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### **Examination of Jail and Prison Policies Related to STD Prevention**

### **Attachment 3 Key Informant Interview Instrument**

Public reporting burden of this collection of information is estimated to average 70 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

# Vulnerable Populations Project Key Informant Interview Guide Flesch-Kincaid Reading Level: 9.8

### Introduction and Verbal Informed Consent

Thank you for taking the time to talk with me today. Before we start, I'd like to take a few minutes to tell you about the project and then get your consent to be interviewed.

This research study is called "*Examination of Jail and Prison Policies Related to STD Prevention.*" The study is being conducted by a team of legal and public health researchers from Public Health Management Corporation, or PHMC. PHMC is working with the Division of STD Prevention at the Centers for Disease Control and Prevention (CDC) to look at the relationship between the law and prevention of sexually transmitted diseases (STDs) in vulnerable populations. The term "vulnerable populations" in this case refers to populations at high risk for STDs. This might include sex workers, homeless persons, people living in poverty, people who use drugs, and those involved in the criminal justice system. Researchers and providers have found a link between STDs and having been involved with the criminal justice system. However, not enough research has been done about how laws and policies directly or indirectly affect STD prevention, testing, and treatment during incarceration or upon release. As part of this project, we want to explore how jail and prison policies may impact STD prevention among populations that are more frequently incarcerated than other populations, as well as the communities to which they return. We will be exploring prison policies related to STD testing, treatment, and counseling during incarceration, Medicaid, and reentry in eight counties across the country, including [name of jurisdiction in which KI works].

This research project period began on January 1, 2015 and will end on December 31, 2015. We will be conducting 1-3 interviews in each of the eight counties. So, we will be interviewing between 8 and 24 people. These interviews are part of a larger research study where our legal researchers have been examining county and state laws that may impact STD rates and prevention.

You were identified as someone who would be valuable to speak with. I would like to ask you some questions in three main areas:

- 1. Questions to help us better understand jail/prison policies related to STD testing and treatment during incarceration and continuity of STD-related care upon inmates' release from custody;
- 2. Questions about Medicaid-related issues. This may include suspension or termination of benefits during incarceration, reenrollment upon release; and
- 3. Questions about any services or linkages made for individuals as they reenter their communities.

Taking part in this interview is voluntary. At any point, if a question is not something you are not comfortable answering, just let me know. We'll move on to the next question. We're talking to a variety of people, so not all questions will apply to everyone. At any point, you have the right to end the interview. The interview will take about 90 minutes. Also, if you have any questions at any time, feel free to ask.

There are few or no risks to you as a result of taking part in this interview. I will not ask you any personal or sensitive information about yourself. In addition, no recording will be made of this discussion. Instead, I will be taking detailed notes during our conversation. After all the interviews are done, I will

summarize the information gathered into a bulleted summary report. Your name and any information that can directly identify you or anyone else will not be included in my notes or reports. In addition, your name and the information I used to contact you will be kept separate from my notes and report.

Do you have any questions or concerns based on this information?

Do you give consent to take part in this interview? (check one)

\_\_\_\_\_Yes (continue to Section A) \_\_\_\_\_No (end the interview)

# A. Introduction

- 1. Please describe your role at [jail/prison OR agency/organization]?
  - a. (As appropriate if key informant is from agency/organization external to jail/prison) What is your agency's relationship to facility?
- 2. How long have you been in this role?
- 3. How long have you been involved with this type of work?

### B. Description of inmate population

In the next couple of questions, I want to get a sense of the different groups of individuals held at [jail/prison].

- 1. Please describe who is being held at [jail/prison]?
  - a. Demographic characteristics: % by age, gender, race/ethnicity?
  - b. % awaiting trial? % convicted? Types of offenses/charges?
  - c. How long are people being held awaiting trial (min-max)?
  - d. How long are people in custody at this facility?
- 2. Do these different groups get access to the same types of services at this facility?
  - a. Probe for different groups described previously.
  - b. Probe specifically about access to health care and STI testing and treatment.
- 3. How is the risk for getting or transmitting STDs while being held at this facility different for these different groups of people?
  - a. Are condoms available in this facility? What are the policies or procedures for obtaining condoms?

### C. Medicaid/health insurance coverage

States have the option of keeping individuals on the Medicaid rolls while incarcerated, even though federal Medicaid funds cannot be used to pay for services in correctional facilities, and there are

different rules for suspension or termination of benefits in different states. The next couple of questions are about Medicaid rules in this state and at [jail/prison].

- 1. Do Medicaid and/or Medicare benefits for individuals in this facility get terminated or suspended upon incarceration at [jail/prison]? Can you please walk me through the rules followed for those held at this facility?
  - a. Is it based on state law? Jail/prison policy?
  - b. Are the rules different for the different groups of people you mentioned are held at this facility?
  - c. Are there any incentives provided to the [jail/prison] for suspending Medicaid vs. terminating coverage while incarcerated?
- 2. Please describe any protocols, procedures, and/or services in place at [jail/prison] to assist individuals in restoration of their Medicaid and Medicare benefits upon release.
  - a. If no assistance provided, ask about what are the options for those reentering communities for restoring benefits.
  - b. How long does it typically take for benefits to be restored?

# D. STD Policies

The next couple of questions are specifically about policies related to testing and treatment for sexually transmitted infections at [jail/prison].

- 1. What are the policies or standard procedures at this facility for STD screening/testing and treatment at this facility?
- 2. What are the policies or standard procedures at this facility for confirming STD test results and notifying individuals about the results of their STD test?
- 3. What are the policies around STD surveillance?

# E. STD screening, testing, treatment protocols and procedures during and after incarceration

In the next set of questions, I would like to ask some more specific questions about STD screening, testing, and treatment at [jail/prison]. If you already answered some of these questions or you don't have any information, we can move on to the next questions.

- 1. How much information does [jail/prison] have about individuals' previous medical history when they come to this facility?
  - a. How much does their previous medical history affect how they are treated at this facility in terms of their health care and other factors?
- 2. What STDs are individuals screened/tested for at [jail/prison]?

- 3. Who performs screening, testing, treatment—jail/prison medical staff or outside health department or other health staff?
  - a. Probe about implications of each--clearances/escorts required, access to clinical records, availability of testing/treatment if health department or other health care staff are only there on certain days, etc.)
- 4. Where does screening/testing/treatment occur—is there one place where individuals go, or do health staff go to them?
- 5. When does screening or testing take place? Probes:
  - a. Routine or universal--is everyone tested upon admission/intake?
  - b. Upon request or as indicated by presented symptoms?
  - c. Frequency of testing
  - d. Opt-in or opt-out testing/screening
- 6. Are there differences in who receives STI screening or testing based on gender or other factors (*ask about different groups discussed earlier*)?
- 7. Where does the funding for STI screening, testing, and treatment come from?
- 8. How do individuals receive treatment if they test positive for an STD?
- 9. What are some barriers or challenges to screening, testing and/or treating individuals for STDs at [jail/prison]?

Probes:

- Rapid release of inmates back into community or to prison in another jurisdiction
- Amount of time takes for lab results to come back
- Inaccurate follow up/tracking/locator information for follow up post-release
- competing priorities of security versus public health
- funding
- difficulty in accessing medical records at the jail,
- difficulty in timely treatment of infected inmates prior to release from jail,
- lack of staffing (screening and correctional staff),
- space availability for screening process
- other ancillary costs
- 10. What are some strategies that have been put into place or may be put into place to address these barriers?

Probes:

• nursing staff vs. needing medical degree to treat

- flagging clinical records in case untreated inmate is arrested again or goes to public STD clinic
- having health department staff follow up with untreated released inmates
- open line of communication between health and security staff,
- development of innovative techniques to incorporate screening and testing into an existing jail health program so as to decrease the potential burden it may have on a facility,
- building collaborative partnerships between potential stakeholders.
- 11. Are there differences between this facility and other prison facilities in [county] or [state] in the STD screening/testing and treatment process?
- 12. What are some recommendations you would suggest for improving the STD screening/testing and/or

follow-up treatment process at this facility?

# F. Reentry

Now I'd like to ask you some questions about what happens when individuals are being released from [jail/prison].

- 1. What percentage of people who are released from this facility return to the communities they came from?
  - a. Where do other individuals released from this facility go?
- 2. Please describe any policies, services, or education that are in place at [jail/prison] for linking individuals to services and/or reentry programs to help them transition back into the community? These may be related or not to STDs.

Probes:

- STD or HIV prevention education and/or care
- Medicaid or other benefits (if wasn't answered earlier)
- Health care
- Job readiness
- Housing
- Substance use
- Education

# G. Recommendation of additional Key Informants and Wrap Up

I just have one more question for you.

1. Is there anyone you can think of that we can talk to who might add to our understanding of this topic or give us a different perspective?

Thank you very much for taking time out of your day to talk with me. Do you have anything you would like to add before I turn the recorder off?