

Department of Health

health

Partner
Notification
Officers

Who are Partner Notification Officers?

Partner Notification Officers (PNOs) are nurses who work in the Health Protection Branch of the Department of Health.

They have experience in sexual health, mental health and drug and alcohol issues.

The PNOs have two major roles:

1. To notify the sexual partners of people diagnosed with a Sexually Transmissible Infection (STI), which includes HIV/AIDS, on request.
2. To help manage people living with HIV/AIDS who risk infecting others.

1. Notifying partners

Notifying the sexual partner(s) of people diagnosed with an STI is a vital part of the public health management of these infections. Once partners know they have been exposed to an STI, they can receive medical advice and treatment, and so protect their health and limit the spread of the infection.

Notifying sexual partner(s) is usually done by the doctor who makes the diagnosis or by the patient themselves. However, sometimes doctors or patients find it difficult or are unable to advise partner(s) and may request the PNOs to assist.

How are partner(s) notified by the PNOs?

A PNO makes contact with the partner(s) in a discreet manner to inform them of the diagnosis and to recommend they seek medical care, such as testing or treatment.

If the exposure involves HIV, a PNO will contact the partner(s) and ask to meet them along with a support person, if they wish. The PNO will explain that they have credible information about the partner's exposure to HIV and will recommend the partner be tested or seek medical advice.

PNOs are able to offer blood testing at this time if the partner requests it and this can be done quickly and discreetly.

Although most partners ask the PNOs about the identity of the person with the recently diagnosed STI (index case), the PNOs are unable to answer this question because they do not know this person's identity.

2. Managing people living with HIV/AIDS who put others at risk

The second role of the PNOs is to investigate allegations made to the department of people living with HIV/AIDS who risk infecting others.

Most people living with HIV are careful to avoid exposing others to the risk of HIV infection.

However, a small number of people, sometimes through psychiatric or other disabilities, continue to pose a risk of transmission. These clients are managed in line with the *Guidelines for the management of people living with HIV who put others at risk*. PNOs will fully explain and provide written information about the processes in the guidelines, including support, confidentiality and reviews.

What kind of questions will the PNOs ask?

The PNOs carry out a discreet interview with the sexual partner involved and, if required, the client at the centre of the allegation.

They ask a range of questions, including sexual practices (having safe sex or not), other partners, the use of alcohol or drugs, and the psychological wellbeing of those involved.

The aim is to ensure all HIV positive people are aware of, and comply with, the expectation that they take all reasonable steps to eliminate or reduce the risk of any other person contracting HIV from them.

The PNOs can also assist people living with HIV to access appropriate supports and counselling services if required.

Where does this information go and what happens next?

The PNOs report their findings to the Medical Adviser of the Partner Notification and Support Unit and the Victorian Chief Health Officer.

The Chief Health Officer then directs the PNOs in line with the *Guidelines for the management of people living with HIV who put others at risk*. The PNOs implement these directions, which may include educating the client about legal requirements, arranging counselling and supports and maintaining contact to ensure risk behaviours have ceased.

If required, the Chief Health Officer may send a letter of warning to a client who places others at risk. If risky behaviour persists, the Chief Health Officer may make legally binding orders that could include a requirement to meet or receive visits from the PNOs, to participate in education or counselling, to undergo psychiatric or cognitive assessments, to refrain from certain activities/behaviours, to refrain from visiting specified places, to reside at a specified place, to notify the Chief Health Officer if the person changes their name or address or, in extreme cases, to be detained and/or isolated from other members of the community.

The PNOs are involved in serving and monitoring these orders and reporting compliance and progress back to the Chief Health Officer. Penalties for failure to comply with public health orders can be up to \$14,000.

All matters undertaken by PNOs are managed with the highest level of professionalism and confidentiality.

Contacts

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Further information about these processes and the role of the PNOs can found at www.health.vic.gov.au/chiefhealthofficer

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