



AMERICAN JAIL ASSOCIATION
1135 Professional Court
Hagerstown, MD 21740-5853
301-790-3930
Fax 301-790-2941
aja.org

SUPPORTING INDIVIDUALS WORKING IN OUR NATION'S JAILS

American Jail Association Resolution

AIDS

WHEREAS, AIDS is recognized as a serious health problem, and

WHEREAS, AIDS poses significant and special problems in a jail setting, and

WHEREAS, it is recognized that health care screening, specific treatment methods, procedures, and education related to AIDS are subject to constant change;

**THEREFORE BE
IT RESOLVED
THAT**

the American Jail Association support the following guidelines and procedures with respect to AIDS in all jail settings:

1. Infection control and health precaution should follow the U.S. Public Health Service/Centers for Disease Control "universal precaution" infection control procedures. These guidelines are based on an assumption that no person's blood or body fluids are safe.
2. Training of all corrections staff and inmates is a critical, essential part of the management of health care. Training should be updated with current knowledge and should be recurring for staff and inmates. Ordinarily, training should be provided to prisoners upon admission and/or release from custody. Training should be varied, with the opportunity for questions to be asked by knowledgeable staff.
3. Jails should adopt procedures for HIV screening. Such procedures should reflect current public standards and legal constraints. Procedures may be adopted to pursue effective medical management goals and to pursue inquiries into management questions about prevalence of the disease in the population. Confidentiality of results must follow current public health and legal standards. Ordinarily, a disclosure of test results is limited to those with a need-to-know, based on medical, legal, and security concerns.
4. Referral to counseling or treatment for patients, and in appropriate circumstances for those in close relationship to them, is an important part of any AIDS program.
5. Management of AIDS requires a policy for housing those inmates who are symptomatic and those who are asymptomatic. Inmates who are HIV positive need not be separated unless medically indicated or unless there is a security or health threat justification. Jails should have procedures and

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practices established to handle risk-situations such as body-fluid spill, altercations, CPR, and biting incidents. In addition to training, these may require special equipment and precise directions for handling these situations.

Adopted by the American Jail Association Board of Directors on April 30, 1989.

Revised on May 19, 1993.

Re-affirmed on May 3, 2008, by the AJA Board of Directors in Sacramento, California.