Best Practices Toolkit to Mitigate COVID-19 Cases in Local Jails
September 28, 2020

Background

COVID-19 has caused substantial morbidity and mortality in correctional facilities. COVID-19 in correctional settings poses hazards to inmates, employees, and the community at large and all possible steps should be taken to prevent and control COVID-19 in these settings. Because COVID-19 is transmitted easily, is spread by both symptomatic and asymptomatic persons, and no vaccination for COVID-19 is available, containment of COVID-19 in congregate settings is challenging.

This document intends to serve as a toolkit or compendium of best practices summarizing interventions that can be taken to prevent the spread of disease when COVID-19 has been introduced into a facility. This document provides information regarding prevention of introduction of COVID-19, personal protective equipment (PPE), medical management of suspected and confirmed cases of COVID-19, and cleaning of facilities. Additionally, other documents already published can be used as a resource, this includes the following:

- U.S. Centers for Disease Control and Prevention
- California Correctional Health Care Services
- California Occupational Safety and Health Administration

Key Items

This document is organized in three sections each with key actions for employees:

1. Planning for responding to exposures.
2. Controlling spread within the correctional facility.
3. Reducing transmission from correctional facilities to the surrounding community.


- Develop a COVID-19 response plan for each institution. This plan should identify persons responsible for leading the response. Responsible parties should be trained on investigation of exposures, record keeping, requirements for reporting to the LHD, and disease control measures.
- Train Human Resources staff and supervisors on steps to take in the event of an exposure incident.
- Establish a plan for onsite testing of employees and expedited reporting of results to the persons leading the response.
- Establish a point of communication between the correctional facility and the LHD.
- Establish a plan for isolation of infected inmates and quarantine of exposed inmates.
• Develop a staffing plan to address COVID-19 related absences.
• Identify adequate supplies of PPE for both employees and inmates according to CDC and CalOSHA guidelines.
• Include plans for protection of inmates and employees at high risk for severe COVID-19, including older persons and persons with underlying medical conditions.

2. Controlling transmission within a correctional facility.

COVID-19 can spread rapidly within a correctional facility. The main infection control strategies are:

• Administrative interventions;
• Identification and testing of exposed persons;
• Isolation of cases;
• Quarantine of exposed but not infected persons, and
• Cleaning of areas where infected persons have been present.

This toolkit covers administrative interventions, and management of employees. California Correctional Health Care Services developed guidance for the control of COVID-19 among inmates in state prisons, which could be applicable for inmates in jails. The CDC also has guidance for the control of COVID-19 in correctional settings.

When a correctional facility is notified that an employee or inmate has a suspected or confirmed case of COVID-19, the facility should:

• Implement their response plan for an exposure incident.
• Consult with LHD; the LHD can seek assistance from CDPH as needed.
• Immediately report the case to the LHD.
• Identify possible sites of exposure within the institution. Exposure sites include both:
  o Locations where the case-patient may have been exposed.
  o Locations where the case-patient may have exposed others prior to isolation.

Administrative interventions

Masking: COVID-19 can be spread by persons without symptoms or by persons who have not yet developed symptoms. These individuals can be unaware that they are infectious, so masking of inmates and employees and social distancing are very important for preventing disease spread. When providing food or medication directly to inmates in cells, employees should wear masks for source control and should be six feet away from inmates.

Limiting Staff Movement: Employees and inmates can unknowingly transmit COVID-19 from one part of the facility to another. When COVID-19 is present in a facility, movement between different units should be avoided. Ideally, employees should be dedicated to a single unit of the
institution. If that is not possible, employees should either be dedicated to units that are infected or units that are uninfected. Inmate movement between units should be limited.

**Dedicated Staff for Food Service:** Food service is critical for correctional operations. Where possible, correctional facilities should use dedicated inmate and employee staff for food service operations. Inmate and employee food service workers should be assigned to a specific kitchen, and a specific shift. If possible, staff should not work more than one shift to prevent spread of infection between work groups. Facilities should have emergency plans in case kitchens need to be temporarily closed for COVID-19 infection control.

**Identification of exposed persons**
COVID-19 is easily transmitted in congregate living settings because inmates and staff are in close and prolonged contact. Determining individual exposed persons is difficult and contact tracing should be based on group exposures. In correctional institutions, all persons who work or reside in the same location as an infectious COVID-19 case should be considered exposed. The time period for exposure is 48 hours prior to the onset of symptoms of a symptomatic case-patient, or 48 hours prior to specimen collection of an asymptomatic infected person until isolation (for inmates) or precautionary removal from the workplace (for employees). When an infected person is identified, the person should be interviewed and administrative records should be reviewed to determine all locations and groups within the institution that are potentially exposed.

**Identification of infections among exposed persons**
Because exposed persons can become infectious within 48 hours of exposure, transmission can be prevented only if the response to an exposure is prompt. All exposed persons in a correctional facility should be promptly tested. Testing should be carried out on-site and arrangements should be made for test results to be provided to persons responsible for the response. Test results for both inmates and employees should be tracked by the institution to ensure test completion and to monitor the spread of disease. If there is evidence of significant spread within the institution, testing of all inmates and employees should be considered.

**Isolation of infected employees**
Employees with suspect or confirmed COVID-19 should be isolated. The most appropriate location for isolation should be determined by the LHD. Employees requiring isolation include:
- Employees who test positive for COVID-19.
- Employees who have symptoms of COVID-19 who have pending test results or who have not been tested.
- Employees who have symptoms of COVID-19 who test negative.

Employees who test positive for COVID-19 and who are asymptomatic should be instructed to care for themselves at home or another site recommended by the LHD and not return to work until at least 10 days have passed since the date of the positive COVID-19 diagnostic test.
Employees who test positive for COVID-19 and who then present with symptoms during their 10-day isolation period may return to work once the following conditions are met:

- At least 1 day (24 hours) has passed since recovery, defined as resolution of fever without the use of fever-reducing medications; **AND**
- Improvement in symptoms\(^1\); **AND**
- At least 10 days have passed since symptoms first appeared.

**Resources:**

- [CDPH Guidance](#) on Self-isolation Instructions for Individuals Who Have or Likely Have COVID-19
- [CDPH Guidance](#) on Self-quarantine Instructions for Individuals Exposed to COVID-19

**Infection prevention for employees**

If possible, custody staff who monitor infected inmates should not also work in areas with uninfected inmates. Custody staff exposed to infected inmates should wear recommended PPE as appropriate for their level of contact (see CDC guidance on PPE) and should limit their own movement between different parts of the facility to the extent possible.

**Quarantine of exposed employees**

Exposed employees who test negative, who are not tested, or who are asymptomatic and awaiting test results should be quarantined at home or at another site recommended by the LHD. Employees should remain in quarantine for 14 days after last exposure. During this time, they should follow LHD directions regarding movement outside of the facility and not work. If the absence of an employee would place critical operations in jeopardy and there are no other workers to replace the critical functions of that employee, then they may be permitted to work on a case by case basis during their quarantine period if released from quarantine by the local health department. In this situation, employees must wear a face covering and maintain 6 feet of separation from others at all times while at the facility.

**3. Reducing transmission between the correctional facilities and the community.**

Movement of infected inmates out of the facility should be avoided. If an incarcerated/detained individual who is a COVID-19 case is released from custody during their medical isolation period, the LHD should be notified in advance to ensure safe transport and continuation of necessary medical care and medical isolation. The LHD should also be notified if a COVID-19 case must leave the facility for medical care or other reasons. Protocols to prevent COVID-19 transmission during transport should be implemented.

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\(^1\) It is possible that individuals may still have residual symptoms despite meeting the criteria to discontinue isolation. These individuals should continue to wear a facemask/cloth face covering when within 6 feet of others until symptoms are completely resolved or at baseline.
Exposed and ill employees should be educated about prevention of transmission outside the workplace. Exposed employees should follow LHD guidance regarding quarantine and should avoid close contact with others and public spaces.

This is a rapidly evolving pandemic and information is being updated frequently. Facilities should monitor public health updates from:

- Local Public Health Department  
  Link: https://www.cdph.ca.gov/Pages/LocalHealthServicesAndOffices.aspx  

- California Department of Public Health  
  Link: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx  

- US Centers for Disease Control and Prevention  