

Appendix F: Evaluation Tools/Entrustable Professional Activities (EPAs)

HIV PRIMARY CARE PATHWAY: 6 Months Report on Entrustable Professional Activities (EPA)

Name of the person completing this form:

Title/Position:

Trainee name, level of training:

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EPA #1: Perform HIV counseling & testing including legal & disclosure issues

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to accurately counsel patients on Universal or “opt-out” HIV testing ✓ Unable to implement culturally competent language when explaining testing procedures ✓ Unable to provide evidence for need for universal testing for patients based on guidelines regardless of risk category ✓ Unable to develop & discuss treatment plans based on testing results ✓ Demonstrates lack of knowledge of HIV law related to confidentiality & disclosure, & available resources ✓ Unable to develop & discuss plans for disclosure & coping with stigma 	<ul style="list-style-type: none"> ✓ Understands HIV testing procedure but cannot implement appropriate counseling procedure, treatment plan or complete documentation of counseling & testing ✓ Understands HIV law & available resources but unable to implement culturally competent language when explaining HIV law related to confidentiality & disclosure ✓ Unable to properly document counseling & testing in the medical record 	<ul style="list-style-type: none"> ✓ Able to perform counseling & testing with supervision in traditional scenario but unable to adapt counseling & testing procedures in more challenging cases ✓ Aware of ancillary services available to assist patients with test results & make appropriate referral ✓ Able to perform counseling about stigma & disclosure with supervision but unable to apply in more challenging cases ✓ Aware of ancillary resources available in this regard & can make appropriate referrals 	<ul style="list-style-type: none"> ✓ Able to perform counseling & testing in a culturally competent fashion in an unsupervised setting using appropriate language & provides complete documentation in the medical record & reporting requirement ✓ Able to interpret test results & understands when additional testing may be necessary ✓ Independently initiates referral to ancillary services depending on test results (health department notification, social services involvement, partner notification) ✓ Able to communicate results & initial treatment plan to patient & care team 	<ul style="list-style-type: none"> ✓ Able to initiate & disseminate universal counseling & testing effectively to patient care in routine clinical practice within your health care community ✓ Becomes an advocate for routine testing in appropriate clinical settings ✓ Role model & teaches learners the techniques of culturally competent counseling & testing. ✓ Role model & teaches learners the techniques of culturally competent counseling & HIV status disclosure ✓ Able to act as an advocate for patients with HIV related stigma & discrimination.

Not Assessed: "

Comment:

EPA #2: Assess person with newly diagnosed HIV infection

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to recognize & assess newly diagnosed HIV infection despite guidance, the provision of a template, & orientation to the assessment. 	<ul style="list-style-type: none"> ✓ Identifies some symptoms & signs associated with new HIV infection or chronic HIV infection but does not accurately characterize entire syndrome. ✓ Unable to appropriately stage patient with necessary panel of blood tests or interpret baseline lab tests including HIV genotype testing. 	<ul style="list-style-type: none"> ✓ Understands when to initiate opportunistic infection prophylaxis & antiretroviral therapy but unable to choose the appropriate therapeutic regimen. ✓ Accurately interprets HIV disease staging tests. 	<ul style="list-style-type: none"> ✓ Develops a plan to initiate OI prophylaxis when indicated ✓ Able to interpret baseline genotype testing ✓ Develops a comprehensive therapeutic approach to initiate antiretroviral treatment & monitor clinical response & adverse effects to therapy. ✓ Responds sensitively & non-judgmentally to patient disclosures, diversity in gender identity, age, culture, race, religion, disabilities, & sexual identity 	<ul style="list-style-type: none"> ✓ Tailors newly diagnosed HIV assessment to particular patient's presentation & clinical circumstances. ✓ Considers patient preferences & education level when devising a treatment plan

Not Assessed: "

Comment:

EPA #3: Counsel persons with HIV on reducing high risk behaviors

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to recognize high risk behaviors in context of HIV & STI transmission & management. ✓ Unable to stage patient motivation to change high risk behaviors. 	<ul style="list-style-type: none"> ✓ When prompted, can identify & delineate high risk behaviors but unable to regularly assess patients for these risks ✓ Can engage in motivational interviewing with patients around high-risk behavior but unable to regularly & reliably supply patient with counseling based on this assessment 	<ul style="list-style-type: none"> ✓ Understands need for risk assessment counseling & can explain rationale to patient. ✓ Able to regularly ask questions to probe for ongoing high-risk behaviors for HIV & STI transmission. ✓ May miss elements of sexual history taking ✓ May miss opportunities for counseling but effective in 60-80% of encounters. ✓ Able to assess patient stages of change according to Stage of Change model ✓ Able to perform appropriate counseling strategies for patient’s stage of change. 	<ul style="list-style-type: none"> ✓ Regularly incorporates questions about ongoing high-risk behavior at every session (80-95% of encounters) ✓ Able to ask open ended questions about behaviors & ask closed ended questions to refine details around types of sexual encounters ✓ Able to accurately determine target risk behavior & assess Stage of Change in all patients. ✓ Accurately relates appropriate counseling for that Stage of Change & usually solicits an action plan. ✓ Follows up plan during future 	<p>Effectively incorporates risk reduction questioning & intervention into every new & recurrent encounter (95-100% of opportunities). Able to identify & prioritize high risk behaviors & accurately assess patient’s stage of change.</p> <p>Effective with stage-specific counseling & action plans. Regularly defines an action plan & follows up.</p> <p>Trouble-shoots very complex high-risk behaviors & serves as a resource for the clinic in this regard</p>

		✓ Variably effective in following up on behavioral outcomes	encounters & tailors approach	
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Not Assessed:

Comment:

EPA #4: Provide behavioral health & substance use disorder management in the clinical setting

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Displays incomplete knowledge & understanding of natural history & risk factors for mental health & unhealthy substance use in person with HIV (PWH) ✓ Incomplete understanding of screening tools for mental health & substance use disorder ✓ Unable to identify mental health & unhealthy substance use in PWH 	<ul style="list-style-type: none"> ✓ Understands the natural history of mental health & unhealthy substance use ✓ Displays incomplete knowledge of screening techniques, treatment eligibility & options 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of mental health & substance use disorder screening tools ✓ Demonstrates working knowledge of treatment options including various counseling techniques & pharmacotherapies ✓ Aware of area resources for referral for management of mental health & substance use disorders ✓ Able to work in an inter-professional team to adequately 	<ul style="list-style-type: none"> ✓ Effectively manages PWH with mental health diagnoses or unhealthy substance use ✓ Demonstrates proficiency in managing complex cases including patients with both mental health & unhealthy substance use ✓ Effectively implements consultative services for patient management when needed 	<ul style="list-style-type: none"> ✓ Educates patients & families on natural history of mental health and/or unhealthy substance use & reviews treatment considerations ✓ Monitors adverse effects to treatment ✓ Acts as a role model & educates other members of the health care team on mental health & unhealthy substance use screening & management ✓ Conducts quality improvement projects

<p>✓ Displays lack of knowledge of available treatment options for patients identified with mental health and/or substance use diagnoses & of side effects & drug interactions for pharmacotherapies to treatment mental health & substance use disorders in PWH</p>		<p>manage patients with mental health and/or substance use disorder</p>	<p>✓ Works as an effective member of the inter-professional team</p>	<p>and/or research related to mental health and/or unhealthy substance use in PWH ✓ Able to lead an inter-professional team</p>
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Not Assessed: "

Comment:

EPA #5: Manage person with HIV in an ambulatory setting: Provide appropriate age-based & HIV-associated preventative services to persons with HIV.

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Demonstrates lack of knowledge of available HIV & age-appropriate prevention, diagnostic & treatment guidelines ✓ Demonstrates lack of knowledge of age-appropriate immunization & cancer prevention management. 	<ul style="list-style-type: none"> ✓ Demonstrates incomplete knowledge of available prevention diagnostic & treatment guidelines ✓ Demonstrates incomplete knowledge of age-appropriate immunization & cancer prevention management. ✓ Able to use available screening tools & patient education tools 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of age-appropriate immunization & cancer prevention management. ✓ Requires supervision to recognize adverse events & manage more complex cases ✓ Implements available patient educational material to counsel patients on side effects & age-appropriate cancer screening but may use jargon and/or complex medical terms. 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge & efficiency in age-appropriate preventive services. ✓ Able to discuss & document immunization initiation & side effects as well as age-appropriate cancer screening with patients in a culturally competent way & taking into account patients level of health literacy using appropriate educational tools 	<ul style="list-style-type: none"> ✓ Educates patients & families on HIV & age-appropriate prevention ✓ Acts as a role model & educates other members of the health care team on HIV & age-appropriate prevention. ✓ Conducts QI projects and/or research studies on HIV-related age appropriate prevention ✓ Updates & develops new patient educational materials as new guidelines emerge

Not Assessed: "

Comment:

EPA #6: Manage person with HIV in an ambulatory setting: Initiate & monitor antiretroviral (ARV) treatment

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Demonstrates lack of knowledge of available ARVs & treatment guidelines, of ARV side effects & drug interactions, & of monitoring response to ARV. ✓ Unable to accurately counsel patient on importance of treatment adherence; unable to implement culturally competent language when discussing medication adherence with patients ✓ Unable to explain consequences of nonadherence to treatment including development of genotypic drug resistance ✓ Unable to develop & discuss treatment 	<ul style="list-style-type: none"> ✓ Demonstrates incomplete knowledge of available ARVs & treatment guidelines, ARV side effects & drug interactions, & monitoring response to ARV ✓ Unable to fully implement baseline step-wise checklist for initiating ARVs or to use available patient education tools. ✓ Understands the importance of treatment adherence but unable to explain it to patients ✓ Implements incomplete treatment adherence monitoring procedures, provides incomplete documentation of 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of available ARVs & treatment guidelines ✓ Demonstrates knowledge of ARV side effects & drug interactions but needs supervision to recognize adverse events ✓ Demonstrates knowledge of monitoring response to ARV ✓ Able to implement key elements from baseline step-wise checklist for initiating ARVs but not complete ✓ Understands importance of implementing genotype resistance testing but unable to alter treatment plan in more complex cases without supervision. 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of available ARVs & treatment guidelines ✓ Demonstrates knowledge of ARV side effects & drug interactions & able to independently recognize adverse events in clinical practice ✓ Able to implement key elements from baseline step-wise checklist for initiating ARVs ✓ Demonstrates no gaps in ARV initiation & monitoring—including interpretation of genotype resistance ✓ Comfortable with different ARV formulations to adapt to patient preferences & co-morbid conditions ✓ Able to discuss & document ARV initiation & side effects with 	<ul style="list-style-type: none"> ✓ Educates patients & families on ARV initiation, monitoring & adverse effects ✓ Acts as a role model & educates other members of the health care team on ARV initiation, monitoring & adverse effects ✓ Conducts quality improvement projects and/or research studies related to ARV management ✓ Updates & develops patient educational materials as new therapies emerge. ✓ Able to Initiate & disseminate treatment adherence

plans based on adherence measure	discussions of treatment adherence	<ul style="list-style-type: none"> ✓ Able to perform treatment adherence monitoring with supervision in traditional scenario but unable to adapt adherence discussions in more challenging cases ✓ Aware of ancillary services available to assist patients with medication adherence ✓ Unable to properly document treatment adherence counseling & monitoring in the medical record 	<p>patient in a culturally competent way & considering patient level of health literacy using appropriate educational tools</p> <ul style="list-style-type: none"> ✓ Demonstrates a patient-centered & cost-effective approach to management of ARV ✓ Provides complete documentation in the medical record regarding adherence discussions, able to independently alter treatment plans specific to individual patient 	<p>counseling & monitoring techniques effectively to patient care in routine clinical practice within their health care community</p> <ul style="list-style-type: none"> ✓ Role model & teaches learners the techniques of culturally competent adherence counseling & monitoring
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Not Assessed: "

Comment:

EPA # 7: Manage person with HIV & treatment of opportunistic infections (OIs)

Level 1	Level 2	Level 3	Level 4	Level 5
✓ Unable to accurately identify common OIs seen in patients with advanced HIV & at	✓ Recognizes need to consider OI prophylaxis at various levels of	✓ Regularly recognizes risk for OI at various level of immunosuppression	✓ Monitors patients for the need for OI prophylaxis.	✓ Monitors patients for the need for OI prophylaxis.

<p>what level of immunocompromise state these occur.</p> <ul style="list-style-type: none"> ✓ Unaware of indications for OI prophylaxis. ✓ Rudimentary recognizes of the proper differential diagnosis of OIs by clinical presentation. ✓ Unaware of any strategic timing with starting ARVs in patients with OIs 	<p>immunosuppression but unable to provide adequate prophylaxis because not aware of what drugs are used, side effects, & monitoring</p> <ul style="list-style-type: none"> ✓ Has some understanding of role of OI in differential diagnosis in PWH with common presentations of pneumonia, CNS infections & skin infections. ✓ Can sometimes but not regularly delineate appropriate diagnostic & management steps to these OIs. ✓ Understands issues around initiation of ARV in patients with OI but needs review & supervision. 	<p>& can accurately delineate approach to provide prophylaxis.</p> <ul style="list-style-type: none"> ✓ May miss some nuances of monitoring side effects of OI prophylaxis, required duration of prophylaxis. ✓ Considers appropriate differential diagnosis including OI in advanced HIV ✓ Demonstrates understanding of approach to diagnosis & management of OIs ✓ Understands the appropriate timing of ARV initiation in patients presenting with OI ✓ Expectantly manages immune reconstitution inflammatory syndrome (IRIS). 	<ul style="list-style-type: none"> ✓ Understands & explains effectively to patient’s relative risks of OI prophylaxis & consequences if left untreated OIs & expected duration of primary & secondary OI prophylaxis. ✓ Demonstrates consistent & comprehensive approach to diagnosis & management of OIs ✓ Recognizes & adheres to published guidelines regarding the timing of ARV initiation ✓ Effectively counsels patients & teams about OI management including IRIS 	<ul style="list-style-type: none"> ✓ Fluent & expert in diagnosis & management of commonly encountered OIs as well as less common systemic OIs, OI etiologies not commonly seen in US, etc. ✓ Educates other health professionals on diagnosis, management & prevention of OIs. ✓ Recognizes nuances in timing of ARV initiation in setting of OI, manages paradoxical & unmasking IRIS effectively, ✓ Effectively explains to patients.
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Not Assessed: "

Comment:

EPA #8: Manage person with HIV in an ambulatory setting

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Demonstrates lack of knowledge & understanding of natural history of HIV disease complications & ART long term side effects ✓ Lacks knowledge of available diagnostic & treatment guidelines for metabolic syndrome (DM, Dyslipidemia, bone disease, etc.). 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge & understanding of natural history of HIV disease complications & ART long term side effects ✓ Demonstrates incomplete knowledge of available diagnostic & treatment guidelines for metabolic syndrome (DM, Dyslipidemia, bone disease, etc.). 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of HIV metabolic syndrome diagnosis & treatment considerations ✓ Demonstrates knowledge of treatment side effects & drug interactions but needs supervision to adequately manage complex cases ✓ Able to identify situations where consultative services are necessary (ie, cardiology, endocrinology, etc.), 	<ul style="list-style-type: none"> ✓ Effectively manages patients with HIV metabolic syndrome ✓ Demonstrates proficiency in managing complex cases ✓ Effectively uses consultative services for patient management ✓ Counsels patients effectively on diet, exercise, & healthy lifestyle 	<ul style="list-style-type: none"> ✓ Educates patient & family on HIV metabolic syndrome & treatment considerations & monitors adverse effects ✓ Acts as a role model & educates other members of the health care team on HIV metabolic syndrome management ✓ Conducts quality improvement projects and/or research studies related to HIV metabolic syndrome.

Not Assessed: "

Comment:

EPA #9: Management of HIV in special populations: Pregnancy/infertility

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to perform gynecologic assessment despite guidance, the provision of a template, & orientation to the specific history & physical examination skills ✓ Unable to identify treatment modalities for pregnant women with HIV 	<ul style="list-style-type: none"> ✓ Obtains accurate & relevant history for women’s in an efficiently customized, prioritized, & hypothesis-driven fashion & identifies some problems ✓ Unable to independently perform a gynecological exam nor explore the measures to prevent pregnancy or HIV transmission. ✓ Demonstrate incomplete knowledge of management of pregnant women with HIV 	<ul style="list-style-type: none"> ✓ Performs formal gynecologic evaluation with minimal supervision, ✓ Identifies treatment modalities for pregnant women. ✓ Explains clearly different methods of contraception ✓ Recognizes drug adverse effects & interactions. ✓ Requires supervision to adequately manage PWH women with complex medical & social issues 	<ul style="list-style-type: none"> ✓ Performs independently complete gynecologic assessment & discusses results with the patient. ✓ Develops plans to address treatment initiation & monitoring for pregnant women with HIV & communicates to patients & families. ✓ Adjusts medications to minimize risk of adverse effects or interactions, considers pregnancy & lactation implications ✓ Counsels clearly & non – judgmentally the risk of transmission of HIV to partner & infant. 	<ul style="list-style-type: none"> ✓ Tailors assessment to particular patient presentation & clinical circumstances. ✓ Understands & attends to changes social issues, abnormal laboratory data & side effects to treatment. ✓ Discusses assessment & plan with interdisciplinary team the perinatal care

Not Assessed: "

Comment:

EPA #10: Management of HIV in special populations: HIV-HCV or HIV-HBV co-infection & multidisciplinary teamwork

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Demonstrates lack of knowledge & understanding of the natural history of HCV or HBV, disease progression, & appropriate diagnostic testing ✓ Unable to identify eligibility criteria for HCV or HBV treatment in patients with HIV coinfection ✓ Demonstrates lack of knowledge of available HCV or HBV treatment options & treatment guidelines ✓ Demonstrates lack of knowledge of HCV or HBV treatment, monitoring, side effects & drug interactions 	<ul style="list-style-type: none"> ✓ Understands the natural history of HCV an HBV in HIV coinfectd patients but demonstrates incomplete knowledge of treatment eligibility & options ✓ Demonstrates incomplete knowledge of HIV-HCV treatment interactions ✓ Demonstrates appreciation of the importance of the HIV multidisciplinary team in the management of HCV or HBV infection 	<ul style="list-style-type: none"> ✓ Demonstrates knowledge of HIV-HCV or HBV coinfection treatment considerations ✓ Demonstrates knowledge of treatment side effects & drug interactions but needs supervision to adequately manage complex cases ✓ Identifies situations where consultative services are necessary (ie, psychiatric, hepatology or transplant services) ✓ Able to work in an inter-professional team to adequately manage patients with HIV-HCV coinfection 	<ul style="list-style-type: none"> ✓ Effectively manages patients with HIV-HCV or HBV coinfection ✓ Demonstrates proficiency in managing complex cases ✓ Effectively uses consultative services for patient management ✓ Works as an independent & effective member of the inter-professional team ✓ Addresses issues related to patient care & develops an action plan with the team ✓ Able to effectively lead a team meeting with minimal supervision. 	<ul style="list-style-type: none"> ✓ Educates patients & families on HIV-HCV or HBV co-infection & treatment considerations & monitors adverse effects ✓ Acts as a role model & educates other members of the health care team on HIV-HCV or HBV treatment ✓ Conducts quality improvement projects and/or research studies related to HIV-HCV or HBV treatment ✓ Able to lead independently an inter-professional team

Not Assessed: "

Comment:

EPA #11: Management of HIV in special populations: LGBTQIA+ patients

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to recognize patients who self-identify as part of the LGBTQIA+ community ✓ Unaware of clinical & psychosocial conditions of LGBTQIA+. ✓ Unaware of resources to improve access to medical & psychological care of LGBTQIA+ patients. ✓ Unable to model sensitivity to LGBTQIA+ issues 	<ul style="list-style-type: none"> ✓ Establishes rapport & solicits sexual preference & gender identification in non-judgmental manner. ✓ Recognizes unique medical & psychosocial conditions relevant to LGBTQIA+ community but needs significant supervision in management. ✓ Aware of some local resources for referral & requires assistance in utilizing these resources. ✓ Demonstrates empathy & advocates for patients, demonstrates limited insight into how physician advocacy can translate to impacting larger culture related to LGBTQIA+ care 	<ul style="list-style-type: none"> ✓ Regularly establishes sexual preference & gender identification in non-judgmental manner. ✓ Aware of common medical & psychosocial conditions that disproportionately affect LGBTQIA+ pts & effectively screens for these conditions ✓ Develops an awareness & is increasingly effective in accessing resources for interdisciplinary care of LGBTQIA+ patients ✓ Often but not routinely demonstrates & models empathy ✓ Speaks out locally to peers & patients when appropriately to 	<ul style="list-style-type: none"> ✓ Demonstrates awareness of common medical & psychosocial conditions that disproportionately affect LGBTQIA+ pts & effectively screens for these in most of appropriate instances (STI, domestic/partner violence, unhealthy substance use, behavioral health issues, etc.). ✓ Routinely knowledgeable & effective with intra & interagency referrals as necessary ✓ Effectively coordinates care across these domains. ✓ Consistently demonstrates empathy, cultural awareness, & 	<ul style="list-style-type: none"> ✓ Aware of common medical & psychosocial conditions that disproportionately affect LGBTQ pts & effective screens for these in 100% of appropriate instances ✓ Acts as an expert resource for accessing & utilizing referrals for complex medical & psychosocial needs of LGBTQIA+ patients such as gender affirming care, surgical needs, STI management. ✓ Acts as a local & national advocate for LGBTQIA+ persons & patients

		decrease stigma to LGBTQIA+	advocacy for LGBTQIA+ patients	
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Not Assessed: "

Comment:

EPA #12: Assess persons for & manage HIV Pre-Exposure Prophylaxis (PrEP)

Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> ✓ Unable to recognize persons who qualify for PrEP. ✓ Does not explore patient preferences in HIV prevention. ✓ Fails to demonstrate shared decision making including assessing readiness to start treatment, alternatives, barriers. ✓ Provides incomplete patient instructions & follow up. 	<ul style="list-style-type: none"> ✓ Establishes rapport & solicits sexual preference & gender identification in non-judgemental manner. ✓ Recognizes indications for & medication types for PrEP but needs significant supervision in management ✓ Aware of baseline assessment & follow up requirements but requires assistance in utilizing these resources. 	<ul style="list-style-type: none"> ✓ Performs risk assessment for PrEP indication including injection behaviors, sexual preference & gender identification in non-judgemental manner. ✓ Effectively engages in shared decision making regarding PrEP including exploring patient knowledge, preference, medication rationale & alternatives but may requires supervision for complex situations 	<ul style="list-style-type: none"> ✓ Routinely performs risk assessment for PrEP indication including injection behaviors, sexual preference & gender identification in non-judgemental manner. ✓ Effectively & independently engages in shared decision making regarding PrEP including exploring patient knowledge, preference, medication rationale & alternatives. ✓ Demonstrates understanding & independently 	<ul style="list-style-type: none"> ✓ All level 4 behaviors & Role modeling & teaches PrEP management ✓ Engages in QI or community activities to promote PrEP uptake.

National HIV Residency Pathway Consortium Toolkit

		✓ Understands routine & ongoing monitoring but may require assistance with intercurrent issues including incident STIs, medication side effects.	explains & perform routine & ongoing monitoring for HIV risk & STI	
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Not Assessed: "

Comment:

Action Plan

- 1. What do you identify as the strengths for this trainee?**

- 2. What do you identify as areas for growth over the next six months?**

- 3. List any specific aspects of the HIV training track that the trainee should be working on enhancing & improving:**