into the portable computer.			
<input type="checkbox"/> Reviewed how the interviewer coded the question regarding the validity of answers.			
<input type="checkbox"/> Reviewed evaluation form with the interviewer.			
<input type="checkbox"/> Provided time for interviewer to ask questions.			
<input type="checkbox"/> Provided the interviewer with recommendations for improvement.			
<input type="checkbox"/> If applicable, briefly described how each skill was below standard and provided recommendations for meeting the standard.			

## Appendix J: RDS and FBS Only - Field Site Checklist

### 1. General Supplies

#### *Equipment:*

- Portable computers (1 for each interviewer and a backup)
- Laptop computer for the electronic Appointment Log if applicable and for the check-in/coupon manager Program (CMP-RDS only).
- AC adaptors for portable computers
- Communications equipment (e.g., 2-way radios or cell phones)
- Other office equipment (e.g., telephone, printer): \_\_\_\_\_

#### *Blank forms or logs:*

- Facebook Survey ID and Contact Log (FBS only - Chapter 8.5, Table 8.1)
- Participants Tracking forms (Appendix R)
- Assent/consent forms for each interviewer and the expected number of participants, including highlighted version for interviewers if applicable.
- Appointment book or log (if applicable)
- HIV Testing Log (Appendix GG)
- Rapid Testing Quality Control Log (Appendix CC)
- Rapid Testing Temperature Log (Appendix DD) and Local Specimen Transport/Shipping Log (Appendix BB)
- CDC DBS Specimen Transport/Shipping Log (Appendix BB)
- Lab slips
- Appointment for Results Cards (if applicable), (Appendix FF).
- Appointment Reminder Call Forms (if applicable) (Appendix JJ)
- Field Supervisor- Project Management Evaluation Form (Appendix G)
- Field Supervisor- HIV Testing Operations Evaluation Form (Appendix B)
- Interviewer Evaluation Form (Appendix I)
- HIV Counseling and Testing Evaluation Form (Appendix H)
- Coupon Manager/Check-in Manager Evaluation form (Appendix D)

***RDS only***

- CMP Log (Appendix N)
- Seed Referral Cards
- Coupons
- Information Cards
- Recruiter training scripts or talking points (Appendix M)
- Other forms or logs: \_\_\_\_\_

***Miscellaneous items:***

- Flashcards for each interviewer (Appendix Y)
- Interview and test incentives to cover the expected number of participants
- Incentive log, receipt book, or other forms of incentive tracking
- Signed Memorandums of Understanding (if applicable)
- Marketing materials
- Recruiter rewards (RDS only)
- Envelopes or file folders to store used, voided, and expired coupons (RDS only)
- Other items: \_\_\_\_\_

***Prevention and referral materials:***

- Informational and educational pamphlets
- List of referral agencies and contact persons
- HIV risk reduction supplies (e.g., condoms, lubricant)
- Other materials: \_\_\_\_\_

***Guidance documents:***

- NHBS-YMSM Protocol*
- NHBS-YMSM Preliminary Research Manual*
- NHBS-YMSM Operations Manual*
- NHBS YMSM Interviewer Guide*
- Other reference materials: \_\_\_\_\_

## 2. HIV Testing Supplies

### *Rapid testing supplies (if applicable):*

- Tests
- Lancets
- Fingertick blood collection devices (i.e., pipettes or loops)
- Test reagents (i.e., developer solution, wash solution, and running buffer)
- Package inserts for the specific rapid test being used
- Other rapid testing supplies: \_\_\_\_\_

### *Standard or laboratory testing supplies:*

- Whole blood specimen collection tubes (if applicable)
- Phlebotomy equipment (e.g., butterfly needles, tube stopper, tourniquet)
- DBS collection cards (Pre-cut if applicable)
- DBS collection devices (i.e., blade lancets if from fingertick or transfer pipettes if from blood tube)
- Oral fluid collection devices (if applicable)
- DBS Stabilizer solution (if applicable)
- Other laboratory testing supplies: \_\_\_\_\_

### *Miscellaneous testing supplies:*

- Alcohol swabs
- Dry sterile gauze or cotton balls
- Band-aids
- Biohazard "sharps" container for lancets and needles
- Biohazard bags for non-sharp blood waste (e.g., gloves, chucks, band-aids)
- Personal protective equipment (i.e., latex gloves, lab coat [optional])
- Absorbent paper (e.g., chucks)
- Disinfectant cleaner (e.g., wipes, diluted Lysol, 10% bleach solution)
- Other testing supplies: \_\_\_\_\_

### 3. Daily Closeout Activities

#### *Field Supervisor:*

- Hold post-event debriefing
- Discuss any problems with HIV specimen collection or test kits.

#### *From check-in/coupon manager –*

- Collect coupons returned (RDS only)
- Collect and review the CMP Log (RDS only)
- Collect and review the Facebook Survey ID Log (FBS only)

#### *From interviewers–*

- Collect and review Participant Tracking Forms (including data edits)
- Discuss possible errors in survey data entry.
- Cross-check Survey ID Log (FBS only) with Participant Tracking Forms and note any errors with Survey IDs.
- Determine if any unusual events occurred (e.g. participant ended interview early, participant consented to HIV test then changed mind)
- Review code numbers, data edits, and other information on Participant Tracking Forms
- If applicable, review Interviewer Evaluation Form(s) or note if scheduled evaluation(s) did not occur and need to be re-scheduled.
- Collect portable computers
- Determine if any problems occurred with the portable computers

#### *From HIV test counselors–*

- For rapid testing, discuss if there were any newly diagnosed HIV+ persons and whether results were returned and if participant was actively referred to care and follow-up HIV testing.
- Collect and review Specimen Transport/Shipping Log
- Collect HIV Testing Log.
- Review HIV Testing Log for completeness.
- Cross-check that there is a specimen for each entry on the HIV Testing Log.
- Cross-check that there is a lab slip for each standard/laboratory or confirmatory test specimen.

- Check for Lab ID accuracy on HIV Testing Log and on lab slip.
- Check HIV Testing Log to ensure that appointments have been scheduled for HIV test results.
- If applicable, collect Appointment Reminder Call Form and check for completeness.
- If applicable, review HIV Counseling and Testing Evaluation Form(s) or note if scheduled evaluation(s) did not occur and need to be re-scheduled.

*Data Manager:*

- Upload data from portable computers
- Back-up CMP data (RDS only)
- Other daily data management activities: \_\_\_\_\_

#### 4. Closeout Tasks to Complete at Project Office

*Test specimens:*

- While waiting to ship HIV test specimens, store them at the appropriate temperature indicated by the laboratory.
- Place DBS cards in a location away from direct sunlight to finish drying.
- Package DBS in ziplock bags when drying is completed (not to exceed 24 hours)
- If not completed in the field, complete Specimen Transport/Shipping Log.
- Ship standard/laboratory HIV test specimens to local laboratory.
- Ship DBS cards to CDC on a weekly basis.

*Data:*

- Upload NHBS-YMSM core interview files from portable computers into respective QDS™ Warehouse.
- Upload local survey files from portable computers into respective QDS™ Warehouse.
- Charge and lock up portable computers.
- Lock up completed forms and logs.

*DCC Data Portal:*

- Enter data edits from Participant Tracking Forms into **online** Data Error Log.

Enter data from **hardcopy** HIV Testing Log into **online** HIV Test Results Log.

## Appendix K: VBS Only - Recruitment Event Checklist

### 1. Tasks to Complete 1-2 Weeks Prior to Recruitment Event

- Record the recruitment event and calendar information in **Section 1** of *Recruitment Event Information & Outcomes Form* (alternatively, this information could be output from the VDTS Program and attached).
- Contact the venue owner, manager or other designated contact person to notify them that the team will be in or near the venue conducting a recruitment event on the specific day and time.
- Obtain a permit to block off a van parking space near the venue (if applicable).
- Schedule project staff and record in **Section 2** of *Recruitment Event Information & Outcomes Form*.
- If applicable, schedule evaluations for project staff and record in **Section 2** of *Recruitment Event Information & Outcomes Form*.
- Record Interviewer IDs in **Section 2** of *Recruitment Event Information & Outcomes Form*.

### 2. Tasks to Complete Right Before Recruitment Event

- Check that batteries for the portable computers are fully charged and working properly.
- Check that data from the previous recruitment event have been uploaded from the portable computers to the QDS™ Warehouse.
- Check that correct date and time are displayed on portable computers.
- If applicable, make sure the van has a full tank of gas, the septic tank has been emptied, the propane or natural gas supply checked, and the water supply replenished.
- Have emergency contact information for project staff readily accessible.
- Determine the next sequential Survey ID and Event Number and record them in **Section 3** of *Recruitment Event Information & Outcomes Form*.
- Gather recruitment event supplies.

### General Supplies

#### **Equipment:**

- Portable computers (1 for each interviewer and backups)
- AC adaptors for portable computers
- Communications equipment (e.g., 2-way radios or cell phones)
- Tally counter (i.e., “clicker”)

Other office equipment (e.g., telephone, printer): \_\_\_\_\_

**Blank forms or logs:**

- Survey ID Log (Chapter 11.3, Table 11.1)
- Participant Tracking Forms (Appendix R)
- Assent/consent forms for each interviewer and the expected number of participants, including highlighted version for interviewers if applicable.  
Appointment Log (if applicable)
- HIV Testing Log (Appendix GG)
- Rapid Testing Quality Control Log (if applicable) (Appendix CC)
- Rapid Testing Temperature Log (if applicable) (Appendix DD)
- Local Specimen Transport/Shipping Log (Appendix BB)
- CDC DBS Specimen Transport/Shipping Log (Appendix BB)
- Lab slips
- Appointment for Results Cards (if applicable) (Appendix FF)
- Appointment Reminder Call Form (if applicable) (Appendix JJ)
- Field Supervisor- Project Management Evaluation Form (Appendix E)
- Field Supervisor- HIV Testing Operations Evaluation Form (Appendix B)
- Interviewer Evaluation Form (Appendix I)
- HIV Counseling and Testing Evaluation Form (Appendix H)
- Recruiter Evaluation Form (Appendix F)
- Other forms or logs: \_\_\_\_\_
- Intercept Forms (Appendices V and W)
- Post-event appointment cards

**Miscellaneous items:**

- Flashcards for each interviewer (Appendix Y).
- Interview and test incentives to cover the expected number of participants
- Incentive log, receipt book, or other forms of incentive tracking
- The current month's recruitment calendar
- Signed Memorandums of Understanding (if applicable)
- Marketing materials
- Other items: \_\_\_\_\_

**Prevention and referral materials:**

- Informational and educational pamphlets
- List of referral agencies and contact persons

- HIV risk reduction supplies (e.g., condoms, lubricant)
- Other materials: \_\_\_\_\_

**Guidance documents:**

- NHBS-YMSM Protocol
- NHBS-YMSM Preliminary Research Manual
- NHBS-YMSM Operations Manual
- NHBS-YMSM Interviewer Guide
- Other documents: \_\_\_\_\_

**HIV Testing Supplies**

**Rapid testing supplies (if applicable):**

- Tests
- Lancets
- Fingerstick blood collection devices (i.e., pipettes or loops)
- Test reagents (i.e., developer solution, wash solution, and running buffer)
- Package inserts for the specific rapid test being used
- Other rapid testing supplies: \_\_\_\_\_

**Standard or laboratory testing supplies:**

- Whole blood specimen collection tubes (if applicable)
- Phlebotomy equipment (e.g., butterfly needles, tube stopper, tourniquet)
- DBS collection cards (Pre-cut if applicable)
- DBS collection devices (i.e., blade lancets if from fingerstick or transfer pipettes if from blood tube)
- Oral fluid collection devices (if applicable)
- DBS Stabilizer solution (if applicable)
- Other laboratory testing supplies: \_\_\_\_\_

**Miscellaneous testing supplies:**

- Alcohol swabs
- Dry sterile gauze or cotton balls
- Band-aids
- Biohazard “sharps” container for lancets and needles
- Biohazard bags for non-sharp blood waste (e.g., gloves, chucks, band-aids)
- Personal protective equipment (i.e., latex gloves, lab coat [optional])
- Absorbent paper (e.g., chucks)
- Disinfectant cleaner (e.g., wipes, diluted Lysol, 10% bleach solution)

- Other testing supplies: \_\_\_\_\_

### 3. Tasks for Setting Up at Recruitment Event

- Check-in with venue owner, manager, or designated contact person upon arriving at the venue.
- Identify and set up spaces for interviewing and HIV testing.
- Hold pre-event meeting with project staff to discuss operational plans.

***For venues with an entrance:***

- Identify the entrance where the entry count should take place
- Decide what strategy to use to consecutively approach young men for recruitment (e.g., use of a recruitment area or alternative recruitment strategy).
- Obtain Pre-Event Count immediately before recruitment event is ready to begin and record the Pre-Event Count (from the tally counter or “clicker”) in **Section 5** of *Recruitment Event Information & Outcomes Form*.

***For venues without an entrance:***

- Identify area where counting and recruitment will take place.

### 4. Closeout Tasks to Complete at Recruitment Event

- Hold post-event debriefing.
  - Discuss how recruitment event went in general.
  - Discuss any venue-related issues that affected project operations (e.g., problems with management, change in attendee population).
  - Discuss any barriers related to recruitment or participation, as well as strategies for overcoming these barriers.
  - Discuss any unusual events (e.g., participant ended survey early, participant who initially consented to HIV test changed his mind).
  - Discuss problems with portable computers.
  - Discuss possible errors in survey data entry.
  - For rapid testing, discuss if there were any newly diagnosed HIV+ persons and whether results were returned and if participant was actively referred to care and follow-up HIV testing.
  - Discuss any problems with HIV specimen collection or test kits.

- Record recruitment event notes in **Section 4** of *Recruitment Event Information & Outcomes Form*.
- Collect and review forms and logs.

**With Recruiters:**

- Collect Intercept Forms.
- Review Intercept Forms for accuracy.
- Tabulate column sub-totals for the number of venue attendees approached, the number of post-event appointments (PEAs) scheduled, and the number of venue attendees who agreed to screening. Record the sub-totals at the bottom of each Intercept Form.
- If applicable, cross-check Intercept Forms and Appointment Log to ensure that all PEAs have been scheduled.
- If applicable, review Recruiter Evaluation Form(s) or note if scheduled evaluation(s) did not occur and need to be re-scheduled.

**With Interviewers:**

- Collect Participant Tracking Forms.
- Review code numbers, data edits, and other information on Participant Tracking Forms.
- Cross-check Survey ID Log with Participant Tracking Forms and note any errors with Survey IDs.
- If applicable, review Interviewer Evaluation Form(s) or note if scheduled evaluation(s) did not occur and need to be re-scheduled.

**With HIV Test Counselors:**

- Collect HIV Testing Log.
- Review HIV Testing Log for completeness.
- Cross-check that there is a specimen for each entry on the HIV Testing Log.
- Cross-check that there is a lab slip for each standard/laboratory or confirmatory test specimen.
- Check for Lab ID accuracy on HIV Testing Log and on lab slip.
- Check HIV Testing Log to ensure that appointments have been scheduled for HIV test results.
- If applicable, collect Appointment Reminder Call Form and check for completeness.
- If applicable, review HIV Counseling and Testing Evaluation Form(s) or note if scheduled evaluation(s) did not occur and need to be re-scheduled.

## **5. Closeout Tasks to Complete at Project Office**

**Test specimens:**

- While waiting to ship HIV test specimens, store them at the appropriate temperature indicated by the laboratory.
- Place DBS cards in a location away from direct sunlight to finish drying.
- Package DBS in ziplock bags when drying is completed (not to exceed 24 hours)
- If not completed in the field, complete Specimen Transport/Shipping Log.
- Ship standard/laboratory HIV test specimens to local laboratory.
- Ship DBS cards to CDC on a weekly basis.

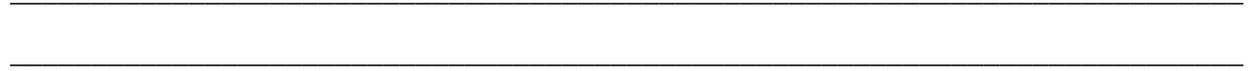
**Data:**

- Upload NHBS-YMSM core interview files from portable computers into respective QDS™ Warehouse.
- Upload local survey files from portable computers into respective QDS™ Warehouse.
- Charge and lock up portable computers.
- Lock up completed forms and logs.

**DCC Data Portal:**

- Enter data edits from Participant Tracking Forms into **online** Data Error Log.
- Enter data from **hardcopy** HIV Testing Log into **online** HIV Test Results Log.
- Indicate the venue(s) where the recruitment event(s) were conducted (**Section 5** of *Recruitment Event Information & Outcomes Form*) in the Outcomes Section of the VDTS Program.
- Enter the Pre-Event Count and the Entry Count (**Section 5** of *Recruitment Event Information & Outcomes Form*) into the Outcomes Section of the VDTS Program.
- Enter the column sub-totals from each Intercept Form into the Outcomes Section of the VDTS Program.
- If applicable, record reason(s) why alternate venue(s) were used (**Section 5** of *Recruitment Event Information & Outcomes Form*) in the Outcomes Section of the VDTS Program.





## **Appendix M: RDS Only - Recruiter Training Script**

A model Recruiter Training Script is outlined below.

### ***Whom to Recruit***

We're going to give you *[insert #]* coupons to give to other young guys between 13 and 17 years of age whom you know identify as gay or bisexual, or are attracted to or have sex with other guys so that they can be in the study too. You should only give the coupons to people who live in *[insert project area]* and you have seen in the past 30 days. Since people can be in the study only once, don't give the coupons to anyone who has already participated. Most importantly, you should NOT give the coupons to strangers. The young guys you recruit will have to bring in their coupons and answer questions to determine if they are selected for the study.

### ***Coupons***

To be in the study, everyone has to have a coupon. Be sure to tell the young guys you give a coupon to that they need to have the coupon with them when they come in or when they call to make an appointment. The first thing we'll do is check to see if their coupon is valid.

Your coupons cannot be replaced if they are lost or stolen or if the person you recruited is not selected for the study. A coupon cannot be used more than once. Each coupon has a date when it expires, and after that date, it can't be used anymore. So, you should tell people you give the coupon to that they need to come in or call to make an appointment before the expiration date written on the coupon.

### ***Process***

Be sure to tell the young guys you recruit to come in or make an appointment at a time when they are able to complete the whole survey process, which takes about 1 hour. People you give coupons to who complete the interview will be given \$25. They will get an additional \$25 for taking an HIV test. We won't do an interview with anyone who is under the influence of drugs or alcohol; people who are not capable of completing the interview will not be allowed to participate in the study.

### ***Reward***

You will get \$10 for each person you recruit who is selected for the study and who completes the interview. But, it's not guaranteed that you will get the \$10 just for recruiting someone:

- You will not get a reward for someone who is not selected for the study.
- You will not get a reward for recruiting someone who has already participated in the study.
- You will not get a reward for someone who does not complete an interview.

Not everyone in this study gets the opportunity to recruit others, and not everyone gets the same number of coupons. Who gets to recruit other people for the study and how many coupons they get is determined by the computer. When you give the coupon to someone else and they become part of the

study, they might get a different number of coupons than you did. The study is time-limited, so eventually there will be no more coupons given out and no more interviews conducted.

### ***Recruiter Information***

In order for us to be sure that we give the reward for recruiting others to the right person, we're going to ask you a few questions and enter the information into the computer to create an identification number that is unique to you. When you come in to get your reward, we'll ask you those same questions again to create the number and check it in the computer. The coupons we give you are linked to you so we'll know which ones to you can get a reward for.

You can call our office to see if the people you gave coupons to were selected for the study and completed an interview, so that you can come in to get your reward. We can't tell you who came in or not, but we can tell you whether you can get a reward. We will only give the reward to you, so do not send someone else in to get it.

### ***Wrap-up***

Do you have any questions?

Thanks for helping us, and remember, give the coupons to young guys who are between 13 and 17 years old whom you know identify as gay or bisexual or are attracted to or have sex with other guys.

## **Recruiter Training Talking Points**

### ***Who to Recruit***

- We're going to give you **[insert #]** coupons to give male friends, relatives, or people you hang out with so that they can be in the study too.
- Give the coupons to male friends, relatives or people you hang out with who are between 13 and 17 and who are attracted to other guys.
- Do NOT give the coupons to **strangers**.
- Give the coupons to people who live in **[insert project area]**.
- Give the coupons to people who have not already participated in the study.

### ***Coupons***

- Everyone has to have a coupon to be in the study.
- Tell people you recruit to have the coupon with them when they come in or when they call to make an appointment.
- Your coupons cannot be replaced if they are lost or the person you recruited is not selected for the study.

### *Process*

- The whole process for the survey takes about 1 hour.
- Everyone who completes an interview will get \$25. Everyone who also does an HIV test will get an additional \$25.
- People who aren't capable of completing the interview won't be allowed to participate in the study. This includes people who are too drunk or high to complete the interview.

### *Reward*

- You will get paid \$10 for each person you recruit who is selected for the study and who completes the interview; the \$10 is not guaranteed just because you give someone a coupon.
- You will not be paid for someone who is not selected for the study.
- You will not be paid for someone who has already participated.
- You will not be paid for someone who does not complete an interview.
- The computer determines who gets to recruit other people for the study and how many coupons they will get.
- Coupons will expire and the study will end at some point.

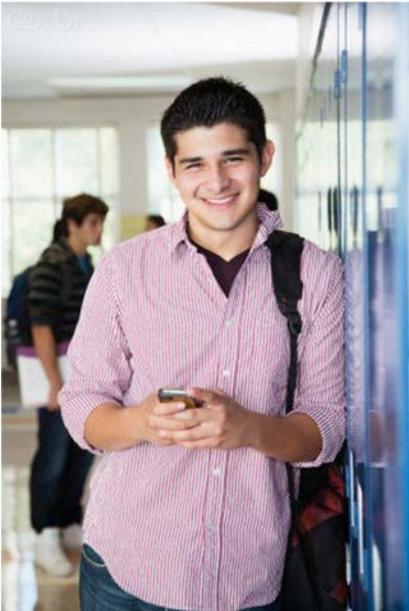
### *Recruiter Information*

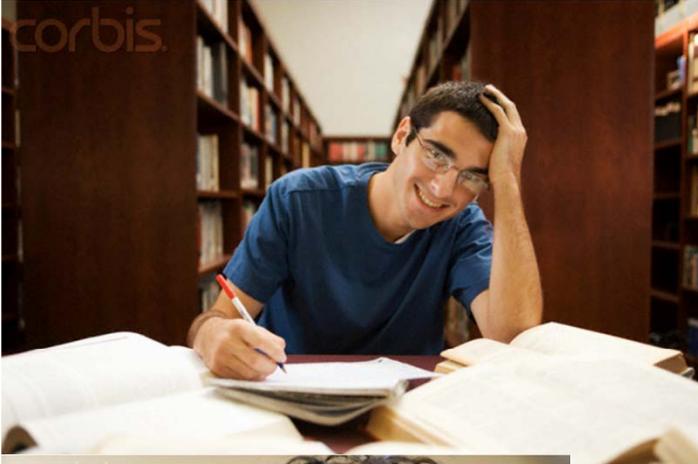
- We ask questions so that we can identify you again when you come to get your rewards.
- We link the numbers on the coupons we give you to the coupon you brought in, so we know who to pay.
- Call the office to find out if you are owed a reward.
- We can't tell you who came in with a coupon from you.
- We will only pay you. Don't send someone else in to get paid.

Do you have any questions? Thanks for helping us, and remember, give the coupons to guys you know who are between the ages of 13 and 17 and who are attracted to other guys.



Appendix O: Facebook Only- Banner Advertisement Images





corbis



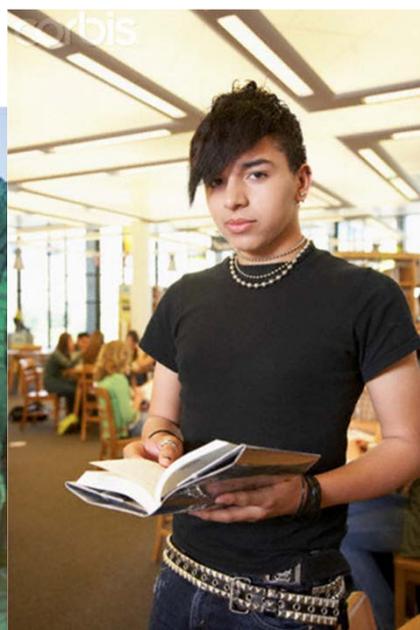
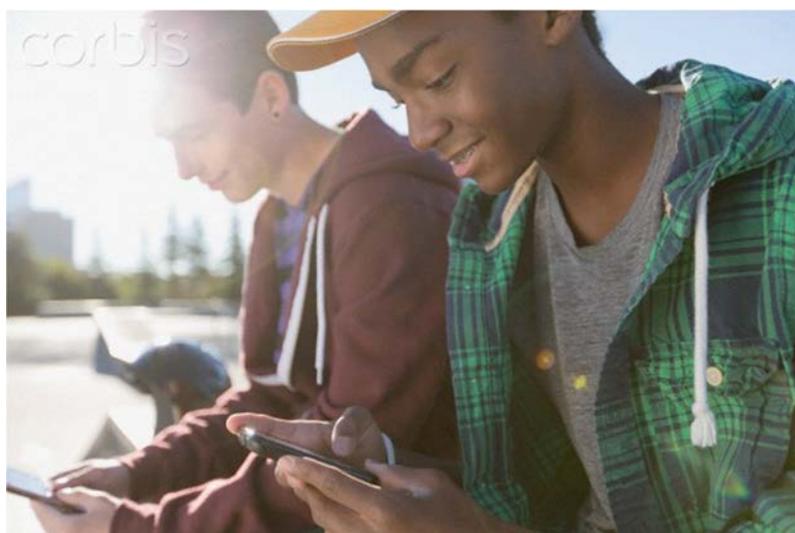
corbis



corbis





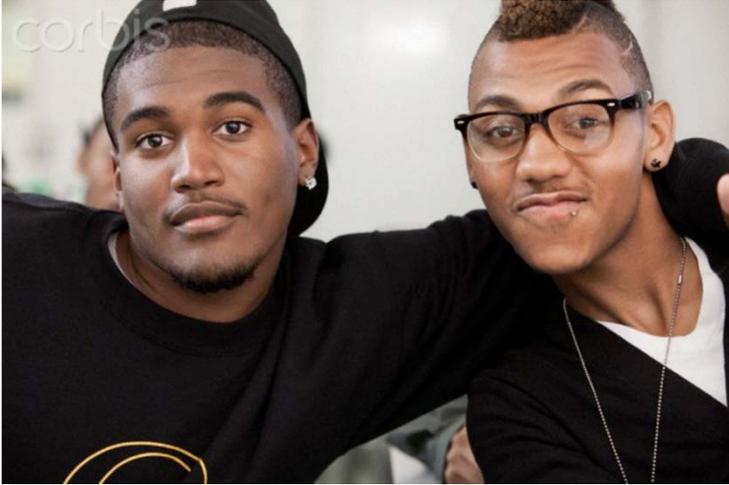


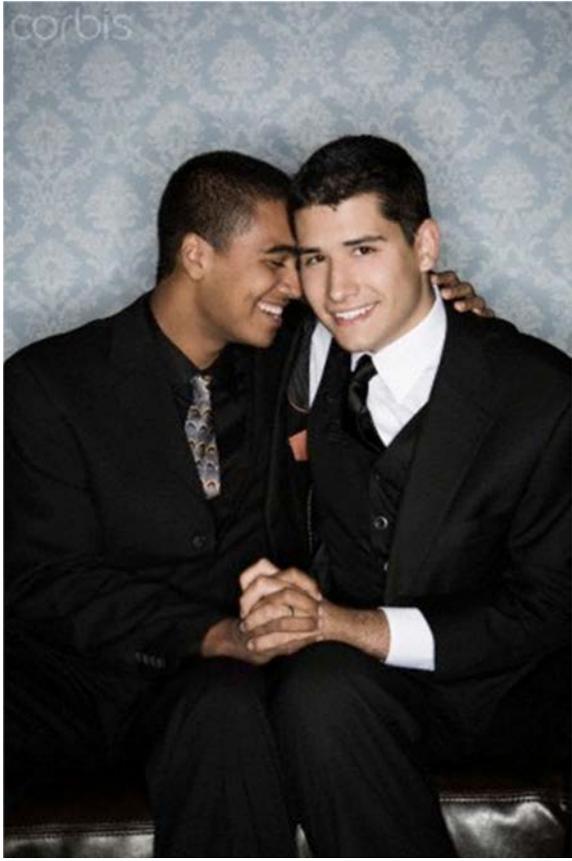




















www.shutterstock.com · 44309245



www.shutterstock.com · 177097052



www.shutterstock.com · 39741856



www.shutterstock.com · 39754756



www.shutterstock.com · 145811852



www.shutterstock.com · 654571



www.shutterstock.com · 98201378











**Appendix P: All Methods - Cost Evaluation Form**

Each month, fill in the form with the costs that have been incurred that month. For some items, you might purchase them infrequently (HIV testing equipment for example) so that section will be empty for most months except for the month(s) where you make the purchase. With regards to staff time, we ask that sites fill in **one table for each method** and attempt to estimate what portion of staff time is spent on either method. This section should be filled in monthly.

Period Covered: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ (Form should be completed monthly)

Preliminary Research Activities

Implementation Activities

Post-Implementation Activities

Today's Date \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_

**A1. PERSONNEL** Recruitment Method:  RDS  VBS  FB

	Hours
Principle Investigator	
Project Coordinator	
Field Supervisor	
Interviewer	
Interviewer	
Interviewer	
Coupon Manager (RDS only)	
Data Manager	
Phlebotomist	
Other: _____	
Other: _____	
<b>Subtotal:</b>	

**A2. PERSONNEL** Recruitment Method:  RDS  VBS  FB

	Hours
Principle Investigator	
Project Coordinator	
Field Supervisor	
Interviewer	
Interviewer	
Interviewer	
Coupon Manager (RDS only)	
Data Manager	
Phlebotomist	
Other: _____	
Other: _____	
<b>Subtotal:</b>	

**B. OFFICE SUPPLIES AND MATERIAL<sup>a</sup>**

	Cost of purchases made this period (if any) (\$)
General office supplies (e.g., paper, copier supplies, printer supplies, other office supplies such as staples, pens, pencils)	
Prevention supplies (e.g., condoms, lubricant)	
Other: _____	
Other: _____	
<b>Subtotal:</b>	

<sup>a</sup> Only document when office supplies and materials are actually purchased (rather than used)

**C. TRAVEL**

	Cost of travel done this period (if any) (\$)
In-State Travel	
Mileage	
Other: _____	
Other: _____	
Out-Of-State Travel	
Airfare	
Lodging	
Per diem	
Transportation	
Other: _____	
Other: _____	

<b>Subtotal:</b>	

**D. DURABLE MATERIAL/EQUIPMENT COST**

	<b>Cost of purchases made this period (if any) (\$)</b>
Computer/Tablet	
Software	
SAS	
QDS	
Furniture	
Cell phone	
Other: _____	
Other: _____	
<b>Subtotal:</b>	

**E. FACILITY SPACE AND UTILITIES**

	<b>Cost of for this period (\$)</b>
Office rental	
Office utilities (e.g, electric, gas, water)	
Telephone line	
Cell phone plan	
Internet	
Other: _____	
Other: _____	
<b>Subtotal:</b>	

**F. HIV TESTING**

	<b>Quantity</b>	<b>Unit Cost (\$)</b>	<b>Total cost of purchases made this period (if any) (\$)</b>
Rapid tests			
Laboratory tests			
Biohazard disposal			

HIV testing materials (e.g., test tubes, safety/biohazard equipment, gloves, wipes)			
Other: _____			
Other: _____			
<b>Subtotal:</b>			

**G. INCENTIVES**

	Quantity	Amount (\$)
Incentives		
Focus groups		
Study interview		
HIV test		
Recruitment (RDS only)		
Public transportation		
<b>Subtotal:</b>		

**G. OTHER**

	Costs for this period (if any) (\$)
Vehicle expenses	
Liability insurance	
Parking	
Gasoline and oil	
Registration	
Maintenance/Service/Emissions	
Computer support	
Training	
Other: _____	
Other: _____	

<b>Subtotal:</b>	
------------------	--

## **Appendix Q: Facebook Only – Landing Page Language**

### **EXAMPLE LANDING PAGE TEXT**

#### **What is [Local project brand name for NHBS-YMSM by site]?**

(Local project name) is a health study run by the [Local Health Department or Subcontracting Entity]. The purpose of the study is to collect information about the health behaviors of young men to help plan better health promotion programs for young men in the future.

#### **What topics are covered in [name of project]?**

Some of the question topics covered in the [Local project name] survey are about HIV testing, health behaviors, family and community ties, and health care services.

#### **How much time does it take to complete the [name of project] survey?**

It will take you between 30 and 45 minutes to finish the [name of project] survey. You will also be offered a free, anonymous HIV test as a part of the survey. If you decide you want to take the HIV test that will take an extra 20 minutes.

#### **What will happen as a part of this study?**

If you are selected and decide to take part in this study, one of our staff members will contact you to schedule a time for you to come to one of our field site locations in [Project city]. A trained interviewer will ask you the survey questions using a computer. Your name will not be stored along with your answers to the survey.

#### **What will I get for taking part in this study?**

You will get \$25 for the time you spend doing the survey. You will get an additional \$25 if you choose to take the HIV test.

#### **How will my privacy be kept?**

Your email address and other contact information will always be kept separately from your answers to the survey. Your answers to the survey questions will be kept in a locked computer file. Only staff members at [Local agency], who need this information to contact you about this study will see it. To keep your privacy, we will only contact you using information you have given us and in the way that you want to be contacted. We won't share your name, email or phone number with anyone else. We respect your privacy and we won't use your email or phone number except to contact you to let you know more about the study.

If you want to participate in [Name of Study] and would like to find out if you are eligible, please fill out the information below and one of our staff members will contact you to tell you more about the study

and will set up a time for you to come to one of our study sites. You can also contact us at [xxx@yyy.com](mailto:xxx@yyy.com) or 555-555-5555.

**First name/nickname:**

**Email address:**

**Phone number:**

**Is it okay for us to leave a message at this number?**

- Yes
- No

**Can you receive text messages?**

- Yes
- No

**What is your preferred method of contact?**

- Email
- Phone
- Text Message

**Appendix R: All Methods - Participant Tracking Form**

Interviewer ID

Date

Survey ID  
(Will be Coupon  
Number for RDS)

Field Site ID(RDS and  
FBS only)

Event # (VBS only)

Venue Code (VBS  
only)

Start Time

Portable Computer #

CT # \_\_\_\_\_

*(Please see instructions for this field in Chapter 8 of the Operations Manual)*

**INTERVIEWER:**

**Notes:**

1. Passed the eligibility screener?	Y	N	If previously completed part of survey, indicate by which method:
2. Assented to the interview?	Y	N	
3. Consented to the HIV test?	Y	N	
4. Consented to blood storage?	Y	N	
5. Completed the interview?	Y	N	
6. Eligible to recruit? (RDS only)	Y	N	<input type="checkbox"/> N/A
<i>If yes, agreed to recruit?</i>	Y	N	
<i>If yes, number of coupons due:</i>	_____		
7. Received recruiter training? (RDS only)	Y	N	<input type="checkbox"/> N/A

**TEST COUNSELOR:**

**Notes:**

1. Obtained test specimen?	Y	N	
----------------------------	---	---	--

**DATA EDITS:**

Variable Name	Old Value	New Value

## Appendix S: VBS Only - Recruitment Event Information & Outcomes Form

A model Recruitment Event Information & Outcomes Form is shown below and on the following pages of this appendix.

### 1 – Recruitment Event and Calendar Information

Record information in the table below or attach a print-out from the VDTs Program:

<b>Scheduled Recruitment Event</b>	
Day (circle one): Sun Mon Tue Wed Thu Fri Sat	
Date: ___ / ___ / _____	
Start time: ___ : ___ AM PM End time: ___ : ___ AM PM	
<b>Primary Venue</b>	
Venue Name:	Venue Code:
Venue Address:	
Venue Contact (name and phone #):	
<b>Alternate 1</b>	
Venue Name:	Venue Code:
Venue Address:	
Venue Contact (name and phone #):	
<b>Alternate 2</b>	
Venue Name:	Venue Code:
Venue Address:	
Venue Contact (name and phone #):	

### 2 – Project Staff Information

	Evaluation Scheduled?	Portable Computer #	Interviewer ID
Field Supervisor:	<input type="checkbox"/>		

<b>Counter:</b>	<input type="checkbox"/>		
<b>Recruiter(s):</b>			
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<b>Interviewers:</b>			
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

### 3 – Recruitment Event Code Numbers

<b>Next sequential Survey ID:</b>
<b>Next sequential Event Number:</b>

### 4 – Post-event Debriefing Notes

## 5 – Recruitment Event Notes

Describe where counting, recruitment, interviewing, and HIV testing were conducted at the venue.
Describe any barriers to project operations at the venue. Describe any strategies to overcome these barriers.
Describe attendance at the venue (crowded, sparsely attended, etc.). Describe if and how project operations were adjusted based on attendance (e.g., recruitment area moved, interviews conducted outside because too crowded inside).
Were there any significant changes in the demographics of the population at the venue since it was last visited or assessed? If yes, explain:
Should the venue be removed from the sampling frame? If yes, explain:
For the venue where the recruitment event was conducted, were any new day-time periods suggested by venue attendees? If yes, when:
Were any new venues suggested by venue attendees? If yes, where and when:

## 6 – Recruitment Event Outcomes

Indicate whether recruitment events were conducted at the primary venue or alternate venues. For each event conducted, record the Event Number and count information.

<b>Primary Venue:</b>
<p>Was recruitment event conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes:</b></p> <p>Event Number _____</p> <p>Was the Pre-Event Count obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No (No entrance) <input type="checkbox"/> No (Other)</p> <p><b>If Yes:</b> Pre-Event Count _____</p> <p><b>If No (Other):</b> Explain why:</p> <p>Entry Count _____</p> <p>Were there additional entries where venue attendees were not counted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<b>Alternate 1:</b>
<p>Was recruitment event conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes:</b></p> <p>Event Number _____</p> <p>Was the Pre-Event Count obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No (No entrance) <input type="checkbox"/> No (Other)</p> <p><b>If Yes:</b> Pre-Event Count _____</p> <p><b>If No (Other):</b> Explain why:</p> <p>Entry Count _____</p> <p>Were there additional entries where venue attendees were not counted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Explain why the recruitment event was conducted at an alternate venue:</p>
<b>Alternate 2:</b>
<p>Was recruitment event conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes:</b></p> <p>Event Number _____</p> <p>Was the Pre-Event Count obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No (No entrance) <input type="checkbox"/> No (Other)</p> <p><b>If Yes:</b> Pre-Event Count _____</p> <p><b>If No (Other):</b> Explain why:</p> <p>Entry Count _____</p> <p>Were there additional entries where venue attendees were not counted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Explain why the recruitment event was conducted at an alternate venue:</p>

## Appendix T: Facebook Only – Phone Screener Talking Points and Questions

If study staff contact participant:

When participant answers the phone, say:

Hello, this is XXX from XXX Project. May I speak with [participant’s name]? Is now an okay time to talk? Thank you for your interest in the XXX Project. Based on what you filled out online, you may be selected to participate in our study; I’ll just need to ask you a few questions first.

Conduct eligibility screener (table below)

### ***If participant contacts project:***

When answering the phone number for the NHBS-YMSM project, please use the following script as a guide.

“Hello, thank you for calling [Name of local NHBS-YMSM project]. How can I help you?”

*If Caller indicates he heard about the study from Facebook:*

“You said that you heard about our project on Facebook. Is that correct? Would you like to know if you can participate in our study?”

*If caller says yes, conduct eligibility screener (table below)*

Questions	Eligible if...
How old are you?	13-17
Did you already complete at least part of the health survey that [Insert Project Name] is conducting? It could have been at XXX or XXX.	No
What county do you currently live in?	[insert counties]
Is this person able to complete the survey in English?	Yes

What was your sex at birth?	Male
Do you consider yourself to be male, female or transgender?	Male
Are you sexually attracted to other males?	The answer to at least one question has to be 'yes'
Do you identify as gay, bisexual, queer, or same gender loving?	
Have you ever had oral or anal sex with a male?	
Have you ever had any other type of sexual contact with a male?	

*NB: The answers should not be documented or linked to the participants name or contact details. If any notes are taken during the call, shred the notes after the call.*

**If caller is eligible:**

“I would like to schedule you for an appointment at one of our project sites. We have sites at [describe field sites available] locations. Which of our locations would be most convenient for you? [Consult Appointment Log and provide available times to caller]. Ok, I have you down for [time] on [date] at [field site location]. Please be on time. Would you be okay with us contacting you with a reminder before your appointment? [If participant says yes] What is the best way to contact you?” [Collect contact information]

Also cover the following points:

- Survey time commitment
- Incentives
- Make sure potential participants are aware that when they come to the field site, they must first answer some background questions to determine if they have been selected to participate in the study. They should also understand that if they are not selected for the study or do not complete the interview, they will not be paid an incentive.

**If caller is not eligible:**

“Unfortunately you have not been selected to participate in our project at this time. Thank you so much for your interest in [Name of local NHBS-YMSM project]. Have a great day.”

## Appendix U: VBS Only - Strategies for Overcoming Recruitment and Participation Barriers



Participants always have the right to decline participation in NHBS-YMSM. Efforts to encourage young men to participate must respect this right.

Young men who decline the recruiter’s invitation to be screened for assent/consent – after project staff has addressed participation barriers – may not return later to NHBS-YMSM staff and ask to be screened. Their initial refusal may not be overturned; in other words, “no” means “no” throughout the recruitment event.

Recruitment Barriers	Strategies for Overcoming
<p><b>1. Avoidance</b> Some young men may not initially respond to or acknowledge the recruiter when approached. Others may respond, but continue walking.</p>	<p>Within reason, walk a short distance with young men who do not initially stop. Terminate the intercept if they continue to walk and ignore you, or if they explicitly gesture or state that they do not wish to answer your questions.</p>
<p><b>2. Groups</b> Recruiters may frequently encounter groups of two or more young men who have been counted and could be approached for recruitment. Yet, group intercepts can be difficult to manage because one or more members of the group may negatively influence the others.</p>	<p>In most circumstances, the recruiter should systematically approach and intercept one member of the group. If more than one interviewer is available, the recruiter has the option of intercepting as many members of the group as there are interviewers available. In addition, if there is more than one recruiter, multiple recruiters can approach the group and divide its members into more manageable units. Field supervisors should monitor potential negative peer influences such as some group members trying to dissuade others from completing the intercept. When negative influences are identified, field supervisors should attempt to engage these group members to minimize their impact.</p>

Recruitment Barriers	Strategies for Overcoming
<p><b>3. Time</b> Some young men may try to deter the intercept by disclosing that they do not have time to stop or that they are in a hurry.</p> <p><b>Examples:</b>  <i>"I'm late."</i>  <i>"I'm in a hurry."</i>  <i>"I don't have time."</i>  <i>"My friends are waiting for me."</i>  <i>"I'm on my way &lt;somewhere&gt;."</i></p>	<p>Prospective participants are not aware of how little time is required to complete the intercept. They may also be unaware of the importance of NHBS-YMSM. Tell them that it takes very little time to complete the intercept and that they are helping an important cause.</p> <p><b>Examples:</b>  <i>"No problem, I'll walk with you if that is OK."</i>  <i>"This will only take a minute of your time and your help is important."</i>  <i>"This will be quick and it's for an important cause. This is part of a health survey that can help our community and other young men."</i></p>
<p><b>4. Ineligibility</b> Some people may try to deter the intercept by stating that they are ineligible for the survey.</p> <p><b>Examples:</b>  <i>"I'm too young/old."</i>  <i>"I'm not from around here."</i></p>	<p>Don't assume that the person understands NHBS-YMSM eligibility criteria. Again, stay positive and do your best to motivate the person to complete the intercept.</p> <p><b>Examples:</b>  <i>"No problem, your age or where you live doesn't matter for this question. It would be great if you could help us out; it's for an important cause."</i></p>

Recruitment Barriers	Strategies for Overcoming
<p><b>5. Previous Participation</b> Some young men may try to deter the intercept by stating that they have already participated in the survey.</p> <p><b>Examples:</b>  <i>"I've already done it."</i>  <i>"I've already been interviewed."</i>  <i>"You spoke to me last month."</i></p>	<p>Unless the recruiter is certain that the venue attendee has already participated in NHBS-YMSM, they should do their best to complete the intercept. Many young men may confuse other research projects with NHBS-YMSM. Thus, the recruiter should try to verify that the venue attendee has already participated in NHBS-YMSM. However, if a venue attendee tells the recruiter that he already participated in NHBS-YMSM (by either of the methods) and the recruiter is certain that he did, the recruiter can end the intercept and</p>

	<p>just complete the Intercept Form (circle “Y” in the “Previously Participated” field).</p> <p><b>Examples:</b>  <i>“Let’s be sure; it may not have been us. Let me ask you a few quick questions; it’s important that I get this right.”</i></p> <p>Ask one or more of the following questions--</p> <ul style="list-style-type: none"> <li>To confirm if it is an NHBS-YMSM - VBS interview or other recruiting approach (FBS, RDS): <i>“When and where were you interviewed?”</i></li> <li>If study clothing is worn: <i>“What was the interviewer wearing?”</i></li> <li><i>“Did the person who interviewed you have an ID badge like this (show ID badge)?”</i></li> <li><i>“What was the interview about?”</i></li> <li><i>“How long did the interview take?”</i></li> </ul>
--	---

<b>Recruitment Barriers</b>	<b>Strategies for Overcoming</b>
<p><b>6. Previous Non-participation</b></p> <p>Some young men may try to deter the intercept by stating that they have already declined participation in the survey.</p> <p><b>Examples:</b>  <i>“I already said no.”</i>  <i>“I told them last week I didn’t have time.”</i></p>	<p>Attempting to get young men to stop and complete the intercept may be difficult if they state that they have previously refused to participate. Again, stay positive and do your best to ensure that he is not confusing NHBS-YMSM with other research or outreach efforts. Even if you are sure that the person has previously declined participation, attempt to complete the intercept in a friendly and confident manner (what you are doing is important!). Moreover, young men who have previously declined to participate in the survey should be given another opportunity to participate. This does not apply to young men who have declined participation at the current event however.</p> <p><b>Examples:</b>  <i>“Let’s be sure; it may not have been us. Let me ask you a few quick questions; it’s important that I get this right.”</i></p> <p>Ask one or more of the following questions--</p>

	<p>To confirm if it is an NHBS-YMSM-VBS approach or other recruiting approach: <i>“When and where were you approached?”</i></p> <p>If study clothing is worn: <i>“What was the person who approached you wearing?”</i></p> <p><i>“Did the person who approached you have an ID badge like this (show ID badge)?”</i></p>
--	--

Participation Barriers	Strategies for Overcoming
------------------------	---------------------------

<p><b>1. Time</b></p> <p>One of the most frequently given participation barriers is lack of time.</p> <p><b>Examples:</b></p> <p><i>“I’m late.”</i></p> <p><i>“I really don’t have time right now.”</i></p> <p><i>“I’m in a hurry; I’m supposed to be meeting friends.”</i></p> <p><i>“I’m busy.”</i></p>	<p>To encourage an intercepted young man to agree to participate in NHBS-YMSM, emphasize the relatively brief amount of time needed to complete the survey, its benefits to the community, and its stipend. Lack of time may not be an issue once he considers how long the interview will actually take, the importance of the survey, and the compensation. Keep in mind that lack of time may be used to mask other more important barriers, such as disinterest, concerns about privacy, distrust, etc. If necessary, explore and address these other potential barriers.</p> <p><b>Examples:</b></p> <p><i>“The interview won’t take too long for the money you’ll earn. We’ll pay you up to \$50 for your time. It’s for a very important cause. We’re trying to make a difference in our community – especially for young men - and we could really use your help.”</i></p>
---	--

Participation Barriers	Strategies for Overcoming
------------------------	---------------------------

<p><b>2. Disinterest</b></p> <p>Another frequent participation barrier is disinterest. Some young men may not be interested in participating in research, while others may not be interested because of existing plans or activities.</p> <p><b>Examples:</b></p> <p><i>“I’m not really interested.”</i></p> <p><i>“I’m not interested in participating in research.”</i></p> <p><i>“It’s my only night off.”</i></p> <p><i>“I’m here to have fun/drink/dance/be with friends.”</i></p>	<p>If possible, explore and address the underlying reasons for the intercepted young man’s stated or implied disinterest. For example, is his disinterest due to a lack of knowledge about the value of NHBS-YMSM for HIV prevention, his having plans for the evening, his mistrust of research, or is it due to another reason? To help establish rapport when exploring why an intercepted young man is disinterested, begin with one or more motivations (community benefit, stipend, etc.). Avoid directly asking, “Why not?” which may be perceived as pushy or coercive.</p>
---	---

	<p><b>Examples:</b>  <i>“This survey is important; it may help us get more resources to help young men in our community and improve our HIV prevention programs.”</i>  <i>“This isn’t just being offered in &lt;city&gt;, it is also done in &lt;other two NHBS-YMSM cities&gt;. We’re part of a big effort and our community needs to be fully represented. It would be great if you could take part and help ensure that we are.”</i></p> <p>If the intercepted young man is still reluctant to participate (but does not explicitly refuse), attempt to identify specific barriers. Sometimes it is helpful to suggest a possible reason for his reluctance to prompt him to share his concerns.</p> <p><b>Examples:</b>  <i>“I understand you’re not that keen to participate. What is it about the survey that concerns you? Is it that someone might find out about what you tell me in the survey?”</i></p>
--	--

Participation Barriers	Strategies for Overcoming
<p><b>3. Friends &amp; Partners</b>  Recruiters may have a difficult time enrolling young men who are meeting others or who have plans for the evening. However, some young men who are with friends or partners may not have specific plans and may participate if other enrollment barriers are addressed.</p> <p><b>Examples:</b>  <i>“I don’t want to leave my friends/partner.”</i>  <i>“I can’t leave my friend/partner alone.”</i>  <i>“I’m meeting friends/my partner.”</i>  <i>“My friends won’t wait.”</i></p>	<p>Don’t assume that an intercepted young man cannot or will not participate just because he is with friends or a partner. First, assess whether or not he wishes to participate in NHBS-YMSM. If a young man agrees to participate, try to keep his friends or partner occupied. Engage them in conversation, keep them comfortable by giving them a place to sit (folding chairs), provide them with prevention materials, or if it can be arranged with venue management, offer them priority entry to the venue.</p> <p><b>Examples:</b>  <i>“Your friend/partner can hang out with us; we’ll take care of him.”</i>  Try humor: <i>“Your friend/partner will wait for you-- tell him with the \$50 you earn you can take him out to dinner!”</i></p>

	You can also consider offering them an 'At event appointment' if they have time later.
--	--

Participation Barriers	Strategies for Overcoming
<p><b>4. Intruders</b> Sometimes, friends or others will interrupt the intercept and deter young men from participating.</p> <p><b>Examples:</b> Intruder: <i>“C’mon, we don’t have time for this. We’re going to be late.”</i> Intruder: <i>“Give us a break; there are plenty of others you can talk to.”</i></p>	<p>Respond to interruptions from others based on the level of disruption and whether you think it can be safely addressed. If the interruption is minimal, focus on the prospective participant and complete the intercept. If the interruption is deterring enrollment and you feel you can safely address it, suspend the intercept and respond to the intruder. Stay positive, acknowledge and address his questions or concerns, and then return to the prospective participant and complete the intercept. If the interruption is severe and rapport or safety is jeopardized, do not confront the intruder. Simply tell the prospective participant that this does not appear to be the best time and thank him. Field supervisors should do their best to prevent interruptions from others by occupying potential intruders.</p> <p><b>Examples:</b> <i>“I just have a quick question for your friend; it will only take a minute.”</i> <i>“It’s important that I speak with your friend. Can you just give us a minute?”</i> If necessary, use one of the previously mentioned motivations (community benefits, stipend, etc.).</p>

Participation Barriers	Strategies for Overcoming
<p><b>5. Low Risk Behavior</b> Some young men may believe that the survey is only for young men at high risk for HIV infection. Others may think that participation is unnecessary if they do not have substantial risks for HIV infection.</p> <p><b>Examples:</b> <i>“You know, I’m not really at risk for HIV.”</i> <i>“I just got tested and I know I’m negative.”</i> <i>“I always use a condom.”</i> <i>“I’m in a long-term relationship; I doubt I would be of much help.”</i> <i>“I’m not sexually active.”</i></p>	<p>Stress the importance of universal participation and the value of everyone’s contribution. Risk behavior is NOT an eligibility requirement. We need to profile the risk behavior of all young men who attend our venues, not just the riskiest ones.</p> <p><b>Examples:</b> <i>“That’s great. We definitely need to talk to you to learn about how you stay safe. We’d also like to know about HIV prevention services you have received and if they worked for you. It’s really important for us to know what works and what doesn’t so that we can improve our prevention efforts.”</i></p>

	<i>"We talk about things other than sex. You'll be able to give us other important information."</i>
--	--

Participation Barriers	Strategies for Overcoming
<p><b>6. Distrust or Cynicism</b></p> <p>Some young men may have concerns about the underlying intentions of government-sponsored research or may perceive a lack of benefit to the community. Government distrust and cynicism may be particularly prevalent in some racial and ethnic minority communities.</p> <p><b>Examples:</b></p> <p><i>"I don't trust the government."</i></p> <p><i>"Yeah right, and what has research done for my community?"</i></p> <p><i>"I don't see how prevention is working with all the risk behavior that's going on."</i></p>	<p>To address barriers involving distrust or cynicism about government surveys, explain the steps taken to protect privacy and participant anonymity. Also, cite local funding, policy changes, and prevention initiatives that have been implemented because of findings from HIV surveillance and research (support for nearly all prevention efforts is based on HIV surveillance and research). NHBS-YMSM can help explain increasing trends in HIV and STDs among young MSM in some areas and it can help identify prevention needs.</p> <p><b>Examples:</b></p> <p><i>"&lt;Agency name&gt; has taken special care to make sure that your participation in this survey is not harmful to you or anyone else. No one outside of our staff will know you participated, and that includes anyone from the government."</i></p> <p><i>"Actually, local organizations like &lt;CBO names&gt; have used what was learned from our survey to get more resources to fight HIV and to help our community."</i></p> <p><i>"Actually, because of our efforts, federal and local governments have devoted more resources to fight HIV. Our own HIV prevention organizations like &lt;CBO names&gt; have benefited from the type of data we collect."</i></p> <p><i>"So that we can improve prevention efforts, we have to do a better job of finding out why HIV is becoming more common in some communities. Your thoughts are important to us."</i></p>

Participation Barriers	Strategies for Overcoming
<p><b>7. Privacy &amp; Anonymity</b> Some young men may be very concerned about their privacy and anonymity. This may be particularly true among non-gay-identified young men.</p> <p><b>Examples:</b> “I don’t want to give you my name.” “I’m not comfortable talking here.”</p>	<p>Stress that the survey is anonymous and that the names of participants will not be connected to the interview or HIV test results. Reassure the prospective participant that staff are prohibited from discussing interviews with unauthorized persons. Describe how survey forms have no identifying information and are maintained in locked filing cabinets with limited access.</p> <p><b>Examples:</b> “That’s perfectly OK. You don’t need to give your name or any other identifying information.” “We’ll conduct the interview in a private area so that no one can overhear your answers. Nothing that you tell us will be shared with anyone else.”</p>

Participation Barriers	Strategies for Overcoming
<p><b>8. Incentive Not Enough or Not Important</b> Some young men might say that the stipend of \$25 or \$50 is not enough.</p> <p><b>Examples:</b> “That’s not enough money.” “Is that all that’s offered?”</p> <p>Other young men may say the stipend is not important.</p> <p><b>Examples:</b> “I don’t need the money.” “The money really isn’t important to me.”</p>	<p>For those young men who think the stipend is insufficient, stress that our interviews are not nearly as long as many other surveys which provide lower incentives. Also emphasize the importance of NHBS-YMSM for helping the community.</p> <p><b>Examples:</b> “The interview won’t take too long and we pay much more than other surveys do. It’s for a very important cause. We’re trying to make a difference in our community and we could really use your help.” OR “Our interview only averages about 25 minutes. That works out to about 1 dollar for each minute you participate. That’s not bad, and we could really use your help.”</p> <p>For those young men who say that the money is not important, appeal to their altruism. In addition, explore other potential participation barriers and address those.</p>

	<p><b>Examples:</b>  <i>"The money is a small token of our thanks for your time and help. The information you provide can help us improve our prevention efforts and better serve our community."</i></p>
--	---

Participation Barriers	Strategies for Overcoming
<p><b>9. HIV Testing</b>            Because of HIV stigma, some young men may not want to participate in the survey and receive an HIV test. This may be especially true if rapid HIV tests are used.</p> <p><b>Example:</b>  <i>"I don't want everyone knowing my business."</i></p> <p>Other young men may not be concerned with HIV stigma, but are not interested in getting tested while out socializing and having a good time with friends.</p> <p><b>Example:</b>  <i>"I'm out having fun. I don't want to know that."</i></p>	<p>Assure the participant that his confidentiality will be protected and that the HIV test will be conducted in a private area. If that does not ease his concerns, note that the HIV test is optional.</p> <p><b>Examples:</b>  <i>"Your name will not be attached to your test result and we won't tell anyone else your result."</i>  <i>"You can still take the survey without having a test."</i></p> <p>Project sites that use rapid HIV tests should also offer standard HIV tests to young men who do not want to get their test results while out at the venue. If a young man is still unwilling to participate, note that the HIV test is optional.</p> <p><b>Examples:</b>  <i>"You don't have to get your test results tonight. You can come to our office."</i>  <i>"You can still take the survey without having a test."</i></p>

## **Appendix V: VBS Only - Intercept Form**

See excel sheet provided separately

## Appendix W: VBS Only - Intercept Form and Instructions

Recruiters should record all information collected during an intercept on the Intercept Form (**Figure W.1** on the next page). The actual form can be found in a separate Excel file named **Appendix V- Intercept Form.xlsx**. Project sites may customize the Intercept Form to meet their own needs, but if they do, they must collect all the data elements that will be entered in the recruitment event outcomes window of the Venue-Day-Time Sampling (VDTS) Program (see **Section W.4**). Instructions for completing the Intercept Form are outlined below.

### *W.1 Recruitment Event Information*

Information needed to identify the recruitment event is collected at the top of the Intercept Form. To help keep track of forms, recruiters should enter the required information on all forms used during the recruitment event, not just on the first form.

#### *W.1a Description of the recruitment event information*

**Venue Code:** The 4-digit venue identification code assigned to the venue where the recruitment event is being conducted.

**Event Number:** The consecutive number assigned to the recruitment event. Each recruitment event must have its own unique number.

**Date:** The date of the recruitment event in a month/day/year format. If an event runs over two days (e.g., starts at 10:00 PM one day and ends at 2:00 AM the next), project sites should record the date the event began.

**Venue Name:** The name of the venue where the recruitment event is being conducted.

**Recruiter:** The recruiter's name or, if a project site prefers, the recruiter's identification code. Each recruiter working at a recruitment event must have his/her own Intercept Form(s).

### *W.2 Recruitment Data*

Each numbered line on the Intercept Form represents recruitment data on a different venue attendee approached to participate in NHBS-YMSM. To ensure that recruitment data are accurate, recruiters

must make an entry on the Intercept Form for every venue attendee they attempt to intercept, even if the attendee ignores them and does not stop.

Figure W.1 –Intercept Form

**Intercept Form (VBS)**

Venue Code: \_\_\_\_\_ Event Number: \_\_\_\_\_ Date: \_\_\_\_\_

Venue Name: \_\_\_\_\_ Recruiter: \_\_\_\_\_

#	Previously Participated				Age	Agreed to Screening		Post-event Appointment	
	Y	N	D	R		Y	N	Y	N
1	Y	N	D	R		Y	N	Y	N
2	Y	N	D	R		Y	N	Y	N
3	Y	N	D	R		Y	N	Y	N
4	Y	N	D	R		Y	N	Y	N
5	Y	N	D	R		Y	N	Y	N
6	Y	N	D	R		Y	N	Y	N
7	Y	N	D	R		Y	N	Y	N
8	Y	N	D	R		Y	N	Y	N
9	Y	N	D	R		Y	N	Y	N
10	Y	N	D	R		Y	N	Y	N
11	Y	N	D	R		Y	N	Y	N
12	Y	N	D	R		Y	N	Y	N
13	Y	N	D	R		Y	N	Y	N
14	Y	N	D	R		Y	N	Y	N
15	Y	N	D	R		Y	N	Y	N
16	Y	N	D	R		Y	N	Y	N
17	Y	N	D	R		Y	N	Y	N
18	Y	N	D	R		Y	N	Y	N
19	Y	N	D	R		Y	N	Y	N
20	Y	N	D	R		Y	N	Y	N
					<13: __, >17: __				

Page (circle one): 1 2 3 4 5 of \_\_\_\_\_

### ***W.2a Description of the recruitment data***

**# (Number):** A running count of the venue attendees approached to participate in NHBS-YMSM. The first attendee approached by the recruiter is number 1, the second attendee approached is number 2, and so on. The recruiter should consecutively circle the numbers on the form when they approach venue attendees for recruitment.

**Age:** Age of the potential participant, if obtained.

**Previously Participated:** After a recruiter intercepts a venue attendee and greets him, they should ask the previous participation question:

*During 2014, did you already complete at least part of the health survey that (project name or sponsoring agency's name) is conducting? It could have been here or at another location.*

Based on the venue attendee's response, the recruiter should circle either the "Y" (yes), "N" (no), "D" (don't know), or "R" (refused) in the "Previously Participated" field:

<b>Venue Attendee's Response</b>	<b>Letter to Circle</b>
Indicates that he completed at least part of the survey during the current project cycle. (This includes young men who were found to be ineligible or stopped the survey prematurely, regardless of whether they were recruited at a venue or by RDS or FBS.)	Y
Indicates that he did not complete any of the survey during the current project cycle.	N
Indicates that he does not know or does not remember whether he completed any of the survey during the current project cycle.	D
Ignores the recruiter, does not stop to talk to the recruiter, is not able to answer the question (e.g., language barrier), or refuses to answer the question.	R

If the venue attendee already completed at least part of the survey ("Y" [yes] response), the recruiter should try to ascertain by what method he completed the survey - was it at a VBS event or was he recruited via RDS or FBS. This information should be recorded in the 'Comments' section.

The recruiter should then thank him for helping with the project and the recruiter should end the intercept. On the other hand, if the attendee did not complete any of the survey ("N" [no] response) or

if he cannot remember if he completed any of the survey (“D” [don’t know] response), the recruiter should invite him to participate in the survey. Attendees who refuse to answer the question (“R” [refused] response) should be thanked for their time and the intercept ended.

**Agreed to Screening:** After the recruiter invites a venue attendee to participate in the survey, the recruiter should indicate whether or not the attendee agreed to be screened for NHBS-YMSM eligibility. If the venue attendee agreed to be screened for eligibility, the recruiter should circle “Y” for yes; and if the venue attendee did not agree to be screened, the recruiter should circle “N” for no.



A response should only be recorded if the venue attendee was invited to participate in the survey (i.e., the venue attendee responded “no” or “don’t know” to the previous participation question).

**PEA:** Project sites that offer post-event appointments (PEAs) should indicate whether or not the prospective participant will be screened for NHBS-YMSM eligibility and interviewed using a PEA. If a prospective participant will be screened and interviewed using a PEA, the recruiter should circle “Y” for yes; whereas, if a prospective participant will not be screened and interviewed using a PEA, the recruiter should circle “N” for no.



A response should only be recorded if the venue attendee agreed to be screened for eligibility.

### ***W.3 Page Numbers***

To help keep track of the Intercept Forms, the recruiter should number the forms they have used during a recruitment event. The bottom of the form has a field for the recruiter to circle the page number and indicate the total number of forms used.

### ***W.4 Data Summation***

At the end of a recruitment event, the field supervisor should collect all the Intercept Forms used during the event. For each of the forms, the field supervisor should tabulate the number of venue attendees approached, the responses to the previous participation question, the number who indicated that they were <13 or >17, the number of venue attendees who agreed to be screened for eligibility, and if applicable, the number of post-event appointments made. The column sub-totals should be recorded in the row at the bottom of the Intercept Form. The field supervisor or data manager should then enter the column sub-totals for each form in the event outcomes section of the VDTs Program.

#### ***W.4a Tabulating column sub-totals***

**Number of Venue Attendees Approached:** The highest number circled in the “#” (number) field. For example, if numbers 1 through 12 were circled, the number of venue attendees approached would be 12.

**“Yes” Responses to the Previous Participation Question:** The number of “Y” (yes) responses circled in the “Previously Participated” field.

**“No” Responses to the Previous Participation Question:** The number of “N” (no) responses circled in the “Previously Participated” field.

**“Don’t know” Responses to the Previous Participation Question:** The number of “D” (don’t know) responses circled in the “Previously Participated” field.

**“Refused” Responses to the Previous Participation Question:** The number of “R” (refused) responses circled in the “Previously Participated” field.

**Age:** Tally the number of men who were younger than 13 and, separately, tally the number of men who were older than 17.

**Number of Attendees who Agreed to Screening:** The number of “Y” (yes) responses circled in the “Agreed to Screening” field.



Since just the number of men who **agreed** to screening is entered in the VDTS Program, the number of “N” (no) responses circled in the “Agreed to Screening” field does not have to be tabulated.

**Number of Post-event Appointments (PEAs):** The number of “Y” (yes) responses circled in the “PEA” field.



Since just the number of men who **are** interviewed by appointment is entered in the VDTS Program, the number of “N” (no) responses circled in the “PEA” field does not have to be tabulated.

## Appendix X: Fingertick quick reference guide

### Before sticking the finger....

- Set out all supplies needed to collect blood; open band aid and alcohol pad
- Ask the participant which is his non-dominant hand
- Assess positioning of you and the participant to decide the easiest way to collect blood for the rapid test and DBS



- Assess which finger is free of callouses and has the softest skin – this is typically the ring finger
- Even if the participant's hands are warm, massage the whole hand to increase circulation; hold participant's hand downward (below the heart) while massaging

- Ask participant to flick his hand in a downward motion
- Clean the finger with an alcohol pad



### The stick.....

- Lay the hand against a hard, flat surface



- Hold the lancet just off from the center of the fingertip pad and perpendicular to the ridges of the fingerprint; **DO NOT STICK THE FINGER ON THE SIDE**
- Massage from the base of the finger using a squeeze-release motion; it works well to wrap your

fingers around the stuck finger and the finger next to it

- **DO NOT SQUEEZE** the tip of the finger



- Wipe away the first drop of blood with a cotton ball

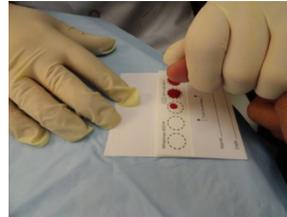
### If blood is not readily flowing:

- Massage entire hand using both of your hands; one hand should continue with the squeeze-release of the fingers
- If participant is feeling okay, ask him to stand up to allow the hand to be held much lower than the heart

### Specimen collection.....

- Allow a new drop of blood to form after wiping the first drop with a cotton ball

- Collect specimen for rapid test
- Flip the hand downward toward the DBS card, continue massaging, allow enough time for a very large drop of blood to form before applying to the first circle



- Upon completion, the circles should be full



#### Valid DBS Specimens.....



- Touch the drop of blood to the card but DO NOT TOUCH THE FINGER TO THE CARD; the card will wick the drop of blood away from the finger
- If one drop of blood does not fill the entire circle, immediately apply a second drop of blood to that same circle
- Continue above procedures as you move to next circle

#### Supply list....

- Band aids
- Cotton balls
- Alcohol prep pads
- Lancets
- Absorbent paper (i.e., “chucks”)
- DBS cards
- Biohazard waste containers
- Gloves
- Disinfectant cleaner



#### Biohazard reminders....

- Gloves must be worn at all times

- **Gloves should fit appropriately; DO NOT begin collection until you have gloves that fit snug**
- **Blood collection should occur over absorbent paper in case of spillage**
- **Always have a disinfectant cleaner on hand**

**POCKET GUIDE  
TO  
FINGERSTICK BLOOD  
COLLECTION  
FOR  
DRIED BLOOD SPOTS**



## **Appendix Y: All Methods - Flashcards**

### Flashcard A

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

### Flashcard B

- A relative or family member
- A person you have sex with
- A friend
- An acquaintance (that is, a person you know but do not consider a friend)
- A stranger (you don't know the person/just met them)

### Flashcard C

- Biological or adoptive mother only
- Biological or adoptive father only
- Both biological or adoptive parents
- Stepparent and biological parent
- Biological grandparent(s) or other relative
- Foster parent(s)

- Another adult only, such as a stepparent, or other living situation such as a group home

#### Flashcard D

- Living with parents or guardians
- Living alone in house/apartment/dwelling
- Living with other relatives
- Living with other adults who are not relatives
- Living with friend(s) or roommate(s)
- Living with a sexual partner/boyfriend/girlfriend
- Living in a school dormitory
- Homeless
- Other

#### Flashcard E

- A private health plan through your parents or guardians
- Medicaid, which is for people with low incomes
- Medicare, which is for the elderly and people with disabilities
- Some other government plan
- TRICARE (CHAMPUS)
- Veterans Administration coverage
- Some other health care plan

#### Flashcard F

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

#### Flashcard G

Definition of "Having Sex"

Oral or anal sex.

- Oral sex means he put his mouth on your penis or you put your mouth on his penis.
- Anal sex means you put your penis in his anus (butt) or he put his penis in your anus (butt).

#### Flashcard H

Definition of "serious" partner and "casual" partner

Serious partner:

Someone who you dated for a while and feel very close to and may call your boyfriend or partner.

Casual partner:

Someone you are casually dating but not serious, someone you are sleeping with but not dating, also called a fuck buddy or booty call, someone who was a one-night stand, or a stranger or anonymous person.

#### Flashcard I

- Never
- More than once a day
- Once a day

- More than once a week
- Once a week
- More than once a month
- Once a month
- Less than once a month

Flashcard J

- Definitely did not
- Probably did not
- Probably did
- Definitely did

Flashcard K

FOR USE WITH ALCOHOL QUESTIONS



1 Shot of Liquor  
(Whisky, Vodka, Gin, etc.)  
1.5 oz.

1 Regular Beer  
12 oz.

1 Glass of Wine  
5 oz.

### Flashcard L

- Not at all
- Several days
- More than half the days
- Nearly every day

### Flashcard M

- HIV/AIDS-focused community-based organization
- GLBTQ organization or community health center
- Health center or clinic
- Bar, club, bookstore, or other business
- School
- Some other place

## Appendix Z: All Methods - YMSM Process Monitoring Reports

The Data Coordinating Center (DCC) will produce the process monitoring reports and post them on the DCC data portal. Project sites should review the reports each week to assess recruitment and enrollment, coupon distribution (RDS only), sample characteristics, HIV testing, seeds (RDS only), previous participants, and interviewer skills.

### #1 Recruitment Monitoring Report – RDS

Recruitment Monitoring Report												
Date	No. Seed	No. Screened	No. Eligible	% Eligible	No. Completed Interview	% Completed Interview	No. Consented To HIV test	% Consented to HIV test	No. Agreed to blood storage	% Agreed to blood storage	No. Eligible to Recruit	% Eligible to Recruit
<b>Total</b>												

### #2 Recruitment Monitoring Report – non-RDS

Recruitment Monitoring Report									
Date	No. Screened	No. Eligible	% Eligible	No. Completed Interview	% Completed Interview	No. Consented To HIV test	% Consented to HIV test	No. Agreed to blood storage	% Agreed to blood storage
<b>Total</b>									

### #3 Coupon Manager Program Report – RDS only

#### 1. COUPON TRACKING

Week	No. Interviewed	No. Agreed to recruit	% Agreed to recruit	No. of Participants who received coupons by No. of Coupons distributed						No. Coupons distributed	No. Coupons returned	% Coupons returned
				0	1	2	3	4	5			
<b>Total</b>												

#### 2. NUMBER OF COUPONS DISTRIBUTED TO RECRUITER

Recruiter Type	No. of coupons	Date Implemented	No. Recruiters

Seeds			
Non-Seeds			

### 3. NUMBER REFUSED COUPONS

Coupons Refused	N	%
Reported coupons refused		
Reported no coupons refused		
Not asked		
Total		

## #4 Sample Characteristics – Screened – RDS

### 1. AGE

Age	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
<13						
13						
14						
15						
16						
17						
>17						
Unknown						
Total						

### 2. RACE / ETHNICITY

Race/Ethnicity	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
American Indian or Alaska Native						
Asian						

Black or African American						
Hispanic						
Native Hawaiian or Other Pacific Islander						
White						
Multiple Races						
Unknown						
Total						

### 3. MSA RESIDENT

	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
MSA Resident						
Yes						
No						
Unknown						
Total						

### 4. KNOWN PREVIOUS PARTICIPANT

	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
Known Previous Participant						
Yes						
No						
Unknown						
Total						

### 5. ABLE TO PARTICIPATE

	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
Able to Participate						
Yes						
No						
Total						

## #5 Sample Characteristics – Screened – *non-RDS*

### 1. AGE

Age	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
<13						
13						
14						
15						
16						
17						
>17						
Unknown						
Total						

### 2. RACE / ETHNICITY

Race/Ethnicity	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
American Indian or Alaska Native						
Asian						
Black or African American						
Hispanic						
Native Hawaiian or Other Pacific Islander						
White						
Multiple Races						
Unknown						
Total						

### 3. MSA RESIDENT

MSA Resident	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
Yes						

No						
Unknown						
Total						

#### 4. KNOWN PREVIOUS PARTICIPANT

	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
Known Previous Participant						
Yes						
No						
Unknown						
Total						

#### 5. ABLE TO PARTICIPATE

	Eligible		Not Eligible		Total	
	N	%	N	%	N	%
Able to Participate						
Yes						
No						
Total						

### #6 Test Result Report – 1 report includes all methods

#### 1. HIV RAPID TEST RESULT

	Positive		Negative		Indeterminate		Unknown		Total
	N	%	N	%	N	%	N	%	N
Rapid HIV Test Result									
Preliminary Positive									
Negative									
Not Done									
Unknown									
Total									

#### 2. HIV SELF-REPORTED TEST RESULT

	Positive		Negative		Indeterminate		Unknown		Total
	N	%	N	%	N	%	N	%	N
<b>Self-Reported HIV Status</b>									
<b>Self-reported Positive</b>									
<b>Interview</b>									
<b>Counseling</b>									
<b>Not Self-reported Positive</b>									
<b>Total</b>									

**#7 Seed Characteristics – RDS only**

Date	Survey ID#	Race/Ethnicity	Age	Sexual Identity	Eligible to recruit

**#8 Possible Previous Participant Report - 1 report includes all methods**

Survey ID	Interview Date	Start Time	Interviewer Code	Previous Participant	Eligibility	Validity	Date of Birth	Race / Ethnicity	Education	ZIP Code	Sampling Method

**#9 Interviewer Report – 1 report includes all methods**

**1. INTERVIEWER CAPACITY**

Interviewer ID	No. of Completed Interviews	Length of Eligibility Screener					Length of Consent Process					Length of Interview						
		Med	Mean	Min	Max	No.	Med	Mean	Min	Max	No.	Med	Mean	Min	Max	No.		
<b>TOTAL</b>																		

## 2. RESPONSE VALIDITY

Interviewer ID	Confident		Some Doubts		Not Confident at All		Total
	N	%	N	%	N	%	N

## 3. HIV TEST CONSENT

Interviewer ID	No. Completed Interviews with HIV Test Result	HIV Test Consent		Total
		Yes	N	No
<b>Total</b>				

## 4. CODING OF OTHER INSURANCE

Interviewer ID	Survey ID	Private	Medicaid	Medicare	Other Government	Tricare (Champus)	VA Coverage	Text for Other Insurance Specified

### #10 Sample Characteristics - Interviewed - 1 report includes all methods

#### 1. Behavior, Identity, Attraction

	RDS		Non-RDS		Total	
	N	%	N	%	N	%
<b>Behavior, Identity, Attraction</b>						
Oral/Anal Sex						
Other sex but no oral/anal						
Identity but no sex						
Attraction only						
Unknown						
<b>Total</b>						

## 2. AGE

Age	RDS		Non-RDS		TOTAL	
	N	%	N	%	N	%
13						
14						
15						
16						
17						
Unknown						
<b>Total</b>						

## 3. RACE / ETHNICITY

Race/Ethnicity	RDS		Non-RDS		TOTAL	
	N	%	N	%	N	%
American Indian or Alaska Native						
Asian						
Black or African American						
Hispanic						
Native Hawaiian or Other Pacific Islander						
White						
Multiple Races						
Unknown						

Total						
-------	--	--	--	--	--	--

**4. Field Site Enrollment – RDS and *FBS only***

Field Site	RDS		FBS		TOTAL	
	N	%	N	%	N	%
Field Site ID 1						
Field Site ID 2						
Field Site ID 3						
Field Site ID 4						
Total						

**5. RECRUITED BY STRANGER – *RDS only***

Recruited by Stranger	TOTAL	
	N	%
Yes		
No		
Unknown		
Total		

## Appendix AA: VBS Only- Post-event Appointment Card

Project sites should provide prospective participants with appointment cards to remind them of their post-event appointments (PEAs). The card should be pre-printed with the project name, phone number, days and hours of operation, address of the project office, and if possible, directions to it. The card should also have fields for the date and time of the appointment and the recruitment event information (Venue Code, Event Number, and date of the recruitment event during which the prospective participant was recruited). Sites that plan on assigning Survey IDs for PEAs at the time of recruitment should include a field for the Survey ID as well.

A model PEA card is shown below.

<b><i>[PROJECT NAME]</i></b>	
Your appointment is scheduled for:	
_____ , _____	at _____ AM PM
day	date                      time
If you need to reschedule your appointment or have any questions, please call us at <b><i>[project phone number]</i></b> .	
Our office is located at:	
<b><i>[address of project office]</i></b>	
and is open <b><i>[days of operation]</i></b> from <b><i>[opening time]</i></b> to <b><i>[closing time]</i></b> .	
Venue Code: _____	Survey ID: _____
Event Number: _____	Date of Recruitment Event: _____



**Figure BB.2 – CDC DBS Specimen Transport/Shipping Log**

**CDC DBS Specimen Transport/Shipping Log**

*[Project Name]* Contact Person: \_\_\_\_\_ Project City: \_\_\_\_\_

*[Project Name]* Phone Number: \_\_\_\_\_

*[Project Name]* Fax Number: \_\_\_\_\_

3 Letter City Code <i>plus</i> Survey ID	Date Collected	Reactive Rapid Test? (Yes or No)	Self-reported HIV-positive? (Yes or No)	Storage for Future Tests? (Yes or No)	Date Packaged	Date Sent to Lab

Page \_\_\_\_\_

**Appendix CC: All Methods - Rapid Testing Quality Control Log**

Date Controls Ran	Name of Person Running Controls	Date Controls Opened	Reason for Running Controls	Negative Control Result	HIV-1 /HIV-2 Positive Control Result(s)	Notes
				<i>Indicate if Controls Run Successfully</i>		
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened <input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity <input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Routine <input type="checkbox"/> New Lot Opened	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	

			<input type="checkbox"/> New Operator <input type="checkbox"/> Storage Temp Irregularity	<input type="checkbox"/> No	<input type="checkbox"/> No
			<input type="checkbox"/> New Shipment <input type="checkbox"/> Test Area Temp Irregularity		

*Field Supervisor Signature:* \_\_\_\_\_



## Appendix EE: All Methods - DBS Supplies and Vendors

This appendix contains a list of vendors that sell supplies that project sites will need for creating and shipping dried blood spots (DBS).



The use of trade names is for identification purposes only and does not imply endorsement by the Centers for Disease Control and Prevention or the U.S. Department of Health and Human Services.

### DBS Cards

**Product:** Item # 10534612  
Whatman 903® protein saver card

**Vendor:** GE Healthcare Life Sciences  
<http://www.whatman.com/903ProteinSaverCards.aspx>  
(800) 526-3593

### DBS Drying Clips

**Product:** Binder clips for attaching DBS cards to drying racks  
**Vendor:** [http://www.staples.com/Staples-Small-Metal-Binder-Clips-3-4-size-with-3-8-Capacity/product\\_831594](http://www.staples.com/Staples-Small-Metal-Binder-Clips-3-4-size-with-3-8-Capacity/product_831594)

### DBS Drying Racks

**Product:** Test tube racks for drying DBS cards  
**Vendor:**  
<http://www.fishersci.com/ecom/servlet/productimagesview?catalogId=29103&productId=803184&langId=-1&storeId=10652&distype=3&isChemical=false&selectedImage=-1&highlightProductsItemsFlag=Y&fromSearch=1>  
**or:**  
<http://www.fishersci.com/ecom/servlet/itemdetail?catalogId=29103&productId=2423908&distype=0&highlightProductsItemsFlag=Y&fromSearch=1&storeId=10652&langId=-1>

### Desiccant Packs

**Product:** 1 gram desiccant packs with blue indicator that turns pink in high humidity  
**Vendor:** Poly Lam Products, Corp  
(800) 836-9648

<http://www.polylam.com/Desiccant%20Packets%20Dist.pdf>

### Envelopes

**Product:** High-quality bonded, anti-tear/moisture envelopes (e.g., Tyvek)

**Vendor:** <http://www.staples.com/>  
<http://www.officedepot.com/>

### Humidity Indicator Cards

**Product:** Item # MS20003-2, 125 can

**Vendor:** Poly Lam Products, Corp  
(800) 836-9648

### Lancets

**Product:** Item # 366594  
BD Microtainer<sup>®</sup> Contact-Activated Lancet (Blue)  
Puncture (blade) 1.5mm x 2.0mm  
High Flow Blood Volume

**Vendor:** Beckton-Dickinson  
<http://www.bd.com/vacutainer/products/capillary/>  
(201) 847-6800

### Low-gas Permeable Plastic Zip-lock Bags

**Product:** Item # 11217-106

**Vendor:** VWR Scientific  
(800) 932-5000

**Product:** Item # 19240127

**Vendor:** Fisher Scientific  
(866) 884-2019



**Appendix GG: All Methods - Model HIV Testing Log**

**Log for Rapid HIV Testing:**

Survey ID	Lab ID	Rapid Test Method*	Self-reported HIV+ during interview? (Y/N)	Rapid Test Result	Returned Rapid Test Result (Y/N)	For preliminary HIV+: Collected Confirmatory Specimen (Y/N)	For preliminary HIV+: Type of Confirmatory Specimen		DBS collected for CDC? (Y/N)	Confirmatory Test Type*	Test Result*	Final Test Result Returned (Y/N)	Comments*

\* If unable to collect a confirmatory specimen, provide reason in comments section.

\*The log will contain a column for each type of test (EIA, Western Blot, NAAT, etc) performed

## Appendix HH: All Methods - Data Entry for Lab-based Testing

In the HIV Test Record Worksheet window of the HIV Test Results Log on the DCC data portal, project sites should enter the types of laboratory-based HIV tests used by their local laboratories for standard or confirmatory testing. Sites can enter up to four different types of laboratory-based HIV tests using the entry fields for Test 1, Test 2, Test 3, and Test 4. The response options available for these entry fields are:

- Immunoassay (4<sup>th</sup> generation)
- Immunoassay (3<sup>rd</sup> generation)
- Immunoassay (1<sup>st</sup> generation)
- Laboratory Rapid Test
- IFA
- Nucleic Acid Test (NAT)/RNA Test
- Western Blot

**Table HH.1** on the next page shows which response options project sites should select depending on the trade names of the laboratory-based HIV tests used locally.

**Table HH.1 – Trade names of laboratory-based HIV tests and the corresponding response options in the HIV Test Results Log**

Trade Name of Laboratory-based HIV Test	Response Option
Abbott Architect HIV Ag/Ab Combo Bio-Rad Genetic Systems HIV Combo Ag/Ab EIA	Immunoassay (4 <sup>th</sup> generation)
Bio-Rad Genetic Systems HIV-1/HIV-2 Plus O EIA ADVIA Centaur HIV 1/O/2 Enhanced Ortho VITROS Anti-HIV 1+2 Immunoassay	Immunoassay (3 <sup>rd</sup> generation)
Avioq HIV-1 Microelisa	Immunoassay (1 <sup>st</sup> generation)
Multispot HIV-1/HIV-2 Rapid Test Determine Reveal Rapid HIV-1 Antibody Test <i>Any point-of-care rapid HIV tests</i>	Laboratory Rapid Test
Sanochemia Flourognost IFA HIV-1	IFA
Gen-Probe APTIMA HIV-1 RNA Qualitative Assay Roche Amplicor HIV-1 Monitor Test (PCR) NucliSens HIV-1 QT (NASBA) Versant HIV-1 RNA 3.0 (bDNA) Gen-Probe APTIMA HIV-1 RNA Qualitative Assay (TMA)	Nucleic Acid Test (NAT) or RNA Test

Abbott RealTime HIV-1 Amplification Kit (PCR) COBAS Ampli-Prep/COBAS TaqMan HIV-1 Test (PCR) <i>Any NAT assay developed and validated in house</i>	
OraSure HIV-1 Western blot Bio-Rad Genetic Systems HIV-1 Western Blot	Western Blot

**Appendix II: Facebook Only - Facebook Data Tracking Form**

**Date tracking form was completed:** \_\_\_\_\_

**Period covered by form:** \_\_/\_\_/\_\_ to \_\_/\_\_/\_\_

**Targeting Algorithm used for this period:** \_\_\_\_\_

**Banner advertisements used for this period (attach)**

# in Facebook universe	
# of ad impressions	
# of ad clicks	
# of landing page screener completions	
# of participant calls to site staff	
# of contact attempts to participants by any method	
# of completed telephone screeners	
# of participants deemed eligible (phone)	
# of participants directed to field site without completing phone screener.	

## Instructions

### Overview

The Facebook data tracking form may be modified to meet local needs. Modified forms should collect all the data elements included on the model form. The data elements needed to complete this form can be found on the Facebook Ads Manager dashboard. Facebook data tracking forms should be completed and sent to CDC at least monthly, or whenever the targeting algorithm or banner advertisement is changed. The following instructions apply to each of the rows included on the form.

**Date tracking form was completed:** The date the tracking form was completed.

**The dates covered by this form:** Should be completed and sent to CDC at least monthly, or whenever the targeting algorithm or banner advertisement is changed.

**Targeting algorithm used for this period:** The targeting algorithm that was used to define the Facebook universe during the time period covered by this tracking form.

**# in Facebook universe:** At the time this form is completed, the number of men aged 13 to 17 who indicate on their profile that they are interested in other men and live in the MSA OR who meet the criteria of the like-based targeting algorithm used for this period.

**# of ad impressions:** Obtained from the Facebook Banner ad page, the number under the column *Ad Reach*

**# of ad clicks:** Obtained from the Facebook Banner ad page, the number under the column labeled *Clicks*

**Click-through rate:** The #ad clicks/ # of ad impressions; this rate is available on the Facebook Banner ad page under the column labeled *Click-Through Rate*

**# of landing page hits:** The number of persons taken to the landing page. The landing page will be designed to count the number of visitors to the landing page.

**# of landing page screener completions:** The number of persons providing their contact information on the landing page.

**# of participant calls to site staff:** The number of calls made by participants to site staff. This information will be tracked locally.

**# of contact attempts to participants by any method:** The number of calls, text messages, emails or Facebook messages site staff make or send to participants. This information will be tracked locally.

**# of completed telephone screeners:** The number of telephone screeners completed. This information will be tracked locally.

**# of participants deemed eligible (phone):** The number of participants deemed eligible during the telephone screener

**# of participants directed to field site without completing phone screener:** The number of participants who staff make contact with, who do not complete the phone screener but whom staff refer directly to the field site (through using text message / email or Facebook communication).

**Please email this form to your CDC project officer whenever you have completed one**

## Appendix JJ: All Methods - Appointment Reminder Call Form and Procedures

If a participant indicates that he would like to receive a phone call to remind him of his appointment for obtaining his test results, a staff member should help the participant complete an Appointment Reminder Call Form (**Figure JJ.1**) by following the steps outlined below.

### ***Step 1. Schedule appointment***

Schedule an appointment for the participant to obtain his test results and give him an Appointment Card with his appointment information.

### ***Step 2. Complete Appointment Reminder Call Form***

Record the day, date and time of the participant's appointment on an Appointment Reminder Call Form and then help him complete the remainder of the form. Ask the participant to write his phone number on the form and indicate the best day(s) and time(s) to call him with his appointment reminder. Be sure that the participant understands what your standard reminder message will be and ask him if he would like a different message.

### ***Step 3. File form***

After the participant completes the form, store it in a locked file or file box for later processing. Forms should be ordered by the date when the reminder call will be made.

### ***Step 4. Process reminder calls***

Every day, retrieve the forms that are due reminder calls on that date and make the calls at the designated times. Before making each call, review the information provided by the participant to ensure that you follow his instructions exactly (e.g., what name to use, what message to leave); and after the call, record the date, time, and outcome of the call in the "Staff Use" section of the form. When calling, always ask for the name that the participant wrote on the form:

- If the participant answers, provide the reminder message and file the form for later shredding.
- If someone other than the participant answers and the participant is not available, ask when it would be best to call back to reach the participant. Record the call-back date and time in the "Staff Use" section of the form and file it under the new call date. If you are told not to call back, note that in the "Staff Use" section of the form and file it for later shredding. Do not provide any additional information about NHBS-YMSM or the participant to the person who answers the phone.
- If voice mail or an answering machine picks up the call, leave the message that the participant agreed to and file the form for later shredding. If the participant did not give permission to leave a message, try calling back one more time at a later time or date.
- If no one answers the phone, try calling back one more time at a later time or date.



Do not try to reach a participant more than two times. Regardless of the outcome of a call, file the form for later shredding after the second call attempt.

***Step 5. Re-schedule appointment (optional)***

If project sites wish, they may contact participants who miss their appointments to try to schedule a new one. To do this, project sites should review their test results appointment book and note the dates and times of missed appointments. For each missed appointment, they should search their file of Appointment Reminder Call Forms for a form with a matching date and time. Project sites can then call the participants whose forms have matching dates and times to reschedule their missed appointments. Project sites are only allowed one attempt to try to reach the participant for rescheduling; they cannot call back repeatedly.

Figure JJ.1 – Appointment Reminder Call Form

### Appointment Reminder Call Form

I would like a phone call to remind me of my test results appointment on:

\_\_\_\_\_ , \_\_\_\_\_ at \_\_\_\_\_  AM  PM  
day                      date                      time

**Please answer the following questions about the call:**

1. What is your phone number? ( \_\_\_\_\_ ) \_\_\_\_\_ – \_\_\_\_\_
2. What are the best days and times to call you?  
 Days: \_\_\_\_\_  
 Times: \_\_\_\_\_
3. Who should we ask for when the phone is answered?  
 Your first name or nickname: \_\_\_\_\_
4. Is it okay for us to identify ourselves as **[Project Name]** when we make the appointment reminder call?  
 Yes     No
5. Unless we are instructed otherwise, our standard appointment reminder message is:  
*Hello, this is (staff member's name) from [Project Name] calling to remind you of your appointment on (day), (date), and (time). Thank you.*  
 If no one answers, is it okay to leave this message on voicemail or an answering machine?  
 Yes     No
6. Add any additional instructions: \_\_\_\_\_  
 \_\_\_\_\_

STAFF USE ONLY << DO NOT record the survey ID or lab ID on this form >>
<b>1<sup>st</sup> Call:</b> Date of Call: _____ Time of Call: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM Outcome of Call: _____ Is a 2 <sup>nd</sup> call necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes:</i> Call-back Date: _____ Call-back Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
<b>2<sup>nd</sup> Call:</b> Date of Call: _____ Time of Call: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM Outcome of Call: _____

## Appendix KK: Facebook Only – Facebook Contact Tracking Sheet

Please see Chapter 6 (section 6.5b) for instructions of how to fill out this form, including Figure 6.7 for an example.

#	First Name	Nick-name	Cell Phone	Call ok?	Msg ok?	Landline	Msg ok?	Email	Preferred method	Contact	Date	Method	Msg?	Replied
1										Participant called/emailed study staff				
										Contact attempts:				
										1				
										2				
										3				
										4				
										5				
										6				
										Add rows if needed (7, 8...)				

2										Participant called/emailed study staff				
										Contact attempts:				
										1				
										2				
										3				
										4				
										5				
										6				
										Add rows if needed (7, 8...)				