



COVID-19 Recommendations for Detention Centers

September 2020

Correctional and detention facilities can include custody, housing, education, recreation, healthcare, food service, and workplace components in a single physical setting. The integration of these components presents unique challenges for control of SARS-CoV-2 transmission among incarcerated/detained persons, staff, and visitors.

- Incarcerated/detained persons live, work, eat, study, and participate in activities within congregate environments, heightening the potential for SARS-CoV-2 to spread once introduced.
- Many opportunities exist for SARS-CoV-2 to be introduced into a correctional or detention facility, including daily staff movements; transfer of incarcerated/detained persons between facilities and systems, to court appearances, and to outside medical visits; and visits from family, legal representatives, and other community members.

Lewis and Clark Public Health (LCPH) recommends taking the precautions below to help prevent transmission, both within the facility and in the community when an inmate is released.

Assessment of Health

1. Assess the health of all employees at the beginning of each shift. Anyone with symptoms of COVID-19 must be sent home. Symptoms include cough, difficulty breathing, fever, repeated shaking with chills, chills, body aches, headache, sore throat and new loss of taste or smell.
2. Assess inmates during intake and use appropriate infection-control practices if an inmate has symptoms of a respiratory infection. This would include isolation and testing, and PPE for the officers.
 - a. If possible, consider quarantining all new intakes for 14 days before they enter the facility's general population (separately from other individuals who are quarantined due to contact with someone who has COVID-19). This practice is referred to as routine intake quarantine.
 - b. Consider testing all newly incarcerated/detained persons before they join the rest of the population in the correctional or detention facility.
3. Assess the health of inmates daily. If any have symptoms listed above, isolate that individual and test for the presence of COVID-19.

Staff Precautions

1. Where feasible, consider establishing an on-site laundry option for staff so that they can change out of their uniforms, launder them at the facility, and wear street clothes and shoes home. If on-site laundry for staff is not feasible, encourage them to change clothes before they leave the work site, and provide a location for them to do so. This practice may help minimize the risk of transmitting SARS-CoV-2 between the facility and the community.

2. Clean and disinfect shared staff equipment several times/day and when the use of the equipment has concluded as specified below.
3. Maintain appropriate PPE supplies (N95 filtering facemask respirators, nitrile gloves, goggles, and aprons) for use when working directly with symptomatic individuals, including transport. Please see PPE Guidance Table.
4. Notify health-care facilities by phone before transferring an inmate with respiratory illness to a facility.
5. Report any possible COVID-19 illness to Lewis and Clark Public Health at 406-457-8900 (daytime) or 406-523-5564 (outside business hours).

Hygiene

1. Practice good **cough and sneeze etiquette**: Cover your mouth and nose with your elbow (or ideally with a tissue) rather than with your hand when you cough or sneeze, and throw all tissues in the trash immediately after use. Then wash your hands.
2. Practice good hand hygiene: regularly wash your hands with soap and water for at least 20 seconds, especially after coughing, sneezing, or blowing your nose; after using the bathroom; before eating; before and after preparing food; before taking medication; and after touching garbage.
3. Wear face coverings, unless PPE is indicated.
4. Avoid touching your eyes, nose, or mouth without cleaning your hands first.
5. Avoid sharing eating utensils, dishes, and cups.
6. Avoid non-essential physical contact.

Cleaning and Disinfection

1. Several times per day, clean and disinfect surfaces and objects that are frequently touched, especially in common areas. Such surfaces may include objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, sink handles, countertops, toilets, toilet handles, recreation equipment, kiosks, telephones, and computer equipment).
2. Use household cleaners and [EPA-registered disinfectants effective against SARS-CoV-2](#), the virus that causes COVID-19 as appropriate for the surface.
 - a. Follow label instructions for safe and effective use of the product, including precautions that should be taken when applying the product, such as wearing gloves and making sure there is good ventilation during use, and around people.
3. Clean according to label instructions, including pre-cleaning steps, product dilution, contact time, and potable water rinse directions, if applicable, in order to ensure the product is effective and does not present an undue risk to users and others.
 - a. The contact time is the amount of time the surface needs be treated for the product to work. Many product labels recommend keeping the surface wet for a specific amount of time.
4. Encourage all persons in the facility to take action to protect themselves and others from COVID-19.

- a. Post signs throughout the facility and communicate this information verbally on a regular basis. Sample signage and other communications materials are available on the [CDC website](#).

Physical Distancing

1. Implement [social distancing](#) strategies to increase the physical space between incarcerated/detained persons (ideally 6 feet between all individuals, regardless of symptoms), and to minimize mixing of individuals from different housing units.
2. **Common areas:** Enforce increased space between individuals in holding cells as well as in lines and waiting areas such as intake (e.g., remove every other chair in a waiting area)
3. **Recreation:**
 - a. Choose recreation spaces where individuals can spread out
 - b. Stagger time in recreation spaces
 - c. Restrict recreation space usage to a single housing unit per space (where feasible)
4. **Meals:**
 - a. Stagger meals in the dining hall (one housing unit at a time)
 - b. Rearrange seating in the dining hall so that there is more space between individuals (e.g., remove every other chair and use only one side of the table)
 - c. Provide meals inside housing units or cells
5. **Group activities:**
 - a. Limit the size of group activities
 - b. Increase space between individuals during group activities
 - c. Suspend group programs where participants are likely to be in closer contact than they are in their housing environment
 - d. Consider alternatives to existing group activities, in outdoor areas or other areas where individuals can spread out
6. **Housing:**
 - a. If space allows, reassign bunks to provide more space between individuals, ideally 6 feet or more in all directions. (Ensure that bunks are cleaned thoroughly if assigned to a new occupant.)
 - b. Arrange bunks so that individuals sleep head to foot to increase the distance between their faces
 - c. Minimize the number of individuals housed in the same room as much as possible
 - d. Rearrange scheduled movements to minimize mixing of individuals from different housing areas
7. **Work details:** Modify work detail assignments so that each detail includes only individuals from a single housing unit.

Prevention Practices for Visitors

1. Instruct visitors to postpone their visit if they have COVID-19 symptoms.

2. If possible, communicate with potential visitors to discourage contact visits in the interest of their own health and the health of their family members and friends inside the facility.
3. If possible, inform potential visitors and volunteers before they travel to the facility that they should expect to be screened for COVID-19 (including a temperature check), and will be unable to enter the facility if they do not clear the screening process or if they decline screening.
4. Require visitors to wear cloth face coverings (unless contraindicated).
5. Staff performing temperature checks should wear recommended PPE.
6. Provide alcohol-based hand sanitizer with at least 60% alcohol in visitor entrances, exits, and waiting areas.
7. Display signage outside visiting areas explaining the COVID-19 symptom screening and temperature check process. Ensure that materials are understandable for non-English speakers and those with low literacy.

Promote non-contact visits:

1. Encourage incarcerated/detained persons to limit in-person visits in the interest of their own health and the health of their visitors.
2. Consider reducing or temporarily eliminating the cost of phone calls for incarcerated/detained persons.
3. Consider increasing incarcerated/detained persons' telephone privileges to promote mental health and reduce exposure from direct contact with community visitors.
4. Consider suspending or modifying visitation programs, if legally permissible. For example, provide access to virtual visitation options where available.
5. If moving to virtual visitation, clean electronic surfaces regularly after each use. (See cleaning guidance for instructions on cleaning electronic surfaces.)
6. Inform potential visitors of changes to, or suspension of, visitation programs.
7. Clearly communicate any visitation program changes to incarcerated/detained persons, along with the reasons for them (including protecting their health and their family and community members' health).
8. If suspending contact visits, provide alternate means (e.g., phone or video visitation) for incarcerated/detained individuals to engage with legal representatives, clergy, and other individuals with whom they have legal right to consult.

If you have questions or need technical assistance, please call Lewis and Clark Public Health at 457-8900. Thank you for protecting our community from COVID-19.

If you suspect Coronavirus, contact your medical provider.

For a link to other local information: www.lccountymt.gov/covid-19

Recommended Personal Protective Equipment (PPE) for Incarcerated/Detained Persons and Staff in a Correctional or Detention Facility during the COVID-19 Response

Classification of Individual Wearing PPE	N95 respirator	Surgical mask	Eye Protection	Gloves	Gown/Coveralls
Incarcerated/Detained Persons					
Asymptomatic incarcerated/detained persons (under quarantine as close contacts of someone with COVID-19*)	Use surgical masks or cloth face coverings as source control (NOTE: cloth face coverings are NOT PPE and may not protect the wearer. Prioritize cloth face coverings for source control among all persons who do not meet criteria for N95 or surgical masks, and to conserve surgical masks for situations that require PPE.)				
Incarcerated/detained persons who have confirmed or suspected COVID-19, or showing symptoms of COVID-19					
Incarcerated/detained persons handling laundry or used food service items from someone with COVID-19 or their close contacts				X	X
Incarcerated/detained persons cleaning an area where someone with COVID-19 spends time	Additional PPE may be needed based on the product label. See CDC guidelines for more details.			X	X
Staff					
Staff having direct contact with asymptomatic incarcerated/detained persons under quarantine as close contacts of someone with COVID-19* (but not performing temperature checks or providing medical care)		Surgical mask, eye protection, and gloves as local supply and scope of duties allow.			
Staff performing temperature checks on any group of people (staff, visitors, or incarcerated/detained persons), or providing medical care to asymptomatic quarantined persons		X	X	X	
Staff having direct contact with (including transport) or offering medical care to individuals with confirmed or suspected COVID-19 (See CDC infection control guidelines). For recommended PPE for staff performing collection of specimens for SARS-CoV-2 testing see the Standardized procedure for SARS-CoV-2 testing in congregate settings .	X**		X	X	X
Staff present during a procedure on someone with confirmed or suspected COVID-19 that may generate infectious aerosols (See CDC infection control guidelines)	X		X	X	X
Incarcerated/detained persons handling laundry or used food service items from someone with COVID-19 or their close contacts				X	X
Staff cleaning an area where someone with COVID-19 spends time	Additional PPE may be needed based on the product label. See CDC guidelines for more details.			X	X

* If a facility chooses to routinely quarantine all newly incarcerated/detained intakes (without symptoms or known exposure to someone with COVID-19) before integrating into the general population, surgical masks are not necessary. Cloth face coverings are recommended.

**A NIOSH-approved N95 respirator is preferred. However, based on local and regional situational analysis of PPE supplies, surgical masks are an acceptable alternative when the supply chain of respirators cannot meet the demand. During this time, available respirators should be prioritized for procedures that are likely to generate respiratory aerosols, which would pose the highest exposure risk to staff.