97TH GENERAL ASSEMBLY

State of Illinois

2011 and 2012

HB1748

by Rep. Camille Y Lilly

SYNOPSIS AS INTRODUCED:

730 ILCS 5/3-6-2	from Ch. 38, par. 1003-6-2
730 ILCS 5/3-8-2	from Ch. 38, par. 1003-8-2
730 ILCS 5/3-10-2	from Ch. 38, par. 1003-10-2
730 ILCS 125/17.10	

Amends the Unified Code of Corrections. Provides that prior to the release of any inmate committed to a facility of the Department of Corrections or the Department of Juvenile Justice, the Department must provide the inmate with appropriate information in writing, by video, or other electronic means, concerning HIV and AIDS. Provides that the Department shall develop the informational materials in consultation with the Department of Public Health. Provides that at the same time, the Department must also offer the committed person the option of testing for infection with human immunodeficiency virus (HIV), with no copayment for the test. Provides that pre-test information shall be provided to the committed person and informed consent obtained as required in the AIDS Confidentiality Act. Provides that the Department may conduct opt-out HIV testing. Provides that the Department shall follow procedures established by the Department of Public Health to conduct HIV testing and testing to confirm positive HIV test results. Eliminates references to the ELISA test and the Western Blot Assay test. Eliminates provision that HIV information and testing provided to inmates is subject to appropriation. Amends the County Jail Act. Provides that inmates of the Cook County Jail shall be provided information and testing conducted by an employee of the Cook County Health & Hospitals System (rather than the Bureau of Health Services).

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FISCAL NOTE ACT MAY APPLY

A BILL FOR

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AN ACT concerning criminal law.

2 Be it enacted by the People of the State of Illinois, 3 represented in the General Assembly:

4 Section 5. The Unified Code of Corrections is amended by 5 changing Sections 3-6-2, 3-8-2, and 3-10-2 as follows:

6 (730 ILCS 5/3-6-2) (from Ch. 38, par. 1003-6-2)

Sec. 3-6-2. Institutions and Facility Administration.

8 (a) Each institution and facility of the Department shall 9 be administered by a chief administrative officer appointed by Director. A chief administrative officer 10 the shall he responsible for all persons assigned to the institution or 11 facility. The chief administrative officer shall administer 12 13 the programs of the Department for the custody and treatment of 14 such persons.

(b) The chief administrative officer shall have suchassistants as the Department may assign.

(c) The Director or Assistant Director shall have the emergency powers to temporarily transfer individuals without formal procedures to any State, county, municipal or regional correctional or detention institution or facility in the State, subject to the acceptance of such receiving institution or facility, or to designate any reasonably secure place in the State as such an institution or facility and to make transfers thereto. However, transfers made under emergency powers shall be reviewed as soon as practicable under Article 8, and shall be subject to Section 5-905 of the Juvenile Court Act of 1987. This Section shall not apply to transfers to the Department of Human Services which are provided for under Section 3-8-5 or Section 3-10-5.

(d) The Department shall provide educational programs for 7 8 all committed persons so that all persons have an opportunity 9 to attain the achievement level equivalent to the completion of 10 the twelfth grade in the public school system in this State. 11 Other higher levels of attainment shall be encouraged and 12 professional instruction shall be maintained wherever 13 possible. The Department may establish programs of mandatory education and may establish rules and regulations for the 14 15 administration of such programs. A person committed to the 16 Department who, during the period of his or her incarceration, 17 participates in an educational program provided by or through the Department and through that program is awarded or earns the 18 number of hours of credit required for the award of an 19 20 associate, baccalaureate, or higher degree from a community college, college, or university located in Illinois shall 21 22 reimburse the State, through the Department, for the costs 23 incurred by the State in providing that person during his or her incarceration with the education that qualifies him or her 24 25 for the award of that degree. The costs for which reimbursement 26 is required under this subsection shall be determined and 1 computed by the Department under rules and regulations that it 2 shall establish for that purpose. However, interest at the rate 3 of 6% per annum shall be charged on the balance of those costs 4 from time to time remaining unpaid, from the date of the 5 person's parole, mandatory supervised release, or release 6 constituting a final termination of his or her commitment to 7 the Department until paid.

8 (d-5) A person committed to the Department is entitled to 9 confidential testing for infection with human immunodeficiency 10 virus (HIV) and to counseling in connection with such testing, 11 with no copay to the committed person. A person committed to 12 the Department who has tested positive for infection with HIV 13 is entitled to medical care while incarcerated, counseling, and 14 referrals to support services, in connection with that positive 15 test result. Implementation of this subsection (d-5) is subject 16 to appropriation.

17 (e) A person committed to the Department who becomes in need of medical or surgical treatment but is incapable of 18 giving consent thereto shall receive such medical or surgical 19 20 treatment by the chief administrative officer consenting on the person's behalf. Before the chief administrative officer 21 22 consents, he or she shall obtain the advice of one or more 23 physicians licensed to practice medicine in all its branches in 24 this State. If such physician or physicians advise:

(1) that immediate medical or surgical treatment is
 required relative to a condition threatening to cause

1 death, damage or impairment to bodily functions, or 2 disfigurement; and

3 (2) that the person is not capable of giving consent to 4 such treatment; the chief administrative officer may give 5 consent for such medical or surgical treatment, and such 6 consent shall be deemed to be the consent of the person for 7 all purposes, including, but not limited to, the authority 8 of a physician to give such treatment.

9 (e-5) If a physician providing medical care to a committed 10 person on behalf of the Department advises the chief 11 administrative officer that the committed person's mental or 12 physical health has deteriorated as a result of the cessation 13 of ingestion of food or liquid to the point where medical or surgical treatment is required to prevent death, damage, or 14 impairment to bodily functions, the chief administrative 15 16 officer may authorize such medical or surgical treatment.

17 (f) In the event that the person requires medical care and treatment at a place other than the institution or facility, 18 the person may be removed therefrom under conditions prescribed 19 20 by the Department. The Department shall require the committed 21 person receiving medical or dental services on a non-emergency 22 basis to pay a \$2 co-payment to the Department for each visit 23 for medical or dental services. The amount of each co-payment shall be deducted from the committed person's individual 24 account. A committed person who has a chronic illness, as 25 26 defined by Department rules and regulations, shall be exempt

from the \$2 co-payment for treatment of the chronic illness. A 1 2 committed person shall not be subject to a \$2 co-payment for follow-up visits ordered by a physician, who is employed by, or 3 contracts with, the Department. A committed person who is 4 5 indigent is exempt from the \$2 co-payment and is entitled to 6 receive medical or dental services on the same basis as a 7 committed person who is financially able to afford the 8 co-payment. Notwithstanding any other provision in this 9 subsection (f) to the contrary, any person committed to any 10 facility operated by the Department of Juvenile Justice, as set 11 forth in Section 3-2.5-15 of this Code, is exempt from the 12 co-payment requirement for the duration of confinement in those 13 facilities.

(q) Any person having sole custody of a child at the time 14 15 of commitment or any woman giving birth to a child after her 16 commitment, may arrange through the Department of Children and 17 Family Services for suitable placement of the child outside of the Department of Corrections. The Director of the Department 18 19 of Corrections may determine that there are special reasons why 20 the child should continue in the custody of the mother until the child is 6 years old. 21

(h) The Department may provide Family Responsibility Services which may consist of, but not be limited to the following:

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family advocacy counseling;

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(2) parent self-help group;

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(3) parenting skills training; 1 2 (4) parent and child overnight program; (5) parent and child reunification counseling, either 3 separately or together, preceding the inmate's release; 4 5 and (6) a prerelease reunification staffing involving the 6 7 family advocate, the inmate and the child's counselor, or both and the inmate. 8 9 (i) (Blank). Prior to the release of any inmate who has a 10 documented history of intravenous drug use, and upon the receipt of that inmate's written informed consent, the 11 12 Department shall provide for the testing of such inmate for infection with human immunodeficiency virus (HIV) and any other 13 identified causative agent of acquired immunodeficiency 14 syndrome (AIDS). The testing provided under this subsection 15 16 shall consist of an enzyme linked immunosorbent assay (ELISA) 17 test or such other test as may be approved by the Illinois Department of Public Health. If the test result is positive, 18 19 the Western Blot Assay or more reliable confirmatory test shall 20 be administered. All inmates tested in accordance with the provisions of this subsection shall be provided with pre-test 21 22 and post-test counseling. Notwithstanding any provision of 23 this subsection to the contrary, the Department shall not -be required to conduct the testing and counseling required by this 24 subsection unless sufficient funds to cover all costs of such 25 26 testing and counseling are appropriated for that purpose by the - 7 - LRB097 08873 RLC 50843 b

1 General Assembly.

(j) Any person convicted of a sex offense as defined in the Sex Offender Management Board Act shall be required to receive a sex offender evaluation prior to release into the community from the Department of Corrections. The sex offender evaluation shall be conducted in conformance with the standards and guidelines developed under the Sex Offender Management Board Act and by an evaluator approved by the Board.

9 (k) Any minor committed to the Department of Juvenile 10 Justice for a sex offense as defined by the Sex Offender 11 Management Board Act shall be required to undergo sex offender 12 treatment by a treatment provider approved by the Board and 13 conducted in conformance with the Sex Offender Management Board 14 Act.

(1) Prior to the release of any inmate committed to a 15 16 facility of the Department or the Department of Juvenile 17 Department must provide the Justice, the inmate with appropriate information in writing, by video, or other 18 19 electronic means, concerning HIV and AIDS. The Department shall 20 develop the informational materials in consultation with the Department of Public Health. At the same time, the Department 21 22 must also offer the committed person the option of testing for 23 infection with human immunodeficiency virus (HIV), as well as counseling in connection with such testing, with no copayment 24 25 for the test. Pre-test information shall be provided to the committed person and informed consent obtained as required in 26

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1	subsection (d) of Section 3 and Section 5 of the AIDS
2	Confidentiality Act. The Department may conduct opt-out HIV
3	testing as defined in Section 4 of the AIDS Confidentiality
4	Act. If the Department conducts opt-out HIV testing, the
5	Department shall place signs in English, Spanish and other
6	languages as needed in multiple, highly visible locations in
7	the area where HIV testing is conducted informing inmates that
8	they will be tested for HIV unless they refuse, and refusal or
9	acceptance of testing shall be documented in the inmate's
10	medical record. The Department shall follow procedures
11	established by the Department of Public Health to conduct HIV
12	testing and testing to confirm positive HIV test results. All
13	testing must be conducted by medical personnel, but pre-test
14	and other information may be provided by committed persons who
15	have received appropriate training. The Department, in
16	conjunction with the Department of Public Health, shall develop
17	a plan that complies with the AIDS Confidentiality Act to
18	deliver confidentially all positive or negative HIV test
19	results to inmates or former inmates. At the same time, the
20	Department shall require each such inmate to sign a form
21	stating that the inmate has been informed of his or her rights
22	with respect to the testing required to be offered under this
23	subsection (1) and providing the inmate with an opportunity to
24	indicate either that he or she wants to be tested or that he or
25	she does not want to be tested. The Department, in consultation
26	with the Department of Public Health, shall prescribe the

contents of the form. The testing provided under this
subsection (1) shall consist of an enzyme-linked immunosorbent
assay (ELISA) test or any other test approved by the Department
of Public Health. If the test result is positive, the Western
Blot Assay or more reliable confirmatory test shall be
administered.

7 Prior to the release of an inmate who the Department knows 8 has tested positive for infection with HIV, the Department in a 9 timely manner shall offer the inmate transitional case 10 management, including referrals to other support services.

11 Implementation of this subsection (1) is subject to 12 appropriation.

(m) The chief administrative officer of each institution or facility of the Department shall make a room in the institution or facility available for addiction recovery services to be provided to committed persons on a voluntary basis. The services shall be provided for one hour once a week at a time specified by the chief administrative officer of the institution or facility if the following conditions are met:

(1) the addiction recovery service contacts the chief
 administrative officer to arrange the meeting;

(2) the committed person may attend the meeting for
addiction recovery services only if the committed person
uses pre-existing free time already available to the
committed person;

(3) all disciplinary and other rules of the institution

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or facility remain in effect;

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(4) the committed person is not given any additional privileges to attend addiction recovery services;

4 (5) if the addiction recovery service does not arrange 5 for scheduling a meeting for that week, no addiction 6 recovery services shall be provided to the committed person 7 in the institution or facility for that week;

8 (6) the number of committed persons who may attend an 9 addiction recovery meeting shall not exceed 40 during any 10 session held at the correctional institution or facility;

11 (7) a volunteer seeking to provide addiction recovery 12 services under this subsection (m) must submit an Department of Corrections 13 application to the under 14 existing Department rules and the Department must review 15 the application within 60 days after submission of the 16 application to the Department; and

17 (8) each institution and facility of the Department
18 shall manage the addiction recovery services program
19 according to its own processes and procedures.

For the purposes of this subsection (m), "addiction recovery services" means recovery services for alcoholics and addicts provided by volunteers of recovery support services recognized by the Department of Human Services.

24 (Source: P.A. 96-284, eff. 1-1-10.)

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(730 ILCS 5/3-8-2) (from Ch. 38, par. 1003-8-2)

Sec. 3-8-2. Social Evaluation; physical examination;
 HIV/AIDS.

(a) A social evaluation shall be made of a committed 3 person's medical, psychological, educational and vocational 4 5 condition and history, including the use of alcohol and other 6 drugs, the circumstances of his offense, and such other 7 information as the Department may determine. The committed 8 person shall be assigned to an institution or facility in so 9 far as practicable in accordance with the social evaluation. 10 Recommendations shall be made for medical, dental, 11 psychiatric, psychological and social service treatment.

12 (b) A record of the social evaluation shall be entered in 13 the committed person's master record file and shall be 14 forwarded to the institution or facility to which the person is 15 assigned.

16 (c) Upon admission to a correctional institution each 17 committed person shall be given a physical examination. If he 18 is suspected of having a communicable disease that in the 19 judgment of the Department medical personnel requires medical 20 isolation, the committed person shall remain in medical 21 isolation until it is no longer deemed medically necessary.

(d) Upon arrival at an inmate's final destination, the
 Department must provide the committed person with appropriate
 <u>information in writing, verbally, by video or other electronic</u>
 <u>means written information and counseling</u> concerning HIV and
 AIDS. The Department shall develop the <u>informational</u> written

materials in consultation with the Department of Public Health. 1 2 At the same time, the Department also must offer the committed 3 person the option of being tested, with no copayment, for 4 infection with human immunodeficiency virus (HIV). Pre-test 5 information shall be provided to the committed person and informed consent obtained as required in subsection (d) of 6 7 Section 3 and Section 5 of the AIDS Confidentiality Act. The Department may conduct opt-out HIV testing as defined in 8 9 Section 4 of the AIDS Confidentiality Act. If the Department 10 conducts opt-out HIV testing, the Department shall place signs 11 in English, Spanish and other languages as needed in multiple, 12 highly visible locations in the area where HIV testing is conducted informing inmates that they will be tested for HIV 13 14 unless they refuse, and refusal or acceptance of testing shall be documented in the inmate's medical record. The Department 15 16 shall follow procedures established by the Department of Public 17 Health to conduct HIV testing and testing to confirm positive HIV test results. All testing must be conducted by medical 18 19 personnel, but pre-test and other information may be provided 20 by committed persons who have received appropriate training. The Department, in conjunction with the Department of Public 21 22 Health, shall develop a plan that complies with the AIDS 23 Confidentiality Act to deliver confidentially all positive or 24 negative HIV test results to inmates or former inmates. The 25 Department shall require each committed person to sign a form 26 stating that the committed person has been informed of

1 her rights with respect to the testing required to be offered 2 under this subsection (d) and providing the committed person with an opportunity to indicate either that he or she wants to 3 be tested or that he or she does not want to be tested. The 4 5 Department, in consultation with the Department of Public 6 Health, shall prescribe the contents of the form. The testing provided under this subsection (d) shall consist 7 of an 8 enzyme linked immunosorbent assay (ELISA) test or any other 9 test approved by the Department of Public Health. If the test 10 result is positive, the Western Blot Assay or more reliable 11 confirmatory test shall be administered. Implementation of 12 this subsection (d) is subject to appropriation.

13 (Source: P.A. 94-629, eff. 1-1-06.)

14 (730 ILCS 5/3-10-2) (from Ch. 38, par. 1003-10-2)

Sec. 3-10-2. Examination of Persons Committed to the Department of Juvenile Justice.

(a) A person committed to the Department of Juvenile Justice shall be examined in regard to his medical, psychological, social, educational and vocational condition and history, including the use of alcohol and other drugs, the circumstances of his offense and any other information as the Department of Juvenile Justice may determine.

(a-5) Upon admission of a person committed to the
 Department of Juvenile Justice, the Department of Juvenile
 Justice must provide the person with appropriate <u>information</u>

written information and counseling concerning HIV and AIDS in 1 2 writing, verbally, or by video or other electronic means. The 3 Department of Juvenile Justice shall develop the informational 4 written materials in consultation with the Department of Public 5 Health. At the same time, the Department of Juvenile Justice 6 also must offer the person the option of being tested, at no 7 charge to the person, for infection with human immunodeficiency 8 virus (HIV). Pre-test information shall be provided to the 9 committed person and informed consent obtained as required in subsection (d) of Section 3 and Section 5 of the AIDS 10 11 Confidentiality Act. The Department of Juvenile Justice may 12 conduct opt-out HIV testing as defined in Section 4 of the AIDS Confidentiality Act. If the Department conducts opt-out HIV 13 14 testing, the Department shall place signs in English, Spanish and other languages as needed in multiple, highly visible 15 16 locations in the area where HIV testing is conducted informing 17 inmates that they will be tested for HIV unless they refuse, and refusal or acceptance of testing shall be documented in the 18 19 inmate's medical record. The Department shall follow 20 procedures established by the Department of Public Health to conduct HIV testing and testing to confirm positive HIV test 21 22 results. All testing must be conducted by medical personnel, 23 but pre-test and other information may be provided by committed 24 persons who have received appropriate training. The 25 Department, in conjunction with the Department of Public Health, shall develop a plan that complies with the AIDS 26

Confidentiality Act to deliver confidentially all positive or 1 2 negative HIV test results to inmates or former inmates. or any other identified causative agent of acquired immunodeficiency 3 syndrome (AIDS). The Department of Juvenile Justice shall 4 5 require each person committed to the Department of Juvenile Justice to sign a form stating that the person has been 6 7 informed of his or her rights with respect to the testing to be offered under this subsection (a 5) 8 required and 9 providing the person with an opportunity to indicate either 10 that he or she wants to be tested or that he or she does not 11 want to be tested. The Department of Juvenile Justice, in 12 consultation with the Department of Public Health, shall prescribe the contents of the form. The testing provided under 13 this subsection (a-5) shall consist of an enzyme-linked 14 15 immunosorbent assay (ELISA) test or any other test approved by 16 the Department of Public Health. If the test result is 17 positive, the Western Blot Assay or more reliable confirmatory test shall be administered. 18

Also upon admission of a person committed to the Department of Juvenile Justice, the Department of Juvenile Justice must inform the person of the Department's obligation to provide the person with medical care.

23 Implementation of this subsection (a-5) is subject to 24 appropriation.

(b) Based on its examination, the Department of JuvenileJustice may exercise the following powers in developing a

1 treatment program of any person committed to the Department of 2 Juvenile Justice:

3 (1) Require participation by him in vocational,
4 physical, educational and corrective training and
5 activities to return him to the community.

6 (2) Place him in any institution or facility of the 7 Department of Juvenile Justice.

8 (3) Order replacement or referral to the Parole and 9 Pardon Board as often as it deems desirable. The Department 10 of Juvenile Justice shall refer the person to the Parole 11 and Pardon Board as required under Section 3-3-4.

12 (4) Enter into agreements with the Secretary of Human 13 Services and the Director of Children and Family Services, 14 with courts having probation officers, and with private 15 agencies or institutions for separate care or special 16 treatment of persons subject to the control of the 17 Department of Juvenile Justice.

(c) The Department of Juvenile Justice shall make periodic reexamination of all persons under the control of the Department of Juvenile Justice to determine whether existing orders in individual cases should be modified or continued. This examination shall be made with respect to every person at least once annually.

(d) A record of the treatment decision including any
 modification thereof and the reason therefor, shall be part of
 the committed person's master record file.

1 (e) The Department of Juvenile Justice shall by certified 2 mail, return receipt requested, notify the parent, guardian or 3 nearest relative of any person committed to the Department of 4 Juvenile Justice of his physical location and any change 5 thereof.

6 (Source: P.A. 94-629, eff. 1-1-06; 94-696, eff. 6-1-06.)

7 Section 10. The County Jail Act is amended by changing8 Section 17.10 as follows:

9 (730 ILCS 125/17.10)

10 Sec. 17.10. Requirements in connection with HIV/AIDS.

11 In each county other than Cook, during the medical (a) admissions exam, the warden of the jail, a correctional officer 12 13 at the jail, or a member of the jail medical staff must provide 14 the prisoner with appropriate written information concerning 15 immunodeficiency virus human (HIV) and acquired immunodeficiency syndrome (AIDS). The Department of Public 16 Health and community-based organizations certified to provide 17 18 HIV/AIDS testing must provide these informational materials to the warden at no cost to the county. The warden, a correctional 19 20 officer, or a member of the jail medical staff must inform the 21 prisoner of the option of being tested for infection with HIV by a certified local community-based agency or other available 22 23 medical provider at no charge to the prisoner.

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(b) In Cook County, during the medical admissions exam, an

employee of the Cook County Health & Hospitals System Bureau of 1 2 Health Services must provide the prisoner with appropriate written information in writing, verbally or by video or other 3 electronic means concerning human immunodeficiency virus (HIV) 4 5 and acquired immunodeficiency syndrome (AIDS) and must also provide the prisoner with option of testing for infection with 6 7 HIV or any other identified causative agent of AIDS, as well as 8 counseling in connection with such testing. The Cook County 9 Health & Hospitals System may provide the inmate with opt-out human immunodeficiency virus (HIV) testing, as defined in 10 11 Section 4 of the AIDS Confidentiality Act, unless the inmate 12 refuses. If opt-out HIV testing is conducted, the Cook County 13 Health & Hospitals System shall place signs in English, 14 Spanish, and other languages as needed in multiple, highly visible locations in the area where HIV testing is conducted 15 informing inmates that they will be tested for HIV unless they 16 17 refuse, and refusal or acceptance of testing shall be documented in the inmate's medical record. Pre-test 18 19 information shall be provided to the inmate and informed 20 consent obtained from the inmate as required in subsection (d) of Section 3 and Section 5 of the AIDS Confidentiality Act. The 21 22 Cook County Health & Hospitals System shall follow procedures 23 established by the Department of Public Health to conduct HIV 24 testing and testing to confirm positive HIV test results. All 25 aspects of HIV testing shall comply with the requirements of the AIDS Confidentiality Act, including delivery of test 26

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1 results, as determined by the Cook County Health & Hospitals 2 System in consultation with the Illinois Department of Public Health. The Department of Public Health and community-based 3 organizations certified to provide HIV/AIDS testing may must 4 5 provide these informational materials to the Bureau at no cost 6 to the county. The testing provided under this subsection (b) 7 shall be conducted by the Cook County Bureau of Health Services 8 and shall consist of an enzyme linked immunosorbent assav 9 (ELISA) test or any other test approved by the Department of 10 Public Health. If the test result is positive, the Western Blot 11 Assay or more reliable confirmatory test shall be administered.

12 (c) In each county, the warden of the jail must make 13 appropriate written information concerning HIV/AIDS available to every visitor to the jail. This information must include 14 15 information concerning persons or entities to contact for local 16 counseling and testing. The Department of Public Health and 17 community-based organizations certified to provide HIV/AIDS testing must provide these informational materials to the 18 warden at no cost to the office of the county sheriff. 19

20 (d) Implementation of this Section is subject to21 appropriation.

22 (Source: P.A. 94-629, eff. 1-1-06.)