

Seek, Test, Treat and Retain for Criminal Justice Populations: Data Harmonization Measure

HIV/HCV/STI TESTING

HIV/HCV Testing Domains Measure

PART I

This series of questions is intended to be collected at baseline through self-report from participants.

HIV

1. Have you ever been tested for HIV?
 - Yes
 - No (SKIP TO Q4)
 - Don't Know (SKIP TO Q4)
 - Refused(SKIP TO Q4)

2. Where have you been tested for HIV? (CHECK ALL THAT APPLY)
 - In jail
 - In prison
 - In an outpatient clinic (SKIP TO Q3)
 - In a hospital, as an inpatient (SKIP TO Q3)
 - In an Emergency Department (SKIP TO Q3)
 - In a community-based program (community VCT program, mobile unit, health fair, etc.) (SKIP TO Q3)
 - In a syringe exchange program (SKIP TO Q3)
 - In a drug treatment program (SKIP TO Q3)
 - Donating blood or plasma (SKIP TO Q3)
 - Other (please specify _____) (SKIP TO Q3)
 - Don't know (SKIP TO Q3)
 - Refused (SKIP TO Q3)

- 2a. The last time you were tested for HIV in prison or jail (which may include during this incarceration), were you (SELECT ONE):
 - Asked if you wanted an HIV test (opt-in)
 - Told you would be getting a test, but given a chance to refuse (opt-out)
 - Not given a choice about whether or not to be tested
 - Don't Know
 - Refused

- 2b. Did you receive the results of your most recent test for HIV in prison or jail (which may include during this incarceration)?
 - Yes
 - No (SKIP TO Q2d)
 - Don't Know (SKIP TO Q2d)
 - Refused (SKIP TO Q2d)

- 2c. The last time you were tested for HIV, how quickly did you receive the results of the test?
 - Within the hour
 - More than an hour, but within the same day
 - The following day
 - More than a day, but within the week
 - More than a week later
 - Don't Know
 - Refused

- 2d. Did the last HIV test you took use a swab from your mouth, blood from your finger, or blood from your arm?
- Swab from mouth
 - Blood from finger
 - Blood from arm
 - Other
 - Don't Know
 - Refused
3. Have you been tested for HIV within the past 12 months?
- Yes
 - No (SKIP TO Q4)
 - Don't Know (SKIP TO Q4)
 - Refused (SKIP TO Q4)
- 3a. Where were you tested for HIV during the past 12 months? (CHECK ALL THAT APPLY)
- In jail
 - In prison
 - In an outpatient clinic
 - In a hospital, as an inpatient
 - In an Emergency Department
 - In a community-based program (community VCT program, mobile unit, health fair, etc.)
 - In a syringe exchange program
 - In a drug treatment program
 - Donating blood or plasma
 - Other (please specify _____)
 - Don't know
 - Refused
4. Has a doctor, nurse or other health care provider ever told you that you had HIV?
- Yes
 - No (SKIP TO Q6)
 - Don't Know (SKIP TO Q6)
 - Refused (SKIP TO Q6)
- 4a. When were you told you had HIV?
- Less than 1 year ago
 - 1-4 years ago
 - 5-9 years ago
 - More than 10 years ago
 - Don't Know
 - Refused
- 4b. Where were you told that you have HIV? (CHECK ALL THAT APPLY)
- In jail
 - In prison
 - In an outpatient clinic
 - In a hospital, as an inpatient
 - In an Emergency Department

- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

5. Have you ever taken medication to treat HIV?

- No (SKIP TO Q6)
- Yes, I am taking it now
- Yes, I took it in the past but stopped
- Don't Know (SKIP TO Q6)
- Refused (SKIP TO Q6)

5a. When did you first start treatment for HIV?

- 6 months ago or less
- More than 6 months ago, but less than 1 year
- 1-4 years ago
- 5 or more years ago
- Don't Know
- Refused

5b. When did you most recently start or re-initiate treatment for HIV?

- 6 months ago or less
- More than 6 months ago, but less than 1 year
- 1-4 years ago
- 5 or more years ago
- Don't Know
- Refused

5c. Where did you receive your most recent treatment? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In a community-based clinic
- In a hospital, as an inpatient
- In a residential treatment facility or assisted care facility
- Part of a research study
- Other (please specify _____)
- Don't know
- Refused

6. During your current or most recent incarceration, did you receive any information or education about HIV? (CHECK ALL THAT APPLY)

- Yes, one-on-one counseling
- Yes, group educational session
- Yes, video-based counseling
- Yes, written informational/educational materials
- No

- Don't Know
- Refused

HEPATITIS C VIRUS

7. Have you ever been tested for hepatitis C virus?

- Yes
- No (SKIP TO Q10)
- Don't Know (SKIP TO Q10)
- Refused (SKIP TO Q10)

8. Where have you been tested for hepatitis C virus? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

9. Have you been tested for hepatitis C virus within the past 12 months?

- Yes
- No (SKIP TO Q10)
- Don't Know (SKIP TO Q10)
- Refused (SKIP TO Q10)

9a. Where were you tested for hepatitis C virus during the past 12 months?
(CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

9b. Did you receive the results of your most recent test for hepatitis C virus?

- Yes
- No

- Don't Know
- Refused

10. Has a doctor, nurse or other health care provider ever told you that you had hepatitis C virus?

- Yes
- No (SKIP TO Q12)
- Don't Know (SKIP TO Q12)
- Refused (SKIP TO Q12)

10a. When were you told you had hepatitis C?

- 6 months ago or less
- More than 6 months ago, but less than 1 year
- 1 year ago or more
- Don't Know
- Refused

10b. Where were you told that you have hepatitis C virus? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

11. Have you taken medication to treat Hepatitis C, like Interferon and Ribavirin?

- No (SKIP TO Q12)
- Yes, I am taking it now (full dose)
- Yes, I am taking it now (but at a reduced dose)
- Yes, I took it in the past and completed the full course
- Yes, I took it in the past but stopped because of side effects
- Yes, I took it in the past but stopped for other reason(s)
- Don't Know (SKIP TO Q12)
- Refused (SKIP TO Q12)

11a. When did you start treatment for HCV?

- 6 months ago or less
- More than 6 months ago, but less than 1 year
- 1 year ago or more
- Don't Know
- Refused

11b. Where did you receive your treatment? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In a community-based clinic

- In a hospital, as an inpatient
- In a residential treatment facility or assisted care facility
- Part of a research study
- Other (please specify _____)
- Don't know
- Refused

12. During your current or most recent incarceration, did you receive any information or education about hepatitis C virus? (CHECK ALL THAT APPLY)

- Yes, one-on-one counseling
- Yes, group educational session
- Yes, video-based counseling
- Yes, written informational/educational materials
- No
- Don't Know
- Refused

HEPATITIS B VIRUS

13. Have you ever been tested for hepatitis B virus?

- Yes
- No (SKIP TO Q16)
- Don't Know (SKIP TO Q16)
- Refused (SKIP TO Q16)

14. Where have you been tested for hepatitis B virus? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

15. Have you been tested for hepatitis B virus within the past 12 months?

- Yes
- No (SKIP TO Q16)
- Don't Know (SKIP TO Q16)
- Refused (SKIP TO Q16)

15a. Where were you tested for hepatitis B virus during the past 12 months? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic

- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

15b. Did you receive the results of your most recent test for hepatitis B virus?

- Yes
- No
- Don't Know
- Refused

16. Has a doctor, nurse or other health care provider ever told you that you had hepatitis B virus?

- Yes
- No (SKIP TO Q17)
- Don't Know (SKIP TO Q17)
- Refused (SKIP TO Q17)

16a. When were you told you had hepatitis B?

- 6 months ago or less
- More than 6 months ago, but less than 1 year
- 1 year ago or more
- Don't Know
- Refused

16b. Where were you told that you have hepatitis B virus? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Donating blood or plasma
- Other (please specify _____)
- Don't know
- Refused

17. Have you received any hepatitis B vaccinations?

- Yes
- No (SKIP TO Q19)
- Don't Know (SKIP TO Q19)
- Refused (SKIP TO Q19)

17a. Where did you receive an hepatitis B vaccination? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a community-based program (community VCT program, mobile unit, health fair, etc.)
- In a syringe exchange program
- In a drug treatment program
- Other (please specify _____)
- Don't know
- Refused

18. Have you completed the full series of 3 hepatitis B vaccinations?

- Yes
- No
- Don't Know
- Refused

19. During your current or most recent incarceration, did you receive any information or education about hepatitis B virus? (CHECK ALL THAT APPLY)

- Yes, one-on-one counseling
- Yes, group educational session
- Yes, video-based counseling
- Yes, written informational/educational materials
- No
- Don't Know
- Refused

SEXUALLY TRANSMITTED INFECTIONS

20. Have you been tested for gonorrhea within the past 12 months?

- Yes
- No (SKIP TO Q21c)
- Don't Know (SKIP TO 21c)
- Refused (SKIP TO Q21c)

20a. Where were you tested for gonorrhea during the past 12 months? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient, city or community clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a drug treatment program
- Other (please specify _____)
- Don't know
- Refused

20b. Has a doctor, nurse or other health care provider told you that you had gonorrhea within the past 12 months?

- Yes

- No
- Don't Know
- Refused

20c. Have you been treated for gonorrhea during the past 12 months?

- Yes
- No
- Don't Know
- Refused

21. Have you been tested for chlamydia within the past 12 months?

- Yes
- No (SKIP TO Q21c)
- Don't Know (SKIP TO Q21c)
- Refused (SKIP TO Q21c)

21a. Where were you tested for chlamydia during the past 12 months? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient city or community clinic
- In a hospital, as an inpatient
- In an Emergency Department
- In a drug treatment program
- Other (please specify _____)
- Don't know
- Refused

21b. Has a doctor, nurse or other health care provider told you that you had chlamydia within the past 12 months?

- Yes
- No
- Don't Know
- Refused

21c. Have you been treated for chlamydia during the past 12 months?

- Yes
- No
- Don't Know
- Refused

22. Have you been tested for syphilis within the past 12 months?

- Yes
- No (SKIP TO Q22c)
- Don't Know (SKIP TO Q22c)
- Refused (SKIP TO Q22c)

22a. Where were you tested for syphilis during the past 12 months? (CHECK ALL THAT APPLY)

- In jail
- In prison
- In an outpatient city or community clinic
- In a hospital, as an inpatient

- In an Emergency Department
- In a drug treatment program
- Other (please specify _____)
- Don't know
- Refused

22b. Has a doctor, nurse or other health care provider told you that you had syphilis within the past 12 months?

- Yes
- No
- Don't Know
- Refused

22c. Have you been treated for syphilis during the past 12 months?

- Yes
- No
- Don't Know
- Refused

PART II

This series of questions would be completed through a review of each participant's jail and/or prison medical record

HIV

1. Did the participant ever complete HIV antibody testing while in custody? (CHECK ALL THAT APPLY)
 - Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q5)
 - Don't Know (SKIP TO Q5)
 - Not available in record (SKIP TO Q5)

2. Did the participant complete HIV antibody testing when s/he was most recently in custody (which may include the current incarceration)?
 - Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q5)
 - Don't Know (SKIP TO Q5)
 - Not available in record (SKIP TO Q5)

3. What was the result of the HIV antibody test conducted when the participant was most recently in custody (which may include the current incarceration)?
 - Positive
 - Negative (SKIP TO Q5)
 - Indeterminate (SKIP TO Q5)
 - Unknown (SKIP TO Q5)

4. Was any follow-up testing, such as Western Blot, conducted when the participant was most recently in custody (which may include the current incarceration)?
 - Yes, in jail
 - Yes, in prison
 - No
 - Don't Know
 - Not available in record

5. Did the participant receive any treatment for HIV when most recently in custody (which may include the current incarceration)?
 - Yes, in jail
 - Yes, in prison
 - No
 - Don't Know
 - Not available in record

HEPATITIS C VIRUS

6. Did the participant ever complete HCV antibody testing while in custody? (CHECK ALL THAT APPLY)
 - Yes, in jail
 - Yes, in prison

- No (SKIP TO Q11)
 - Don't Know (SKIP TO Q11)
 - Not available in record (SKIP TO Q11)
7. Did the participant complete HCV antibody testing when s/he was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q11)
 - Don't Know (SKIP TO Q11)
 - Not available in record (SKIP TO Q11)
8. What was the result of the HCV antibody test conducted when the participant was most recently in custody (which may include the current incarceration)?
- Positive
 - Negative (SKIP TO Q12)
 - Indeterminate
 - Not available in record (SKIP TO Q12)
9. Was any follow-up testing, such as genotype or HCV viral load testing, conducted when the participant was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q12)
 - Don't Know (SKIP TO Q11)
 - Not available in record (SKIP TO Q11)
10. What was the result of the follow-up/confirmatory HCV testing conducted when the participant was most recently in custody (which may include the current incarceration)?
- Positive
 - Negative (SKIP TO Q12)
 - Indeterminate
 - Unknown
11. Did the participant receive any treatment for HCV when most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No
 - Don't Know
 - Not available in record

HEPATITIS B VIRUS

12. Did the participant ever complete HBV testing while in custody? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q16)
 - Don't Know (SKIP TO Q16)
 - Not available in record (SKIP TO Q16)

13. Did the participant complete HBV testing when s/he was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q16)
 - Don't Know (SKIP TO Q16)
 - Not available in record (SKIP TO Q16)
14. What was the result of the HBV test conducted when the participant was most recently in custody (which may include the current incarceration)?
- HBsAg+
 - HBsAg-, HBcAb+, and HBsAb+
 - HBsAg-, HBcAb+, and HBsAb-
 - HBsAg-, HBcAb-, and HBsAb+
 - HBsAg-, HBcAb-, and HBsAb-
 - Unknown (SKIP TO Q17)
15. Was any follow-up testing or confirmatory testing for HBV such as HBV DNA, HBeAg, or HBeAb, conducted when the participant was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q17)
 - Don't Know (SKIP TO Q17)
 - Not available in record (SKIP TO Q17)
16. Was the participant vaccinated for hepatitis B virus when most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q17)
 - Don't Know (SKIP TO Q17)
 - Not available in record (SKIP TO Q17)
- 16a. How many vaccine doses did the participant receive while in custody?
- One
 - Two
 - Three
 - Don't Know
 - Not available in record
- 16b. Did the participant complete the vaccine series while in custody?
- Yes, in jail
 - Yes, in prison
 - No
 - Don't Know
 - Not available in record

SEXUALLY TRANSMITTED INFECTIONS

17. Did the participant complete gonorrhea testing when s/he was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q19)
 - Don't Know (SKIP TO Q19)
 - Not available in record (SKIP TO Q19)
18. What was the result of the gonorrhea test conducted when the participant was most recently in custody (which may include the current incarceration)?
- Positive
 - Negative (SKIP TO Q20)
 - Indeterminate
 - Unknown
19. Did the participant receive any treatment for gonorrhea when most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - Don't Know
 - Not available in record
20. Did the participant complete chlamydia testing when s/he was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q22)
 - Don't Know (SKIP TO Q22)
 - Not available in record (SKIP TO Q22)
21. What was the result of the chlamydia test conducted when the participant was most recently in custody (which may include the current incarceration)?
- Positive
 - Negative (SKIP TO Q23)
 - Indeterminate
 - Unknown
22. Did the participant receive any treatment for chlamydia when most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - Don't Know
 - Not available in record
23. Did the participant complete syphilis testing when s/he was most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - No (SKIP TO Q25)
 - Don't Know (SKIP TO Q25)
 - Not available in record (SKIP TO Q24)

24. What was the result of the syphilis test conducted when the participant was most recently in custody (which may include the current incarceration)?
- Positive
 - Negative (SKIP TO END)
 - Indeterminate
 - Unknown
25. Did the participant receive any treatment for syphilis when most recently in custody (which may include the current incarceration)?
- Yes, in jail
 - Yes, in prison
 - Don't Know
 - Not available in record

Questions related to HIV/viral hepatitis/STI testing and treatment policies of criminal justice settings:

PART III

This series of questions would be asked of medical directors/health service administrators/designee in the criminal justice setting where the STT project is being implemented.

1. Indicate which criminal justice setting(s) is represented in the following responses (CHECK ALL THAT APPLY).
- Jail
 - Prison
 - Community corrections
 - Other (specify: _____)

HIV

2. Does the criminal justice setting in which you are working provide any HIV testing to persons in custody? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - Yes, in community corrections
 - No (SKIP TO Q5)
 - Don't Know (SKIP TO Q6)
 - Refused (SKIP TO Q6)
3. Is there a routine HIV testing program in effect, whereby HIV tests are offered as a screening test for all persons in custody who are not known to be HIV-infected? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - Yes, in community corrections
 - No (SKIP TO Q5)
 - Don't Know
 - Refused
4. Is the routine HIV testing offered on an opt-in or opt-out basis? (CHECK ALL THAT APPLY) Opt-in means that a person will be asked if they want to be tested; opt-out means that a person is automatically tested unless they do not want to be tested.
- Jail: Opt-in (SKIP TO Q6)
 - Jail: Opt-out (SKIP TO Q6)
 - Prison: Opt-in (SKIP TO Q6)
 - Prison: Opt-out (SKIP TO Q6)
 - Community Corrections: Opt-in (SKIP TO Q6)
 - Community Corrections: Opt-out (SKIP TO Q6)
 - Jail: Don't Know (SKIP TO Q6)
 - Prison: Don't Know (SKIP TO Q6)
 - Community Corrections: Don't Know (SKIP TO Q6)
 - Refused (SKIP TO Q6)
5. Why is HIV testing not offered as a screening test in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)

- HIV testing test is too expensive
- Staffing constraints
- Inability to refer patients with HIV to specialty care
- HIV testing is beyond the scope of medical evaluation in our facility
- Other (specify _____)
- Don't Know
- Refused

6. Does the criminal justice setting in which you are working offer HIV treatment to HIV-infected persons in custody? (CHECK ALL THAT APPLY)

- Yes, in jail (SKIP TO Q8)
- Yes, in prison (SKIP TO Q8)
- Yes, in community corrections (SKIP TO Q8)
- No
- Don't Know (SKIP TO Q9)
- Refused (SKIP TO Q9)

7. Why is HIV treatment not offered or provided in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)

- HIV treatment is too expensive (SKIP TO Q9)
- Staffing constraints (SKIP TO Q9)
- Inability to transfer ongoing HIV treatment to the community upon release (SKIP TO Q9)
- HIV treatment is beyond the scope of medical services provided in our facility (SKIP TO Q9)
- Other (specify _____) (SKIP TO Q9)
- Don't Know (SKIP TO Q9)
- Refused (SKIP TO Q9)

8. Of HIV-infected persons in custody for whom treatment is indicated, what proportion receive treatment for HIV?

- All (100%)
- 75-99%
- 50-74%
- 25-49%
- 1-24%
- None (0%)
- Don't Know
- Refused

HEPATITIS C VIRUS

9. Does the criminal justice setting in which you are working provide any HCV testing to persons in custody? (CHECK ALL THAT APPLY)

- Yes, in jail
- Yes, in prison
- Yes, in community corrections
- No (SKIP TO Q12)
- Don't Know (SKIP TO Q12)
- Refused (SKIP TO Q12)

10. Is there a routine HCV testing program in effect, whereby HCV antibody tests are offered as a screening test for all persons in custody who are not known to be HCV-infected? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - Yes, in community corrections
 - No (SKIP TO Q12)
 - Don't Know (SKIP TO Q13)
 - Refused (SKIP TO Q13)
11. Is the routine HCV testing offered on an opt-in or opt-out basis? (CHECK ALL THAT APPLY) Opt-in means that a person will be asked if they want to be tested; opt-out means that a person is automatically tested unless they do not want to be tested.
- Jail: Opt-in (SKIP TO Q13)
 - Jail: Opt-out (SKIP TO Q13)
 - Prison: Opt-in (SKIP TO Q13)
 - Prison: Opt-out (SKIP TO Q13)
 - Community Corrections: Opt-in (SKIP TO Q13)
 - Community Corrections: Opt-out (SKIP TO Q13)
 - Jail: Don't Know (SKIP TO Q13)
 - Prison: Don't Know (SKIP TO Q13)
 - Community Corrections: Don't Know (SKIP TO Q13)
 - Don't Know (SKIP TO Q13)
 - Refused (SKIP TO Q13)
12. Why is HCV testing not offered as a screening test in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)
- HCV screening test is too expensive
 - Confirmatory testing (HCV viral load) is too expensive
 - Staffing constraints
 - Inability to refer patients with chronic active HCV to specialty care
 - HCV testing is beyond the scope of medical evaluation in our facility
 - Other (specify _____)
 - Don't Know
 - Refused
13. Does the criminal justice setting in which you are working offer HCV treatment to HCV-infected persons in custody? (CHECK ALL THAT APPLY)
- Yes, in jail (SKIP TO Q15)
 - Yes, in prison (SKIP TO Q15)
 - Yes, in community corrections (SKIP TO Q15)
 - No
 - Don't Know (SKIP TO Q16)
 - Refused (SKIP TO Q16)
14. Why is HCV treatment not offered or provided in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)
- HCV treatment is too expensive (SKIP TO Q16)
 - Staffing constraints (SKIP TO Q16)
 - Inability to transfer ongoing HCV treatment to the community upon release (SKIP TO Q16)

- HCV testing is beyond the scope of medical services provided in our facility (SKIP TO Q16)
- Other (specify _____) (SKIP TO Q16)
- Don't Know (SKIP TO Q16)
- Refused (SKIP TO Q16)

15. Of HCV-infected persons in custody for whom treatment is indicated, what proportion receive treatment for HCV?

- All (100%)
- 75-99%
- 50-74%
- 25-49%
- 1-24%
- None (0%)
- Don't Know
- Refused

HEPATITIS B VIRUS

16. Does the criminal justice setting in which you are working provide any HBV testing to persons in custody? (CHECK ALL THAT APPLY)

- Yes, in jail
- Yes, in prison
- Yes, in community corrections
- No (SKIP TO Q19)
- Don't Know (SKIP TO Q20)
- Refused (SKIP TO Q20)

17. Is there a routine HBV testing program in effect, whereby HBV tests are offered as a screening test for all persons in custody who are not known to be HBV-infected? (CHECK ALL THAT APPLY)

- Yes, in jail
- Yes, in prison
- Yes, in community corrections
- No (SKIP TO Q19)
- Don't Know (SKIP TO Q20)
- Refused (SKIP TO Q20)

18. Is the routine HBV testing offered on an opt-in or opt-out basis? (CHECK ALL THAT APPLY) Opt-in means that a person will be asked if they want to be tested; opt-out means that a person is automatically tested unless they do not want to be tested.

- Jail: Opt-in (SKIP TO Q20)
- Jail: Opt-out (SKIP TO Q20)
- Prison: Opt-in (SKIP TO Q20)
- Prison: Opt-out (SKIP TO Q20)
- Community Corrections: Opt-in (SKIP TO Q20)
- Community Corrections: Opt-out (SKIP TO Q20)
- Jail: Don't Know (SKIP TO Q20)
- Prison: Don't Know (SKIP TO Q20)
- Community Corrections: Don't Know (SKIP TO Q20)

- Don't Know (SKIP TO Q20)
 - Refused (SKIP TO Q20)
19. Why is HBV testing not offered as a screening test in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)
- HBV screening test is too expensive
 - Confirmatory testing is too expensive
 - Staffing constraints
 - Inability to refer patients with chronic active HBV to specialty care
 - HBV testing is beyond the scope of medical evaluation in our facility
 - Other (specify _____)
 - Don't Know
 - Refused
20. Does the criminal justice setting in which you are working provide hepatitis B vaccination for persons in custody? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - Yes, in community corrections
 - No (SKIP TO Q22)
 - Don't Know (SKIP TO Q23)
 - Refused (SKIP TO Q23)
21. Is there a hepatitis B vaccination program in effect, whereby HBV vaccination is routinely performed for persons in custody? (CHECK ALL THAT APPLY)
- Yes, in jail (SKIP TO Q23)
 - Yes, in prison (SKIP TO Q23)
 - Yes, in community corrections (SKIP TO Q23)
 - No
 - Don't Know (SKIP TO Q23)
 - Refused (SKIP TO Q23)
22. Why is HBV vaccination not routinely offered in the criminal justice setting in which you are working? (CHECK ALL THAT APPLY)
- HBV vaccination is too expensive
 - Staffing constraints
 - Inability to complete the 3 vaccine series
 - HBV vaccination is beyond the scope of medical services in our facility
 - Other (specify _____)
 - Don't Know
 - Refused

SEXUALLY TRANSMITTED INFECTIONS

23. Does the criminal justice setting in which you are working offer routine STI tests to screen persons in custody? (CHECK ALL THAT APPLY)
- Yes, in jail
 - Yes, in prison
 - Yes, in community corrections
 - No (SKIP TO END)
 - Don't Know (SKIP TO END)

- Refused (SKIP TO END)

24. For which STIs is routine screening conducted (CHECK ALL THAT APPLY):

- Gonnorhea
- Chlamydia
- Syphillis
- Other (please specify _____)
- Don't Know
- Refused

25. Is the routine STI testing offered on an opt-in or opt-out basis? (CHECK ALL THAT APPLY) Opt-in means that a person will be asked if they want to be tested; opt-out means that a person is automacially tested unless they do not want to be tested.

- Jail: Opt-in
- Jail: Opt-out
- Prison: Opt-in
- Prison: Opt-out
- Community Corrections: Opt-in
- Community Corrections: Opt-out
- Jail: Don't Know
- Prison: Don't Know
- Community Corrections: Don't Know
- Don't Know
- Refused