

HIV Testing

All clients of the Connecticut Department of Corrections (DOC) are offered HIV testing unless they opt out or have a previous HIV-positive diagnosis. Verification of HIV status can be obtained from the Connecticut Department of Public Health (DPH) HIV Surveillance Division at (860) 509-7900.

Demographic and locating information should be collected from the client prior to testing, specifically: name; date of birth; residential address; home and mobile telephone numbers; race; ethnicity; gender; marital status; photo I.D.; and emergency contact. Once a client has consented to testing, they are offered rapid testing or conventional testing.

Rapid Method– Finger stick-based test is performed. If results are positive, a blood specimen will be collected by venipuncture and sent to a laboratory in accordance with current guidance for submission of specimens for HIV testing at DOC facilities.

Conventional – Blood will be collected by venipuncture and sent to a laboratory in accordance with current guidance for submission of specimens for HIV testing at DOC facilities.

Communication of confirmatory test results – When the DOC healthcare provider has received the positive HIV confirmatory results, the provider should contact the client to provide HIV results in person. The client should be informed that a Disease Intervention Specialist (DIS) from the Connecticut Department of Public Health (DPH) will be notified. The DIS will interview and provide education about medication adherence to the client at the facility.

Referral to Partner Services of New Positives

The DOC healthcare provider must complete the *Client Referral Form for Partner Services*. If partners have been identified by the client, a *Partner Referral Form for Partner Services* should be completed for each partner (if no partners have been identified, do not complete this form).

The DOC healthcare provider will contact the DIS assigned to cover all DOC facilities. After speaking with the DOC DIS about the newly-detected case, the provider will fax the information listed below to the number listed on the referral form, or another number specified by the DOC DIS:

- Copy of Clinical Intake Form;
- HIV test results;
- Results of any other tests performed (e.g., syphilis, chlamydia, gonorrhea, tuberculosis);
- Client Referral Form; and
- Partner Referral Form for each partner who has been identified by the client.

DOC healthcare providers should expect a call back within one business day of leaving a phone message for the DOC DIS. If no response is received within 24 hours, please contact the Region 1 DIS Supervisor.

Post referral activities – The DOC DIS will make arrangements with the VIP Coordinator (the on-site DOC staff person designated to serve as a liaison to other state agencies and volunteer organizations) and healthcare provider at the DOC facility to meet with the client. In the event that the client is

discharged from DOC before the scheduled interview date, the healthcare provider will notify the DOC DIS.

Notification of Newly-Diagnosed Who Are Not Available for Results

If a client is no longer in custody of DOC and results cannot be provided in person, the DOC healthcare provider should notify the DOC DIS immediately. The DOC DIS will make at least two attempts to locate and deliver HIV results in person. If these attempts are not successful, the DOC DIS will close out the case as “not located” in the Connecticut Electronic Disease Surveillance System (CTEDSS), and the DOC healthcare provider will be notified.

Referral to Partner Services of Previously-Positive, Co-infected Persons

If an HIV-positive client is newly co-infected with syphilis, gonorrhea, and/or chlamydia, the same referral procedures will be followed as detailed above. See below the complete list of criteria for referring a previously-positive HIV client to Partner Services.

Referral criteria for previously-positive DOC clients – Previously diagnosed, with an HIV diagnosis of at least 12 months and at least one of the following:

- New reportable STD diagnosis (syphilis, gonorrhea or chlamydia) and infected within the last 3 months.
- Unprotected sex within the last 3 months with any of the following: multiple partners; anonymous partner(s); and/or new sex partner(s).
- Known partners unaware of status, client having sex after HIV diagnosis.
- Client is requesting Partner Services for a new partner.
- HIV positive clients with a current viral load > 100,000 c/ml.
- Someone diagnosed and currently incarcerated in DOC who was never interviewed for partners.

DPH Partner Services Providers for DOC

DOC DIS

Tia Gaines

Phone: (860) 8243

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Region 1 DIS Supervisor

Ava Nepaul

Phone: (860) 509-8239