NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
610

HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)

Supersedes: AR 610 (05/19/2015); (10/12/16, Temporary); (06/07/17, Temporary)
Effective date: 05/15/18

AUTHORITY: NRS 209.131; NRS 209.385; NRS 209.511; NRS 441A

PURPOSE

To ensure that inmates, while incarcerated in the Nevada Department of Corrections, will be afforded the opportunity to receive screening, counseling and treatment services. This regulation works to provide guidance on reporting, protection of protected health information, and responsibilities related to inmates with HIV or AIDS.

RESPONSIBILITY

The Director is responsible to ensure administration of all regulations.

The Medical Director is responsible to ensure implementation of this regulation.

All Medical Division staff and all Medical Officers are responsible for compliance with this regulation.

610.01 HIV STATUS AND AIDS INFORMATION

1. The Department should deliver treatment, programs, and services to inmates with Human Immunodeficiency Virus (HIV) antibodies.

2. Mandatory screening for HIV will be conducted during the intake process on all inmates housed in the Department and after an incident involving the inmate.

3. All inmates who test positive for HIV in the initial screening test shall be retested, as the Medical Director determines appropriate, for confirmation.

A. Positive results from the confirmatory test for HIV do not necessarily indicate that the inmate has Acquired Immunodeficiency Syndrome (AIDS), but that the inmate is presumed to be infected with HIV.
4. All inmates will be given AIDS information handouts coupled with an educational and pre-test counseling component explicitly emphasizing modes of transmission and specific risk reduction behaviors during the intake orientation process.

A. Inmates that test positive for HIV will be offered voluntary counseling during incarceration and prior to release from prison.

610.02 REQUIREMENTS FOR INMATES WHO TEST HIV POSITIVE

1. The name of the inmate(s) who test positive for HIV antibodies in the supplemental test may be disclosed to the following parties via a confidential list prepared and distributed by Medical Administration to:

A. Director;

B. Medical Director and those responsible for the medical treatment of the inmate or require the employee to come into contact with the blood or bodily fluids of the inmate;

C. Inmate management administrative officers; and

D. The Warden/manager of each institution/facility at which the inmate is confined.

2. Outdated lists should be shredded or deleted.

3. If an employee of the Department comes into contact with the blood or bodily fluids of an inmate the Warden/manager/Shift Supervisor may contact medical staff to inquire if the subject inmate has tested positive for HIV. The Warden/Manager/Shift Supervisor should inform the employee if the inmate is HIV positive for their own protection and medical need.

4. All information of a personal nature about any person that concerns a real or suspected case of a communicable disease is confidential medical information.

A. Disclosure of the names of persons infected with HIV virus is prohibited except as provided for in Nevada Revised Statute 209.385 and 441.A.220.

B. No Department employee who has knowledge of an infected inmate based on his legal right to know may disclose this information to anyone except as described in paragraphs section 1 and 3 above.

C. Unauthorized disclosure of confidential information may result in disciplinary action.

5. In cases of inmate disciplinary action where there is evidence that a HIV positive inmate engaged in behavior that increases the risk of transmitting the virus, such as battery,
sexual activity, illegal intravenous injection of a controlled substance or a dangerous drug, or receiving or giving of tattoos, the inmate must be segregated from every other inmate whose HIV test results are negative.

A. Subsequent to being assigned to conduct a Disciplinary Hearing (DH) but prior to the actual Disciplinary Hearing, the Disciplinary Hearing Officer (DHO) will review the Offense In Custody (OIC) report to determine if any of the alleged inmate behavior increased the risk of transmitting the virus, and if so they will contact designated medical staff to inquire whether the inmate tested positive for HIV.

B. If there is any question as to whether the behavior in the OIC increased the risk of transmitting the virus or not, medical staff will be consulted prior to the DH.

C. If found guilty, or if the inmate pleads guilty, at the DH to any OIC which is for behavior that increases the risk of transmitting the virus, the DHO, in order to comply with the mandatory segregation stipulated in NRS 209.385.4, must impose a Disciplinary Segregation (DS) sanction appropriate for that OIC, and in line with the approved Chart of Disciplinary Sanctions.

D. Upon completion of the imposed DS, such inmate would be eligible for reclassification as deemed appropriate, to include returning to their prior custody level, provided they are no longer engaging in the same or other behavior that increases the risk of transmitting the virus.

6. Staff will use Standard (Universal) Precautions.

610.03 DEPARTMENT’S RESPONSIBILITY TO INMATES

1. All inmates will be provided with an educational program during the inmate orientation process and annually thereafter to provide information about HIV infection, means of virus transmission and measures to prevent transmission.

A. HIV positive inmates and those with AIDS will receive adequate mental health and medical care, including the availability of standard diagnostic tests and medications proven to be effective.

B. Inmates may be entered into approved medication trials after signing informed consent and with the approval of the Medical Director/Designee.

610.04 EXIT TESTING AND DISSEMINATION OF INFORMATION TO STATE HEALTH DIVISION

1. Correctional Case Records Manager/designee will provide the Medical Division a printout that lists inmate discharges.
A. The Medical Division will contact each inmate on the list to have the required exit labs drawn.

2. All inmates paroling or discharging will be tested for HIV prior to release from custody.

3. The Medical Division staff at each institution will ensure that counseling is conducted by a practitioner for all inmates who have confirmed positive results. Appropriate reports will be sent to the State Health Division by the Disease Control Specialist III.

A. If the inmate is released before receiving confirmed test results, the Disease Control Specialist III will notify the inmate (if forwarding address known) and the State Health Division in writing of confirmed positive tests and to advise that post-test counseling and contact tracing are required.

APPLICABILITY

1. This regulation requires a Medical Directive for HIV treatment, management and precautions for NDOC institutions and facilities.

2. This regulation requires an audit.

REFERENCES:

National Commission on Correctional Health Care Standards, 2014 Revision, P-B-01.

Medical Directive

6/12/18

Date

Director

5-15-18

Date