



# Arkansas Department of Health

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New  
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## **COVID-19: Guidance for State Correctional Facilities and Local Detention Facilities**

### **Background:**

Because of the congregate nature of correctional facilities and detention centers, these settings pose a high risk for transmission of COVID-19, caused by the novel coronavirus – SARS-CoV-2. It is imperative for, offenders, volunteers, staff, and visitors alike are aware of this rapidly changing situation. **Symptoms include fever, cough, and shortness of breath.** This document has been created in accordance with the Centers for Disease Control and Prevention (CDC) recommendations, based on what is currently known about COVID-19, in order to provide guidance for the management and mitigation of the highly infectious COVID-19 in the aforementioned settings.

### **Recommendations:**

#### **Communicate with staff, offenders, volunteers, and visitors.**

- Educate staff, residents, and family members of offenders about COVID-19.
- Make sure they know the potential risks for offenders and basic prevention measures, such as:
  - Wash hands often with soap and water or use alcohol-based hand sanitizer.
  - Cough and sneeze into elbow or into a tissue. Throw away the tissue immediately after use and wash hands.
  - Frequently clean and disinfect surfaces.
  - Ask staff to use Personal Protective Equipment (PPE) when directly caring for COVID-19 patients, including a gown, gloves, mask (or respirator), and eye protection  
<https://www.healthy.arkansas.gov/programs-services/topics/novel-coronavirus>
  - Staff and visitors should remain home if they are sick with cough, shortness of breath, or fever.
  - Inform staff about leave policies and the ability to work from home, if possible.
  - Post signs at the entry, the reception area, and throughout the facility to help visitors, staff, and volunteers self-identify relevant symptoms and travel history.
  - Communicate with family members of offenders to share information about the measures you are taking to protect your offenders from COVID-19.

#### **Post signage throughout the facility:**

- [https://www.healthy.arkansas.gov/images/uploads/pdf/COVID-19\\_-\\_Facility\\_Entrance\\_Precautions\\_-\\_POSTER\\_11x17\\_-\\_March\\_20\\_2020-..\\_.pdf](https://www.healthy.arkansas.gov/images/uploads/pdf/COVID-19_-_Facility_Entrance_Precautions_-_POSTER_11x17_-_March_20_2020-.._.pdf)

#### **Coordinate with local law enforcement and court officials.**

- Identify lawful alternatives to in-person court appearances, such as virtual court, as a social distancing measure to reduce the risk of COVID-19 transmission.
- Explore strategies to prevent over-crowding of correctional and detention facilities during a community outbreak.

### **Amend the Visitors Policy:**

- Currently, visitation to correctional facilities, and most detention facilities, has been prohibited.
- So that plans are in place when visitation restrictions are relaxed, criteria and protocols for enforcing visitor limitations and how you will communicate those limitations should be made. These protocols include:
  - Screening visitors for respiratory illness symptoms (fever, shortness of breath) and exclude those who are positive
  - Asking visitors and family members not to visit the facility if they are experiencing respiratory symptoms. Suggest other options such as visiting by phone or video, if possible.
  - **Restrict transfers of offenders to and from other jurisdictions and facilities unless necessary for medical evaluation, medical isolation or quarantine, clinical care, extenuating security concerns, preparation for reentry, or to prevent overcrowding. This restriction should not be interpreted as a prohibition on new intakes into a correctional or detention facility that are asymptomatic.**
- Strongly consider postponing non-urgent outside medical visits.
- If a transfer is necessary, perform verbal screening and a temperature check, before the offender leaves the facility. If an offender does not clear the screening process, delay the transfer and follow the protocol for a suspected COVID-19 case (unless medical staff advises another diagnosis exists) – including putting a face mask on the offender, immediately placing them under medical isolation, and evaluating them for possible COVID-19 testing. If the transfer must still occur, ensure that the receiving facility has capacity to properly isolate the offender upon arrival. Ensure that staff transporting the offender wear recommended PPE and that the transport vehicle is cleaned thoroughly after transport.

### **Suggested Prevention Practices for Offenders:**

- Stagger Meals
- Rearrange seating in the dining hall so that there is more space between offenders (e.g., remove every other chair and use only one side of the table)
- Provide meals inside housing units or cells
- If possible, designate a room near each housing unit to evaluate offenders with COVID-19 symptoms, rather than having them walk through the facility to be evaluated in the medical unit. If this is not feasible, consider staggering sick call.
- Designate a room near the intake area to evaluate new offenders who are flagged by the intake screening process for COVID-19 symptoms or as COVID-19 contacts, before they move to other parts of the facility.
- **Implement social distancing strategies to increase the physical space between offenders (ideally 6 feet between all individuals, regardless of the presence of symptoms).** Strategies will need to be tailored to the individual space in the facility, in addition to the needs of the offender population and staff. Not all strategies will be feasible in all facilities.

### **Create a plan for separating symptomatic offenders from the remaining population:**

- Confining symptomatic offenders and exposed offenders to their housing area.
- Placing symptomatic offenders together in one area of the facility.
- Restricting access to units where symptomatic and asymptomatic offenders reside.
- Assigning staff on either affected or non-affected units to prevent transmission between units.
- Canceling events in the facility where many people come together, unless events are limited to a single housing area.
- Cleaning and disinfecting frequently touched surfaces with an EPA-registered disinfectant with a label indicating effectiveness against human coronavirus or emerging viral pathogens.

### **Suggested Mitigation Strategies**

- Offenders with fever or respiratory symptoms should perform hand hygiene, wear masks if possible, or be placed in a unit with the door closed and a special precautions sign posted

- If single cells are **not** available, combine housing areas for offenders with laboratory-confirmed COVID 19
- All staff entering designated patient containment areas should wear appropriate personal protective equipment, such as gowns, gloves and N95 masks.
- Whenever possible, use social distancing and isolation
- Limit points of entry to facility
- Limit visitors to those essential for facility support.
- Screen all persons entering the facility for fever and respiratory symptoms
- Implement system for detecting and reporting signs and symptoms of staff reporting for duty before they enter the building and ask them to call their supervisor immediately for direction.
- Symptomatic employees will be screened regarding fitness for duty
- Entry logs will be at all facility entrances to document all who enter the unit
- Personnel assigned to combined patient care units should not float to other areas
- If transportation of a symptomatic offender is necessary, have the offender wear mask to contain respiratory secretions
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- Facilities should utilize pre-designated isolation or quarantine areas for affected offenders to be housed
- Cellmates of sick offenders will be isolated until it is determined that the sick offender is free of COVID-19.
- Restrict movements of offenders to reduce the possibility of additional exposures
- Consider limiting or suspending programming (such as: education, self-help, industries, work programs, and volunteer programs)
- Consider limiting exposure during meals, for example restricting movement to and from the dining facilities to provide social distancing or serving meals in housing areas
- If feasible, maintain incoming offenders in a designated isolation unit for 14 days prior to release into the general population
- Arrange appropriate aftercare for offenders who are sick and scheduled for release in collaboration with their local health department
- Create a policy for medical personnel to evaluate patients who have recovered from COVID-19 infection and are ready to be released from isolation. See below:  
(<https://www.healthy.arkansas.gov/images/uploads/pdf/DiscontinuationHomeIsolationFinal3.27.20.pdf>)
- Facility tours should be suspended

#### **Other Considerations when creating your plan:**

- A policy for when direct care staff should use personal protective equipment for offenders with symptoms of respiratory infection.
- A plan for implementing respiratory hygiene throughout the facility.
- A proactive leave policy to address the needs of staff including:
  - Advising staff, caregivers, or volunteers who have respiratory symptoms that they should not report to work and to immediately report their symptoms to an identified supervisor.
  - Plans to accommodate staff who need to care for ill family members
  - Identifying staff who may be at higher risk for severe COVID-19 disease and assigning them to unaffected units, or a duty assignment with limited exposure, if possible.
- Contact local hospitals to learn who to coordinate with if one of your offenders needs to be hospitalized or is being discharged from the hospital.
  - **Offenders referred to the hospital:** If an offender is referred to a hospital, you will need to coordinate transport with the hospital, local health department, and medical transport service/emergency medical service to ensure that the offender can be safely transported and received by the hospital.

- **Offenders discharged from the hospital:** When your offender is ready to be discharged, coordinate with the hospital regarding transportation and continued care needs, including any precautions to take in your facility. As the outbreak spreads, having open beds in hospitals is vitally important.

For specific questions regarding the guidance in this document, please call ADH Physicians hotline: 1-844-930-3023.

For more detailed information about the management within Correctional Facilities and Detention Centers, please visit the CDC website:

[https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html#Min\\_Mod\\_Trans](https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html#Min_Mod_Trans)