

DHRPC Disclosure Form

Disclosure: Disclosure is defined as an “act of making new or secret information known.” A key element in avoiding perceived or actual conflicts of interest is to ensure a system is in place under which those serving on the DHRPC provide full disclosure of agency affiliations, and any direct or indirect financial or other interest in a decision made by the DHRPC.

Directions: Provide the names of Ryan White funded agencies that you, your spouse, or domestic partner served in the position of board member, volunteer, intern, paid staff, or contract employee within the last year.

Agencies You, Your Spouse, or Domestic Partner have Served as a Board Member, Volunteer, Intern, Paid Staff or Contract Employee Within the Last Year:

List other HIV-related agency affiliations: _____

Check the box to the left of the services provided by the agencies funded by Ryan White.

SERVICES PROVIDED		SERVICES PROVIDED	
<input type="checkbox"/>	AIDS Drug Assistance Program (ADAP)	<input type="checkbox"/>	Mental Health Services
<input type="checkbox"/>	Case Management (non-medical)	<input type="checkbox"/>	Oral Health Care
<input type="checkbox"/>	Early Intervention Services	<input type="checkbox"/>	Outpatient Ambulatory Health Services
<input type="checkbox"/>	Emergency Financial Assistance	<input type="checkbox"/>	Psychosocial Support
<input type="checkbox"/>	Food Bank/Home Delivered Meals	<input type="checkbox"/>	Substance Abuse Services Outpatient
<input type="checkbox"/>	Health Insurance & Cost Sharing Assistance	<input type="checkbox"/>	Other Ryan White Funded Services:
<input type="checkbox"/>	Home & Community-based Health Services	<input type="checkbox"/>	
<input type="checkbox"/>	Housing Services	<input type="checkbox"/>	
<input type="checkbox"/>	Medical Case Management	<input type="checkbox"/>	
<input type="checkbox"/>	Medical Transportation Services	<input type="checkbox"/>	

☐ I do not have any agency affiliations as described above.

As a member of the DHRPC, I hereby acknowledge that I have read and understand this Disclosure policy, and I accept its conditions. Prior to any discussions, I agree to disclose agency affiliations and direct or indirect financial interests in a decision of the DHRPC. I agree to provide a comprehensive list of all HIV-related affiliations annually to DHRPC, which also will be available to the public upon request.

Areas of Expertise

DHRPC members bring a wealth of experience to the Planning Council and can speak freely from an area of expertise to inform fellow DHRPC members of the implications of decisions.

Check Areas of Expertise	Topic
Service Delivery Expertise	
	AIDS Drug Assistance Programs
	Pharmacy Services
	Case Management
	Early Intervention Services
	HIV Testing
	Linkage to Care
	Retention in Care
	Emergency Financial Assistance
	Food Bank
	Home Delivered Meals
	Health Insurance & Cost Sharing Assistance
	Home & Community-based Health
	Housing
	Medical Case Management
	Medical Transportation
	Mental Health
	Oral Health Care
	Medical Care
	Adherence Counseling
	Psychosocial Support
	Substance Abuse Prevention or Treatment
	Other:
	Other:
	Other:
Community Expertise	
	Services for people living with HIV
	Services for African Americans/Blacks
	Services for African Immigrants
	Services for Latinx
	Services for Native Americans
	Services for Asian Americans
	Services for people who are homeless
	Services for people who have been or are incarcerated
	Services for children and youth

Check Areas of Expertise	Topic
	Services for men who have sex with men
	Services for those who are gay, lesbian, bisexual, transgender or questioning
	Services for women
	Services for injection drug users
	Services for immigrants or refugees
	Services for people who are undocumented
	Services for people with disabilities
	Services for sex workers
	Services for veterans or current military personnel
	Services for people who are transgender
	Services for older people living with HIV
	Services for people who are low income
	Services for people with Hepatitis B or C
	Other:
	Other:
	Other:
Agency-Specific Expertise	
	Medicaid or Medicare
	Public Health
	Hospitals or Clinics
	Non-profit organizations
	Social Services
	Health Planning
	Federally Recognized Indian Tribes
	Epidemiology and Surveillance
	Disease Prevention or Health Promotion
	Community organizing or leader
	Community leader
	Outreach
	Research and Evaluation
	Media or public information
	Other:
	Other:
	Other:

Name: (Please Print): _____

Signature: _____

Date: _____