



For Office Use: Input

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MEMBER INTAKE FORM

Date: _____ How Did You Hear About Us? _____ What is your immediate concern? _____

Name: Last: _____ First: _____ M.I.: _____ Birth Date: ____/____/____

Primary Phone: (____) _____ Does this number receive text messages? Y N May we text you? Y N

Address: _____ Apt: _____ City: _____ State: _____ Zip: _____

May we send you mail at this address? YES NO May we identify ourselves on a voice message? YES NO

Email: _____ May we email you? YES NO

For appointment reminders, what is your preferred method of contact (circle one): PHONE EMAIL TEXT

Do you work, rent, go to school, own property, or are homeless in West Hollywood? YES NO

If YES, Employer Name and Address: _____
Please provide verification of West Hollywood affiliation.

Gender Identity: Male Female Transgender (please specify FTM MTF) Gender at birth: Male Female

Are your sexual partners primarily (mark all that apply): Men Women Transgender Non-Binary Other _____

Race/Ethnicity: _____ Primary Language: _____ Family/ Household Size: _____

Annual Income: _____ Occupation/ Source of Income: _____ Dependent Children: _____

HIV Status: HIV Negative HIV +/-no symptoms HIV +/- with symptoms AIDS /no symptoms AIDS / with symptoms

Date of your first HIV Diagnosis: ____/____/____ Viral load _____ as of _____ CD4 _____ as of _____

How did you contract HIV: Sexual Contact _____ IV Drug Use _____ Other _____

If HIV Negative, what was the date of last HIV Test (if HIV-) _____ If HIV-, are you currently on PrEP? YES NO

Are you in a sero-discordant relationship (HIV+ and HIV-)? YES NO

Rate yourself at managing your own healthcare: Excellent Good Fair Poor

What (if anything) is keeping you from managing your healthcare? _____

Where do you access medical care? _____ What is your provider's name? _____

Which is your pharmacy? _____ What are your HIV Meds? _____

What type of medical insurance do you have? _____

If on HIV Meds, do you take them as prescribed? Always Sometimes Rarely Never N/A

If HIV- and on PrEP, do you take it as prescribed? Always Sometimes Rarely Never N/A

Do you need more knowledge or understanding about HIV/AIDS? YES NO

Do you need help in setting up a better adherence plan? YES NO Do you need Peer Support? YES NO

Substance Use History: Yes, within past year Yes, not within past year No History Decline to state

Are you currently in treatment for substance use? YES NO If yes, where? _____

Are you currently in treatment for mental health issues? YES NO If yes, where? _____

Do you have any current risk behaviors? Unprotected Sex Crystal Meth Use IV Drug use None

Please check the outside services listed below that you may need referrals to:

_____ Housing _____ Transportation _____ Legal _____ Food Banks _____ Medical/ Dental Resources

_____ Case Mgmt. (Benefits) _____ Mental Health Counseling _____ Drug/ Alcohol Mgmt. _____ Other

Emergency Contact

Name, Last: _____ First: _____ Phone: (_____) _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Is this person aware of your HIV Status? YES NO

By signing below, I authorize Being Alive to release/share information with other like agencies regarding services I've received, my HIV status, finances, and physical/mental conditions for purposes of assistance in gaining services related to my needs. This information may be shared through mail, by telephone/fax, or electronic computer mail. I understand that I may revoke this consent at any time, by contacting Being Alive in person, by phone or in writing. (A list of these other agencies will be provided to me upon request, and I may add other specific agencies to this consent. I have been given the HIV/AIDS Patient's Bill of Rights/Responsibilities and been made aware of the Grievance Procedures.)

 X _____
Member Signature

Date

 X _____
Staff Signature

Date

Office Use:
Necessary paperwork for eligibility: Proof of residency: _____ Proof of Diagnosis: _____ Proof of WeHo Qualification _____

Please mark the services in which you are interested:

Wellness Center

Being Alive offers a variety of alternative & holistic practices that will complement the drug therapies that most people take to reach and maintain an undetectable viral load. The program includes therapies such as Chiropractic, Acupuncture, Reiki, Massage and more.

Dignity Plus (Psychotherapy)

This ground breaking Mental Health program will pair you with a Master's level Psychotherapy Trainee or Associate. They offer individual, group, couples, family, and short term crisis counseling implementing a variety of therapeutic modalities. There is no predetermined limit on the number of sessions offered.

Activities & Events

Being Alive offers social events and other activities designed to bring people out of isolation and find support and friendships with others living with HIV & AIDS. In addition to weekly activities such as ceramics, acting and writing workshops, field trips to area attractions are offered several times a year. Past field trips have included The Getty, Huntington Gardens, Norton Simon Museum, Doheny Beach, and Point Fermin Lighthouse. Concert tickets for Disney Hall, Hollywood Bowl, LA Ballet and other venues are also offered throughout the year.

Support Groups/Classes

Being Alive hosts nightly support groups including: "Strength Within" for HIV+ Women; a fun and educational group to remove stigma from sex called "Shameless," "Wise Guys" for long-term survivors, "Positively New" for those newly diagnosed with HIV, an open group called "Friday Night Light", and an AA group. Groups are open to anyone and their friends/family, and are subject to change based on the needs of the community. Classes are frequently offered with topics ranging from apartment gardening, cooking on a budget, advanced planning, immigration, and more.

Medical Updates/ Treatment Education

Learn current information on medical breakthroughs, clinical trials, drug interactions, new treatment options, etc. at monthly presentations from HIV experts, clinicians, researchers, and other guest speakers. These updates include a complementary meal.

Prevention / Get Real / PeP/PrEP Workshops

Group & individual risk reduction counseling sessions that enhance personal strategies to improve life skills are offered at Being Alive. Topics frequently discussed include HIV/STD transmission, disclosure, reducing substance misuse, sex, dating, & relationships. The Group workshops also present information and referrals for PrEP and PEP. Incentives are provided for attending all 3 weekly sessions, and a light lunch is included at group presentations.

Care Management

Staff members are able to help clients get linked to medical care including PrEP treatment, find resources for food, shelter, and clothing, and general support for those finding difficulty navigating the services available to the community.

Advocacy/Outreach

Opportunities exist throughout the year to help with outreach at events, informing people about reducing risk for STI and HIV transmission, proper condom usage, and general information to help others have a healthy approach to intimacy and sex. Additionally, clients can choose to participate in events to raise awareness about HIV, community needs, and available services.