POLICY

HIV INFECTION AND AIDS

REVIEW/REVISION HISTORY:

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SUMMARY OF REVISION/REVIEW:

I.F. - Removed language per DOC 890.600 Bloodborne Pathogens (BBP) Protection and Exposure Response
V.A.2.a. - Removed statute reference
V.A.2.b. - Adjusted reference title

APPROVED:

Signature on file

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BERNARD WARNER, Secretary
Department of Corrections

Date Signed
POLICY

REFERENCES:

DOC 100.100 is hereby incorporated into this policy; RCW 70.24.370; WAC 246-100-072; WAC 246-100-207; WAC 246-100-209; ACA 4-4357; ACA 4C-10; DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting; DOC 590.100 Extended Family Visiting; DOC 620.020 Non-Consensual Blood Draws; DOC 890.600 Bloodborne Pathogen (BBP) Protection and Exposure Response; Health Information and Patient Education Self-Help Guide; Health Information Management Protocols; HIV Protocol; Offender Health Plan

POLICY:

I. [4C-10] The Department recognizes the risk of exposure to Human Immunodeficiency Virus (HIV) in the correctional setting. This risk is managed by providing information, training, and materials to offenders, employees, contract staff, and volunteers as appropriate.

II. The Department will have programs and practices to reduce the risk of spreading HIV within the correctional setting and upon release, provide HIV testing and counseling to incarcerated offenders, and provide medical management for incarcerated offenders diagnosed with HIV or Acquired Immune Deficiency Syndrome (AIDS). [4-4357]

DIRECTIVE:

I. HIV Information and Testing

A. [4-4357] [4C-10] HIV/AIDS information, DOH Pub 430-021 HIV Testing - Patient Information (Attachment 2), will be provided to all offenders as part of the reception process. Thereafter, education and HIV testing will be offered on a voluntary basis to all offenders in all Department facilities.

1. Work Release employees/contract staff may access the Health Information and Patient Education Self-Help Guide.

B. Offenders will be provided HIV testing during intake at the Reception Diagnostic Centers, unless they refuse to give consent. [4-4357]

C. An offender may request testing at any time during incarceration. [4-4357]

1. Unless clinically indicated, testing will be done no more than once every 6 months.

2. Such testing is exempt from the Department’s co-payment program.

D. In Work Releases other than Rap House/Lincoln Park, an offender will request testing from his/her private health care provider and/or local health department at his/her own expense. [4C-10]
E. At any time during incarceration, a health care practitioner will recommend voluntary testing for clinical purposes per the Offender Health Plan.
   
   1. Offenders who are known to be pregnant will be provided DOH Pub 410-015 Prenatal Testing for HIV - What You Should Know (Attachment 1) and will be provided HIV testing, unless they refuse to give consent.
   
   2. Offenders who have requested or are receiving treatment for a sexually transmitted disease, or have viral hepatitis, a positive tuberculosis test, or any other risk factors for HIV, will be counseled about HIV risk factors and encouraged to consider voluntary HIV testing.

F. When the Superintendent/Community Corrections Supervisor has determined that an exposure to blood or other potentially infectious body fluids has occurred, voluntary or involuntary source person testing will be conducted per DOC 890.600 Bloodborne Pathogens (BBP) Protection and Exposure Response.

G. If an HIV test was conducted in Prison, the date will be released to local health jurisdictions in response to a court order for HIV testing.

H. Consent is required for voluntary testing and will be obtained verbally and documented on DOC 13-303 History and Physical or DOC 13-435 Primary Encounter Report.

I. Consent is not required for involuntary testing, which will be handled per DOC 620.020 Non-Consensual Blood Draws.

II. Post-Test Counseling

A. Prison offenders who have been tested for HIV will be offered post-test counseling. Prison offenders who test positive for HIV will receive post-test counseling that meets Department of Health standards as established by WAC 246-100-209. The counseling will:

   1. Increase the offender’s understanding of HIV infection,
   
   2. Seek to influence the offender’s behavior in ways to reduce the risk of acquiring and transmitting HIV,
   
   3. Encourage the offender testing positive to notify individuals with whom there has been contact capable of spreading HIV,
   
   4. Refer the offender to facility or community support services and risk reduction services, when appropriate, and
5. Inform an HIV positive offender that it may be a crime to expose another person to HIV through consensual sex or otherwise without disclosing the infection to that person.

B. [4C-10] Work Release offenders will be referred to their private health care provider and/or the local health department for post-test counseling.

III. Reporting

A. Reports will be submitted per WAC 246-100-072 and WAC 246-100-207.

B. Health services employees/contract staff will contact the Department of Health’s Partner Counseling and Referral Services to arrange assistance for HIV positive offenders in notifying exposed individuals.

IV. Treatment

A. [4-4357] Treatment of HIV positive offenders will be delivered per the HIV Protocol.

V. Confidentiality

A. [4C-10] No person may disclose or be compelled to disclose the identity of any offender tested for a sexually transmitted disease, including HIV, the results of such a test, or any information regarding the diagnosis of or treatment for a sexually transmitted disease in a manner which permits identification of the offender or his/her diagnosis or treatment. Exceptions may be made only as follows:

1. Information pertaining to an offender’s HIV testing results may be disclosed to Superintendents when necessary for facility security or the safety of another person.

2. Information concerning an offender’s HIV status may be disclosed per:

   a. DOC 890.600 Bloodborne Pathogen (BBP) Protection and Exposure Response to employees, contract staff, and volunteers who have experienced a substantial exposure, and

   b. The Department’s Health Information Management Protocols.

B. If an offender seeking counseling, testing, or treatment for a sexually transmitted disease indicates to a health care provider that s/he has been a victim of sexual misconduct, the health care provider will report the information per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting.
1. The health care provider will not disclose information about the offender’s sexually transmitted disease status or the fact that the offender requested or had an HIV antibody test.

VI. Programs/Housing

A. [4-4357] [4C-10] Offenders who are HIV positive will not be denied access to program, housing, or work opportunities based solely on their antibody status. An offender’s need for special medical housing will be based on his/her individual treatment plan.

B. The following must occur before an extended family visit between an HIV positive offender and a spouse/state registered domestic partner is approved:

1. The offender will complete DOC 13-035 Authorization for Disclosure of Health Information to agree to divulge HIV positive status to his/her spouse/state registered domestic partner.

2. A health care provider will conduct a counseling session with the offender and the offender’s spouse/state registered domestic partner to make them aware of the implications of positive status and to provide information regarding safer sex.

3. Both the offender and spouse/state registered domestic partner will sign DOC 13-437 Family Visit Counseling. The completed form will be filed in the legal section of the offender’s health record.

4. Condoms or another form of barrier protection will be provided to the offender for use during an extended family visit with a spouse/state registered domestic partner per DOC 590.100 Extended Family Visiting.

DEFINITIONS:

The following words/terms are important to this policy and defined in the glossary section of the Policy Manual: Acquired Immune Deficiency Syndrome (AIDS), Health Care Provider, Human Immunodeficiency Virus (HIV), Sexually Transmitted Disease, Spouse. Other words/terms appearing in this policy may also be defined in the glossary.

ATTACHMENTS:

DOH Pub 410-015 Prenatal Testing for HIV - What You Should Know (Attachment 1)
DOH Pub 430-021 HIV Testing - Patient Information (Attachment 2)
### DOC FORMS:

- DOC 13-035 Authorization for Disclosure of Health Information
- DOC 13-303 History and Physical
- DOC 13-435 Primary Encounter Report
- DOC 13-437 Family Visit Counseling