

HS-18.20, "COVID-19 GUIDELINES,"

SCDC POLICY

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TITLE: COVID-19 GUIDELINES

ISSUE DATE: OCTOBER 6, 2020

RESPONSIBLE AUTHORITY: OFFICE OF THE DEPUTY DIRECTOR OF MEDICAL SERVICES

POLICY MANUAL: MEDICAL SERVICES

SUPERSEDES: NONE - NEW POLICY

RELEVANT SCDC FORMS/SUPPLIES: M-216, M-216A, M-216B, M-216C

STATE/FEDERAL STATUTES: NONE

PURPOSE: To provide guidelines for the operation of SCDC Institutions in the management of the COVID-19 Pandemic.

POLICY STATEMENT: The South Carolina Department of Correction (SCDC) shall attempt to limit the COVID-19 pandemic as much as possible and shall manage the agency response through a comprehensive approach which includes prevention, testing, appropriate treatment, education, and infection control measures.

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Public safety is central to the mission of the South Carolina Department of Corrections. In the event of an COVID-19 pandemic in a correctional facility, the SCDC is to be prepared to promptly identify suspected cases, treat infected individuals, and prevent the spread of disease all while protecting staff and inmates. Accordingly, the following guidelines shall be adhered to. COVID-19 is an ongoing, quickly changing health crisis. This policy is subject to change at any time for any reason, including the protocol for administering vaccinations.

### 1. HYGIENE/SANITATION/SOCIAL DISTANCING/:

1.1 Preventive Measures: Throughout the duration of the COVID-19 pandemic the following general prevention measures should be implemented to interrupt viral infection transmission.

## 1.2 General Prevention Measures:

### 1.2.1 Promote good health habits among employees and inmates:

1.2.1.1 Avoid close contact with persons who are sick.

1.2.1.2 Avoid touching your eyes, nose, or mouth.

1.2.1.3 Wash your hands often with soap and water for at least 20 seconds.

1.2.1.4 Cover your sneeze or cough with a tissue (or into a sleeve). Then throw the tissue in the trash.

1.2.1.5 Greet without handshakes (or other touching).

1.2.1.6 Wear face coverings, unless PPE is indicated.

1.2.2 Conduct frequent environmental cleaning of high touch surfaces.

1.2.3 Institute social distancing measures to increase the physical space between inmates (ideally 6 feet between all individuals) to prevent spread of germs (e.g., minimize self-serve foods and group activities).

1.2.4 Employees stay at home if they are sick.

1.2.5 Influenza (flu) vaccine is offered to inmates yearly.

## 1.3 Good Health Habits:

1.3.1 Good health habits should be promoted in various ways (e.g., educational programs, posters, campaigns, assessing adherence with hand hygiene). This CDC website has helpful educational posters: <https://www.cdc.gov/coronavirus/2019-ncov/communication/factsheets.html>

1.3.2 Each institution should ensure that adequate supplies and facilities are available for hand washing for both inmates and staff. Provide liquid or foam soap where possible. At a minimum, soap will be provided to indigent inmates. Provide alcohol-based hand sanitizer with at least 60% alcohol where permissible based on security restrictions.

1.3.3 Provisions should be made for staff and visitors and new intakes to sanitize their hands when they enter the institution.

## 1.4 Sanitation:

1.4.1 Proper cleaning supplies such as bleach solution, Wex-Cide 128 or other EPA-registered disinfectants must be provided on a daily basis to inmates to clean their living spaces. It should also be provided on request if additional supplies are needed.

1.4.2 Routine cleaning and disinfecting of surfaces that are touched repeatedly should be conducted at least three times per day. These include doorknobs, sink handles, toilet handles, keys, handrails, telephones, computer keyboards, elevator buttons, cell bars, etc.

1.4.3 Common areas such as recreation areas, dormitories, cafeterias, and bathrooms must be cleaned and disinfected at least three times per day.

1.4.4 Each Warden will ensure their local cleaning schedule is reviewed and increased to allow for continual cleaning. Additional inmate labor may be utilized to accomplish this.

1.4.5 Cleaning and disinfecting of correctional staff equipment such as restraints, handcuffs and other items used on multiple inmates must be done after every use.

## 1.5 Social Distancing:

1.5.1 Enforce increased space between inmates in common areas such as holding cells and in lines and waiting areas.

1.5.2 Choose recreation spaces where inmates can spread out, stagger recreation time and restrict recreation time to a single housing unit at a time.

1.5.3 Stagger meals in dining hall (one housing unit at a time), rearrange seating so there is more space between inmates (e.g., remove every other chair and use only one side of table), and provide meals inside housing units or cells as necessary.

1.5.4 If possible, reassign bunks in dormitories to provide more space between inmates, ideally 6 feet in all directions; arrange bunks so that inmates sleep head to foot to increase distance between faces; and minimize the number of inmates housed in the same room.

1.5.5 Stagger sick call visits to medical and/or designate an area near each housing unit to evaluate inmates with COVID-19 symptoms to avoid having them move through the facility to medical unit.

1.5.6 Staff should maintain 6 feet distance between themselves and others and practice social distancing as work duties permit.

## 2. TESTING:

## 2.1 Staff Testing:

2.1.1 SCDC in conjunction with MUSC, or other entity (to make provision for any future partnerships that may occur). SCDC may continue periodic testing of all staff through the duration of the pandemic.

2.1.2 Employees/Contractors with positive results must not return to work until they have a negative test, 14 days have passed since symptoms first appeared, and 72 hours have passed since last fever and other symptoms have improved.

2.1.3 SCDC will report daily on its website the total number of positive tests, as obtained by self-report.

## 2.2 Inmate Testing:

2.2.1 SCDC in conjunction with MUSC may conduct targeted testing of inmates at institutions.

2.2.2 SCDC medical staff will have the authority to order testing.

2.2.3 All new inmate intakes must be tested upon arrival.

2.2.4 Inmates being released from isolation or quarantine units to the community may be tested prior to release.

2.2.5 Any inmate exhibiting symptoms (e.g., fever, cough, respiratory distress) may be tested.

2.2.6 Contact tracing may be conducted for all positive cases.

2.2.7 SCDC will report daily on its website the total number of positive tests.

## 3. DESIGNATION OF CERTAIN MEDICAL CONDITIONS FOR PAROLE PROCEEDINGS

3.1 SCDC will determine if an inmate who is scheduled for a parole hearing has certain medical conditions which can be exasperated by COVID-19.

3.2 If an inmate has a medical condition which can be exasperated by COVID-19, that information will be provided to the Department of Probation, Parole, and Pardon Services in compliance with HIPAA and other law.

## 4. STAFF PROCEDURES & PERSONAL PROTECTIVE EQUIPMENT (PPE):

4.1 Staff should be instructed to stay home if they have fever, respiratory symptoms, or any other symptoms listed on the SCDC Form M-216, Coronavirus Disease 2019 (COVID-19) Screening Tool".

4.2 If employees become sick at work, they should be advised to promptly report this to their supervisor and go home.

4.3 If employees have been exposed to a known COVID-19 case as defined by the CDC, and if they have symptoms of fever, cough or difficulty breathing, they should call their healthcare provider.

4.4 Employees shall report to the COVID-19 Hotline Call Team. Contact Tracing may be conducted by the Office of the Deputy Director of Medical Services and the Contact Tracing Call Team if an individual tests positive for COVID-19.

4.5 Staff/Visitor Screening:

4.5.1 Upon arrival on-site, all staff and all other personnel (including visitors, vendors, contractors) entering the facility will be screened using SCDC Form M-216.

4.5.2 The screener will wear PPE as follows: Gloves, face shield, and mask.

4.5.3 Screening should take place as close to the entrance as reasonably possible and as soon as the staff member arrives.

4.5.4 Anyone who answers yes to any question will not be allowed entry into the institution. All positive employee forms will be emailed to [employeescreeningM216@doc.sc.gov](mailto:employeescreeningM216@doc.sc.gov).

4.5.5 Staff and all other individuals (including visitors, vendors, contractors) entering the facility will also be screened for fever with an infrared thermometer. Anyone with a temperature at or above 100.4 will not be allowed to enter.

4.5.6 Anyone who refuses to comply with the screening, including temperature check, will not be allowed entrance to the institution or any other SCDC building.

4.5.7 A re-screening will not need to be done for staff exiting and re-entering the building on the same continuous shift.

4.6 Personal Protective Equipment (PPE):

4.6.1 PPE will be used when any person comes into contact with any person with suspected or confirmed COVID-19. This includes N95 mask, gown, gloves and goggles/face shield.

4.6.2 Hand washing must occur before and after donning and doffing PPE. If water is not available, hand sanitizer will be used and hand washing shall occur as soon as possible.

4.6.3 Staff anticipated to wear PPE should be trained on its use.

4.6.4 Institutions will be responsible for maintaining a current inventory of PPE. The Division of Support Services shall make arrangements to maintain a supply chain for this equipment for each institution.

4.6.5 Additional PPE is required:

4.6.5.1 When entering any area designated as an Isolation or Quarantine unit.

4.6.5.2 When transporting inmates from, or to, an Isolation or Quarantine unit.

4.6.5.3 Where a use of force appears likely.

4.6.6 Each institution will ensure appropriate receptacles for used PPE are present.

## 5. SOCIAL DISTANCING:

5.1 In-person social visits have been suspended indefinitely. Ongoing review will be conducted to determine when reinstatement is appropriate.

5.2 Volunteer activities shall be evaluated on an ongoing basis. If they are suspended, an ongoing review will be conducted to determine when reinstatement is appropriate.

5.3 Each Warden will review how to group inmates for medication and meals. There should be a time gap between groups. During that time gap, the area will be cleaned and disinfected.

5.4 Outdoor recreation will continue to be offered. Inmates shall be instructed to maintain a distance of 6 feet between each other. Indoor recreation (e.g., gym) will occur only by unit with disinfection in between uses.

5.5 Each Warden will implement methods to reduce movement of staff between units/buildings to the extent reasonably possible.

## 6. FACE COVERINGS:

6.1 Staff Face Coverings:

6.1.1 All staff, regardless of role, will wear a Face Covering and shield when on-duty at a physical work site.

6.1.2 A Face Covering is not a substitute for N95 masks when these are required.

6.1.3 In any situation that requires N95 mask, the Face Covering is to be removed and the appropriate mask applied.

6.1.4 Wherever Face Coverings are specified, an approved alternative mask may be substituted if preferred by the wearer. Where the protocol specifies N95 mask, a Face Covering may not be used as a substitute.

## 6.2 Inmate Face Coverings:

6.2.1 SCDC will provide each inmate with two (2) Face Coverings free of charge and will be replaced as needed and supplies are available.

6.2.2 All inmates are required to wear a Face Covering when outside of their cells. Anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance should not wear a cloth face covering. In dormitory settings, masks should be worn whenever an inmate is within six (6) feet of another person.

6.2.3 Inmates must remove the covering if directed to by staff (e.g., for identification purposes or other security needs).

6.2.4 A Face Covering is not a substitute for N95 masks or other specialized PPE when these are required for completion of laundry or other tasks where PPE is specialized.

6.2.5 Face Coverings may be laundered by inmates as frequently as inmates desire.

6.2.6 Each institution will ensure information regarding Face Coverings is communicated to the inmate population.

## 6.3 How to wear a Face Covering:

6.3.1 Face Coverings should fit snugly but comfortably against the side of the face, be secured with ties or ear loops, include multiple layers of fabric, allow for breathing without restriction, be able to be laundered and machine dried without damage or change to shape.

6.3.2 Individuals should be careful not to touch their eyes, nose, and mouth when removing their Face Covering and wash hands immediately after removing.

## 7. INTAKE SCREENING & TESTING:

### 7.1 Intake Screening:



7.1.1 All new intakes to SCDC will be screened, tested and housed following the procedures listed below.

7.1.2 Male intakes will be processed at Kirkland Reception and Evaluation and female intakes at Camille Griffin Graham Correctional Institution.

7.1.3 When a new intake arrives, security staff will provide them with a face covering. Security will don full PPE when greeting new intakes.

7.1.4 All new intakes will be screened using SCDC Form M-216A or M-216B (Spanish language version).

7.1.5 Inmates being transferred to a different institution will be screened using SCDC Form M-216C and the same process followed.

7.1.6 Any intake who has screened positive will be placed in an isolation area until medical staff can complete their screening. Any time the cell door opens, the intake must wear their mask and staff who will be in contact must don PPE (gloves, N95 mask and goggles). Medical will complete the symptom screening and determine if placement on Isolation is appropriate.

7.1.7 Intakes who do not screen positive will be placed on Intake Quarantine.

## 7.2 Intake Testing:

7.2.1 New intakes may receive COVID-19 tests at the following intervals: Day 2, Day 14, and ongoing as needed.

7.2.2 Inmates who refuse tests must remain in quarantine for at least fourteen (14) days.

7.2.3 New intakes may be moved out of quarantine when the entire cohort tests negative.

## 8. INTERNAL SCREENING:

### 8.1 Inmate Directed:

8.1.1 Regular communication will be provided to the inmates encouraging them to report symptoms.

8.1.2 Inmates who experience coughing, shortness of breath, believe they have a fever, or any other COVID-19 related symptoms are to report this directly to an SCDC employee.

8.1.3 The employee will contact medical. Medical staff will determine whether to see the inmate where they are or whether the inmate should be brought to medical or directly to Isolation.

## 8.2 Correctional Staff Directed:

8.2.1 During rounds correctional staff may ask each inmate if s/he is experiencing coughing, shortness of breath, or fever or other COVID-related symptoms.

8.2.2 At the conclusion of rounds, and prior to releasing the unit, correctional staff will report any positive responses to medical.

8.2.3 The cell(s) with positive responses will stay locked in until medical screening takes place.

8.2.4 Medical staff will determine whether to see the inmate where they are or whether the inmate should be brought to medical or directly to Isolation.

## 8.3 Peer Directed:

8.3.1 If another inmate reports a peer is experiencing symptoms, medical staff shall be contacted.

8.3.2 The officer will contact medical. Medical staff will determine whether to see the inmate where they are or whether the inmate should be brought to medical or directly to Isolation.

8.3.3 Any abuse of this peer report system (e.g., intentionally-false reporting to harass staff or peers) will be dealt with as a disciplinary issue.

8.4 Medical Staff Directed: Medical Staff will review sick call slips.

## 8.5 Movement of Symptomatic Inmates to Medical/Isolation:

8.5.1 Inmates experiencing new symptoms will be escorted by staff to medical or isolation; staff will wear appropriate PPE.

8.5.2 Medical will complete their screening. This includes properly recording the dates and times of all inmates seen by medical staff.

8.5.3 If it is determined that the inmate is to be placed on Isolation, Operations will assist medical in determining if there are other individuals who have had close contact who require quarantine.

## 9. MEDICAL/INTAKE QUARANTINE:

9.1 The purpose of Medical Quarantine is to ensure that inmates who are known to have been exposed to the virus are kept separate from other inmates to assess whether they develop viral infection symptoms.

9.2 Staff identified as vulnerable will not be used to work Isolation or Quarantine units, nor will they be assigned to transport inmates designated for Isolation or Quarantine. It is the staff's responsibility to notify their supervisor of this information and, if requested, to provide documentation from their healthcare provider.

9.3 The precautions for Medical and Intake Quarantine are similar, however inmates on Intake Quarantine may not be housed or recreate with any inmate on Medical Quarantine.

9.4 If an individual who is part of a quarantined cohort becomes symptomatic and tests positive (or refuses to be tested), the 14-day quarantine clock for the remainder of the cohort must be reset to 0.

9.5 Each Warden will identify a location for Medical/Intake Quarantine.

9.6 The door to the Quarantine Unit should remain closed.

9.7 Quarantined inmates should be restricted from being transferred to, or otherwise interpersonally interacting with, the general population.

9.8 To the extent possible, all services (meals, medication, etc.) will be delivered in the cell.

9.9 Meals will be served with disposable service. Nothing coming out of the quarantine area will be returned to the kitchen.

9.10 Anything coming out of the cell that cannot be disinfected (to include any trash) will be treated as medical waste and treated accordingly.

9.11 Laundry should remain in the cell until it is ready to be washed. It will be picked up by an inmate in full PPE. It should be washed at the highest available temperature and should be completely dried.

9.12 ~~Each site will determine how~~ Movement outside of the quarantine area should be at a minimum. Opportunities for showers may be offered three times each week; however, they must be offered in a way that does not bring them into contact with any other inmates. ~~and recreation will be offered to these inmates. Recreation will be suspended during quarantine. Such activities must be offered in a way that does not bring them into contact with any other inmates.~~

9.13 Any space used for recreation must be cleaned with an Environmental Protection Agency (EPA) approved disinfectant prior to its use by any other population.

9.14 If a cell door or food chute will be opened, then a gown will be worn by staff.

9.15 Twice daily, medical staff will assess inmates in quarantine. Symptomatic patients need to be isolated or cohorted.

9.16 An inmate may be released from quarantine after they meet all of the following criteria: at least 14 days have passed, and 72 hours have passed with no fever and other symptoms have improved.

9.17 All medical co-pays will be suspended for COVID-19 related issues or suspected COVID-19 related issues.

## 10. MEDICAL ISOLATION:

10.1 Inmates who have been placed on Medical Isolation based on physical symptoms will have a COVID-19 test ordered.

10.2 Each Warden will designate an area within the Institution for initial Medical Isolation. This should allow for as much separation from staff and inmates as possible. This will ideally be a single cell located a physical distance from other cells.

10.3 SCDC will identify isolation areas as needed.

10.4 All services (meals, medication, medical care, etc.) will be delivered in the cell. Meals will be served with disposable service. Nothing coming out of the Isolation area will be returned to the kitchen.

10.5 Anything coming out of the cell that cannot be disinfected (to include any trash) will be discarded in the appropriate receptacle.

10.6 Any time the cell door is opened, the inmate must wash their hands and don their mask.

10.7 If a phone call is allowed, it must be done from within the Isolation Area when feasible. At the conclusion of the call, the inmate will disinfect the phone. Staff will then re-disinfect the phone.

10.8 Anytime contact is anticipated, staff will don PPE (gloves, gown, N95 respirator, and face shield).

10.9 The door to the Medical Isolation area should remain closed.

10.10 Movement outside of the isolation area should be at a minimum. Opportunities for showers may be offered three times each week; however, they must be offered in a way that does not bring them into contact with any other inmates. Recreation will be suspended during quarantine.

~~10.10~~10.11 After any designated quarantine or isolation area is vacated, it shall be thoroughly cleaned as follows:

~~10.10~~~~10.11~~10.11.1 Wearing full PPE (Gown/Tyvek Suit, N95, gloves and face shields), spray the cell with an EPA approved disinfectant.

~~10.10.2~~10.11.2 Clean and disinfect all areas (e.g., cells, bathrooms, and common areas) used by the infected individual, focusing especially on frequently touched surfaces.

~~10.10.3~~10.11.3 Hard (non-porous) surface cleaning and disinfection. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. For disinfection, use Bleach Solution, Wex-Cide 128 or EPA-approved wipes for frequently touched or difficult to clean surfaces.

~~10.10.4~~10.11.4 Inmates will be screened with SCDC Form 216C upon return. Any positive result will be handled as described herein.

~~10.10.5~~ 10.11.5 Electronics cleaning and disinfection. For electronics such as tablets, touch screens, keyboards, and remote controls, remove visible contamination if present. Follow the manufacturers instructions for all cleaning and disinfection products. If no manufacturer guidance is available, use alcohol-based wipes or spray containing at least 60% alcohol to disinfect touch screens.

~~10.11~~10.12 Release from Isolation: An inmate may be released from isolation after they meet all of the following criteria: (1) at least 14 days have passed; (2) a negative test on or after Day 14; and (3) 72 hours have passed with no fever and other symptoms have improved. Inmates who refuse the Day 14 test must be reviewed by the Deputy Director of Medical Services or designee for release.

## 11. TRANSPORTATION PROCEDURES:

### 11.1 Transportation to Court:

11.1.1 Virtual hearings will be utilized in all possible cases.

11.1.2 Inmates being transported to Court will have a temperature check and be screened with SCDC Form 216C prior to departure. Any temperature above 100.4 will be referred to medical for review.

11.1.3 When these inmates return, they will not require placement on Intake Quarantine provided that their release and return was on the same day and they remained in SCDC custody.

11.1.4 Inmates will be screened with SCDC Form M-216C upon return. Any positive result will be handled as described herein.

11.1.5 If inmates are inadvertently exposed to other populations while attending court or otherwise exposed to an unanticipated risk of virus infection, that information shall be communicated to Medical at the relevant institution. Medical can determine the need for Intake Quarantine.

11.2 Transportation of suspected or positive COVID-19 Inmates: The standards listed below will be utilized for transport in addition to normal transport protocols.

11.2.1 Inmate wears a mask and washes their hands.

11.2.2 Correctional officer wears appropriate PPE.

11.2.3 Ventilation system should bring in as much outdoor air as possible. Set fan to high. Do not place air on recirculation mode. Weather permitting, drive with the windows down.

11.2.4 Following the transport, if close contact with the patient occurs, use appropriate PPE. Wash hands after PPE is removed.

11.2.5 The vehicle must be cleaned after transport and prior to its re-use.

11.3 In general, inmate transfers and transportation should be restricted as much as possible and only conducted as necessary and in compliance with the above measures.

## 12. RELEASES:

12.1 Inmates from institutions affected by COVID-19 may be quarantined for at least 14 days prior to inmates projected release date.

12.2 Inmates may be screened and tested with results received prior to being released to the community.

12.3 Inmates with a negative test and screen will be released following standard release procedures.

12.4 Inmates with a positive screen or test will be isolated and released (1) once they have obtained a negative result or (2) if the inmates true Max Out date comes before the negative result is received. The Director of Community Outreach or designee will determine in conjunction with SCDHEC if there is a safe plan for release that allows for self-isolation.

12.5 If it is mandated that an inmate has to be released to the community while positive, the inmate will be required to self-isolate for the remaining time of that isolation period. The Director of Community Outreach or Designee will get a signed release of information (ROI) and contact the receiving party where the inmate will be self-isolating. The Director of Community Outreach or Designee will verify with the receiving party that they are able to accommodate the isolation period of the inmate. The Director of Community Outreach or Designee will explain the isolation process in detail to the receiving party.

12.6 If an inmate is mandated to be released to the community while positive and has a receiving party that can accommodate the isolation period, the inmate will be released following the agency's standard release procedures. If an inmate is mandated to be released to the community while positive and does not have a receiving party that can accommodate the isolation period, The Director of Community Outreach or Designee will contact SCDHEC to provide housing for the inmate for the remainder of the isolation period.

12.7 Released inmates will receive COVID-19 prevention information, hand hygiene supplies and cloth face covering. Inmates that are released that are positive also receive a self-monitoring form, a form that documents their specific days remaining in their isolation period, and free testing sites located in their county of release.

### 13. GRIEVANCES:

13.1 Grievances based on this policy may be filed in accordance with SCDC Policy GA-01.12, "Inmate Grievance System," Section 14 (Emergency Procedures). All grievances regarding COVID-19 will be considered emergency since they involve conditions in which a persons health, safety or welfare is threatened. Dates and times of all COVID-19 related grievances must be recorded.

13.2 COVID-19 grievances, including delay in medical assessment or treatment and failure to follow COVID-19 policies, will be forwarded immediately to the Warden and the Deputy Director of Medical Services or designee. The Warden will conduct an investigation with input from the Deputy Director of Medical Services or designee, if needed, and will respond to the inmate within no more than seven (7) working days after receipt of the grievance by the Institution Grievance Coordinator. The Warden will also take immediate steps to implement the appropriate precautions or temporary actions without waiting for an investigation to occur.

### 14. DEFINITIONS:

**Bleach Solution:** 5 (five) tablespoons of bleach to 1 (one) gallon of water or 4 (four) teaspoons of bleach to 1 quart of water. This should be used within 24 hours of mixing.

**Close contact:** Close contact is defined as an individual within six (6) feet of an infected person for at least fifteen (15) minutes.

**Face Covering:** Mask made of available cloth to cover the nose and mouth. Face coverings are not PPE, but are worn to protect others in surrounding area from respiratory droplets generated by wearer. Face coverings do not include microfiber or N95 masks.

**Cohorting:** Inmates on the same status (e.g., two inmates both designated for quarantine) may be housed together. Inmates on different statuses (e.g., one designated for Quarantine and one for Isolation) should not be housed together. Cohorting inmates with suspected COVID-19 is not recommended due to high risk of transmission from infected to uninfected individuals.

**COVID-19 Test:** A test approved by the Food and Drug Administration (FDA) for the identification and diagnosis of an individual person as infected with the COVID-19 virus.

**Duration of the pandemic:** The pandemic is ongoing and this policy will remain in effect until the CDC suspends its Interim Guidance on Management of Covid-19 in Correctional and Detention Facilities or otherwise indicates the pandemic has concluded.

Goggles/Face Shield: Goggles or disposable face shield that fully covers the front and sides of the face. This does not include personal eyeglasses.

Gown or Tyvek Suit: Protection for workers who deal with hazardous materials and small hazardous particles while performing daily job duties. Tyvek suits have protection built into their fabric.

Intake Quarantine: The physical separation of the persons arriving from the community outside the institution.

Isolation Unit: An area used to house inmates on isolation status.

Medical Isolation: The physical separation of ill persons (positive Covid-19 test and/or the presence of symptoms such as shortness of breath or difficulty breathing, fever, cough, chills, muscle pain, sore throat, new loss of taste or smell) from those who are not ill in order to prevent the spread of disease.

Medical Quarantine: The physical separation of persons who have been exposed (had close contact but have no symptoms) to assess whether they develop viral symptoms.

Medically Vulnerable or Vulnerable: Medically vulnerable or Vulnerable will be used as defined by the CDC as "at higher risk." Those currently listed are: adults over the age of 65, pregnant women, and those with certain medical conditions such as heart disease, lung disease, or diabetes.

N95 Mask: An N95 mask is a mask that is worn over the face to prevent the inhalation of airborne particles. The N95 designation means that the mask will filter at least 95% of particles 0.3 microns in size.

Quarantine Unit: An area used to house inmates on quarantine status.

SIGNATURE ON FILE

—  
s/Bryan P. Stirling, Director

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Date of Signature

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