



WARDEN'S INSTRUCTION

May 6, 2021

Scope:

This Warden's Instruction is intended to assist the Officer(s) in charge of biowaste removal for purposes of maintaining the integrity of the Correctional Facilities operational management as defined within the Standing Order 1207 – Infectious and Communicable Diseases.

Purpose:

To ensure staff are given clear directional procedures to mitigate the potential risk(s) that can be associated with handling biohazardous waste.

Staff handling such items are to follow directions outlined in the procedures, as well any supplementary communications from the Management and Healthcare Teams.

Procedures:

The Shift Supervisor will assign staff to the removal of biohazard waste from high risk areas that are suspected to have had contact with COVID-19.

Staff members assigned shall be fully donned in the Personal Protective Equipment (PPE) provided by the centre. Items to be worn are:

- Surgical mask (not fabric)
- Isolation gown
- Eye protection
- Gloves

Note: The outlined procedures are only required for packing the biohazard waste. Once the packaging has been completed, transporting secured boxes from the facility to the sea can may be done while wearing gloves and mask.

It should be noted that proper donning and doffing procedures are to be done. Example: Prior to entering the gym at BCC the staff must don PPE gear. Prior to exiting this room, proper doffing must be done.

To enter Makigiarvik, full PPE is required. After packing has been complete, assigned staff must change their full PPE gear prior to attending to any other duties within the units.



Infectious control trolleys have been placed in both BCC and Makigiarvik and are stocked with all the necessary equipment. Should the stock levels run low it is the responsibility of the on-duty Correctional Caseworker(s) to notify the Shift Supervisor, so inventory can be ordered.

Biohazard bags have been placed strategically in the centre and on the units (they are orange bags labeled *Biohazard*). They are to be changed out once they reach three-quarters (3/4) full.

Prior to removing the bag, staff are to be fully donned in the appropriate PPE. Once readied, staff are to conduct the following steps:

- Cardboard box is to be assembled (Arrows identify the top vs bottom. The bottom is to be secured with a minimum of 3 strips of duct tape.)
- A clear liner is to be placed inside the box prior to placing biohazard bags inside the box
- Tie the biohazard bag closed securing the contents inside
- Place the tied biohazard bag directly inside the clear liner which is inside the cardboard box
- Tie the clear liner closed securing the contents inside
- Seal the box closed with a minimum of 3 strips of duct tape
- Once the cardboard box is secure, store neatly in the designated room to allow space for additional boxes

Until removed off-site, all biohazard bags at BCC are to be secured and stored in Gym. Until removed off-site, all biohazard bags at Makigiarvik are to be secured and stored in the Multipurpose Room.

The transportation of the boxes off-site will be conducted during the night shift as per the direction of the Shift Supervisor. Only at transportation time will the secured boxes be paced in the designated vehicle that has been predetermined by Management. All boxes that have been readied to go are to be placed in the pan of the truck only.

The staff member that has been assigned this role by the Shift Supervisor will deliver the secured boxes to the appropriate sea-can once the truck has been filled. Once at the destination, the staff member will stack all boxes from the truck and into the sea-can in an orderly and organized fashion, filling the far side first. Once all boxes have been stacked, staff are to secure the door on the sea-can and return to the centre.



Prior to returning the vehicle keys to their designated area, sanitize all high-contact areas of the vehicle with the products provided by Healthcare. They are, but not limited to:

- Steering wheel and column
- Indicator switches
- Seatbelt(s)
- Rear-view mirror
- Dashboard
- Doorhandle (interior and exterior)
- Light switches
- Radio/console

Once the vehicle has been sanitized, staff are to turn the placard on the dash to green indicating to others that the vehicle has been cleared and is again ready for use.

Expectations/Summary:

Staff who have been assigned the responsibility of emptying and removing biohazard waste products are to adhere to the procedures in place and communicate any questions they may have or encounter directly to the Shift Supervisor.

Staff are to follow best practice and seek help should they require lifting/carrying anything to prevent injury.

During this process staff are to remain diligent when opening doors and communicating procedures in the presence of Clients. As this process is intended to be conducted during the night shift, staff are also to be mindful and respectful of Clients who may be sleeping and easily disturbed by load noises.



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Warden - Baffin
Correctional Centre
Department of Justice
Government of
Nunavut

Itiqtauviup Atanilluanga -
Kikitalukmi Ikajuktauvik
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WARDEN'S INSTRUCTION

CORRECTIONS COVID 19 OUTBREAK BCC/MAKI

UNIT & PROCEDURE GUIDLEINES

May 16, 2021

General

- Entrance to all facilities is restricted. Visitation is prohibited currently.
- Outside activity including work TAs are suspended.
- All clients arriving to any Iqaluit facility are required to complete a 14-day isolation.
- BCC/Maki staff are not to work at other Correctional Facilities.
- Outside employment has been suspended.
- Staff picks ups/drop offs are in place to avoid exposure to public transportation. Disinfecting of Correction's vehicles is to occur after each pick up or drop off. Staff requiring pick ups are to call ahead and perform the screening questions prior to entering the vehicle. Hand hygiene with hand sanitizer is to be performed by all staff prior to entry into a vehicle.
- Surgical masks are mandatory for all staff entering the facility.
- Screening is required for all entry into the facilities; Screening questionnaire, observation of hand hygiene followed by infrared temperature reading. Screeners are to maintain 6 feet throughout this process, wear a surgical mask, eye protection and gloves. Gloves are to be changed after each screening. Paper is prohibited. Documentation is to be completed on an electronic log sheet.
- Weekly COVID swabs are mandatory. This will be coordinated and documented by the COVID Lead Nurse.
- Strict cleaning regimes are to be followed in all units. Full deep clean of the units, twice per shift. High touch surfaces a minimum of 4 times per shift.
- Correctional staff are expected to follow all regional CPHO guidelines.

Delta

- The Delta unit has been designated to house all positive cases.
- Capacity of this unit is 6 clients per room. Maximum housing capacity 18.
- Entry into this unit requires PPE.
- Staff working in this unit must wear PPE attire within the unit.
- Signage, infection control trolleys and biohazard bins are placed throughout the unit.
- The area is to be free of all unnecessary items including paper or fabric products.



- Staff are responsible for all cleaning in this unit.
- Masks are mandatory for clients prior to opening the hatch or door of the cell.
- Clients must don masks prior to allowing access. Masks are to be always maintained throughout this process. Clients are to maintain 6 feet from staff and not interact with other cells. Failure to follow this and access is to be prohibited.
- Laundry: Clean laundry is to enter this unit in a set placed and tied in a clear bag. Once it enters it is to be given to the client immediately.
- To remove dirty laundry, it is to be placed in a clear bag, tied, and moved immediately for laundry services.
- To remove biohazard from the unit, secure biohazard bag once $\frac{3}{4}$ full. Cover with a clean biohazard bag. Remove PPE at designated exit. Don a new surgical mask and gloves. The biohazard can then be removed from the unit and placed in the designated area.
- Meals are to be provided to each client in this unit with disposable trays and utensils.
- The meals are to be provided by a 2 staff approach. 1 staff is to don PPE attire and enter the unit. Another staff is to remain in the secure hallway and pass items requested to the delta officer through the door. This officer is not to enter the unit nor does the meal trolleys.
- Medication is to be given to clients on designated medication times by the Nurses. This will be done through the hatch.
- Daily assessments of each client is to be done by the Nurse including temperature checks with an oral thermometer.
- It is the responsibility of the medical team to ensure all required PPE attire for staff and infection control trolleys are stocked for staff use.
- Movement out of this unit for clients is restricted.
- No sharps will be provided to the clients during this placement such as razors, nail clippers or hair clippers.

Flex

- The Flex unit has been designated the isolation unit that houses new intakes.
- Capacity of this unit varies. There are 6 cells.
- Co horting must be avoided if possible, as per CPHO. If co horting is required related to space only clients arriving on the same day can be housed together. Do not co hort clients arriving from an outbreak community with another client from a community with no outbreak.



- Entry into this unit requires PPE.
- Staff working in this unit must wear PPE attire within the unit.
- Signage, infection control trolleys and biohazard bins are placed throughout the unit.
- The area is to be free of all unnecessary items including paper or fabric products.
- Staff are responsible for all cleaning in this unit.
- Masks are mandatory for clients prior to opening the hatch or door of the cell.
- Clients must don masks prior to allowing access. Masks are to be always maintained. Clients are to maintain 6 feet from staff and not interact with other cells. Failure to follow this and access is to be prohibited.
- Laundry: Clean laundry is to enter this unit in a set placed and tied in a clear bag. Once it enters it is to be given to the client immediately.
- To remove dirty laundry, it is to be placed in a clear bag, tied, and moved immediately for laundry services.
- To remove biohazard from the unit, secure biohazard bag once $\frac{3}{4}$ full. Cover with a clean biohazard bag. Remove PPE at designated exit. Don a new surgical mask and gloves. The biohazard can then be removed from the unit and placed in the designated area.
- Meals are to be provided to each client in this unit with disposable trays and utensils.
- The meals are to be provided by a 2 staff approach. 1 staff is to don PPE attire and enter the unit. Another staff is to remain in the secure hallway and pass items requested to the flex officer. This officer is not to enter the unit nor does the meal trolley.
- Medication is to be given to clients on designated medication times by the Nurses. This will be done through the hatch.
- Daily assessment of each client is to be done by the Nurse including temperature checks with a tympanic thermometer.
- It is the responsibility of the medical team to ensure all required PPE attire for staff and infection control trolleys are stocked for staff use.
- Movement out of this unit for clients is restricted.
- No sharps will be provided to the clients during this placement such as razors, nail clippers or hair clippers.



Charlie

- The Charlie unit has been designated to house all cleared (Clean) clients who recover from the delta unit or clear the isolation requirements.
- Capacity of this unit is 42 clients.
- Staff working in this unit must wear a surgical mask.
- Masks are mandatory for clients in this unit.
- Clients are responsible for cleaning this unit. Deep cleaning should be done twice per shift. High touch areas should be disinfected a minimum of 4 times per shift.
- Social distancing should be encouraged in this area especially during mealtimes and leisure time.
- Client movement out of this unit into the secure hallway should be minimum.
- Prior to exiting the unit clients are to perform hand hygiene, ensure masks is on and wear gloves.
- Staff working in this unit should not enter either Delta or Flex. Breaks will be completed by the “clean” floater.
- Prior to returning the client should remove gloves and perform hand hygiene prior to re-entering the unit.
- Medication times are to be adhered to. Clients are to come to the medication hatch at designated times through 167 only.

Makigiarvik

- Makigiarvik is the center of the outbreak at corrections. This entire unit is currently isolating awaiting a mass swab scheduled for May 25, 2021.
- All clients are isolated in their designated rooms.
- Entry into this unit requires PPE.
- Staff working in this unit must wear PPE attire.
- Signage, infection control and biohazard trolleys are placed throughout the unit.
- The area is to be free of all unnecessary items including paper or fabric products.
- Staff are responsible for all cleaning in this unit. Deep cleaning the entire units including washrooms a minimum of twice per shift and high touch areas should be disinfected a minimum of 4 times per shift.
- Masks are mandatory for clients prior to opening the door of the cell.
- Clients must don masks prior to allowing access. Masks are to be always maintained. Clients are to maintain 6 feet from staff and not interact with other cells. Failure to follow this and access is to be prohibited.
- Only 2 clients can come out to go to the washroom at a time.



- Staff must ensure phones are thoroughly disinfected between use.
- Meals are to be provided to each client in this unit with disposable trays and utensils.
- The meals are to be provided by a 2 staff approach. 1 staff is to don PPE attire and enter the unit. Another staff is to remain in the secure hallway and pass items requested to the Makigiarvik officer. This officer is not to enter the unit nor does the meal trays.
- Staff are to do laundry for the clients. The client is to place any dirty clothes in clear bags, secure and place outside the room. Once clean, the laundry is to be placed in a clean bag and returned to the client.
- Clients should be encouraged to clean and disinfect their units. Disinfecting wipes can be provided to each client on request.
- Client's can use the designated mop or broom. They must perform hand hygiene and wear gloves. Once finished the handles must be thoroughly disinfected.

Secure Hallway BCC

- The secure hallway is considered a “clean” zone.
- This area is to be cleaned thoroughly a minimum of twice per shift by staff.
- High touch areas should be disinfected a minimum of 4 times per shift.
- This area must be clear of any unnecessary items.

Secure Hallway Maki

- The secure hallway is considered a “clean” zone.
- This area is to be cleaned thoroughly a minimum of twice per shift by staff.
- High touch areas should be disinfected a minimum of 4 times per shift.
- This area must be clear of any unnecessary items.
- The front entrance must be clear of unnecessary items and thoroughly cleaned.

Biohazard Removal

- Please follow Warden's instructions on Biohazard waste disposal.

A&D Process

- Please follow the procedure for A&E during an outbreak.



Transportation of Symptomatic or Positive Clients

- If a client develops symptoms in either the Charlie unit or Maki units, they will be moved immediately to an empty isolation cell (Flex). The Nurse on duty will inform the IC and movement will take place.
- If the client is in Charlie. Ensure a mask is in place, hand hygiene is to be performed by the client and the client is to don gloves. Client will be escorted by the staff to the isolation unit.
- If transportation from Maki to BCC is required 1 staff and the nurse is to go to Maki. They are to don PPE as per guidelines inside the secure hallway to Maki. Staff working in the unit are to get the client and bring to the secure hallway. They are to perform hand hygiene and don gloves. They are to be transferred in the white van. Symptomatic clients are to enter through 115. For clients identified as positive they are to enter 184.
- Please follow procedure for disinfecting corrections vehicles following transport.

Recovered Clients

- The COVID lead nurse will submit daily a request for recovery for clients identified as positive based on the positive swab date of the client.
- Only the office of the CPHO can deem a client as “recovered”.
- If a client has recovered, they will be moved to a clean unit.
- They are to leave their assigned delta cell. No items can accompany the client to the clean unit.
- They are to shower in intake and change into a new set of institutional clothing and mask. This includes footwear. Once this has been completed a staff will escort them through 173 and they will enter the front door and placed in Charlie.

Cleared Clients from Flex

- Once the clients have cleared isolation they will be moved to Charlie.
- They are to leave their assigned flex cell. No items can accompany the client to the clean unit.
- They are to shower in Flex shower and change into a new set of institutional clothing and mask. This includes footwear. Once this has been completed a staff will escort them through 115 and they will enter the front door and placed in Charlie



Cleaning of Cells After Client Movement

- If a client has tested positive or has become symptomatic and movement had to occur, thorough cleaning of the client's cell is to be done.
- This includes all clothing and bedding. This is to be placed in a clear bag, secured, then moved for laundry services.
- All items that can be disinfected are to be thoroughly wiped and placed in a clear bag and secured.
- All items unable to be disinfected which includes paper products are to be disposed of in a biohazard bin.
- Walls, floors, and all surfaces are to be thoroughly disinfected including the mattress.
- If staff identify a tear in the mattress, then the mattress should be disposed of in a biohazard bag.

Lawyer Calls or Phone Court

BCC – Lawyer calls/phone court can be done in the phone booth if required for a client. No matter which unit the client comes from the same procedure should be in place. Prior to exiting the unit, the clients must perform hand hygiene and don gloves. Masks are mandatory. They can be placed in the phone booth ensuring they understand that they can not remove the mask or gloves. Once they are done, they are to be escorted back to their unit. Gloves are to be removed and hand hygiene performed.

The phone booth must be thoroughly disinfected after use including all surfaces, door, bench, and phone.

Maki – Lawyer calls/phone court can be done at the designated phone areas as spacing allows for adequate privacy. Prior to the client exiting their cell they must perform hand hygiene and don gloves. Masks are mandatory. They must understand that they can not remove their masks throughout this process. Once they are done, they are to be escorted back to their cell. Gloves are to be removed and hand hygiene is to be performed. The phone and chair are to be thoroughly disinfected after use.

If privacy issues are a concern, this can be done in the program room on the North side ensuring the same steps are followed.



Mechanical Restraints & Client Movements

In cases where mechanical restraints are required for the safe & secure movement of clients, staff will clean the cuffs with disinfecting wipes before going onto the unit and applying on the client.

Once the movement has been completed, and immediately upon removing the restraints from the client, staff are to clean them again using disinfecting wipes.

Medical Care

It is the Correction's medical team's responsibility to ensure all up to date infection control guidelines are in place and being followed.

During the COVID outbreak in Iqaluit, Corrections must make every possible effort to modify staff assignments to minimize movement across housing units and other areas of the facility. The same staff are to be assigned to the same housing unit across shifts to prevent cross-contamination from units where infected.

The CPHO has recommended the following be implemented within staffing.

1. All Nursing staff are encouraged to be vaccinated.
2. Eliminate unnecessary face to face interaction among Nursing staff.
3. When Nursing staff need to work together, they **MUST** always wear PPE.
4. Nursing staff are encouraged to take breaks separate and avoid interactions in any size group.
5. Only one Nurse should be assigned COVID lead to communicate with the Public Health team and CPHO to avoid miscommunication and follow a standardized approach.

COVID Nurse Lead

As requested by the office of CPHO, 1 Nurse has been assigned this role within corrections to minimize miscommunication and provide adequate guidelines throughout the outbreak. This nurse will be responsible for communicating directly with CPHO and Public health on all positive cases, recovery daily reviews, contact tracing, coordinating staff and client swabbing and tracking, as well as facilitating Moderna clinics. Other Correctional Nurses will report all suspected or positive cases to the COVID lead who will immediately communicate directly with the CPHO.

BCC Assignment – 1 Nurse should be assigned and stationed at BCC.

Maki Assignment – 1 Nurse should be assigned and stationed at Maki.



WARDEN'S INSTRUCTION

May 31, 2021

Effective immediately, as approved by the CPHO, isolation requirements for Makigiarvik has been removed. All clients currently housed at Makigiarvik are no longer considered high risk contacts and are no longer required to isolate.

PPE attire is no longer required for staff, with the exception of the nurse during assessments. Masks remain mandatory for ALL staff and clients. Strict cleaning regimes (2 deep cleans per shift and a minimum of 4 times a day for high touch surface areas) must be maintained. This can be completed by clients under supervision of correctional staff. Social distancing must be adhered to during meals and activities.

Medication delivery can return to the nurses office during medication time. Full PPE attire is not required for the nurse during this time. Masking only.

Kitchen work placements will NOT resume at this time. We will review later next week.

All cleaning products will remain at Makigiarvik. Left over PPE kits should be brought to BCC for use in Flex and Delta. Hand sanitizers will be removed from units. One (1) will remain at the Crow's Nest for staff use and at the front entrance of the building.

Bio-hazard is no longer a requirement for Makigiarvik.

Delta & Flex Units

Bio-hazard is still required for Delta & Flex only.

Procedures for Delta and Flex will remain the same for now. Full PPE attire is required for staff entering into these units.



Department of Justice, COVID 19 Facility Precautions Admission & Discharge Officer, Infection Control Protocol

The Admission and Discharge Officer (A&D) has the first contact with a new client that enters a facility. For the protection of this officer, it is crucial that strict infection control protocols are followed to ensure their safety.

All new clients entering Corrections Facilities now require isolation related to the current Iqaluit outbreak of COVID 19. The clients are to enter from door 115, into flex, the isolation unit. The client and RCMP member must be wearing a mask prior to entry. Hand hygiene with an available hand sanitizer is to be offered to the client on arrival.

During this process, if feasible, the Institutional Nurse should accompany the A&D officer and screening officer during this procedure. Remainder of Flex need to be locked down during these procedures. Both the Nurse, A&D officer and 2nd screening officer are to don full PPE attire prior to the arrival of the client; a surgical mask (not fabric), isolation gown, nitrile non latex gloves and eye protection.

Once the client arrives at the facility the COVID 19 screening by the Nurse should be completed prior to the interaction between the A&D officer and the client. The screening questions are to be asked followed by a temperature screening. Complete vitals can be obtained once the client is placed in the isolation cell. The Nurses are to follow the ***Corrections Health Care Procedure for receiving a new client.***

After this, the A&D officer is to complete their process in the flex unit. All clothing is to be placed into 2 separate clear bags (1 that can be washed and 1 that have items that can not) and the client is to be changed into facility clothing. ORAMS is to be completed in the isolation unit. A copy of the ORAMS questions should be placed in a protective sheet or laminated to reduce the paper products brought into the unit. The remand warrant received from the RCMP should be placed in a protective cover once received.

Itemizing personal effects can be completed in the isolation unit, using laminated personal effects sheet and an expo dry eraser marker. This can be brought back to the A&D office and disinfected easily.

Once the process has been complete and all personal belongings are placed in a clear bag, the A&D officer must doff their PPE prior to leaving the unit and perform hand hygiene. They are to ensure a new set of gloves and surgical mask is worn prior to leaving the unit. This will apply to the 2nd screening officer as well.

Any clothing that can be washed must be immediately placed into the washer with hot water and normal detergent available at the facility. Once the A&D officer return to the A&D office the information obtained should be entered into the computer.

After the laundry is complete, all personal effects are to be placed in the hanging affects bag, then sealed with a clear garbage bag. Any luggage or items that do not fit into these bags are to be sealed with a separate clear garbage bag.

If any additional itemizing of personal effects needs to be done in the A&D office, the officer must don full PPE attire to ensure no cross contamination occurs from the items to the officers clothing or person.



Department of Justice COVID 19 Facility Precautions Baffin Correctional Center

Staff

Please ensure staff are self monitoring at home for signs and symptoms of COVID 19. Staff who are sick should not be attending the facilities for work. These centers are vulnerable and at high risk if COVID 19 is introduced. Currently the biggest risk to these areas are staff. Entrance to these facilities is strictly monitored by staff. Currently there is a 4-step screening process for entrance into the facility. This screening process applies to all staff, visitors, contractors, maintenance, and delivery personnel.

Entrance 4 step screening process

1. COVID 19 screening questionnaire

If a person answers “YES” to any of these questions entry into the facility is prohibited.

- Do you have a new onset cough (with or without shortness of breath)?
- Do you have a fever?
- Do you have a sore throat?
- Do you have a runny nose, nasal congestion, or sneezing that is not part of chronic allergies or sinus problems?
- Do you have a sudden loss of taste or smell?
- Do you have any nausea, vomiting or diarrhea?
- Do you have unusual joint pain or muscle aches?
- Have you been feeling unwell or have unusual tiredness?
- Have you travelled outside of Nunavut in the last 14 days without completing a GN designated hub?
- Have you had close contact with a person who has been tested for COVID 19 and results are still pending?
- Have you had close contact with anyone who has tested positive for COVID 19 and remains in isolation?
- Have you been tested for COVID 19 and results are still pending or have been asked by Public Health to self isolate for 14 days?

2. Observe hand hygiene for a minimum of 20 seconds

If the answer to all questions is “NO” then staff need to move onto the next step, observing hand hygiene for proper technique and timing for a minimum of 20 seconds.

- Please have the person wait until the screening questionnaire is complete.
- Staff should observe and time hand hygiene for a minimum of 20 seconds.
- This should not be done during the questions as staff will be unable to properly visualize and time appropriately.

3. Ensure mask is applied properly prior to entering the facility.

- All staff and personnel entering the facility MUST wear a mask. **No exceptions.**

- Staff need to ensure the mask is properly applied prior to the oncoming staff or personnel entering the facility.

4. Infrared temperature check

- Temperature screening using an infrared thermometer has been added based on recommendations from Corrections Canada.
- This is the last step for staff to complete. If the temperature is **37.7** or less entrance is permitted. If the temperature is **37.8** or higher entry is prohibited.
- To ensure the safety of the staff completing screening this step **MUST** be done last.

All entrances of BCC and Maki are equipped with wash stations, signage, a box of masks and gloves.

It is crucial that staff continue to self monitor for any symptoms to decrease the chance of COVID 19 entering the facilities.

Self Monitoring

It is imperative that staff and clients are self monitoring for symptoms daily. If any of the above-mentioned symptoms develop while on shift the staff should advise the IC and once relieved, immediately leave work. They are encouraged to contact Public Health for instruction and possible testing.

Staff Education

Staff within the facilities are provided with training to ensure compliance of all Public Health and Corrections Canada recommendations. This will be continuing throughout the next coming months to avoid complacency. The following is available and mandatory for all staff.

- PPE equipment “Donning and Doffing” video.
- PPE training with drills.
- Hand hygiene mandatory online course and quiz.
- COVID 19 precautions for each facility.
- Regular supervisor meetings to review any changes or recommendations.

Good Hand Hygiene and Social Distancing

These are 2 of the most important things the staff and clients can do to stop the spread of COVID 19. COVID 19 is a virus that is transmitted by droplet and contact from infected people. An infected person can shed the virus through coughing, sneezing, or contaminating surfaces such as phones and keyboards. The virus can live on surfaces for hours or days.

Good hand hygiene: All staff and clients need to be diligent in practicing good hand hygiene and avoid touching their face. This can be accomplished through soap and water or sanitizer that is a minimum of 60% alcohol content.

Social distancing: All visitation has been cancelled except for emergencies. Activities that are occurring outside such as walking or recycling is occurring without contact with members of the public and ensuring social distancing is maintained. Within the facilities encouragement of social distancing should still occur. 2 meters of length is recommended.

Facility Precautions

As noted above there is a 4-step screening process for entry into any Corrections Facility. In addition to this, signage has been placed on the front entrance to advise staff and the public to the restrictions of entry to the facility.

- COVID 19 screening questionnaire
- Hand hygiene observation
- Mandatory masks
- Infrared temperature reading

The entry points of each facility are also equipped with the following.

- Hand wash stations
- A box of surgical masks
- Gloves
- A waste bin
- Blue air unit – air purifier
- Signage

Signage for COVID 19 resources have been posted throughout the facilities to help educate staff and the clients on COVID 19.

The following screening tools have been developed for use within the facilities with resources from Nunavut Public Health and Corrections Canada.

- COVID 19 screening questionnaire
- Initial client screening tool
- 14-day isolation, daily monitoring tool for clients

Mandatory Mask Use for Staff in all Facilities

As of **November 23, 2020**, masks are now mandatory for all staff working in all facilities in Nunavut. Hand made masks are to be used with the exemption of staff working with or in direct contact with any symptomatic isolated client or client who has COVID 19 results pending. These staff should wear medical masks. 3-layer masks are preferred based on Health Canada recommendations. Staff are to wear mask during the entire shift other than the following exemptions.

- Masks can be removed when eating or drinking however 6 feet distance must be maintained
- Masks can be removed when staff are outside for breaks. Ensuring 6 feet is maintained if in the presence of other staff
- Masks must be worn by staff designated for staff pick ups or when in a vehicle with a client.
- Control staff if alone can remove the mask however if multiple staff are present mask use should be maintained
- Admin staff who are in offices alone or in shared offices with the ability to maintain 6 feet can remove their masks

Staff are permitted to wear their own mask if it is 3 layers of approved material. Valve masks are not to be used. The main purpose of mask wearing is to protect others around you for example the client, from exposure to symptoms you may have. Most valve masks made have exhalation valves which allows exhaled air to flow out of the mask. Although some valve masks have filters or other features it would be time consuming for medical personnel to validate the valve masks to ensure they are no risk to others so this mask should not be used.

Hand made masks worn must be work appropriate. Only masks deemed workplace appropriate are to be used. Preference would be solid/print patterns free of wording or logos. Neck gaiters or warmers should not be used in corrections. They are not well secured to the head/ears and are likely to move or slip out of place.

Hand made masks need to be washed in hot water and normal detergent daily. When possible, masks should be washed separately from normal laundry. Ensure the mask is fully dried prior to wearing.

Staff pick ups/drop offs

To avoid the risk with public transportation, any staff who require a taxi to go to and from work should contact the facility to arrange pick up. Screening should be done over the phone for these staff to ensure no risk to the staff picking up these staff. Corrections vehicles should be disinfected regularly with approved disinfecting wipes.

- Staff are to wear masks throughout this process.
- Hand hygiene with hand sanitizer should be completed prior to entry.
- Vehicles are to be equipped with hand sanitizer, a box of surgical masks, disinfectant products and gloves.

Cleaning of the Facilities

All facilities have been directed to do a thorough cleaning with any of the approved products from the Health Canada website. A thorough cleaning should be done twice per shift. Cleaning schedule/routines have been provided to the facilities. More commonly touched surfaces such as counters, keyboards, doorknobs, light switches, and radio systems should be wiped down with hospital grade wipes at least 4 times per shift.

All unnecessary items should be removed from areas of high traffic such as common areas, control rooms and entry ways. COVID 19 can live on numerous surfaces and products for hours to days. Below is a list of items that should be removed or stored in a closed area.

- Clothes such as outer wear should be kept in dressers, closets, or lockers.
- Fabric items that are not able to be washed should be removed from common areas.
- Food and drink should be limited to kitchen/dinning area.
- Paper products. COVID 19 can survive on these products especially if wet. Remove all paper products. Laminate or cover in protective sheets when able.

Cleaning of Facility Vehicles

Vehicles should be cleaned thoroughly. General cleaning should be done once per shift if vehicle is not in use. After each use it should be thoroughly cleaned as well using a hospital grade wipe/cleaner.

Laundry Services

Laundry should be washed in hot water whenever possible. Normal laundry detergent available in the facilities is sufficient. Any contaminated clothing or clothing from an isolation area should be washed separately.

PPE Equipment

PPE stands for personal protective equipment. This equipment is needed in each center for staff and client protection against the spread of COVID 19. Each facility is equipped with the following items.

- Surgical/procedural masks
- Hand made masks
- Face shields (Important for instances when staff can encounter bodily fluids example spitting)
- Surgical or yellow gowns
- Gloves, available in all sizes. Nitrile, latex free
- Hospital grade disinfecting wipes. Example, Cavi wipes, Germicide
- Health Canada approved cleaning supplies. Example, Virex, Germosolve, Lysol, Bleach
- Hand sanitizing stations and easy access to hand sanitizer throughout the facilities
- An isolation cart/trolley for easy access of equipment

Court Movements

Corrections has made the decision that clients who are attending court must wear masks. Surgical masks are the only ones currently available. These will be used until corrections has enough stock of hand made masks for use.

- Clients will be fitted with a mask prior to leaving the facility.
- Sheriff's will be subject to the screening process prior to entry into the facility.
- Clients are encouraged to keep masks on throughout the court proceedings until returned to the facility.
- The client must perform hand hygiene on return.

Medical Appointments

Clients attending any medical appointment outside of the facility must wear a mask. Surgical masks are to be worn at present until adequate stock of hand made masks are available. Staff are always to wear a mask.

Dental Appointments

Dental services during COVID 19 are a higher risk activity. Related to these concerns, clients must wear a mask when attending any dental appointments. Surgical masks are to be worn at present until adequate stock of hand made masks become available. Staff are always to wear a mask.

Outside Activity

Outside activity is limited at present. Walks, traditional activities, and recycling is occurring at select facilities. Ensure limited contact with the public occurs. Encourage social distancing and good hand throughout activities. Staff and clients are to maintain mask use during these activities. For walks if 6 feet can be maintained masks can be removed however if questionable masks are to be used.

See specific facility memos for most accurate, up to date information.

Designated Droplet/Contact Precaution Areas

Each facility should have a minimum of 2 areas that are reserved and designated as droplet and contact precautions. In the likelihood of multiple inmates needing isolation other areas should also be identified for use.

- A sign identifying the room as Droplet/contact precaution should be present.
- Donning and doffing instructions for PPE use should be present.
- An isolation trolley and biohazard waste bin should be located outside the door when in use.
- Any item that enters this room needs to be disinfected prior to returning to the floor. Items that can not be disinfected will be thrown out (books, paper etc). Items entering this room should remain in this room until isolation is complete except garbage.
- Only disposable cutlery, plates and cups will be used.
- Fans or humidifiers are not permitted for use in this room.
- Any garbage that is removed from this room must be placed in the biohazard waste bin.
- If in use, the door must always be closed.
- After isolation, the room must be thoroughly disinfected including all surfaces, walls, floor etc.
- During isolation daily disinfecting by the client should be encouraged.

Mandatory 14-day Isolation of New Clients

The Department of Justice has mandated that all new clients entering facilities **MUST** undergo a 14-day isolation period. This is in place to protect the staff, clients, and facility from the potential exposure to COVID 19. The only facilities exempt from this rule currently is CRC if clients are coming from BCC and have completed a COVID 19 screening form. Clients coming from an institution outside of Nunavut will be required to complete a 14-day isolation period. During this 14-day isolation period they will be assessed daily by the medical team.

BCC Designated Areas

Designated droplet/contact areas

Flex Cell 1 - 5 have been designated as a droplet and contact rooms. These rooms should be used for all new clients entering the facility.

Assessment Cell 1 - 2 have been designated as a droplet and contact rooms. Clients who have been swabbed and are awaiting results will be isolated in these rooms. The isolation trolley is kept just outside of this cell for use.

Process of Arrival of a New Client to BCC

All new clients entering Corrections Facilities now require isolation related to the current Iqaluit outbreak of COVID 19. The clients are to enter from door 115, into flex, the isolation unit. The client and RCMP member must be wearing a mask prior to entry. Hand hygiene with an available hand sanitizer is to be offered to the client on arrival.

During this process, if feasible, the Institutional Nurse should accompany the A&D officer and screening officer during this procedure. Remainder of Flex need to be locked down during these procedures. Both the Nurse, A&D officer and 2nd screening officer are to don full PPE attire prior to the arrival of the client; a surgical mask (not fabric), isolation gown, nitrile non latex gloves and eye protection.

Once the client arrives at the facility the COVID 19 screening by the Nurse should be completed prior to the interaction between the A&D officer and the client. The screening questions are to be asked followed by a temperature screening. Complete vitals can be obtained once the client is placed in the isolation cell. The Nurses are to follow the ***Corrections Health Care Procedure for receiving a new client.***

After this, the A&D officer is to complete their process in the flex unit. All clothing is to be placed into 2 separate clear bags (1 that can be washed and 1 that have items that can not) and the client is to be changed into facility clothing. ORAMS is to be completed in the isolation unit. A copy of the ORAMS questions should be placed in a protective sheet or laminated to reduce the paper products brought into the unit. The remand warrant received from the RCMP should be placed in a protective cover once received.

Itemizing personal effects can be completed in the isolation unit, using laminated personal effects sheet and an expo dry eraser marker. This can be brought back to the A&D office and disinfected easily.

Once the process has been complete and all personal belongings are placed in a clear bag, the A&D officer must doff their PPE prior to leaving the unit and perform hand hygiene. They are to ensure a new set of gloves and surgical mask is worn prior to leaving the unit. This will apply to the 2nd screening officer as well.

Any clothing that can be washed must be immediately placed into the washer with hot water and normal detergent available at the facility. Once the A&D officer return to the A&D office the information obtained should be entered into the computer.

After the laundry is complete, all personal effects are to be placed in the hanging affects bag, then sealed with a clear garbage bag. Any luggage or items that do not fit into these bags are to be sealed with a separate clear garbage bag.

If any additional itemizing of personal effects needs to be done in the A&D office, the officer must don full PPE attire to ensure no cross contamination occurs from the items to the officers clothing or person.

PPE requirement for staff during this process: Full PPE Attire

Movement of Clients to Designated Room for 14-day Isolation Period

14-day isolation is required for all new intakes arriving at all Nunavut facilities. The client must be agreeable to follow the infection control policies. The infection control policies will be explained to the client by the Nurse.

The client must always wear a mask when outside of a designated room and in the presence of staff. Failure to follow any infection control protocol will result in refusal of access time.

Interacting with a Client on 14-day Isolation

By placing a client on a 14-day isolation we are treating them as if they could potentially have COVID 19. Precautions should always be taken serious as a person can become symptomatic at any point. If symptoms arise the nursing staff will inform the IC and Duty. Staff should be aware of all infection protocols in place and follow them strictly.

Clients will be assessed daily by the nursing staff. Each day the mask will be changed after the assessment. Staff should not give a client a new mask unless the mask becomes wet or soiled. If this occurs the nurse must be notified. The client must always remain in their designated droplet and contact room with the door closed, unless coming out for phone calls or fresh air. Interactions with a client should be minimal and follow all direction set out by the infection control protocol.

Providing Meals and Snacks

Meals will be eaten in the designated room. Paper plates, cups and utensils are only permitted to be used. A clear garbage bag/bin should be present within the room. Once this is full, it should be placed in a biohazard bag located outside of the designated area.

To provide meals to clients placed inside these designated areas, staff need to ask the client to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the meal hatch can be opened.

PPE requirement for staff during this process: Mask and gloves

Medication Administration

Medication administration at BCC should only be done by nursing staff or the IC on shift. Clients in isolation will receive medication in their room. To minimize risk to staff, the person dispensing the medication should wear masks & gloves. Staff need to ask the client to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the hatch can be opened, and the medication can be placed on the hatch ledge. Staff must observe the inmate taking the medication, followed by a cup of water. Once satisfied that the client has successfully taken the medication staff can then close the hatch. Ensure staff perform good hand hygiene after removing gloves.

PPE requirement for staff during this process: Mask and gloves

Telephone Calls

Telephone calls should be accommodated even for those on a 14-day isolation. The client will have to come out of the designated area for this to occur. Staff should wear gloves for this process and maintain social distancing. Prior to opening the door have the client don their surgical mask. Once the door is open have the client perform hand hygiene with Purell located on the isolation trolley. The telephone used should be disinfected thoroughly with Cavi Wipes (by staff) immediately after use.

PPE requirement for staff during this process: Mask and gloves

Fresh Air for Clients

Fresh air should still occur during a 14-day isolation period. The client will have to exit out of the designated area for this to occur. Staff must ensure that the isolation trolley, located in the Assessment area, is moved prior to this movement. Prior to opening the door have the client don their surgical mask. Once the door is open have the client perform hand hygiene with purell located on the isolation trolley. No gloves are needed for clients after this step. They must maintain wearing their mask on exiting the cell until they are outside of the facility. Once outside the facility they can remove their mask. Once fresh air is complete the client must put on the mask again prior to entering the facility. Both the client and staff should perform thorough hand hygiene on entry to the facility

PPE requirement for staff during this process: Mask and gloves

Clients in isolation that the nurse has identified as symptomatic:

PPE requirement during this process: Gloves, mask, and an isolation gown

Housing Multiple Clients that Require Isolation

There may be occasions that multiple clients require isolation at the same time.

Placement will be decided by the Nurse depending on presence of symptoms and/or need for swabbing.

Co-hording is the process of placing multiple clients in the same room for isolation. This will be avoided as this could cause transmission from one client to the other especially when clients are on different days of the 14-day isolation. Co-hording should only be practiced in cases where no other reasonable options exist.

In cases where co-hording includes clients with different isolation start dates, all occupants in the room will reset to day 1.

Transporting Clients for Medical Attention Under a 14-day Isolation Who are Asymptomatic

A client being transported for emergency issues, DI/Lab or urgent clinic appointments should be transported with a surgical mask. Escorting staff must wear a mask and gloves. Proper hand hygiene and social distancing with members of the public is mandatory for staff and clients.

Once Iqaluit has a confirmed case, arrival back to the facility should be done differently. In this situation when the client has arrived back to the facility, they should go into an A&D cell just as if they were a new

client. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The client should shower and get dressed in clean facility attire. The escorting staff should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Transporting clients for Medical Attention who are Symptomatic or High Suspicion of COVID 19

Any transfers to the hospital with a client who have symptoms of COVID 19 should be done with caution. The client should wear a surgical mask and gloves for the entire transfer. Escorting staff should wear surgical masks, gowns, and gloves to protect their clothing from exposure. For transfers to QGH the accepting division should be made aware of the client's arrival. For non emergent cases the medical team should make these calls to appropriate hospital staff. In the event of an emergency transfer, the IC should call ahead to inform the ER staff. Once they arrive at QGH, QGH staff will direct the staff which room the client will go for assessment.

If the client is deemed medically cleared to return to the centre, then infection control should be strictly maintained. Escorting staff should wear gowns, gloves, and surgical masks for transfers. The client must wear a mask and gloves until placed back into their designated room. Once the client has arrived back to the facility, they should go into an A&D cell just as if they were a new client. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The client should shower and get dressed in clean facility attire. The staff who escorted the client should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Take Downs or Potential Violence with Clients Under 14-day Isolation or Suspected/Known COVID 19

Staff safety should be priority in these incidents. **Full PPE** attire should be worn whenever possible prior to intervening or when a suspected take down of these clients may occur. This includes gowns, gloves, surgical mask, and face shields. The donning procedure of this is laminated at each centre at the designated areas. If the client is spitting or is refusing to wear a mask, the IC will direct staff to use the containment shield and a spit hood should be placed on the client. Once the incident has resolved, staff should remove gear as identified in laminated papers. Staff should change into a different set of clothing when there was any contact with bodily fluids. The staff should keep a change of clothes with them at work and change into a different uniform in case of exposure. If there was exposure to blood or bodily fluids during the take down, please inform duty immediately.

Where time permits, take downs will be performed by the CCIT team.

CLEANING SCHEDULE FOR YOUNG OFFENDERS

Young offenders' facility must be cleaned thoroughly a minimum of **2 times per shift**. Common surfaces at least **4 times per shift**. Only approved CDC cleaning products should be used (Example; Lysol, Virex or Bleach).

AREA	ITEMS TO BE INCLUDED
CONTROL	<ul style="list-style-type: none"> • Remove all unnecessary items. • Wipes down all counters and surfaces • Sweep and mop • Empty garbage
SECURE HALLWAY	<ul style="list-style-type: none"> • Remove all unnecessary items. • Wipe down all surfaces and walls • Sweep and mop
ENTRY WAY (OUTSIDE PORCH, HALL AREA)	<ul style="list-style-type: none"> • Remove all unnecessary items, paper products and garbage • Wipe down all surfaces and walls • Sweep and mop • Vacuum the rug
STAFF & VISITOR WASHROOM	<ul style="list-style-type: none"> • Remove all unnecessary items • Wipe down all surfaces including sink, toilet, walls, toilet paper holder • Empty garbage
KITCHEN INCLUDING PANTRY AREA	<ul style="list-style-type: none"> • Clean and dry all dishes • Keep counter surface free of items • Wipe down all surfaces including counters, walls, sink, stove, grill and any other surfaces • Sweep and mop floors • Empty garbage
COMMON AREA (SECURE SIDE)	<ul style="list-style-type: none"> • Remove all unnecessary items • Wipe down all surfaces including counters, chairs, walls, ping pong table/paddles, toys, cards, remotes, phone, movies etc. • Sweep and mop floors • Empty garbage
WASHROOM 1 & 2 / WASHROOM IN ROOM #1	<ul style="list-style-type: none"> • Remove all unnecessary items • Wipe down all surfaces including sink, toilet, walls, toilet paper holder, walls • Empty garbage
INMATE ROOMS	<ul style="list-style-type: none"> • Ensure inmate wipes all surfaces including walls, counters, bed frame, desk, etc.

	<ul style="list-style-type: none"> • Curtains and bedding should be washed every 2-3 days • Empty garbage
GP OR GENERAL-PURPOSE ROOM	<ul style="list-style-type: none"> • Remove all unnecessary items • Wipe down all surfaces including counters, chairs, walls, ping pong table, toys, cards, remotes, movies etc. • Sweep and mop floors • Empty garbage
STAFF LOUNGE	<ul style="list-style-type: none"> • Remove all unnecessary items. Staff personal items should be kept in their locker or in a bag. • Wipe down all surfaces including wall • Sweep, vacuum and mop floors • Empty garbage
LAUNDRY ROOM	<ul style="list-style-type: none"> • Remove all unnecessary items. • Wipe down all surfaces including the counters, walls, sink, washer and dryer. • Ensure all inmate laundry is washed daily. • Bedding and curtains a minimum of every 2-3 days. • Empty garbage
MUD ROOM	<ul style="list-style-type: none"> • Store all extra coats away in closed area • Wipe down all surfaces including walls • Sweep and mop floors • Empty garbage
CLASSROOM	<ul style="list-style-type: none"> • Keep all paper items in drawers or cupboards when not in use • Wipe down all surfaces including counters, walls, chairs, electronic surfaces etc. • Sweep, vacuum and mop • Empty garbage

Important areas to continuously disinfect throughout the shift. All doorknobs/handles, light switches, remotes, keyboards and commonly touched surfaces. Ensure mop and broom handles are wiped after use.

****Staff/inmates must wear gloves when cleaning and thoroughly wash hands after. Disposable washcloths are preferred but if not available, after cleaning complete these MUST be washed in hot water and not to be reused throughout the day****

Important areas to continuously disinfect throughout the shift
All doorknobs/handles, light switches, remotes, keyboards and
commonly touched surfaces

****Staff/inmates must wear gloves when cleaning and thoroughly**
wash hands after**

****Disposable washcloths are preferred but if not available, after**
cleaning complete these MUST be washed in hot water and not to be
reused throughout the day**

CONTACT & DROPLET PRECAUTIONS



CLEAN YOUR HANDS WHEN ENTERING AND EXITING ROOM



DOOR IS TO BE CLOSED AT ALL TIMES.

STAFF ARE TO WEAR A MASK & GLOVES AT ALL TIMES WHEN INTERACTING WITH AN ISOLATED INMATE. GOWNS/EYE PROTECTION ARE NEEDED WHEN 6 FEET CAN NOT BE MAINTAINED OR INMATE IS UNCOOPERATIVE

ENSURE INMATE IS WEARING A MASK AND STANDING 6 FEET AWAY FROM DOOR PRIOR TO OPENING

ALL GARBAGE ITEMS THAT COME OUT OF THE ISOLATED CELL MUST BE THROWN AWAY INTO A BIO HAZARD BIN

WHEN THE INMATE IS EXITING THE CELL, A MASK MUST BE WORN AT ALL TIMES.

ENSURE SURFACES TOUCHED ARE THOROUGHLY CLEANED



A bio hazard bin and infection control trolley containing appropriate PPE equipment must be present outside the room for easy access for staff. Become familiar with the facility COVID 19 precautions.





Department of Justice COVID 19 Facility Precautions

URGENT CHANGES FOR ALL NUNAVUT FACILITIES

April 17, 2021

Effective immediately, as per the Director of Corrections, the following changes have been implemented for all Nunavut facilities.

- All personnel, visitors and contractors other than Corrections' employees are still required to complete the 4-step screening prior to entry. Staff must ensure good hand hygiene is performed prior to entry. **RCMP and the Nunavut Sheriffs office are exempt from this screening process however they must wear masks prior to entry.**
- The office of the CPHO is still recommending masks. Masks for staff remain mandatory throughout their shift. Cloth masks will be provided by Corrections. If staff have their own, they are permitted to wear them if they are a minimum of 2 layers of cotton and are workplace appropriate. Masks with valves are not permitted to be used. Any staff interacting with a symptomatic isolated client are required to use medical masks. Masks can only be removed when eating and drinking or when outside for breaks. Social distancing must be strictly followed when the mask is removed.
- Client escorts to QGH or Dental appointments still require the client and staff to wear and maintain masking throughout the visit.
- All cleaning regimes for facilities, corrections vehicles and COVID 19 precautions for each facility should remain and strictly followed.
- All clients returning from facilities outside of Nunavut are mandated to complete a 14-day isolation. All clients arriving from other communities within Nunavut should be received with caution, masks are to be placed on the client prior to entry into the facilities and remain in place if in the presence of correctional staff until a medical assessment is completed. 14-day isolation for clients within Nunavut will only be implemented if deemed necessary by the medical staff.
- In person visitation for all facilities in Nunavut can resume. All visitors are required to be screened prior to entry; screening questionnaire, observation of hand hygiene and infrared temperature checks. Masks are mandatory prior to entry into the facility and must be maintained throughout the visit. CPHO guidelines recommend 6 feet separation during visits, if no barrier is present (plexiglass barrier), clients are to wear masks as well. Thorough cleaning of visitation space is required in between visits.
- Contact visits should be approved by management on a case-by-case basis depending on individual situations. During this type of visit, masks must be strictly maintained as well for client and visitor.
- Outside activity including work TAs for all facilities in Nunavut will resume. **Correctional staff and clients will be required to wear masks, practice social distancing and perform good hand hygiene.**
- Public outings such as public skate for youth at YO or library visits for NWCC clients can resume in public buildings that follow CPHO guidelines. **Correctional staff and clients will be required to**

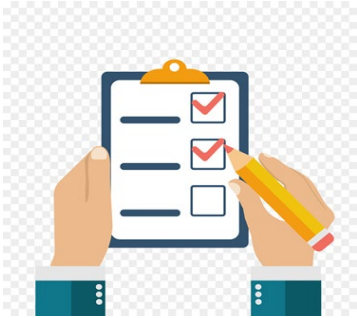
wear masks, practice social distancing and perform good hand hygiene. If clients refuse to wear a mask or follow social distancing guidelines during this time, outings should not occur.

- Carving sales and money drop-off at BCC will remain by appointment only.
 - Carving sales – call Makigiarvik caseworker at (867) 979-8136
 - Inmate money drop-off – call Jackie Erkidjuk at (867) 979-8105
- Training center capacity is normally 50. CPHO states that the number of staff present in this facility can now increase to 35 depending on the training program offered and ability to maintain 6 feet separation.
- Clients attending court are required to wear masks and are encouraged to maintain masking throughout court. Hand hygiene should be performed on return to facilities.
- Corrections staff who have not yet received their vaccine and wish to receive the vaccine are encouraged to contact Public Health at **867 975 4810** and identify that they are a front-line corrections staff.
- All new clients will be offered an opportunity to receive the Moderna vaccine.
- Correctional staff and clients are encouraged to receive the Moderna vaccine. The vaccine is extremely effective in preventing severe disease. We do not know yet how much impact it has on transmission, we know it has some, but this has not been quantified. **The vaccine does not exempt you from any CPHO recommendations.**
- Corrections employees are expected to follow all CPHO guidelines while in the community. We are working with a vulnerable population and staff are expected to strictly follow all CPHO guidelines to minimize risk of exposure to our facilities.

The Department of Justice is working closely with the office of the Chief Public Health Officer. It is imperative at this point that we continue to implement our COVID 19 precautions and not become complacent. Continue to practice social distancing and good hand hygiene.

COVID 19 SCREENING STEPS FOR ENTRY TO FACILITIES

1. COVID 19 screening questionnaire



2. Observe hand hygiene for a minimum of 20 seconds



3. Ensure mask is applied properly if required for entering the facility

THE RIGHT WAY TO WEAR



4. Infrared temperature check





Department of Justice COVID 19 Facility Precautions

URGENT CHANGES FOR ALL NUNAVUT FACILITIES

July 20, 2021

Effective immediately, as per the Acting Director of Corrections, the following changes have been implemented for all Nunavut facilities.

- Effective July 21st staff will no longer be required to screen prior to entry into any facility. Hand hygiene must be completed prior to entry. Staff must be aware of the symptoms of COVID 19. If staff are experiencing any of these symptoms, please do not attend work, call the COVID 19 hotline and then contact the corrections COVID Lead Nurse for further direction.
- All personnel, visitors, and contractors are still required to complete the 4-step screening prior to entry. All entry and screening should be recorded in an electronic logbook. Screening paperwork should be laminated for use. Facilities without a barrier for the screeners are to ensure the screener maintains a mask, eye protection and social distancing throughout the process apart from the infrared temperature step. During the temperature screening, gloves are to be worn. After this step gloves are to be removed and hand hygiene performed by the screener. **There will be no exceptions to this screening. No one can access any of the facilities without this process being completed.**
- In person visitation for all Iqaluit facilities can resume if a physical barrier is present in the facility. All visitors will be required to complete the screening and maintain masking throughout the visit. Contact visits will not be permitted at this time. Exceptions to this can be made on a case-by-case bases, in collaboration between the Director, Facility Warden and COVID Lead Nurse.
- The office of the CPHO still has mandated masks throughout the territory. Masks for staff remain mandatory throughout their shift. Iqaluit facilities who have the presence of clients under a mandatory isolation should have staff wear surgical masks only and no cloth masks are permitted. Mandatory masks for clients at BCC/Maki are no longer required in house.
- Staff pick ups/drop offs will no longer be required.
- Outside activity at all facilities will resume. Masks for staff and clients are mandatory. Physical distancing and hand hygiene is to be always practiced. Direct contact with the Public should be avoided during these activities.
- When escorting clients for medical appointments caution must be taken. Masks are mandatory throughout this process for clients and staff. Good hand hygiene and social distancing must be maintained.
- All cleaning regimes for facilities, corrections vehicles and COVID 19 precautions for each facility should remain and strictly followed.
- Isolation requirements for new intakes have changed for Iqaluit facilities. Clients arriving from within the territory will no longer require isolation if there are no concerns voiced after the

COVID screening is completed by a member of the medical team. PPE requirements for A&D for these clients arriving is a surgical mask and gloves. An arriving client must always maintain a mask until medically cleared by a Nurse. Clients arriving from outside of the territory apart from the NWT will require isolation. Clients arriving from outside the territory must be received with full PPE. Clients who are vaccinated will be swabbed and if negative, can be then released to the general population. Clients who are not vaccinated will require a 7-day isolation with swabbing on day 1 and day 7 prior to being cleared for the general population.

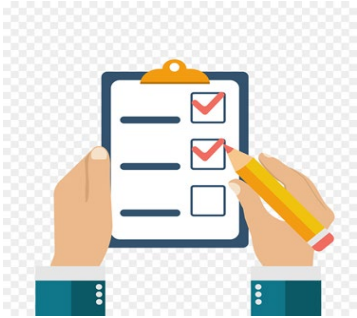
- Court movements locally and in the community have resumed. Sheriffs are to be screened on arrival. Corrections clients will be placed in cells at the Court House and in RCMP cells in the community away from other clients within the Public. Clients are to wear a mask during this process. On arrival back to the facility from the Iqaluit Court House, clients are to perform hand hygiene prior to placement back in their assigned unit. If the client was placed in a cell with a member of the public, they are to shower and be provided new facility clothing on arrival prior to be placed back into their assigned units. Clients arriving back from community court are to shower on arrival and be provided new facility clothing prior to returning to their assigned unit.
- Outside employment can resume outside of Corrections other than health-related positions where direct contact with possible COVID cases can occur such as paramedics or hospital staff. Employees wishing to resume their employment outside of Corrections must provide proof of full vaccination status to the Corrections COVID Lead Nurse.
- Mandatory surveillance swabbing for all Iqaluit facilities will no longer be required now that Iqaluit has been deemed COVID free.
- Medical Care Services in house at all Iqaluit facilities will remain at status. This is related to a continued process of isolating clients arriving outside of the territory as well as the Nursing shortage within Nunavut. Unnecessary face to face interactions with other health care staff should be avoided unless required for emergencies or necessary consultations. For any client assessments from the general population masking is required for clients and Nurse. Assessment of clients on isolation will require full PPE attire.
- Physician visits can resume on August 3rd, 2021. Community call forms and on call physician services should be utilized as per procedure and only clients requiring a non urgent physician assessment should be added to the physician list, otherwise Community call forms should be used.
- Mental Health Services can resume if spacing allows for a minimum of 6 feet distancing. Masks are mandatory for both Mental Health Clinicians and clients during same. Small office spaces that do not allow for adequate spacing should not be used. Clients on isolation will continue to receive mental health services by phone.
- Carving sales and money drop-off at BCC will remain by only.
 - Carving sales – call Makigiarvik caseworker at (867) 979-8136
 - Inmate money drop-off – call Jackie Erkidjuk at (867) 979-8105
- Training has resumed as approved by the office of the CPHO. The number of people will depend on the ability to social distance throughout activities. Physical contact training can resume if masks are worn, and staff are screened prior to start of the day. Strict protocol is in place and to be followed by staff.
- All new clients will be offered an opportunity to receive the Moderna vaccine.

- Correctional staff and clients are encouraged to receive the Moderna vaccine. The vaccine is extremely effective in preventing severe disease. We do not know yet how much impact it has on transmission, we know it has some, but this has not been quantified.
- Corrections employees are expected to follow all CPHO guidelines while in the community. We are working with a vulnerable population and staff are expected to strictly follow all CPHO guidelines to minimize risk of exposure to our facilities.

The Department of Justice is working closely with the office of the Chief Public Health Officer. It is imperative at this point that we continue to implement our COVID 19 precautions and not become complacent. Continue to practice social distancing and good hand hygiene.

COVID 19 SCREENING STEPS FOR ENTRY TO FACILITIES

1. COVID 19 screening questionnaire



2. Observe hand hygiene for a minimum of 20 seconds



3. Ensure mask is applied properly if required for entering the facility

THE RIGHT WAY TO WEAR



4. Infrared temperature check



COVID 19 SCREENING

Prior to entry into this building the following questions **MUST** be asked to all employees on shift, visitors, contractors, maintenance and delivery personnel.

If a person answers **“YES”** to any of the following questions entry into the building is **prohibited**.


If a person answers **“NO”** to all questions, please ensure supervisor on shift observes and times hand hygiene with hand sanitizer for a minimum of 20 seconds.

Visitors, contractors, maintenance and delivery personnel must put on a mask prior to entry.

COVID 19 SCREENING QUESTIONS	YES	NO
Do you have a cough (with or without shortness of breath)?		
Do you have a fever?		
Have you travelled outside of Nunavut in the last 14 days?		
Do you have a new onset cough accompanied with any of the following symptoms; <ul style="list-style-type: none"> • Sore throat • Runny nose, nasal congestion or sneezing • Joint pain or muscle aches • Tiredness or feeling unwell 		
Have you been advised by Public Health to self isolate for 14-days?		
Have you been tested for COVID 19?		
Have you been in close contact with anyone who has been tested for COVID 19 and results are still pending?		
Have you had close contact with anyone who has tested positive for COVID 19?		
Did staff observe and time hand hygiene with hand sanitizer for 20 seconds?		

How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

 Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.



World Health
Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

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May 2009

COVID 19 SCREENING

Prior to entry into this building the following questions **MUST** be asked to all employees on shift, visitors, contractors, maintenance and delivery personnel.

If a person answers **“YES”** to any of the following questions entry into the building is **prohibited**.


If a person answers **“NO”** to all questions, please ensure supervisor on shift observes and times hand hygiene with hand sanitizer for a minimum of 20 seconds.

Visitors, contractors, maintenance and delivery personnel must put on a mask prior to entry.

COVID 19 SCREENING QUESTIONS	YES	NO
Do you have a cough (with or without shortness of breath)?		
Do you have a fever?		
Have you travelled outside of Nunavut in the last 14 days?		
Do you have a new onset cough accompanied with any of the following symptoms; <ul style="list-style-type: none"> • Sore throat • Runny nose, nasal congestion or sneezing • Joint pain or muscle aches • Tiredness or feeling unwell 		
Have you been advised by Public Health to self isolate for 14-days?		
Have you been tested for COVID 19?		
Have you been in close contact with anyone who has been tested for COVID 19 and results are still pending?		
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May 2009

ABOUT CORONAVIRUS DISEASE (COVID-19)

WHAT IT IS

COVID-19 is an illness caused by a coronavirus.

Human coronaviruses are common and are typically associated with mild illnesses, similar to the common cold.

SYMPTOMS

Symptoms may be very mild or more serious. They may take up to 14 days to appear after exposure to the virus.



FEVER



COUGH



DIFFICULTY BREATHING

HOW IT IS SPREAD

Coronaviruses are most commonly SPREAD from an infected person through:

- ▶ respiratory droplets when you cough or sneeze
- ▶ close personal contact, such as touching or shaking hands
- ▶ touching something with the virus on it, then touching your eyes, nose or mouth before washing your hands

These viruses are not known to spread through ventilation systems or through water.

PREVENTION

The best way to prevent the spread of infections is to:



- ▶ wash your hands often with soap and water for at least 20 seconds



- ▶ avoid touching your eyes, nose or mouth, especially with unwashed hands



- ▶ avoid close contact with people who are sick



- ▶ when coughing or sneezing:
 - cover your mouth and nose with your arm or tissues to reduce the spread of germs



- immediately dispose of any tissues you have used into the garbage as soon as possible and wash your hands afterwards



- ▶ clean and disinfect frequently touched objects and surfaces, such as toys, electronic devices and doorknobs.



- ▶ stay home if you are sick to avoid spreading illness to others

IF YOU HAVE SYMPTOMS

If you have SYMPTOMS of COVID-19 — fever, cough, or difficulty breathing:

- ▶ stay home to avoid spreading it to others
 - if you live with others, stay in a separate room or keep a 2-metre distance
- ▶ call ahead before you visit a health care professional or call your local public health authority
 - tell them your symptoms and follow their instructions



 www.gov.nu.ca/health

 [@GOVofNunavut](https://twitter.com/GOVofNunavut)

 Facebook.com/govofNunavut



Department of Justice COVID 19 Facility Precautions

Uttaqivik Community Residential Centre (CRC)

Staff

Please ensure staff are self monitoring at home for signs and symptoms of COVID 19. Staff who are sick should not be attending the facility for work. Our facilities are vulnerable and at high risk if COVID 19 is introduced. Currently the biggest risk to these areas are staff. Entrance to these facilities is strictly monitored by staff. Currently there is a 4-step screening process for entrance into the facility. This screening process applies to all staff, visitors, contractors, maintenance, and delivery personnel.

1. COVID 19 screening questionnaire

If a person answers "YES" to any of these questions entry into the facility is prohibited.

- Do you have a cough (with or without shortness of breath)?
- Do you have a fever?
- Do you have a sore throat?
- Do you have a runny nose, nasal congestion, or sneezing?
- Do you have joint pain or muscle aches?
- Have you been feeling unwell or have unusual tiredness?
- Have you travelled outside of Nunavut in the last 14 days?(without completing a 14 day isolation)
- Have you had any contact with a person who has travelled outside of Nunavut in the last 14 days who has become sick (cough, fever, sneezing or sore throat)?
- Have you had close contact with a person who has been tested for COVID 19 (results pending) or has been diagnosed with COVID 19?
- Have you been tested for COVID 19 or have been asked by Public Health to self isolate for 14 days?

2. Observe hand hygiene for a minimum of 20 seconds

If the answer to all questions are "NO" then staff need to move onto the next step, observing hand hygiene for proper technique and timing for a minimum of 20 seconds.

- Please have the person wait until the screening questionnaire is complete.
- Staff should observe and time hand hygiene for a minimum of 20 seconds.
- This should not be done during the questions as staff will be unable to properly visualize and time appropriately.

3. Ensure mask is applied properly if required for entering the facility.

- All personnel entering the facility MUST wear a mask. The only exception is Department of Justice employees who have completed all steps.
- Staff need to ensure the mask is properly applied prior to the personnel entering the facility.

4. Infrared temperature check

- Temperature screening using an infrared thermometer has been added based on recommendations from Corrections Canada.
- This is the last step for staff to complete. If the temperature is 37.7 or less entrance is permitted. If the temperature is 37.8 or higher entry is prohibited.
- To ensure the safety of the staff completing screening this step **MUST** be done last.

All entrances of CRC, NWCC and YO are equipped with purell stations, signage, a box of masks and gloves.

It is crucial that staff continue to self monitor for any symptoms to decrease the chance of COVID 19 entering the facilities.

Self Monitoring

It is imperative that staff and inmates are self monitoring for symptoms daily. If any of the above-mentioned symptoms develop while on shift the staff should put a mask on, contact duty and once relieved, immediately leave work. They are encouraged to contact Public Health for instruction and possible testing.

Staff Education

Staff within the facilities are provided with training to ensure compliance of all Public Health and Corrections Canada recommendations. This will be continuing throughout the next coming months to avoid compliancy. The following is available and mandatory for all staff.

- PPE equipment “Donning and Doffing” video.
- PPE training with drills.
- Hand hygiene mandatory online course and quiz.
- COVID 19 precautions for each facility
- Regular supervisor meetings to review any changes or recommendations

Good Hand Hygiene and Social Distancing

These are 2 of the most important things the staff and inmates can do to stop the spread of COVID 19. COVID 19 is a virus that is transmitted by droplet and contact from infected people. An infected person can shed the virus through coughing, sneezing, or contaminating surfaces such as phones and keyboards. The virus can live on surfaces for hours or days.

Good hand hygiene: All staff and inmates need to be diligent in practicing good hand hygiene and avoid touching their face. This can be accomplished through soap and water or sanitizer that is a minimum of 60% alcohol content.

Social distancing: All visitation has been cancelled except for emergencies. Activities that are occurring outside such as walking or recycling is occurring without contact with members of the public and ensuring social distancing is maintained. Within the facilities encouragement of social distancing should still occur. 2 meters of length is recommended.

Facility Precautions

As noted above there is a 4-step screening process for entry into any Corrections Facility. In addition to this, signage has been placed on the front entrance to advise staff and the public to the restrictions of entry to the facility.

- COVID 19 screening questionnaire
- Hand hygiene observation
- Mandatory masks if applicable
- Infrared temperature reading

The entry point of each facility is also equipped with the following.

- Hand sanitizer stations
- A box of surgical masks
- Gloves
- A waste bin
- Blue air unit – air purifier
- Signage

Signage for COVID 19 resources have been posted throughout the facilities to help educate staff and the inmates on COVID 19.

The following screening tools have been developed for use within the facilities with resources from Nunavut Public Health and Corrections Canada.

- COVID 19 screening questionnaire
- Initial inmate screening tool
- 14-day isolation, daily monitoring tool for inmates
- Weekly employee screening tool

Cleaning of the Facilities

All facilities have been directed to do a thorough cleaning with any of the approved products from the Health Canada website. A thorough cleaning should be done twice per shift. Cleaning schedule/routines have been provided to the facilities. More commonly touched surfaces such as counters, keyboards, doorknobs, light switches, and radio systems should be wiped down with hospital grade wipes at least 4 times per shift.

All unnecessary items should be removed from areas of high traffic such as common areas, control rooms and entry ways. COVID 19 can live on numerous surfaces and products for hours to days. Below is a list of items that should be removed or stored in a closed area.

- Clothes such as outer wear should be kept in dressers, closets, or lockers.
- Fabric items that are not able to be washed should be removed from common areas.
- Food and drink should be limited to kitchen/dinning area.

- Paper products. COVID 19 can survive on these products especially if wet. Remove all paper products. Laminate or cover in protective sheets when able.

Cleaning of Facility Vehicles

Vehicles should be cleaned thoroughly. General cleaning should be done once per shift if vehicle is not in use. After each use it should be thoroughly cleaned as well using a hospital grade wipe/cleaner.

Laundry Services

Laundry should be washed in hot water whenever possible. Normal laundry detergent available in the facilities is sufficient. Any contaminated clothing or clothing from an isolation area should be washed separately.

PPE Equipment

PPE stands for personal protective equipment. This equipment is needed in each center for staff and inmate protection against the spread of COVID 19. Each facility is equipped with the following items.

- Surgical/procedural masks
- Face shields (Important for instances when staff can encounter bodily fluids example spitting)
- Surgical or yellow gowns
- Gloves, available in all sizes. Nitrile, latex free
- Hospital grade disinfecting wipes. Example, Cavi wipes, Germicide
- Health Canada approved cleaning supplies. Example, Virex, Germosolve, Lysol, Bleach
- Hand sanitizing stations and easy access to hand sanitizer throughout the facilities
- An isolation cart/trolley for easy access of equipment

Hand Made Masks

In addition to the above listed equipment, hand made (non-medical) masks have been approved for use within the centers once available. These will be made available for staff and inmates throughout each facility. Once available staff will be issued 2-4 masks that will become part of their uniform for added protection.

These masks are to be worn by asymptomatic inmates under a 14-day isolation only. If symptoms are present that are consistent with COVID 19 or COVID 19 is confirmed the only approved masks are surgical masks.

Hand made masks need to be washed in hot water and normal detergent daily. When possible, masks should be washed separately from normal laundry.

Court Movements

Court services has reopened as of July 7th, 2020. Corrections has made the decision that inmates who are attending court must wear masks. Surgical masks are the only ones currently available. These will be used until corrections has enough stock of hand made masks for use.

- Inmates will be fitted with a mask prior to leaving the facility.
- Sheriff's will be subject to the screening process prior to entry into the facility.

- Inmates are encouraged to keep mask on throughout the court proceedings until returned to the facility.
- The inmate must perform hand hygiene on return.

Medical Appointments

Inmates attending any medical appointment outside of the facility must wear a mask. Surgical masks are to be worn at present until adequate stock of hand made masks are available. Mask wearing for staff is optional depending on their comfort unless transporting an inmate who is symptomatic, then masks are mandatory.

Dental Appointments

Dental services during COVID 19 is a higher risk activity. Related to these concerns, inmates and escorting staff must wear a mask when attending any dental appointments. Surgical masks are to be worn at present until adequate stock of hand made masks become available.

Outside Activity

Outside activity is limited at present. Walks, traditional activities, and recycling is occurring at select facilities. Ensure limited contact with the public occurs. Encourage social distancing and good hand throughout activities.

Designated Droplet/Contact Precaution Areas

Each facility should have a minimum of 2 areas that are reserved and designated as droplet and contact precautions. In the likelihood of multiple inmates needing isolation other areas should also be identified for use.

- A sign identifying the room as Droplet/contact precaution should be present.
- Donning and doffing instructions for PPE use should be present.
- An isolation trolley and biohazard waste bin should be located outside the door when in use.
- Any item that enters this room needs to be disinfected prior to returning to the floor. Items that can not be disinfected will be thrown out (books, paper etc). Items entering this room should remain in this room until isolation is complete except garbage.
- Only disposable cutlery, plates and cups will be used.
- Fans or humidifiers are not permitted for use in this room.
- Any garbage that is removed from this room must be placed in the biohazard waste bin.
- If in use, the door must always be closed.
- After isolation, the room must be thoroughly disinfected including all surfaces, walls, floor etc.
- During isolation daily disinfecting by the inmate should be encouraged.

Mandatory 14-day Isolation of New Inmates

The Department of Justice has mandated that all new inmates entering facilities **MUST** undergo a 14-day isolation period. This is in place to protect the staff, inmates, and facility from the potential exposure to COVID 19. The only facilities exempt from this rule currently is CRC, KIC and RIHF if inmates are coming from another facility within Nunavut and have a completed a COVID 19 screening form. Inmates coming from an institution outside of Nunavut will be required to complete a 14-day isolation period.

During this 14-day isolation period they will be assessed daily by the medical team. There is an exception to this 14-day isolation period if Nunavut remains COVID 19 free. On days 8-10, if the inmate remains asymptomatic the medical team can consult the CPHO to remove the inmate from the isolation period.

CRC Designated Areas

Designated droplet/contact areas

Room 1 has been designated as a droplet and contact room. This room should be used for all new inmates entering the facility. The isolation trolley is kept outside the room to be shared between room 1 and room 2.

Room 2 has been designated as a droplet and contact room. Inmates will be moved into this room once the medical assessment is complete in room 1.

Process of Arrival of a New Inmate into CRC

As of April 7, 2020, an inmate being transferred from BCC/Makii or Rankin does not have to enter a 14-day isolation period, as per the Director of Corrections. Prior to an inmate being accepted into CRC, a COVID 19 screening tool must be completed and sent to the Warden and Nurse for review.

CRC staff picking up an inmate for transfer should take with them the COVID 19 screening questions, bottle of hand sanitizer and infrared thermometer to ask the inmate prior to transfer. If an inmate is symptomatic contact the Warden of CRC to inform prior to transfer. To protect the staff during this process, ensure 6 feet is maintained during questioning. A box of masks should be present in the corrections vehicle in case needed for staff.

Once the inmate arrives into CRC please ensure any personal belongings are immediately disinfected. Clothing should be washed immediately in hot water and available facility detergent. All items able to be disinfected should be thoroughly wiped using Cavi wipes. Staff should ensure gloves are worn for this process.

The following documentation refers to transfers of inmates once the 14-day isolation comes into play for CRC or an existing inmate becomes symptomatic.

Process of Arrival of a New Inmate into CRC that Requires a 14-day Isolation

The staff should follow the above listed procedure when picking up the inmate from the sending facility. The only difference would be that the staff should ensure the inmate puts on a mask prior to entering the vehicle once the screening is complete. Once the mask is on the inmate, they must perform good hand hygiene observed by staff. The inmate should be immediately moved to room 1 once they arrive to CRC. Once the inmate is placed in the designated room, their clothes are removed, and the inmate is placed in CRC clothing. Their street clothes will be placed in a bag by staff, ensuring gloves are worn. The clothes will be immediately washed in hot water with normal laundry detergent available at the facility. Staff must follow good hand hygiene after this has been done. The inmate is to wait in the room until the Nurse arrives to clear them. The inmate can remove the mask if the door is closed and no staff is present. Do not open the door to the room until the inmate has secured their mask.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Inmate Belongings on Arrival

When the new inmate arrives to the facility, until staff are ready to go through their personal belongings place the luggage in a large clear bag. Once ready to be searched have a garbage bag ready. All washable items place in a garbage bag. These items will be washed in hot water with normal laundry detergent that is available at the facility. All items that can be disinfected should be thoroughly wiped with Cavi wipes. Place these items in a clear bag and seal. Any paper products or items unable to be disinfected place in a clear bag and seal. Duffle bags or book bags should be washed as per laundry. Luggage that cannot be placed in the washer should be thoroughly wiped inside and out with Cavi wipes. Then place the luggage in a clear bag. The luggage should remain in this clear bag until the inmate is released or transferred.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Movement of Inmates to Designated Room for 14-day Isolation Period

The Nurse will assess the inmate in room 1. Once this assessment is done and there are no contraindications addressed by the nurse, the inmate will be cleared to be moved to room 2. The inmate must be agreeable to follow the infection control policies and shower immediately before any movement can occur. The infection control policies will be explained to the inmate by the Nurse.

Once they agree to this process, the inmate can be moved to room 2 by corrections staff. Ensure the isolation trolley and biohazard bin is outside of room 2 prior to moving the inmate. The inmate must always wear a mask when outside of a designated room and in the presence of staff. Ensure the following toiletries/clothing are present.

- Towel
- Face cloth
- Bedding
- Facility clothing
- Toothbrush and toothpaste
- Shampoo
- Body wash
- Deodorant

Interacting with an Inmate on 14-day Isolation

CRC has designated rooms that do not have a window and is located far away from CRC staff. A 2-way radio will be used for communication between the staff and the inmate under isolation. If the inmate needs to exit the designated room, they must communicate with staff prior to exiting.

By placing an inmate on a 14-day isolation we are treating them as if they could potentially have COVID 19. Precautions should always be taken serious as a person can become symptomatic at any point. If

symptoms arise the nursing staff will inform the IC and Duty. Staff should be aware of all infection protocols in place and follow them strictly.

Inmates will be assessed daily by the nursing staff. Each day the mask will be changed after the assessment. Staff should not give an inmate a new mask unless the mask becomes wet or soiled. If this occurs the nurse must be notified. The inmate must always remain in their designated droplet and contact room with the door closed, unless coming out for phone calls or fresh air. Interactions with an inmate should be minimal and follow all direction set out by the infection control protocol.

Providing Meals and Snacks

Meals will be eaten in the designated room. Paper plates, cups and utensils are only permitted to be used. A clear garbage bag/bin should be present within the room. Once this is full, it should be placed in a biohazard bag located outside of the designated area.

To provide meals to inmates placed inside these designated areas, staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the food placed on the floor just inside the door. If 6 feet can be maintained and the inmate wears their mask staff are only required to wear gloves during this process and ensure good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Medication Administration

Medication administration at young offenders should only be done by nursing staff or the IC on shift. Inmates should receive medication in their room. To minimize risk to staff, the IC dispensing the medication should wear gloves. Staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the medication (in a medication cup) placed on the floor just inside the door. The staff can then close the door and have the inmate show the staff they have swallowed the medication through the window. Ensure staff perform good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Fresh Air for Inmates

Fresh air should still occur during a 14-day isolation period. The inmate will have to exit out of the designated area for this to occur. Prior to opening the door have the inmate don their surgical mask. Once the door is open have the inmate perform hand hygiene with purell located on the isolation trolley. No gloves are needed for inmates after this step. They must maintain wearing their mask on exiting the cell until they are outside of the facility. Once outside the facility they can remove their mask. Escorting staff will be required to wear a mask. The reason behind this is if an inmate at any point is unable to maintain 6 feet or if an incident occurs the staff has access to a surgical mask. Once fresh air is complete the inmate must put on the mask again prior to entering the facility. All items used such as balls etc must be thoroughly disinfected with cavi wipes after use. Both the inmate and staff should perform thorough hand hygiene on entry to the facility

PPE requirement during this process: Masks only.

Washroom/Hygiene for Inmates on 14-day Isolation

There is a washroom close to both room 1 and room 2 at CRC. If an inmate is housed in these rooms the washroom should be designated as for use for those inmates only.

The inmate must wear a mask when exiting their designated room and hand hygiene prior to movement. Once the inmate is in the washroom and the door is closed, they can then remove their mask to shower. They must then put the mask back on prior to opening the door to return to their designated area. Staff escorting the inmate should wear gloves and maintain social distancing.

The washroom must be deep cleaned following use. This includes counters, walls, floor, shower, and toilet. No wait time is needed prior to cleaning.

For cleaning the washroom, the following PPE equipment should be used depending on the inmate.

Inmates in isolation with no symptoms:

PPE requirement during this process: Gloves only

Inmates in isolation that the nurse has identified as symptomatic:

PPE requirement during this process: Gloves, mask, and an isolation gown

Housing Multiple Inmates that Require Isolation at Uttaqivik CRC

There may be occasions that multiple inmates require isolation at the same time at Uttaqivik. The options to house these inmates if necessary are listed below.

- Room 1
- Room 2
- Admin room

Placement will be decided by the Nurse depending on presence of symptoms and/or need for swabbing.

Co-hording is the process of placing multiple inmates in the same room for isolation. This will be avoided as this could cause transmission from one inmate to the other especially when inmates are on different days of the 14-day isolation. Co-hording should only be practiced if the inmates arrive to CRC from the same community and on the same day.

Transporting Inmates for Medical Attention Under a 14-day Isolation Who are Asymptomatic

For precautions an inmate being transported for emergency issues, DI/Lab or urgent clinic appointments should be transported with a surgical mask. At this point it is optional for staff to wear a mask; their comfort level will dictate this. There is no need at present with no confirmed case within the territory to have them change clothes on arrival back to the facility. Proper hand hygiene and social distancing with members of the public is mandatory for staff and inmates.

Once the territory has a confirmed case, arrival back to the facility should be done differently. In this situation when the inmate has arrived back to the facility, they should go into a designated area just as if they were a new inmate. They should have the clothes worn to the medical appointment removed,

placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The guards who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Transporting Inmates for Medical Attention who are Symptomatic or High Suspicion of COVID 19

Any transfers to the hospital with an inmate who have symptoms of COVID 19 should be done with caution. The inmate should wear a surgical mask for the entire transfer. Staff should wear surgical masks, gowns, and gloves to protect their clothing from exposure. For transfers to QGH the accepting division should be made aware of the inmate's arrival. For non emergent cases the medical team should make these calls to appropriate hospital staff. In the event of an emergency transfer, the IC should call ahead to inform the ER staff. Once they arrive at QGH, QGH staff will direct the staff which room the inmate will go for assessment.

If the inmate is deemed medically cleared to return to the centre, then infection control should be strictly maintained. Staff should wear gowns, gloves, and surgical masks for transfers. The inmate must wear a mask until placed back into their designated room. Once the inmate has arrived back to the facility, they should go into a designated room just as if they were a new inmate. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The staff who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Take Downs or Potential Violence with Inmates Under 14-day Isolation or Suspected/Known COVID 19

If an inmate refuses to wear a mask at Uttaqivik CRC support for their residency will be withdrawn.

Under no circumstance are staff to engage with a violent or aggressive inmate under 14-Day Isolation. If an inmate becomes aggressive or violent staff are to give verbal commands to cease and desist and to remain in the isolation room. If these commands are not followed the RCMP are to be called, if the inmate leaves the isolation room staff are to take all clients into the staff office and lock the door. Inform the RCMP that we have an aggressive inmate currently under 14-day isolation that needs to be removed from the facility. The duty officer is to be contacted who will then contact BCC to inform them that we have an aggressive inmate under isolation returning to the facility.

CLIENT DAILY MONITORING FORM

MONTH: _____ YEAR: _____

To be completed on client's under a 14 day isolation





Name: _____		DOB: _____		Start date: _____		Planned end date: _____								
HC #: _____		Facility: _____		Revised end date (if applicable): _____										
Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Date														
Symptoms	Mark all applicable below with a ✓ (unless otherwise indicated)													
No symptoms														
Cough														
Fever or chills														
Muscle aches														
Joint pain														
Fatigue														
Temperature Specify °C														
Sore throat														
Runny nose														
Shortness of breath/difficulty breathing														
Other (enter in notes)														
Initials of staff														
Change to care Yes or no														



Notes:



How to put on Personal Protective Equipment

1. Perform hand hygiene	
	<ul style="list-style-type: none"> • HCW will perform hand hygiene following IHS Clinical Guideline Hand Hygiene. • Alcohol-based hand rub (ABHR) is preferred • Soap and water is used when hands are visibly soiled and for CDI • Both methods are effective
2. Put on gown	
	<ul style="list-style-type: none"> • Don the gown by placing each arm into the sleeves, opening at the back • Secure the neck of the gown • Secure the waist with the ties
3. Mask with Visor protection	
	<p>For Droplet or Droplet and Contact Precautions:</p> <ul style="list-style-type: none"> • Secure the straps • Pull the bottom of the mask down under the chin • Place middle fingers on the bridge of the nose and “walk” the index finger down the sides of the nose pressing and moulding the wire to the face
4. Put on gloves	
	<ul style="list-style-type: none"> • Choose appropriate size of gloves • Put on gloves, taking care not to tear or puncture • Ensure that the cuff of the glove covers the cuff of the gown

*Adapted from Infection Prevention and Control Canada Best Practices

Don't Spread Germs WASH YOUR HANDS




How to take off Personal Protective Equipment.

1. Remove gloves	
	<ul style="list-style-type: none"> • The outside of gloves are contaminated • Take off gloves at doorway just inside the client room/space • Glove-to-glove, pull forward and discard • Then place fingers under other glove cuff, pull forward and discard • Discard one at a time – do not ball gloves together to minimize risk of self-contamination
2. Perform hand hygiene	
	<ul style="list-style-type: none"> • Perform hand hygiene following IHS Clinical Guideline Hand Hygiene • Soap and water is used when hands are visibly soiled and for CDI
3. Remove gown	
	<ul style="list-style-type: none"> • Untie at neck and then the waist • Slide 2 fingers under cuff of gown; pull hand into gown. • Using covered hand, grab opposite sleeve and pull over hand • Fold gown inward, rolling it outside-in, away from you • Then place in disposal receptacle

*Adapted from Infection Prevention and Control Canada Best Practices

Don't Spread Germs WASH YOUR HANDS

February 27th, 2020

4. Perform hand hygiene	
	<ul style="list-style-type: none"> • Perform hand hygiene following IHS Clinical Guideline Hand Hygiene. • Soap and water is used when hands are visibly soiled and for CDI
5. Remove mask/visor	
	<p>Avoid touching the contaminated area on the front of all types of eye and face protection.</p> <ul style="list-style-type: none"> • Grasp the elastic behind both ears, unhook from ear and pull away from side of head and simultaneously extending arms forward to remove the mask and visor from the face • Dispose of the mask in the waste receptacle
6. Perform hand hygiene	
	<ul style="list-style-type: none"> • Perform hand hygiene following IHS Clinical Guideline Hand Hygiene. • Soap and water is used when hands are visibly soiled and for CDI

*Adapted from Infection Prevention and Control Canada Best Practices

Note: At any time during the donning or the Doffing of PPE, you feel you have contaminated your hands, perform Hand Hygiene and then continue with donning or doffing of PPE

Don't Spread Germs WASH YOUR HANDS



“Personal Protective Equipment” Tips:

- Do not dangle a mask around the neck when not in use.
- Do not reuse mask
- Change the mask if it becomes wet or soiled
- Do not double glove.
- Do not use the same pair of gloves for the care of more than one patient.
- Do not clean gloves for reuse
- Remove gloves and perform hand hygiene immediately after patient care activities.

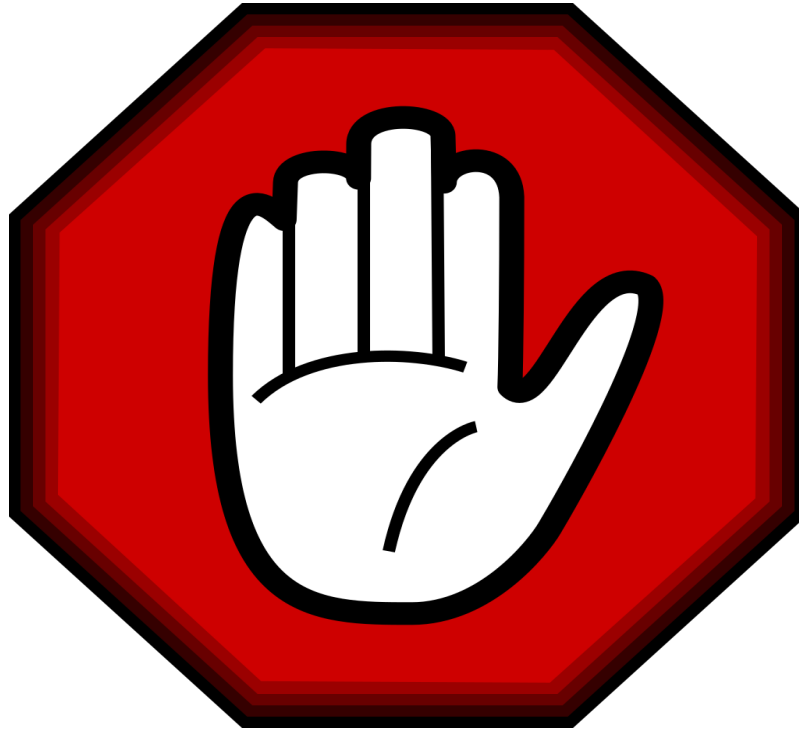
The use of gloves DOES NOT
replace the need to perform
hand hygiene

Don't Spread Germs WASH YOUR HANDS

Don't Spread Germs WASH YOUR HANDS

February 27th, 2020

COVID 19 PRECAUTIONS



Do you have a cough (with or without shortness of breath)?

Do you have a fever?

Have you travelled outside of Nunavut in the last 14 days?

Have you had close contact with anyone who is positive for COVID 19 or has been tested for COVID 19 and results pending?

**IF YOU ANSWERED YES TO ANY OF THESE QUESTIONS
DO NOT ENTER THIS BUILDING. PLEASE CONTACT
PUBLIC HEALTH FOR DIRECTION.**

COVID 19 PRECAUTIONS



DO YOU HAVE A NEW ONSET COUGH WITH ANY
OF THE FOLLOWING SYMPTOMS;

*SORE THROAT

*RUNNY NOSE/SNEEZING

*JOINT PAIN OR MUSCLE ACHES

* TIREDNESS, FEELING UNWELL

IF YOU ANSWERED YES TO ANY OF
THESE QUESTIONS YOU ARE NOT
PERMITTED TO ENTER THIS BUILDING

COVID 19 PRECAUTIONS



**NOTICE TO ALL VISITORS, CONTRACTORS,
MAINTENANCE & DELIVERY PERSONNEL.**

ACCESS TO THIS BUILDING IS RESTRICTED.

TO ENTER PLEASE DO THE FOLLOWING;

WASH YOUR HANDS

PUT ON A MASK PROVIDED IN THE PORCH

ANSWER SCREENING QUESTIONS FROM STAFF

**FAILURE TO DO ANY OF THE ABOVE WILL RESULT
IN DENIAL OF ENTRY**



Department of Justice COVID 19 Screening Tool

Prior to entry into any Department of Justice Facility the following questions **MUST** be asked to all staff, visitors, contractors, maintenance, and delivery personnel.

If a person answers **"YES"** to any of the following questions entry into a facility is **prohibited**.

If a person answers **"NO"** to all questions, please ensure supervisors on shift observe and time hand hygiene for a minimum of 20 seconds.

Staff, visitors, contractors, maintenance, and delivery personnel **MUST** wear a mask prior to entry.

Once the screening questions have been asked, hand hygiene has been observed and a mask has been properly applied, temperature **MUST** be completed.

Temperature **37.8** or higher: Entrance is **prohibited**

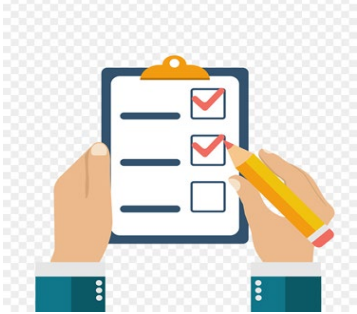
Temperature **37.7** or less: Entrance is **permitted**

COVID 19 SCREENING QUESTIONS	YES	NO
Do you have a new onset cough (with or without shortness of breath)?		
Do you have a fever?		
Do you have a sore throat?		
Do you have a runny nose, nasal congestion, or sneezing that is not part of chronic allergies or sinus problems?		
Do you have a sudden loss of taste or smell?		
Do you have any nausea, vomiting or diarrhea?		
Do you have unusual joint pain or muscle aches?		
Have you been feeling unwell or have unusual tiredness?		
Have you travelled outside of Nunavut in the last 14 days without completing a GN designated hub?		
Have you had contact with anyone who has travelled outside of Nunavut in the last 14 days who has become sick?		
Have you had close contact with a person who has been tested for COVID 19 and results are still pending?		
Have you had close contact with anyone who has tested positive for COVID 19 and remains in isolation?		
Have you been tested for COVID 19 and results still pending or have been asked by Public Health to self isolate for 14 days?		

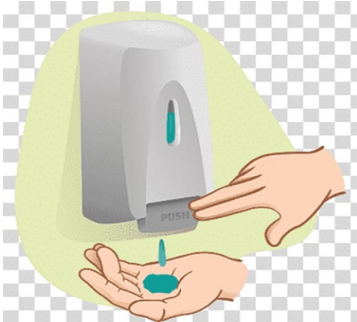
CHECK LIST FOR STAFF COMPLETING THE SCREENING TOOL	✓
Observe and time hand hygiene for a minimum of 20 seconds	
Ensure mask is fitted properly prior to entry	
Once the screening questions have been asked and a mask is fitted, if applicable, ensure temperature is checked. If the temperature is 37.7 or less then entry to the facility is permitted. If the temperature is 37.8 or higher entry is prohibited	

COVID 19 SCREENING STEPS FOR ENTRY TO FACILITIES

1. COVID 19 screening questionnaire



2. Observe hand hygiene for a minimum of 20 seconds



3. Ensure mask is applied properly if required for entering the facility

THE RIGHT WAY TO WEAR




4. Infrared temperature check



How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

 Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.



World Health
Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

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May 2009

Medical Non-contact Infrared Thermometer

Non-contact infrared thermometers measure temperature using the human forehead. The body temperature of the tested person is displayed by measuring the thermal radiation on the forehead. Temperature checks is an added element in a comprehensive screening process implemented by the Department of Justice to protect the facilities, staff, and clients.

Supervisors are required to complete a COVID 19 screening questionnaire with anyone entering the facility followed by observed hand hygiene. Once these have been complete temperature checks will be done as an added element.



Instructions for use

1. Aim the thermometer at the middle of the forehead (above the eyebrows) and keep it vertical. It should be 5-10cm away from the forehead. Before measurement ensure there is no hair, sweat or hat covering the area. If these are unavoidable the posterior ear lobe can be used.
2. Press the measuring switch and hold until a beep is heard. The temperature reading will appear on the LCD screen.

Temperature readings of 37.7 or less are permitted to enter the facility. 37.8 or higher are prohibited.

If not used the thermometer will shut off automatically.

Care and Maintenance

1. Avoid striking or dropping this product.
2. Do not place in water or any other liquid.
3. Avoid storing near radios or mobile phones
4. Do not clean with corrosive detergents.
5. When cleaning is required, wipe the instrument with an alcohol swab and let dry.

Trouble shooting tips

1. If LO appears despite following instructions, wait 10 seconds and retake. Delay start up can occur if inactive for a long period of time



Department of Justice COVID 19 Screening Tool

Prior to entry into any Department of Justice Facility the following questions **MUST** be asked to all staff, visitors, contractors, maintenance, and delivery personnel.

If a person answers **"YES"** to any of the following questions entry into a facility is **prohibited**.

If a person answers **"NO"** to all questions, please ensure the screener on shift observes and times hand hygiene for a minimum of 20 seconds.

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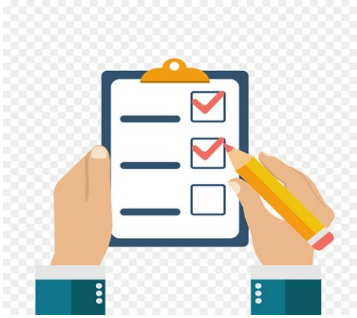
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COVID 19 SCREENING QUESTIONS	YES	NO
Do you have a new onset cough (with or without shortness of breath)?		
Do you have a fever?		
Do you have a sore throat?		
Do you have a runny nose, nasal congestion, or sneezing that is not part of chronic allergies or sinus problems?		
Do you have a sudden loss of taste or smell?		
Do you have any nausea, vomiting or diarrhea?		
Do you have unusual joint pain or muscle aches?		
Have you been feeling unwell or have unusual tiredness?		
Have you travelled outside of Nunavut in the last 14 days without completing a GN designated hub and you are not fully vaccinated? (Fully vaccinated – having both doses of a vaccine and it has been 2 weeks since your 2nd shot)		
Have you had contact with anyone who has travelled outside of Nunavut in the last 14 days who has become sick?		
Have you had close contact with a person who has been tested for COVID 19 and results are still pending?		
Have you had close contact with anyone who has tested positive for COVID 19 and remains in isolation?		
Have you been tested for COVID 19 and results still pending or have been asked by Public Health to self isolate for 14 days?		

CHECK LIST FOR STAFF COMPLETING THE SCREENING TOOL	✓
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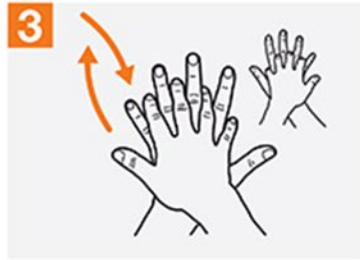
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Palm to palm with fingers interlaced;



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Rotational rubbing of left thumb clasped in right palm and vice versa;



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5. When cleaning is required, wipe the instrument with an alcohol swab and let dry.

Trouble shooting tips

1. If LO appears despite following instructions, wait 10 seconds and retake. Delay start up can occur if inactive for a long period of time

Canadian prisons in the time of COVID-19: Recommendations for the pandemic and beyond

ROSEMARY RICCIARDELLI AND SANDRA BUCERIUS
CONTRIBUTED TO THE GLOBE AND MAIL
PUBLISHED JUNE 23, 2020

Dr. Rosemary Ricciardelli is a Professor of Sociology and Criminology at Memorial University of Newfoundland. Elected to the Royal Society of Canada, her research centres on evolving understandings of gender, vulnerabilities, risk and experiences within different facets of the criminal justice system. Her current work includes a study of the occupational experiences of correctional officers given the potential for compromised psychological, physical and social health and well-being inherent to the occupation.

Dr. Sandra M. Bucerius is an Associate Professor of Sociology and Criminology in the Department of Sociology and the Director of the University of Alberta Prison Project (@theUAPP). She deploys extensive qualitative and ethnographic research to reveal the intricacies of settings that are difficult both to access and understand: prisons, police organizations and marginalized street and newcomer communities.

[Open this photo in gallery](#)



The Mission Correctional Institution in Mission, B.C., is seen on April 14, 2020.

JONATHAN HAYWARD/THE CANADIAN PRESS

The COVID-19 pandemic poses distinctive challenges for individuals working and housed in Canada's prisons. Similar to retirement complexes, nursing homes and long-term care facilities, prisons are enclosed spaces with limited room for physical distancing to contain the spread of COVID-19. As of June 17, 360 prisoners and 98 officers have tested positive for COVID-19 in federal institutions across the country.

In Canada, federal prisons house individuals sentenced to two or more years, while provincial or territorial prisons house individuals sentenced to a maximum of two years less a day or awaiting their trial (i.e., remand prisoners). Remand prisoners, a majority in provincial/territorial custodial populations, are legally presumed innocent and held in custody, rather than in the community.

Individuals who live or work in prisons are vulnerable to the effects of concentrated living, including exposure to potential contagions. Concerns of contagion pose acute challenges and agonizing decisions for correctional administrators tasked with managing the crisis. Naturally, COVID-19 does not discriminate between prisoners and essential service providers (i.e., staff). As front line workers, officers and staff face an unprecedented ongoing challenge – mitigating the spread of COVID-19 while keeping healthy enough to maintain the care, custody and control of prisoners, and then returning home without infecting their loved-ones (and not bring COVID-19 into prison upon returning).

While the spread of COVID-19 has mostly been kept at bay in Canadian prisons (with some concerning outbreaks as exceptions), the fear of contagion has not dissipated for staff, prisoners and their loved-ones, and the day-to-day realities in prison have become increasingly difficult. For instance, lockdowns – implemented to combat the spread of COVID-19 – may leave prisoners detained in their cells, sometimes double-bunked, unable to practice physical distancing. Prolonged lockdowns and reduced outdoor time also have implications for prisoners' mental health. Prisoners are only further isolated as all jurisdictions have had little choice but to suspend in-person visitations and programming in an attempt to mitigate opportunities for the virus to enter prisons.

In this context, we urge governments and correctional administrators to continue to undertake structured and informed decarceration efforts (i.e. to reduce the number of people in prisons). While not a simple undertaking, such actions would be in line with recommendations made by the UN and other penological working groups.

What decarceration looks like must be unique to individual circumstances, and both prisoner and community safety. Now more than ever, correctional administrators are confronted with the task of delicately balancing the rights, health and well-being of those in correctional facilities with the goals of public safety.

Decarceration, however, is particularly critical and applicable in the remand system, which holds many individuals believed to have committed a minor non-violent offense (e.g., breached their conditions of release). Do they all have to be there? Regarding

sentenced prisoners, we could decarcerate by reconsidering sentence lengths, release possibilities for prisoners nearing their date of parole eligibility (i.e., after serving one third of a federal prison sentence) or, alternatively, the date of eligibility for statutory release (i.e., after serving two thirds of a federal sentence).

Consideration should also be given to the prisoner's behaviour and institutional record (e.g., is the person the same person who committed a crime 10, 15 or even 20 years ago? Could they be safely reintegrated?), the seriousness of the offense and potentiality for recidivism, and security classifications within the system. Equally importantly, before releasing prisoners, a realistic reintegration plan giving consideration to whether the prisoner has a safe place to go, both in terms of the potential spread of COVID-19 and for their own personal safety and successful community re-entry needs to be crafted. It should not be assumed that all prisoners want to be released during COVID-19. Some may feel safer from contagion inside prison, particularly if they expect to experience health and social vulnerability on the outside.

Apart from decarceration efforts, prison administrations need to inform staff, prisoners and their loved ones of protocols for managing COVID-19. Sharing information is particularly valuable given the current pandemic, coupled with drastic (though necessary) policies and practices inside prisons and around visitations, has resulted in loved-ones experiencing increased anxiety about the well-being of their incarcerated kin. Given the potential of a second wave, we recommend prisoners have more access to time outside of their cells, outdoors, and to video visits, and free phone calls, a practice that should be considered as a general way forward (research has shown regular contact with loved-ones is vital for successful reintegration).

Indeed, many of our suggestions for managing COVID-19 and decarceration are also a way to rethink our approach to incarceration more generally. Are sentences appropriate? Should all persons in prison be there? Can we do more to promote family unification for prisoners including offering free phone calls and the implementation of video calls?

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HOW TO PROPERLY APPLY A MASK



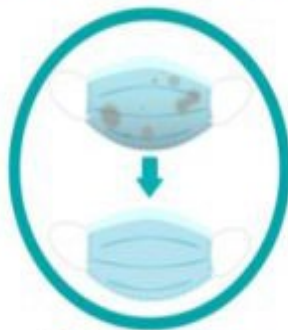
It should **COVER YOUR MOUTH, NOSE AND CHIN**, with the coloured side facing outwards.



PINCH THE METAL EDGE OF THE MASK so that it presses gently on your nose bridge.



Remove a used mask **HOLDING ONLY THE EAR LOOPS**.



To be effective, **CHANGE YOUR MASKS REGULARLY OR IF SOILED OR WET**.



WASH YOUR HANDS WITH SOAP AND WATER after disposing the soiled mask properly into a bin.

INFECTION CONTROL TROLLEY

PPE EQUIPMENT TO BE USED WITH ANY ISOLATED
INMATE



Droplet & Contact Signage	1 package
Nitrile gloves, small	1 box
Nitrile gloves, medium	1 box
Nitrile gloves, large	1 box
Nitrile gloves, X large	1 box
Hand sanitizer	1 bottle
Isolation gowns	1 package
Eye shield	5
Shoe covers	6
Biohazard bags	2
Surgical masks	2 boxes
Cavi wipes	1 canister
Disinfectant	1 bottle

**Ensure the infection trolley and biohazard bin is present
outside of the isolated cell.**

Correct Sequence of Putting On and Removing Personal Protective Equipment





Putting On Personal Protective Equipment

1	 <p>Perform hand hygiene</p>
2	 <p>PUT ON gown</p>
3	 <p>PUT ON mask or N95 respirator</p>
4	 <p>PUT ON eye protection</p>
5	 <p>PUT ON gloves</p>

Removing Personal Protective Equipment

1	 <p>REMOVE gloves</p>
2	 <p>REMOVE gown</p>
3	 <p>Perform hand hygiene</p>
4	 <p>REMOVE eye protection</p>
5	 <p>REMOVE mask or N95 respirator</p>
6	 <p>Perform hand hygiene</p>

How to put on Personal Protective Equipment

1. Perform hand hygiene	
	<ul style="list-style-type: none"> • HCW will perform hand hygiene following IHS Clinical Guideline Hand Hygiene. • Alcohol-based hand rub (ABHR) is preferred • Soap and water is used when hands are visibly soiled and for CDI • Both methods are effective
2. Put on gown	
	<ul style="list-style-type: none"> • Don the gown by placing each arm into the sleeves, opening at the back • Secure the neck of the gown • Secure the waist with the ties
3. Mask with Visor protection	
	<p>For Droplet or Droplet and Contact Precautions:</p> <ul style="list-style-type: none"> • Secure the straps • Pull the bottom of the mask down under the chin • Place middle fingers on the bridge of the nose and "walk" the index finger down the sides of the nose pressing and moulding the wire to the face
4. Put on gloves	
	<ul style="list-style-type: none"> • Choose appropriate size of gloves • Put on gloves, taking care not to tear or puncture • Ensure that the cuff of the glove covers the cuff of the gown

*Adapted from Infection Prevention and Control Canada Best Practices

Don't Spread Germs WASH YOUR HANDS

How to take off Personal Protective Equipment.

1. Remove gloves



- The outside of gloves are contaminated
- Take off gloves at doorway just inside the client room/space
- Glove-to-glove, pull forward and discard
- Then place fingers under other glove cuff, pull forward and discard
- Discard one at a time – do not ball gloves together to minimize risk of self-contamination

2. Perform hand hygiene



- Perform hand hygiene following [IHS Clinical Guideline Hand Hygiene](#)
- Soap and water is used when hands are visibly soiled and for CDI

3. Remove gown



- Untie at neck and then the waist
- Slide 2 fingers under cuff of gown; pull hand into gown.
- Using covered hand, grab opposite sleeve and pull over hand
- Fold gown inward, rolling it outside-in, away from you
- Then place in disposal receptacle

*Adapted from Infection Prevention and Control Canada Best Practices

Don't Spread Germs WASH YOUR HANDS

4. Perform hand hygiene



- Perform hand hygiene following [IHS Clinical Guideline Hand Hygiene](#).
- Soap and water is used when hands are visibly soiled and for CDI

5. Remove mask/visor



Avoid touching the contaminated area on the front of all types of eye and face protection.

- Grasp the elastic behind both ears, unhook from ear and pull away from side of head and simultaneously extending arms forward to remove the mask and visor from the face
- Dispose of the mask in the waste receptacle

6. Perform hand hygiene



- Perform hand hygiene following [IHS Clinical Guideline Hand Hygiene](#).
- Soap and water is used when hands are visibly soiled and for CDI

*Adapted from Infection Prevention and Control Canada Best Practices

Note: At any time during the donning or the Doffing of PPE, you feel you have contaminated your hands, perform Hand Hygiene and then continue with donning of doffing of PPE

Don't Spread Germs WASH YOUR HANDS



“Personal Protective Equipment” Tips:

- Do not dangle a mask around the neck when not in use.
- Do not reuse mask
- Change the mask if it becomes wet or soiled
- Do not double glove.
- Do not use the same pair of gloves for the care of more than one patient.
- Do not clean gloves for reuse
- Remove gloves and perform hand hygiene immediately after patient care activities.

The use of gloves DOES NOT
replace the need to perform
hand hygiene

Don't Spread Germs WASH YOUR HANDS

Don't Spread Germs WASH YOUR HANDS



INMATE INFORMATION SHEET

COVID 19 PRECAUTIONS

With COVID 19 now confirmed in the territory, the Department of Justice has implemented many precautions to keep the facilities and the inmates safe from the risk of COVID 19. Since March, many precautions have been put in place to keep the facilities safe. Here are some new changes that have come into affect or will be for added protection.

- All staff and members of the community are screened at the door for signs and symptoms of COVID 19, they are observed performing proper hand hygiene and they have their temperature checked. All members of the community must wear a mask to enter.
- All new inmates will be isolated in a separate area for 14 days to ensure if any symptoms develop, they will have no contact with other inmates in the facility.
- Starting Monday staff will also be required to wear masks. The reason for this is to protect you and the facility from any potential exposure to COVID 19. As of right now inmates will not be provided masks just staff. This is because inmates are in a bubble of protection currently and do not leave the facility. Staff come back and forth to get to work and masks are an added measure to keep any germs including COVID 19 out of the building. If COVID 19 enters the building, then inmates will be provided masks for your protection.

The above changes are in addition to the precautions already in place such as increased cleaning of the facilities to help keep COVID 19 out and everyone safe.

What you can do to protect your self

- Try not to touch your face.
- Wash your hands with soap and water frequently for a minimum of 20 seconds.
- Social distance. Try as much as possible to keep 6 feet away from other inmates and staff.
- If you become sick inform the staff and nurses.
- Do not share any food or drinks.
- Throw away any used tissues



DEPARTMENT OF JUSTICE

COVID 19 SCREENING FORM

Client Information	
Facility location:	
Client Name:	
Inmate #:	
Date of Birth:	
Health Card #:	
Date of Intake:	
Date of Screening:	Date: _____ Time: _____

Client Vital Signs					
BP:	HR:	RR:	SATS:	TEMP:	WGT:

Screening Questions	Yes	No	Date of Onset
Presence of cough (with or without shortness of breath) This includes new onset or exacerbation of chronic cough			
Fever, sore throat, runny nose, nasal congestion, or sneezing that is not part of chronic allergies or sinus problems?			
Do you have any unusual joint pain, muscle aches, feeling unwell or have unusual tiredness?			
Have you travelled outside of Nunavut in the last 14 days without completing a GN designated hub?			
Have you travelled to Arviat in the last 14 days? Have you been in contact with anyone who has travelled to that community who has become sick?			
Have you been tested for COVID 19 and the test is still pending?			
Have you had close contact with anyone waiting for results or have been asked by Public Health to self-isolate?			
If the client answers yes to any of the screening questions, has arrived from Arviat or a Southern Facility 14-day isolation is required. Initiate Droplet & Contact precautions. Ensure mask is maintained and client is moved to a designated area. Biohazard bin, infection control trolley and signage are to be placed at the designated area. Please refer to Nunavut's Public Health COVID 19 guidelines for testing guidance or call 975-5772.			

Is isolation required for this client?	Yes: <input style="width: 40px;" type="checkbox"/>	No: <input style="width: 40px;" type="checkbox"/>	PH/CPHO Advised: <input style="width: 40px;" type="checkbox"/>
Screening completed by:			



DEPARTMENT OF JUSTICE COVID 19 SCREENING FORM

Client Information	
Facility location:	
Client Name:	
COMS #:	
Date of Birth:	
Health Card #:	
Date of Intake:	
Date of Screening:	Date: _____ Time: _____

Client Vital Signs					
BP:	HR:	RR:	SATS:	TEMP:	WGT:

Screening Questions	Yes	No	Date of Onset
Presence of cough (with or without shortness of breath) This includes new onset or exacerbation of chronic cough			
Fever, sore throat, runny nose, nasal congestion, or sneezing that is not part of chronic allergies or sinus problems?			
Do you have any unusual joint pain, muscle aches, feeling unwell or have unusual tiredness?			
Do you have any nausea, vomiting or diarrhea?			
Do you have a sudden loss of taste or smell?			
Have you travelled outside of Nunavut in the last 14 days without completing a GN designated hub and are not fully vaccinated?			
Have you had contact with anyone who has travelled outside of Nunavut in the last 14 days who has become sick?			
Have you been tested for COVID 19 and the test is still pending?			
Have you had close contact with anyone waiting for results or have been asked by Public Health to self-isolate?			
<p>As of July 20th, clients arriving from within Nunavut, or the NWT do not require isolation unless they answer yes to any of the above questions. Clients arriving from outside of Nunavut are to isolate and a swab is to be collected. If the clinic is vaccinated, have a negative screening and negative swab they can be placed in the general population. If not vaccinated they are to be isolated for 7 days. Swabbing is required on day 1 and day 7. If isolation is required, initiate Droplet & Contact precautions. Ensure mask is maintained and client is moved to a designated area. Biohazard bin, infection control trolley and signage are to be placed at the designated area. Please refer to Nunavut's Public Health COVID 19 guidelines for testing guidance or call 975-5772.</p>			

High suspicion for COVID 19 Infection	Yes: <input style="width: 40px;" type="checkbox"/>	No: <input style="width: 40px;" type="checkbox"/>	PH/CPHO Advised: <input style="width: 40px;" type="checkbox"/>
Screening completed by:			



INTERACTING WITH ISOLATED CLIENTS

General

- The client's door must always remain closed.
- Staff must wear full PPE attire while on the units and take off prior to exiting into the secure hallway.
- All garbage in the building is biohazard waste.
- Place all full biohazard bags into the program room behind the crow's nest.
- The units must be free of all paper products or any unnecessary items and must be thoroughly cleaned throughout the day.
- The secure hallway must be cleaned at all time and free of all unnecessary items.

Meals

- Only disposable cutlery, plates and cups are to be used.
- Prior to giving meals, staff must ensure they have the client don his mask. Staff should wear gloves prior to touching the hatch.
- Once the mask is on and staff are wearing gloves. Provide meals through the door, then closed after.
- Staff must remove gloves immediately and hand sanitize with hand sanitizer.

Access/Telephone use/Shower

- Prior to opening the door for access staff are to wear gloves. Ensure the client has his mask on prior to opening the door. If available prior to exiting have the client hand sanitize.
- The client **must wear their mask** for the entire time they are out of the cell, if they refuse, access is denied or ended early.
- **Staff must pay attention to all surfaces touched including the telephone used, as thorough disinfecting is mandatory after access is completed.**

- The client must wear a mask unless showering. After the shower, the client must be directed to put the mask on immediately.
- Ensure the shower stall is thoroughly disinfected.

Medication

- Medication administration will be done through the door.
- Medication will only be given by the Nurse or IC.
- Prior to opening the door **staff must don gloves and the client don a mask.**
- The client is to be directed to not remove their mask until the door is closed.
- Once closed. Staff are to observe the client taking the medication through the window of the door.
- Gloves are to be immediately removed and hand sanitizing is to be done.

Cleaning

- **Any garbage that is removed from this room must go into a biohazard bin.**
- Clients should be encouraged to keep this space tidy and be provided wipes to disinfect inside the cell.
- After isolation is complete, the cell must be thoroughly disinfected including all surfaces, walls, floor, etc.



INTERACTING WITH ISOLATED CLIENTS

General

- Clients on isolation are to be treated as if they have COVID 19.
- A sign identifying the cell as Droplet/contact precaution should be present.
- Donning (Put on) and doffing (Take off) instructions for PPE use should be present.
- **The door and hatch are to be always closed.** Prior to opening the hatch or door the client **must don a surgical mask.**
- When touching the door or hatch, staff **must wear gloves.** After interaction is complete gloves are to be immediately removed and sanitize hands.
- An infection control cart and biohazard bin are required to be always present outside the cell.
- **Clients are not to exit the room unless they don a mask,** with the understanding that the mask must be always maintained.
- **Any item that enters this room needs to be thoroughly disinfected prior to returning to the floor. Items that can not be disinfected (paper, books etc) must be thrown out.**

Meals

- Only disposable cutlery, plates and cups are to be used.
- Prior to giving meals, staff must ensure they have the client don his mask. Staff should wear gloves prior to touching the hatch.
- Once the mask in on and staff are wearing gloves. Provide meals through the hatch, then closed after.
- Staff must remove gloves immediately and hand sanitize with hand sanitizer.

Access/Telephone use/Shower

- Prior to opening the door for access staff are to wear gloves. Ensure the client has his mask on prior to opening the door. If available prior to exiting have the client hand sanitize.
- The client **must wear their mask** for the entire time they are out of the cell, if they refuse, access is denied or ended early.
- **Staff must pay attention to all surfaces touched including the telephone used, as thorough disinfecting is mandatory after access is completed.**
- The client must wear a mask unless showering. After the shower, the client must be directed to put the mask on immediately.
- Ensure the shower stall is thoroughly disinfected.

Medication

- Medication administration will be done through the hatch.
- Medication will only be given by the Nurse or IC.
- **Prior to opening the hatch staff must don gloves and the client don a mask.**
- The medication will be placed on the ledge and the client picks up the medication.
- The client is to be directed to not remove their mask until the hatch is closed.
- Once closed. Staff are to observe the client taking the medication through the window of the door.
- Gloves are to be immediately removed and hand sanitizing is to be done.

Cleaning

- **Any garbage that is removed from this room must go into a biohazard bin.**
- Clients should be encouraged to keep this space tidy and be provided wipes to disinfect inside the cell.
- After isolation is complete, the cell must be thoroughly disinfected including all surfaces, walls, floor, etc.

Biohazard bin

To be used for isolation cell



**All garbage removed from
isolation cell should be placed
in the biohazard bin**

COVID 19 PRECAUTIONS FOR KIC

STAFF

Please ensure staff are self-monitoring at home for signs and symptoms of COVID 19. Staff who are sick should **not** be attending the centres for work as these facilities are vulnerable. Currently the biggest risk to these areas are staff. The following is posted on the entrance of these buildings;

Staff presenting who answer yes to the following should **not enter the building;**

1. **Do you have cough, with or without shortness of breath?**
2. **Do you have a fever?**
3. **Have you travelled outside of Nunavut in the last 14 days?**

Staff presenting who answer yes to the following should **not enter the building;**

1. **Do you have a new onset cough accompanied with any of the following symptoms;**
 - **Runny nose/sneezing**
 - **Sore throat**
 - **Fever**
 - **Muscle aches/pains**
 - **Tiredness or feeling unwell.**

Staff presenting who answer yes to the following should **not enter the building;**

1. **Have you been advised by Public Health to self-isolate for 14-days?**
2. **Have you been tested for COVID 19?**
3. **Have you been in close contact with anyone who has been tested for COVID 19 and test results are still pending?**
4. **Have you been in close contact with anyone who has tested positive for COVID 19?**

It is crucial that staff continue to self monitor for any symptoms to decrease the chance of **COVID 19** from entering the building.

Staff are encouraged to bring an extra set of clothing and a small bag of toiletries in case of exposure.

COVID 19 SCREENING PRECAUTIONS

All employees, visitors, contractors, maintenance and delivery personnel will enter through one entrance.

Prior to entrance a staff/supervisor will ask a series of COVID 19 screening questions. If all answers result in a no, the staff/supervisor **must observe proper hand hygiene for a minimum of 20 seconds prior to entry.**

The main entrance of KIC should be equipped with a purell station, signage, a box of masks and gloves.

VISITATION/CONTRACTORS/MAINTAINANCE & DELIVERY PERSONELL

All visitation into the facilities has been cancelled unless deemed an emergency.

It is difficult to ensure proper screening or verifying information received from maintenance personnel outside of the Department of Justice. All maintenance staff entering the building are subject to the COVID 19 screening questions and hand hygiene observation. In addition, they must wear a **surgical mask** or **hand made mask**. Businesses should provide their own however if unavailable, masks are in the outer porch of each facility. Personnel refusing to wear a mask will not be permitted access.

SELF MONITORING

It is imperative that staff and residents are self monitoring for symptoms daily. If any of the above-mentioned symptoms occur the staff should put a mask on, contact duty and once relieved, immediately leave work. The residents have been instructed to self monitor. If an resident mentions any of the above symptoms to staff, they should be asked to wear a mask and be placed in a room with a closed door until medical staff are able to access..

SCREENING TOOLS

The following screening tools have been developed for use within the centres with the help from Nunavut Public Health officials;

- COVID 19 screening questions for entrance.
- Initial inmate screening tool
- 14-day, daily monitoring tool for inmates
- Weekly inmate screening tool
- Weekly employee screening tool

GOOD HAND HYGIENE AND SOCIAL DISTANCING

These are 2 of the most important things the staff and residents can do to stop the spread of COVID 19. COVID 19 is a virus that is transmitted by droplet and contact from infected people. An infected person can shed the virus through things like coughing, sneezing or contaminating surfaces such as phones and keyboards. The virus can live on surfaces for **hours or days**.

Good hand hygiene. All staff and residents need to be diligent in practicing good hand hygiene and avoid touching their face. This can be accomplished through soap and water or sanitizer that is a minimum of 60% alcohol content.

Social distancing. All visitation and outside activities are cancelled except for emergencies. Exceptions for KIC is shopping trips which are limited and land trips. Within the center encouragement of social distancing should still occur. 2 meters of length is recommended.

CLEANING OF THE CENTRES

All centres have been directed to do a thorough cleaning with any of the approved cleaning products from the Health Canada website. Examples are Lysol products, Virex and bleach. A thorough cleaning should be done twice per shift. Cleaning schedule/routines have been provided to the centres. More

commonly touched surfaces such as counters, keyboards, doorknobs, light switches and radio systems should be wiped down with hospital grade wipes at least 4 times per shift.

All unnecessary items should be removed from areas of high traffic such as common areas, control rooms and entry ways. COVID 19 can live on numerous surfaces and products for hours to days. Below is a list of items that should be removed or stored in a closed area;

- Clothes such as outer wear (jackets) should be kept in dressers, closets or lockers
- Food and drinks should be limited to kitchen/dinning area
- Paper products. COVID 19 can survive on these products especially if wet. Remove all paper products. Laminate or cover in protective sheets when able.

PPE EQUIPMENT

Equipment needed in each center for staff and inmate protection. PPE=Personal protective equipment

- Surgical/procedural masks
- Face shields (Important for instances when staff can encounter bodily fluids example spitting)
- Surgical or yellow gowns
- Gloves, available in all sizes. Nitrile, latex free
- Hospital grade disinfecting wipes. Example, Cavi wpes, germicide
- Health Canada approved cleaning supplies. Example, Virex, Lysol, Bleach
- An isolation equipment cart/trolley for easy access of equipment

In additional to the above listed equipment, hand made (non medical) masks have been approved for use within the centers once available. **These masks are to be worn by asymptomatic residents under a 14-day isolation only.** If symptoms are present or COVID 19 is confirmed the only approved masks are surgical masks. Hand made masks need to be washed in hot water and normal detergent daily or if they become wet or soiled. Surgical masks are still the standard, but hand made masks can be used to decrease the unnecessary use of surgical masks.

DESIGNATED DROPLET/CONTACT PRECAUTION AREAS

Each centre should have a minimum of 1 area that is reserved for new residents or residents with suspected COVID 19.

An additional area or room should be identified that can house multiple residents who have tested positive for COVID 19

KIC

- **Room 1** has been identified and labelled as a droplet precaution area which will house new residents under a 14-day isolation.
- **Room 2** has been identified to house a single resident under a 14-day self isolation (quarantine) if needed if room 1 is full or multiple cases of COVID 19 positive residents

NEW RESIDENTS ARRIVING TO THE CENTRES

As of **April. 7 2020**, a resident being transferred from any area within Nunavut **does not have to enter into a 14 day isolation, as per the Director of Corrections.** Prior to a resident being accepted into KIC, a COVID Screening tool must be completed and reviewed by the KIC Warden. This process will be reviewed and likely changed once a positive case of COVID 19 is identified in Nunavut.

The following documentation refers to transfers of residents once the 14-day isolation comes into play for KIC or an existing resident is high suspicion for COVID 19 or tests positive for COVID 19.

NEW RESIDENT INTO KIC

Most residents arriving into KIC will be within the territory transfers.

Room 1 has been designated as droplet and contact precautions and should be used for new arrivals. It is designated by signs and an infection control trolley is outside the room with all PPE equipment necessary to protect the staff; isolation gowns, gloves, surgical masks, face shields and wipes if needed. A Purell dispenser has been placed near the cell for easy access to hand hygiene for staff.

When reviewing a resident, please ensure a COVID 19 screening tool has been used and a copy is provided with the medical summary for review.

Prior to the resident arriving and being transported by KIC staff, the resident must be fitted with a mask. Signs are present for staff to ensure the mask is placed properly. Once the mask is fitted the resident can enter the transporting vehicle and facility. Once the resident is placed in room 1, their street clothes are removed, and the resident is placed in new clean clothes. Their clothes worn on transfer will be placed in a bag by staff, ensuring gloves are worn. The clothes will be immediately washed in hot water with normal laundry detergent available at the facility. Staff must follow good hand hygiene after this has been done.

If high suspicion for COVID 19 or information not available accepting staff should greet the inmate in partial PPE gear; mask and gloves.

The resident should be asked questions using the COVID 19 screening tool on arrival to determine any symptoms that could have developed. **Even if they are deemed as asymptomatic, they will be placed in a 14-day self isolation (quarantine) to monitor for symptoms (as per the Director's request).** For the 14-day isolation period, the resident will remain in room 1. If they are asymptomatic at the end of the 14-day period they will be cleared for a regular room.

If multiple new residents arrive, KIC will avoid co-horting multiple quarantined residents in the same area as this could cause transmission from one resident to the other especially when residents are on different days of the 14-day quarantine. Co-horting should only be practiced if there are no other available options.

Options for quarantine in the absence of a positive COVID 19 inmate are; Room 1, room 2 and the program room. If a positive COVID 19 case is present, room 2 will house positive residents and quarantined residents will be housed in room 1 and the program room.

Public health or Health Centre will be contacted for additional instruction and/or need to swab.

HOUSING POSITIVE COVID 19 CASES

HOUSING CASES AT KIC

In the likelihood that the resident is positive for COVID 19, **Room 2** as been assigned as the designed positive COVID 19 holding area. This room can house 3 residents comfortably, more if needed. The residents will always remain in this room with the door closed, masks can be removed when in this room. Residents will need to leave this room for the washroom and showering. They are always to wear masks when not in the designated room with the door closed. Masks must be worn in the presence of staff or when exiting the room.

MEALS AND FOOD ITEMS

Food and drinks should never be shared. Items such as popcorn and chips should be divided into individual containers or bowls for consumption.

Social distancing should always be encouraged in the facilities even within the general population. 2 meters should be encouraged when sitting to eat meals.

MEALS FOR COVID 19 POSITIVE RESIDENTS AND QUARANTINED RESIDENTS ON 14-DAY SELF ISOLATION

Meals will be eaten in the designated room. Disposal plates and utensils should be used to minimize risk and a garbage bin should be provided for this designated area. Once the garbage is full, it should be placed in a bio hazard, located outside the room, then immediately removed from the facility. Ensuring staff wear gloves and perform good hygiene following removal.

Staff will have the resident stand 6 feet away from the door and wear a surgical mask. Staff should wear gloves, then place the food on the floor of the room. Ensure staff perform good hand hygiene after removing gloves.

MEDICATION ADMINISTRATION

Residents should receive medication in their room. To minimize risk to staff, the staff dispensing the medication should wear gloves. Have the resident stand 6 feet away from the door and wear a mask. Place the medication on the floor. The door should be closed until the resident has communicated, they have picked up the medication and have returned to 6 feet away from the door. Once this is complete the staff can then open the door and observe the resident taking the medication.

WASHROOM/HYGIENE FOR COVID 19 POSITIVE RESIDENTS AND QUARANTINED RESIDENTS ON 14-DAY SELF ISOLATION

KIC

Washroom breaks and showers should be accommodated in a separate washroom. No room is equipped with its own bathroom at KIC. If a resident is under quarantine or a positive COVID 19 resident is present the washroom closest to room 1 and room 2 will be reserved for these residents and not to be used by uninfected residents or staff. Ensure that the resident wears a mask when exiting the designated room. Once they have entered the designated washroom and the door is closed, they can then remove their mask. Once finished and prior to exiting the washroom and returning to the

designated room the resident MUST wear a mask. No wait time is needed prior to cleaning. Staff or residents cleaning the washroom should wear PPE gear based on the following;

- A resident under 14-day isolation with no symptoms: Staff and residents cleaning the area should use **gloves** only when cleaning.
- A resident who is positive for COVID 19 or high suspicion for COVID 19 (symptomatic): Staff and residents cleaning the area should use a **mask, gown and gloves** when cleaning.

The recommendations set out for cleaning a room where no high-risk activity has occurred is deep clean with Health Canada approved cleaning products. No wait time prior to clean is recommended. In respect to normal hygiene activities no wait time is necessary prior to cleaning.

FRESH AIR FOR RESIDENTS

KIC

Fresh air breaks should still be allowed for COVID 19 positive residents and residents under a 14-day self isolation. They should maintain wearing their mask on exiting the room until they are outside of the facility. Once outside the facility they can then remove their mask. Escorting staff will wear a mask if the resident is symptomatic or a known positive COVID 19. Be aware and always maintain social distancing of a minimal of 2 meters if possible. Once fresh air is complete the resident must put on a mask again prior to entering the facility. If there is concern that the resident will not be compliant, fresh air breaks should not occur.

TRANSPORTING RESIDENTS FOR MEDICAL NEEDS

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

TRANSFERS OF RESIDENTS UNDER 14-DAY SELF ISOLATION (QUARANTINE) WITH NO SYMPTOMS OR GENERAL POPULATION

For precautions a resident being transported for emergency issues, DI/Lab or urgent clinic appointments should be transported with a mask (non surgical if available). At this point it is optional for staff to wear a mask; their comfort level will dictate this. There is no need at present with no confirmed case within the territory to have them change clothes on arrival back to the facility. Proper hand hygiene and social distancing with members of the public is mandatory for staff and residents.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

WITH HIGH SUSPICION (SYMPTOMATIC INMATE) OR POSITIVE COVID 19

Any transfers to the health centre with a suspected or positive COVID 19 resident should be done with caution. The resident should wear a surgical mask for the entire transfer. Staff should wear surgical masks, gowns and gloves to protect their clothing from exposure. For transfers to the health centre, ensure staff contact the health centre prior to arrival so health care staff can be made aware of symptoms.

If the resident is deemed medically cleared to return to the centre, then infection control should be strictly maintained. Staff should wear gowns, gloves and surgical masks for transfers. The resident must wear a mask until placed back into the designated COVID 19 room. Once the resident has arrived back to the facility, they should go into their designated room. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The staff who escorted the resident should keep a change of clothes with them at work and change into a different uniform in case of exposure.

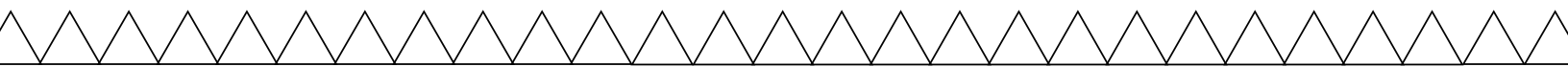
Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

TAKE DOWNS OR POTENTIAL VIOLENCE WITH RESIDENT SUSPECTED OR KNOWN COVID 19 POSITIVE

The staff safety should be priority in these incidents. **Full PPE** attire should be worn whenever possible prior to intervening or when a suspected take down of these residents may occur. This includes gowns, gloves, surgical mask and face shields. The donning procedure of this is laminated at each centre at the designated areas. Once the incident has resolved, staff should remove gear as identified in laminated papers. Staff should change into a different set of clothing. The staff should keep a change of clothes with them at work and change into a different uniform in case of exposure.



NUNAVUT'S PATH: moving forward during COVID-19



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Where we are now



The Government of Nunavut (GN) took immediate action in response to COVID-19, by declaring a public health emergency, and introducing measures to reduce the spread of the virus. Thanks to the support of Nunavummiut, we are in a position to re-assess some of the restrictions that were put in place.

It is undeniable that these measures have changed the way Nunavummiut interact and access services. The GN's public health measures have impacted peoples' ability to visit friends and loved ones, worship, work, travel and socialize as they would normally.

Guided by three criteria that assess our ability to respond to an outbreak, the status of COVID-19 in territory and the situation in our neighbouring jurisdictions, we can now move forward with reassessing our public health measures.

Starting June 1, 2020, the GN, under the guidance of the Chief Public Health Officer (CPHO) will begin modifying the current public health measures.

When considering which measures to ease, we will begin with those that pose the lowest risk. All public health decisions will be guided by best available knowledge, practices, and epidemiological considerations.

Every two weeks after June 1, the CPHO will decide which measures can be eased, maintained or if additional restrictions are needed.

Easing restrictions also requires everyone's commitment to continue to maintain the personal protective measures of good hygiene, hand washing, personal distance, and staying away from others when feeling sick.



Our Map

Nunavut's Path: moving forward during COVID-19 highlights the critical public health measures that will be in place for the duration of the COVID-19 pandemic, identifies the criteria for easing public health measures, and lays out the government's approach to ease restrictions, based on reducing risks related to the virus while minimising the impacts on Nunavummiut.



Our tools

Public health measures are in place to ensure the health and well-being of our residents, by reducing the risk of COVID-19. As a result, when considering easing restrictions, decisions will be based on an assessment of how each measure impacts health and well-being.

There are several factors that impact risk of acquisition and transmission of COVID-19.

Duration of contact: the longer two people are close together, the more likely it is that a viral illness will be passed between the two; when contact is less than 10 minutes, transmission is less likely to occur.

Nature of contact: the closer two people are to each other, the easier it is for acquisition to occur. For example, two people sitting across a table are less likely to spread an illness than two people in a hairstyling session.

Location: acquisition is less likely when contact occurs outdoors.

Vulnerability: Elders and individuals with compromised immune systems may be more susceptible to acquiring an illness, and have higher risk of severe complications; children are less prone to severe complications and less likely to spread COVID-19.

Experience, evidence and observations from within Nunavut and other jurisdictions have helped clarify how effective public health measures have been in meeting the above goals. It is prudent to alter measures that create the least risk first, as doing so has minimal chance of triggering an outbreak or spread.

Scouting ahead

Every two weeks the current situation will be reassessed by the CPHO, with the option of continuing to ease measures, hold for an additional two weeks, or tighten measures. No matter what, Nunavummiut will need to maintain general protective measures like hand washing and staying home when they feel ill.

Knowledge about COVID-19 is still evolving and there continue to be many unknowns. How we approach the next steps in containment are crucial. We need to examine the repercussions of each decision as measures are eased, and adapt our approach to stay one step of COVID-19 coming into the territory. Examining the situation every two weeks will allow Nunavut to maintain flexibility to adapt and respond quickly as the situation changes.

As these decisions are made, they will be guided by several factors including:

1. Status of transmission of COVID-19 in territory.
2. Status of in-territory testing capacity.
3. Current health system capacity.
4. Transmission and cases levels in our most common travel destinations in Canada (Northwest Territories, Alberta, Manitoba, Québec and Ontario), and the possibility of spread to multiple locations within Nunavut.
5. Current evidence available.
6. Assessment of risk of each measure.



Public health measures are and will continue to be guided by best practices, epidemiological considerations and evidence.



The terrain

Measures generally fall into three groups - lower risk measures, medium risk measures and higher risk measures. Based on the current evidence on risk and impacts of measures, the below is a current assessment of some of these measures. The risk level of activities can change over time.

Examples of low risk measures

- Opening daycares.
- Opening parks and playgrounds.
- Increasing the number of people participating in outdoor events/gatherings.
- Opening work places.
- Opening gyms (solo workouts and swims).
- Opening outdoor day camps.
- In-territory travel between communities.
- Visiting museums and art galleries (without group tours).
- Opening retail outlets.
- Resume in-person health care services.

Examples of medium risk measures

- Dining in restaurants (half capacity or other space separation requirements).
- Visits to long-term care facilities.
- Holding faith and critical cultural ceremonies, based meetings (indoor; must maintain distancing and separation).
- Resuming personal services such as hairdressers and nail salons (one-on-one session(s), while wearing gloves and masks and maintaining distancing when feasible).
- Resuming indoor group meetings (gym classes, indoor sports).
- Opening public sauna & hot tubs.
- Opening youth centres.
- Opening the theater.
- Resuming Courts.
- Opening schools and Nunavut Arctic College campuses.

Examples of high risk measures

- Allowing community feasts (indoor).
- Allowing indoor concerts.
- Lifting household visitor restrictions.
- Opening drinking establishments, bars and pubs.



Travel restrictions are expected to continue in some form until we have more information about effective therapies and/or a vaccine for COVID-19, since travel is Nunavut's highest risk.

It is important to remember that as the threat of COVID changes, it will affect these measures. Even though an activity may be assessed as low risk, it may not be appropriate for a measure to be eased immediately.

Removing a Public Health Order barring an institution/facility from opening does not force or guarantee that the facility will open on that specific date. These are decisions for the owner(s) and operators.

For employers and retailers seeking detailed information, please refer to the Workers' Safety and Compensation Commission (WSCC). For individuals wishing to understand their personal risk of acquisition of COVID-19 there are many resources available at <https://nu.thrive.health/covid19/en>, <https://gov.nu.ca/health/information/covid-19-novel-coronavirus>, or at 1-888-975-8601.

As more information becomes available and data on the current situation is analyzed, some measures may need to be re-introduced or new measures implemented to reduce the risk of spreading COVID-19.

Everyone still has a role in Nunavut's response to COVID-19. As there are currently no targeted treatments or vaccine available, public health measures are critical to slow the spread of COVID-19 and protect our family, friends and communities.

Remaining vigilant and prepared

We are asking Nunavummiut to continue to respect these personal public health practices:

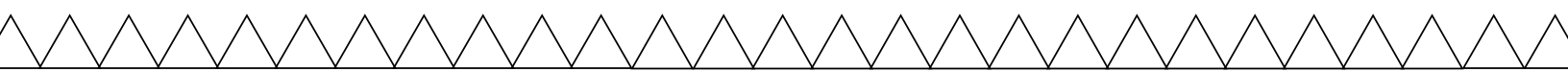
- Stay informed, be prepared and follow public health advice.
- Continue to practise good hygiene (hand hygiene, avoid touching face, respiratory etiquette, disinfect frequently touched surfaces).
- Maintain physical distancing as much as possible when outside of the home (i.e. from non-household members).
- Continue to increase environmental cleaning and ventilation of public spaces and worksites.
- Stay at home and away from others if symptomatic/feeling ill.
- Stay at home if you have pre-existing conditions.
- Wear a mask when social distancing cannot be maintained
- Limit non-essential travel out of the territory.
- Assess and be aware of the risk with non-essential social gatherings.

Following these practices are critical to reduce the spread of COVID-19 and will support easing the various restrictions.

In conclusion

Today, there is no timeline for when the COVID-19 pandemic may end. Until a vaccine or another form of treatment is developed, COVID-19 is something that the world will have to live with. We all want to return to what our lives were like before the pandemic, but this is not possible right now. We cannot go back to what we considered normal. Instead, we need to work towards something new. We need to decide how to re-introduce the activities we love and the programs we depend on, in a way that is safe and sustainable.

Our sacrifices and our actions have allowed us to keep COVID-19 out of Nunavut for now. We have also all shown that we can respond quickly and decisively. Our efforts as a territory will need to continue, even as we begin to ease public health measures. Nunavut's collective responsibility will keep us safe and healthy, and each day that passes gives us more information and better tools to help manage the threat of COVID-19.





Department of Justice COVID 19 Facility Precautions

Nunavut Women's Correctional Center

Staff

Please ensure staff are self monitoring at home for signs and symptoms of COVID 19. Staff who are sick should not be attending the facilities for work. These centers are vulnerable and at high risk if COVID 19 is introduced. Currently the biggest risk to these areas are staff. Entrance to these facilities is strictly monitored by staff. Currently there is a 4-step screening process for entrance into the facility. This screening process applies to all staff, visitors, contractors, maintenance, and delivery personnel.

1. COVID 19 screening questionnaire

If a person answers "YES" to any of these questions entry into the facility is prohibited.

- Do you have a cough (with or without shortness of breath)?
- Do you have a fever?
- Do you have a sore throat?
- Do you have a runny nose, nasal congestion, or sneezing?
- Do you have joint pain or muscle aches?
- Have you been feeling unwell or have unusual tiredness?
- Have you travelled outside of Nunavut in the last 14 days?
- Have you had any contact with a person who has travelled outside of Nunavut in the last 14 days who has become sick (cough, fever, sneezing or sore throat)?
- Have you had close contact with a person who has been tested for COVID 19 (results pending) or has been diagnosed with COVID 19?
- Have you been tested for COVID 19 or have been asked by Public Health to self isolate for 14 days?

2. Observe hand hygiene for a minimum of 20 seconds

If the answer to all questions are "NO" then staff need to move onto the next step, observing hand hygiene for proper technique and timing for a minimum of 20 seconds.

- Please have the person wait until the screening questionnaire is complete.
- Staff should observe and time hand hygiene for a minimum of 20 seconds.
- This should not be done during the questions as staff will be unable to properly visualize and time appropriately.

3. Ensure mask is applied properly if required for entering the facility.

- All personnel entering the facility MUST wear a mask. The only exception is Department of Justice employees who have completed all steps.
- Staff need to ensure the mask is properly applied prior to the personnel entering the facility.

4. Infrared temperature check

- Temperature screening using an infrared thermometer has been added based on recommendations from Corrections Canada.

- This is the last step for staff to complete. If the temperature is 37.7 or less entrance is permitted. If the temperature is 37.8 or higher entry is prohibited.
- To ensure the safety of the staff completing screening this step MUST be done last.

All entrances of CRC, NWCC and YO are equipped with purell stations, signage, a box of masks and gloves.

It is crucial that staff continue to self monitor for any symptoms to decrease the chance of COVID 19 entering the facilities.

Self Monitoring

It is imperative that staff and inmates are self monitoring for symptoms daily. If any of the above-mentioned symptoms develop while on shift the staff should put a mask on, contact duty and once relieved, immediately leave work. They are encouraged to contact Public Health for instruction and possible testing.

Staff Education

Staff within the facilities are provided with training to ensure compliance of all Public Health and Corrections Canada recommendations. This will be continuing throughout the next coming months to avoid compliancy. The following is available and mandatory for all staff.

- PPE equipment “Donning and Doffing” video.
- PPE training with drills.
- Hand hygiene mandatory online course and quiz.
- COVID 19 precautions for each facility
- Regular supervisor meetings to review any changes or recommendations

Good Hand Hygiene and Social Distancing

These are 2 of the most important things the staff and inmates can do to stop the spread of COVID 19. COVID 19 is a virus that is transmitted by droplet and contact from infected people. An infected person can shed the virus through coughing, sneezing, or contaminating surfaces such as phones and keyboards. The virus can live on surfaces for hours or days.

Good hand hygiene: All staff and inmates need to be diligent in practicing good hand hygiene and avoid touching their face. This can be accomplished through soap and water or sanitizer that is a minimum of 60% alcohol content.

Social distancing: All visitation has been cancelled except for emergencies. Activities that are occurring outside such as walking or recycling is occurring without contact with members of the public and ensuring social distancing is maintained. Within the facilities encouragement of social distancing should still occur. 2 meters of length is recommended.

Facility Precautions

As noted above there is a 4-step screening process for entry into any Corrections Facility. In addition to this, signage has been placed on the front entrance to advise staff and the public to the restrictions of entry to the facility.

- COVID 19 screening questionnaire
- Hand hygiene observation
- Mandatory masks if applicable
- Infrared temperature reading

The entry points of each facility is also equipped with the following.

- Hand sanitizer stations
- A box of surgical masks
- Gloves
- A waste bin
- Blue air unit – air purifier
- Signage

Signage for COVID 19 resources have been posted throughout the facilities to help educate staff and the inmates on COVID 19.

The following screening tools have been developed for use within the facilities with resources from Nunavut Public Health and Corrections Canada.

- COVID 19 screening questionnaire
- Initial inmate screening tool
- 14-day isolation, daily monitoring tool for inmates
- Weekly employee screening tool

Cleaning of the Facilities

All facilities have been directed to do a thorough cleaning with any of the approved products from the Health Canada website. A thorough cleaning should be done twice per shift. Cleaning schedule/routines have been provided to the facilities. More commonly touched surfaces such as counters, keyboards, doorknobs, light switches, and radio systems should be wiped down with hospital grade wipes at least 4 times per shift.

All unnecessary items should be removed from areas of high traffic such as common areas, control rooms and entry ways. COVID 19 can live on numerous surfaces and products for hours to days. Below is a list of items that should be removed or stored in a closed area.

- Clothes such as outer wear should be kept in dressers, closets, or lockers.
- Fabric items that are not able to be washed should be removed from common areas.
- Food and drink should be limited to kitchen/dinning area.
- Paper products. COVID 19 can survive on these products especially if wet. Remove all paper products. Laminate or cover in protective sheets when able.

Cleaning of Facility Vehicles

Vehicles should be cleaned thoroughly. General cleaning should be done once per shift if vehicle is not in use. After each use it should be thoroughly cleaned as well using a hospital grade wipe/cleaner.

Laundry Services

Laundry should be washed in hot water whenever possible. Normal laundry detergent available in the facilities is sufficient. Any contaminated clothing or clothing from an isolation area should be washed separately.

PPE Equipment

PPE stands for personal protective equipment. This equipment is needed in each center for staff and inmate protection against the spread of COVID 19. Each facility is equipped with the following items.

- Surgical/procedural masks
- Face shields (Important for instances when staff can encounter bodily fluids example spitting)
- Surgical or yellow gowns
- Gloves, available in all sizes. Nitrile, latex free
- Hospital grade disinfecting wipes. Example, Cavi wipes, Germicide
- Health Canada approved cleaning supplies. Example, Virex, Germosolve, Lysol, Bleach
- Hand sanitizing stations and easy access to hand sanitizer throughout the facilities
- An isolation cart/trolley for easy access of equipment

Hand Made Masks

In addition to the above listed equipment, hand made (non-medical) masks have been approved for use within the centers once available. These will be made available for staff and inmates throughout each facility. Once available staff will be issued 2-4 masks that will become part of their uniform for added protection.

These masks are to be worn by asymptomatic inmates under a 14-day isolation only. If symptoms are present that are consistent with COVID 19 or COVID 19 is confirmed the only approved masks are surgical masks.

Hand made masks need to be washed in hot water and normal detergent daily. When possible, masks should be washed separately from normal laundry.

Court Movements

Court services has reopened as of July 7th, 2020. Corrections has made the decision that inmates who are attending court must wear masks. Surgical masks are the only ones currently available. These will be used until corrections has enough stock of hand made masks for use.

- Inmates will be fitted with a mask prior to leaving the facility.
- Sheriff's will be subject to the screening process prior to entry into the facility.

- Inmates are encouraged to keep mask on throughout the court proceedings until returned to the facility.
- The inmate must perform hand hygiene on return.

Medical Appointments

Inmates attending any medical appointment outside of the facility must wear a mask. Surgical masks are to be worn at present until adequate stock of hand made masks are available. Mask wearing for staff is optional depending on their comfort unless transporting an inmate who is symptomatic, then masks are mandatory.

Dental Appointments

Dental services during COVID 19 is a higher risk activity. Related to these concerns, inmates and escorting staff must wear a mask when attending any dental appointments. Surgical masks are to be worn at present until adequate stock of hand made masks become available.

Outside Activity

Outside activity is limited at present. Walks, traditional activities, and recycling is occurring at select facilities. Ensure limited contact with the public occurs. Encourage social distancing and good hand throughout activities.

Designated Droplet/Contact Precaution Areas

Each facility should have a minimum of 2 areas that are reserved and designated as droplet and contact precautions. In the likelihood of multiple inmates needing isolation other areas should also be identified for use.

- A sign identifying the room as Droplet/contact precaution should be present.
- Donning and doffing instructions for PPE use should be present.
- An isolation trolley and biohazard waste bin should be located outside the door when in use.
- Any item that enters this room needs to be disinfected prior to returning to the floor. Items that can not be disinfected will be thrown out (books, paper etc). Items entering this room should remain in this room until isolation is complete except garbage.
- Only disposable cutlery, plates and cups will be used.
- Fans or humidifiers are not permitted for use in this room.
- Any garbage that is removed from this room must be placed in the biohazard waste bin.
- If in use, the door must always be closed.
- After isolation, the room must be thoroughly disinfected including all surfaces, walls, floor etc.
- During isolation daily disinfecting by the inmate should be encouraged.

Mandatory 14-day Isolation of New Inmates

The Department of Justice has mandated that all new inmates entering facilities **MUST** undergo a 14-day isolation period. This is in place to protect the staff, inmates, and facility from the potential exposure to COVID 19. The only facilities exempt from this rule currently is CRC, KIC and RIHF if inmates are coming from another facility within Nunavut and have a completed a COVID 19 screening form. Inmates coming from an institution outside of Nunavut will be required to complete a 14-day isolation period.

During this 14-day isolation period they will be assessed daily by the medical team. There is an exception to this 14-day isolation period if Nunavut remains COVID 19 free. On days 8-10, if the inmate remains asymptomatic the medical team can consult the CPHO to remove the inmate from the isolation period.

NWCC Designated Areas

Designated droplet/contact areas

ISO cell 2 has been designated as a droplet and contact room. This room should be used for all new inmates entering the facility. The isolation trolley is kept just outside of this cell for use.

Room 4 has been designated as a droplet and contact room. Inmates will be moved into this room once the medical assessment is complete in ISO cell 2.

Room 3 has been designated as a droplet and contact room.

Process of Arrival of a New Inmate to NWCC

The inmate will arrive via the side door with the RCMP. RCMP should **not** enter the facility. Staff should ensure the inmate puts on a mask prior to entering the facility. Once the mask is on the inmate, they can enter the building and immediately perform good hand hygiene with the hand sanitizer located on the wall outside of ISO cell 2. After this has been completed, the inmate should be immediately moved to ISO cell 2. Once the inmate is placed in the ISO cell, their clothes are removed, and the inmate is placed in baby dolls. Their street clothes will be placed in a bag by staff, ensuring gloves are worn. The clothes will be immediately washed in hot water with normal laundry detergent available at the facility. Staff must follow good hand hygiene after this has been done. The inmate is to wait in the cell until the Nurse arrives to clear them. The inmate can remove the mask if the door is closed and no staff is present. Do not open the door to the cell until the inmate has secured their mask.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Inmate Belongings on Arrival

When the new inmate arrives to the facility, until staff are ready to go through their personal belongings place the luggage in a large clear bag. Once ready to be searched have a garbage bag ready. All washable items place in a garbage bag. These items will be washed in hot water with normal laundry detergent that is available at the facility. All items that can be disinfected should be thoroughly wiped with Cavi wipes. Place these items in a clear bag and seal. Any paper products or items unable to be disinfected place in a clear bag and seal. Duffle bags or book bags should be washed as per laundry. Luggage that cannot be placed in the washer should be thoroughly wiped inside and out with Cavi wipes. Then place the luggage in a clear bag. The luggage should remain in this clear bag until the inmate is released or transferred.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Movement of Inmates to Designated Room for 14-day Isolation Period

The Nurse will assess the inmate in ISO cell 2. Once this assessment is done and there are no contraindications addressed by the nurse, the inmate will be cleared to be moved to room 4. The inmate must be agreeable to follow the infection control policies and shower in the Nurse's office for movement to occur. The infection control policies will be explained to the inmate by the Nurse.

Once they agree to this process and a shower is complete the inmate can be moved to room 4 by corrections staff. Ensure the isolation trolley and biohazard bin is outside of room 4 prior to moving the inmate. The inmate must always wear a mask when outside of a designated room and in the presence of staff.

Interacting with an Inmate on 14-day Isolation

By placing an inmate on a 14-day isolation we are treating them as if they could potentially have COVID 19. Precautions should always be taken serious as a person can become symptomatic at any point. If symptoms arise the nursing staff will inform the IC and Duty. Staff should be aware of all infection protocols in place and follow them strictly.

Inmates will be assessed daily by the nursing staff. Each day the mask will be changed after the assessment. Staff should not give an inmate a new mask unless the mask becomes wet or soiled. If this occurs the nurse must be notified. The inmate must always remain in their designated droplet and contact room with the door closed, unless coming out for phone calls or fresh air. Interactions with an inmate should be minimal and follow all direction set out by the infection control protocol.

Providing Meals and Snacks

Meals will be eaten in the designated room. Paper plates, cups and utensils are only permitted to be used. A clear garbage bag/bin should be present within the room. Once this is full, it should be placed in a biohazard bag located outside of the designated area.

To provide meals to inmates placed inside these designated areas, staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the food placed on the floor just inside the door. If 6 feet can be maintained and the inmate wears their mask staff are only required to wear gloves during this process and ensure good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Medication Administration

Medication administration at young offenders should only be done by nursing staff or the IC on shift. Inmates should receive medication in their room. To minimize risk to staff, the IC dispensing the medication should wear gloves. Staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the medication (in a medication cup) placed on the floor just inside the door. The staff can then close the door and have the inmate show the staff they have swallowed the medication through the window. Ensure staff perform good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Telephone Calls

Telephone calls should be accommodated even for those on a 14-day isolation. The inmate will have to come out of the designated area for this to occur. Staff should wear gloves for this process and maintain social distancing. Prior to opening the door have the inmate don their surgical mask. Once the door is open have the inmate perform hand hygiene with Purell located on the isolation trolley. Once this is complete the inmate needs to don gloves while using the phone. Once the phone calls are complete have the inmate remove their gloves and dispose in the biohazard bin located outside of their designated room and again perform hand hygiene before entering back into the room. The telephone used should be disinfected thoroughly with Cavi Wipes immediately after use by staff.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Fresh Air for Inmates

Fresh air should still occur during a 14-day isolation period. The inmate will have to exit out of the designated area for this to occur. Prior to opening the door have the inmate don their surgical mask. Once the door is open have the inmate perform hand hygiene with purell located on the isolation trolley. No gloves are needed for inmates after this step. They must maintain wearing their mask on exiting the cell until they are outside of the facility. Once outside the facility they can remove their mask. Escorting staff will be required to wear a mask. The reason behind this is if an inmate at any point is unable to maintain 6 feet or if an incident occurs the staff has access to a surgical mask. Once fresh air is complete the inmate must put on the mask again prior to entering the facility. All items used such as balls etc must be thoroughly disinfected with cavi wipes after use. Both the inmate and staff should perform thorough hand hygiene on entry to the facility

PPE requirement during this process: Masks only.

Washroom/Hygiene for Inmates on 14-day Isolation

No rooms at NWCC are equipped with its own washroom so movement for hygiene and toileting must occur outside of the designated areas.

The preferred area for toileting and hygiene is ISO cell 1. Showers will occur in the Nurse's office. The washroom used must have a door that can completely close to maintain infection control.

The inmate must wear a mask when exiting their designated room and hand hygiene prior to movement. Once the inmate is in the designated area and the door is closed, they can then remove their mask to shower. They must then put the mask back on prior to opening the door to return to their designated area. Staff escorting the inmate should wear gloves and maintain social distancing. The staff escorting the inmate into the Nurse's office during the shower **MUST** wear a surgical mask and gloves.

After ISO cell 1 is used staff must cavi wipes all hard surfaces within this room. The Nurse's office after shower must be deep cleaned following use. This includes counters, walls, floor, and shower. No wait time is needed prior to cleaning.

For cleaning the washroom, the following PPE equipment should be used depending on the inmate.

Inmates in isolation with no symptoms:

PPE requirement during this process: Gloves only

Inmates in isolation that the nurse has identified as symptomatic:

PPE requirement during this process: Gloves, mask, and an isolation gown

Housing Multiple Inmates that Require Isolation at Young Offenders

There may be occasions that multiple inmates require isolation at the same time at young offenders. The options to house these inmates if necessary are listed below.

- ISO cell 2
- Room 4
- Room 3

Placement will be decided by the Nurse depending on presence of symptoms and/or need for swabbing.

Co-horting is the process of placing multiple inmates in the same room for isolation. This will be avoided as this could cause transmission from one inmate to the other especially when inmates are on different days of the 14-day isolation. Co-horting should only be practiced if the inmates arrive to youth offenders from the same community and on the same day.

Transporting Inmates for Medical Attention Under a 14-day Isolation Who are Asymptomatic

For precautions an inmate being transported for emergency issues, DI/Lab or urgent clinic appointments should be transported with a surgical mask. At this point it is optional for staff to wear a mask; their comfort level will dictate this. There is no need at present with no confirmed case within the territory to have them change clothes on arrival back to the facility. Proper hand hygiene and social distancing with members of the public is mandatory for staff and inmates.

Once the territory has a confirmed case, arrival back to the facility should be done differently. In this situation when the inmate has arrived back to the facility, they should go into an ISO cell just as if they were a new inmate. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The guards who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Transporting Inmates for Medical Attention who are Symptomatic or High Suspicion of COVID 19

Any transfers to the hospital with an inmate who have symptoms of COVID 19 should be done with caution. The inmate should wear a surgical mask for the entire transfer. Guards should wear surgical

masks, gowns, and gloves to protect their clothing from exposure. For transfers to QGH the accepting division should be made aware of the inmate's arrival. For non emergent cases the medical team should make these calls to appropriate hospital staff. In the event of an emergency transfer, the IC should call ahead to inform the ER staff. Once they arrive at QGH, QGH staff will direct the staff which room the inmate will go for assessment.

If the inmate is deemed medically cleared to return to the centre, then infection control should be strictly maintained. Guards should wear gowns, gloves, and surgical masks for transfers. The inmate must wear a mask until placed back into their designated room. Once the inmate has arrived back to the facility, they should go into an ISO cell just as if they were a new inmate. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The guards who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Take Downs or Potential Violence with Inmates Under 14-day Isolation or Suspected/Known COVID 19

Staff safety should be priority in these incidents. **Full PPE** attire should be worn whenever possible prior to intervening or when a suspected take down of these inmates may occur. This includes gowns, gloves, surgical mask, and face shields. The donning procedure for this is laminated at each centre at the designated areas. If the inmate is spitting or is refusing to wear a mask, a spit hood should be placed on the inmate. Once the incident has resolved, staff should remove gear as identified in laminated papers. Staff should change into a different set of clothing when there was any contact with bodily fluids. The staff should keep a change of clothes with them at work and change into a different uniform in case of exposure. If there was exposure to blood or bodily fluids during the take down, please inform duty immediately.

CORRECTIONS STAFF PPE TRAINING AND DRILLS – CONTINUING EDUCATION

1. COVID 19 DISCUSSION

- NEW UPDATES RELATED TO COVID 19; NUNAVUT & CORRECTIONS CANADA BASED
- NUNAVUT'S PATHWAY
- MYTH VS FACT
- IMPORTANCE OF CONTINUING EDUCATION

2. EXPECTATIONS OF STAFF

- COVID 19 RISK WITHIN A CORRECTIONAL FACILITY
- IMPORTANCE OF PROFESSIONALISM WITHIN CORRECTIONS IN REGARD TO COVID 19
- SAFEGUARDING THE FACILITIES AND PROTECTING THEM FROM COVID 19 EXPOSURE

3. SCREENING TOOLS IN PLACE AT CORRECTIONS

- DISCUSSION ABOUT IMPORTANCE OF ALL 4 ELEMENTS, COMMON ERRORS
 - SCREENING QUESTIONNAIRE
 - HAND HYGIENE OBSERVATION
 - MASK APPLICATION
 - INFRARED TEMPERATURE SCREENING

✓ DRILL #1: EACH STAFF MEMBER IS REQUIRED TO DEMONSTRATE PROPER SCREENING TECHNIQUE

4. INSPECTION OF FACILITIES – WEAK AREAS IDENTIFIED NEEDING IMPROVEMENT

- DISCUSSION ON CLEANING REGIME – IMPORTANCE OF 2 FULL CLEANINGS PER SHIFT/4 FOR HIGH TRAFFIC AREAS
- PAPER/FABRIC MATERIAL THROUGHOUT THE FACILITIES
- CONTROL AREAS
- IMPORTANCE OF VALIDATION OF WORK COMPLETED

5. PPE REVIEW AND LOCATION OF SAME

- WHAT PPE EQUIPMENT CORRECTIONS HAS, WHAT IT LOOKS LIKE AND WHERE STOCK IS KEPT
 - ✚ SURGICAL MASKS
 - ✚ MASKS WITH VISORS
 - ✚ FACESHEILDS, DISPOSABLE
 - ✚ SAFETY GOOGLES
 - ✚ PLAN FOR INTRODUCTION OF HAND MADE MASKS
 - ✚ ISOLATION GOWNS
 - ✚ GLOVES
 - ✚ HAND SANITIZER
 - ✚ CAVI WIPES
 - ✚ CLEANING PRODUCTS

✓ DRILL #2: DRESSING AND DRESSING OF PPE EQUIPMENT. EACH STAFF MEMBER ARE REQUIRED TO DEMONSTRATE PROPER DRESSING AND DRESSING OF PPE GEAR

6. IMPORTANCE OF CONSERVING PPE GEAR AND CONSEQUENCE OF USING IRRESPONSIBLY

- SOME EXAMPLES OF IMPROPER USE OF PPE GEAR
- TIPS FOR CONSERVING SUPPLY

CORRECTIONS STAFF PPE TRAINING AND DRILLS – CONTINUING EDUCATION

- CONSEQUENCES OF MISUSE AND ITS IMPACT ON THE SAFETY OF CORRECTIONS
- 7. CHANGES TO COVID 19 PRECAUTIONS DOCUMENTS**
- SCREENING
 - COURT MOVEMENT
 - MEDICAL APPOINTMENTS
 - INMATES PERSONAL AFFECTS
 - CLEANING CORRECTIONS VEHICLES
 - OUTSIDE ACTIVITY – MAINTAINING SOCIAL DISTANCING/HAND HYGIENE
 - GROUP DISCUSSION
- 8. DESIGNATED DROPLET/CONTACT AREAS FOR THE FACILITIES**
- IDENTIFYING EACH AREA
 - RESTRICTIONS OF ITEMS
 - COMMON MISTAKES
 - IMPORTANCE OF ISOLATION TROLLEYS AND REASON TO ENSURE ADEQUATE STOCK
 - CLEANING/DISINFECTING AREA
- 9. WHAT CORRECTIONS STAFF CAN DO TO PROTECT THEMSELVES AND THEIR FAMILIES**
- AWARENESS AND UNDERSTANDING OF COVID 19
 - SOCIAL DISTANCING AND HAND HYGIENE
 - UNDERSTANDING DROPLET/CONTACT PRECAUTIONS
 - BEING PREPARED
 - ✚ ENSURING CHANGE OF CLOTHES/TOILETTRES AVAILABLE IN CASE
 - ✚ STEPS TO TAKE IN CASE OF EXPOSURE
 - ✚ NUNAVUT RESOURCES








✓ **DRILL #3: NEW INTAKES ARRIVING TO THE FACILITY: EACH STAFF MEMBER ARE REQUIRED TO DEMONSTRATE THEIR UNDERSTANDING OF THE PROCESS**

✓ **DRILL #4: INTERACTIONS WITH AN INMATE ON ISOLATION; WASHROOM, MEALS, MEDICATION ADMINISTRATION, FRESH AIR, PHONE CALLS; EACH STAFF MEMBER ARE REQUIRED TO DEMONSTRATE THEIR UNDERSTANDING OF EACH ASPECT.**

✓ **DRILL #5: TAKE DOWN – USE OF PPE GEAR AND RISK: DISCUSSION ON REQUIREMENTS DURING CELL EXTRACTION AND TAKE DOWN SITUATIONS.**

10. QUESTIONS

RESOURCES PROVIDED TO CORRECTIONS STAFF

-  NUNAVUT'S PATH: Moving forward during COVID 19
-  GLOBE AND MAIL ARTICLE: Canadian prisons in the time of COVID 19: Recommendations for the pandemic and beyond
-  CORRECT SEQUENCE OF PUTTING ON AND REMOVING PERSONAL PROTECTIVE EQUIPMENT
-  PPE-HOW TO PUT ON
-  PPE-HOW TO REMOVE
-  PPE-TIPS
-  STAFF RESOURCE HAND OUT

CORRECTIONS STAFF PPE TRAINING AND DRILLS – CONTINUING EDUCATION

CORRECTIONS STAFF RESOURCE HAND OUT

When looking up the most up to date and accurate research-based information related to COVID 19 search reputable resources such as The Government of Canada website and The World’s Health Organization website.

Correctional Facilities are a vulnerable environment and at high risk for the spread of COVID 19. If you are sick or feeling unwell **DO NOT** go to work.

Government of Nunavut COVID 19 media updates occur every Monday at 11am on CBC Nunavut Live

Updated information on COVID 19 in Nunavut and Nunavut’s Pathway visit <https://www.gov.nu.ca/>

Resource	Contact information
Qikiqtani General Hospital	867 975 8600
QGH appointments	867 975 8600 ext 5425
Public Health –General inquiries	867 975 4800
Public Health – COVID 19 related	867 975 4811/4814
COVID 19 Hotline	867 975 8601 10am – 6pm
Travel related questions	867 975 8601 830am – 530pm
Travel requests/isolation hubs	Email: CPHOtravelrequests@gov.nu.ca



CORRECTIONS HEALTH CARE PROCEDURES FOR RECEIVING A NEW INTAKE

As per the Director of Corrections, all new intakes arriving at all Nunavut facilities are now required to complete a strict 14-day isolation period. The only exception is for clients arriving from another Nunavut facility. This is related to the current COVID 19 outbreaks identified in Iqaluit and will stay in place until the Director indicates changes.

Corrections has implemented “*Exit testing*” for all clients on the mandated 14-day isolation period. New intakes will be swabbed for COVID 19 on **day 1** of intake and again on **day 10**. They will remain in a mandated 14-day isolation even if these COVID 19 swabs are negative. If swabs are positive contact CPHO on call for further direction.

Clients on isolation require a daily symptom screening assessment as well as a temperature screen using a tympanic thermometer. See below the process to follow for the initial assessment as well as daily screening required:

Arrival of Intake

- Once the client has arrived through the A & D process all clients require a COVID screening completed by the Nurse. This screening is to be completed at intake. The screening Nurse is to attend the intake area. The client is to maintain a mask during this procedure and maintain social distancing from the Nurse. Mask and gloves are required for the screening Nurse.
- The screening questions are to be asked to the client first. If the answer is no to all screening questions, the nurses can proceed with vitals without any additional PPE equipment.
- Once assessment is complete proper doffing procedures are to be followed and hand hygiene complete.
- If the client answers yes to any of the screening questions a full set of vitals is still required. To minimize exposure full PPE attire is required, which includes surgical mask, face shield, isolation gown and gloves. The Nurse should avoid bringing paper or any item that can not be disinfected into the space during this time to avoid any potential contamination.
- Once assessment is complete proper doffing procedures are to be followed and hand hygiene complete.

Medical Intake Assessment for Clients requiring 14 Day Isolation

- To avoid any potential contamination, a partial medical intake assessment is to be complete.
- All questions included on this medical intake assessment form should be asked to the client if privacy allows. The Nurse is to maintain 6 feet of distance, don a mask and gloves. The client is to maintain masking during this procedure.
- If privacy is a concern focus on the most important aspects of the assessment ensuring to obtain, allergies, TB history and symptom screening, medication history as well as any pertinent medical history. Mental health is still crucial and pointed questions should be asked to rule out the presence of active psychosis or active suicidal thoughts or intent.

- To reduce the risk of cross contamination, intake consent forms are to be delayed until after the 14-day isolation period has ended and a full medical intake assessment is to be completed.
- If the COVID 19 screening yielded no concerns, then the partial medical intake assessment can occur simultaneously after the COVID 19 screening.
- If a client had answered yes to any of the screening questions and 6 feet distance can not be obtained, nurses are required to wear full PPE attire.

Daily Symptom Screening Assessment

- All clients on a 14-day isolation, are required to be assessed daily by nursing staff. This includes a screening for development of symptoms and a daily temperature screen.
- This can be done through the hatch of the cell. The client must don a mask prior to opening the hatch. Nurses are required to wear a mask and gloves. If possible, temperature screening can be completed through the hatch using a tympanic thermometer.
- If a more advanced assessment is required such as full set of vitals or physical assessment, the nurse will follow the below criteria:
 - ✓ If the client answered yes to any of the initial screening questions or develops any symptoms, full PPE attire is required for all assessments that require contact.
 - ✓ If the client answered no to all the initial screening questions and remains asymptomatic, masks and gloves are required.
 - ✓ All assessments require the client to always remain masked.

COVID 19 Swabs

Exit testing is initiated by Dr Patterson on all clients requiring a 14-day isolation in Corrections. A swab is to be collected on day 1 and day 10 of the client's isolation time. The nurse is to follow the ***Nasopharyngeal Swab Procedure in appendix A of the Department of Health's COVID 19 Protocol.***

Nurses are to wear full PPE attire during collection of this swab whether the client is symptomatic or not. The nurse is to ensure the swab is labelled with the client's name (first, last), date of birth and health care card. Ensure the lab requisition is filled out with the same information. The ordering physician should indicate Dr M Patterson and respiratory PCR is checked on this requisition. COVID 19 swab can be added under this on the form. A Person Under Investigation Assessment Form (PUI) is not required for routine exit testing with any client who reported no to the initial screening question and remains asymptomatic.

For swabbing criteria outside of routine exit testing, the nurse is to refer to the ***Healthcare Provider Flowchart in appendix D of the Department of Health's COVID 19 protocol.*** If any client reports any symptoms that indicate testing, the nurse is to immediately move the client to an isolated area. A COVID 19 swab is to be completed and sent to the lab under Dr M Patterson. The isolation area of the client is to be identified as a designated/contact precautions area and required equipment placed outside the cell. A PUI form is to be completed and emailed to cdsurveillance@gov.nu.ca. The client is to remain isolated until cleared by the Regional Communicable Disease Coordinator (RCDC) and requires daily monitoring.

If the client who developed symptoms was housed with other clients, those clients will be isolated in the area they are currently in. The cell is to be identified as a designated/contact precautions area and

required equipment placed outside the cell. The nurse is to contact the CPHO on call for further direction. Discussion with the Warden of the facility should be consulted to see if staffing allows for 1 staff to interact with these clients per shift to reduce the risk of cross contamination or if feasible these clients can be moved to a more equipped isolation area.

It is the responsibility of the nursing staff to ensure all adequate signage and equipment is available for all clients under isolation. Resources have been made available for staff for reference. If any mistakes are noted by the nurse in the interactions with this client, the staff are to be notified immediately and the IC on shift to ensure correction of behaviour.

Mental Health Assessment

Mental health needs will be accommodated during isolation when feasible depending on behaviour of the client and presence of other clients. Mental health issues can increase during isolation and living through the COVID 19 pandemic. Clients can have increase in anxiety and worry. To minimize movement or unnecessary exposure mental health visits can be accommodated through telephone consults and when available, virtual meeting between the client and mental health clinician.

- Clients will still be provided access time during isolation. To ensure privacy, clients with mental health concerns or requests to speak with the clinician can arrange telephone consults with the mental health clinician and be granted access for same. The client will have to ensure a mask remains throughout their access time and thorough disinfecting of all surfaces and telephone occurs after session.
- When available, a tablet will be used for team meetings between the client and mental health clinician. If the client is alone in an isolation cell and behaviour permits, they can be provided the tablet in the cell for privacy throughout the session. The tablet must be thoroughly disinfected following session.
- If the client has roommates during this time, access can be granted for privacy. Ensuring masking is maintained and thorough disinfecting of all services occur after the session.



CORRECTIONS HEALTH CARE PROCEDURES FOR RECEIVING A NEW INTAKE

As per the Director of Corrections, all new intakes arriving at all Nunavut facilities are now required to complete a strict 14-day isolation period. This is related to the current COVID 19 outbreaks identified in Iqaluit and will stay in place until the Director indicates changes.

Corrections has implemented **“Exit testing”** for all clients on the mandated 14-day isolation period. New intakes will be swabbed for COVID 19 on **day 1** of intake and again on **day 10**. They will remain in a mandated 14-day isolation even if these COVID 19 swabs are negative. If swabs are positive contact CPHO on call for further direction.

Clients on isolation require a daily symptom screening assessment as well as a temperature screen using a tympanic thermometer. See below the process to follow for the initial assessment as well as daily screening required:

Arrival of Intake

- Once the client has arrived through the A & D process all clients require a COVID screening completed by the Nurse. This screening is to be completed at intake. The screening Nurse is to attend the intake area. The client is to maintain a mask during this procedure and maintain social distancing from the Nurse. Full PPE attire is required throughout this process.
- Please refer to the **Admission & Discharge Officer, Infection Control Protocol**.
- The screening questions are to be asked to the client first followed by a temperature screening.
- Once this is complete the A&D officer will proceed with their process.
- Once the A&D process is complete and the client is placed in the isolation cell, the Nurse will proceed to the cell to complete the assessment including full set of vitals.
- The day 1 COVID swab should be collected at this time.
- Once assessment is complete proper doffing procedures are to be followed and hand hygiene complete.

Medical Intake Assessment for Clients requiring 14 Day Isolation

- To avoid any potential contamination, a partial medical intake assessment is to be complete.
- All questions included on this medical intake assessment form should be asked to the client if privacy allows. The Nurse is required to be in full PPE attire for this process.
- If privacy is a concern focus on the most important aspects of the assessment ensuring to obtain, allergies, TB history and symptom screening, medication history as well as any pertinent medical history. Mental health is still crucial and pointed questions should be asked to rule out the presence of active psychosis or active suicidal thoughts or intent.
- To reduce the risk of cross contamination, intake consent forms are to be delayed until after the 14-day isolation period has ended and a full medical intake assessment is to be completed.

Daily Symptom Screening Assessment

- All clients on a 14-day isolation, are required to be assessed daily by nursing staff. This includes a screening for development of symptoms and a daily temperature screen.
- This can be done through the hatch of the cell. The client must don a mask prior to opening the hatch. Nurses are required to wear a mask and gloves. If possible, temperature screening can be completed through the hatch using a tympanic thermometer.
- If a more advanced assessment is required such as full set of vitals or physical assessment, the nurse is required to:
 - ✓ Don full PPE attire prior to the assessment.
 - ✓ All assessments require the client to always remain masked.

COVID 19 Swabs

Exit testing is initiated by Dr Patterson on all clients requiring a 14-day isolation in Corrections. A swab is to be collected on day 1 and day 10 of the client's isolation time. The nurse is to follow the ***Nasopharyngeal Swab Procedure in appendix A of the Department of Health's COVID 19 Protocol.***

Nurses are to wear full PPE attire during collection of this swab whether the client is symptomatic or not. The nurse is to ensure the swab is labelled with the client's name (first, last), date of birth and health care card. Ensure the lab requisition is filled out with the same information. The ordering physician should indicate Dr M Patterson and respiratory PCR is checked on this requisition. COVID 19 swab can be added under this on the form. A Person Under Investigation Assessment Form (PUI) is not required for routine exit testing with any client who reported no to the initial screening question and remains asymptomatic.

For swabbing criteria outside of routine exit testing, the nurse is to refer to the ***Healthcare Provider Flowchart in appendix D of the Department of Health's COVID 19 protocol.*** If any client reports any symptoms that indicate testing, the nurse is to immediately move the client to an isolated area. A COVID 19 swab is to be completed and sent to the lab under Dr M Patterson. The isolation area of the client is to be identified as a designated/contact precautions area and required equipment placed outside the cell. A PUI form is to be completed and emailed to cdsurveillance@gov.nu.ca. The client is to remain isolated until cleared by the Regional Communicable Disease Coordinator (RCDC) and requires daily monitoring.

If the client who developed symptoms was housed with other clients, those clients will be isolated in the area they are currently in. The cell is to be identified as a designated/contact precautions area and required equipment placed outside the cell. The nurse is to contact the CPHO on call for further direction. Discussion with the Warden of the facility should be consulted to see if staffing allows for 1 staff to interact with these clients per shift to reduce the risk of cross contamination or if feasible these clients can be moved to a more equipped isolation area.

It is the responsibility of the nursing staff to ensure all adequate signage and equipment is available for all clients under isolation. Resources have been made available for staff for reference. If any mistakes are noted by the nurse in the interactions with these clients, the staff are to be notified immediately and the IC on shift to ensure correction of behaviour.

Mental Health Assessment

Mental health needs will be accommodated during isolation when feasible depending on behaviour of the client and presence of other clients. Mental health issues can increase during isolation and living through the COVID 19 pandemic. Clients can have increase in anxiety and worry. To minimize movement or unnecessary exposure mental health visits can be accommodated through telephone consults and when available, virtual meeting between the client and mental health clinician.

- Clients will still be provided access time during isolation. To ensure privacy, clients with mental health concerns or requests to speak with the clinician can arrange telephone consults with the mental health clinician and be granted access for same. The client will have to ensure a mask remains throughout their access time and thorough disinfecting of all surfaces and telephone occurs after session.
- When available, a tablet will be used for team meetings between the client and mental health clinician. If the client is alone in an isolation cell and behaviour permits, they can be provided the tablet in the cell for privacy throughout the session. The tablet must be thoroughly disinfected following session.
- If the client has roommates during this time, access can be granted for privacy. Ensuring masking is maintained and thorough disinfecting of all services occur after the session.

Appendix C: COVID-19 Person Under Investigation (PUI) Assessment Form

Date & Time of Assessment		Medical emergency? Y N
Assessment completed by (check):	Phone In person	Client sought healthcare? Y N
For calls made by caller on behalf of pt: Name & relationship to pt		
Patient name Last, First		
DOB (dd-mmm-yyyy)		Male Female Other
NU HCN# Chart #		
Patient phone number(s) (or # where HCP can leave message)		
Patient home address including community and house number		
TRAVEL HISTORY		
Has the patient returned from within Canada or International in the last 14 days?	Yes No	Visited known high-risk locations? Specify if yes. Yes eg. gathering with known case. No
Travel History Include travel dates and city/country. Details (flights, hotels, etc) for cases go on page 2.		
COVID-19 Vaccination Status	Received one dose	Eligible and not vaccinated
Vaccine name:	Received two doses	Not eligible
CONTACT OF A CONFIRMED CASE		
Contact of a probable/confirmed case? Check. Specify if Yes.	Yes	No Not asked
Date of most recent contact	Specify:	
SYMPTOMS		
Symptomatic?	Yes	No Unknown
Date of Onset (dd-mmm-yyyy)		
Symptoms Check from list, add others if not listed. Please put details of cough or other symptoms as relevant in additional notes below	Fever New Cough	Worsening Cough Shortness of Breath Sore Throat Congestion
Vulnerable patient. Check	Age (> 60 years)	Immunocompromised Co-morbidities
Specify co-morbidities. Check or write in notes	Heart Disease Lung Disease Pregnancy	Cancer Diabetes
Number of people in household		
Vulnerable household members	Yes	No
Healthcare provider Specify occupation and place of work	Yes	No
Place of employment		

Appendix C: COVID-19 Person Under Investigation (PUI) Assessment Form

Patient name:	Patient DOB:
RECOMMENDATIONS:	
Follow flowchart and COVID-19 Protocol to determine precautions and testing guidance	
Testing Indicated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Consult RCDC (who will work with TCDS and PHO) RCDC recommendation:
If testing indicated:	<input type="checkbox"/> NP swab done (for in person visits) Date: _____ <input type="checkbox"/> NP swab by home visit - arranged by CHN (in communities) <input type="checkbox"/> NP swab to be arranged by RCDC for phone consults <input type="checkbox"/> If indicated as per protocol – phone notification to PHO on-call (3rd # listed at 867-975-5772)
Precautions Indicated	<input type="checkbox"/> Self-Monitor - Dates: _____ to _____ or until symptomatic (then immediately contact HCP) <input type="checkbox"/> Self-Isolate with Health Care Provider monitoring 3,7,14 days Dates: _____, _____, _____ AND until cleared by RCDC <input type="checkbox"/> Isolate with Health Care Provider monitoring daily Dates: _____ to _____ AND until cleared by RCDC <input type="checkbox"/> No precautions indicated – provide education (including reminder on self-monitoring and physical distancing)
Additional Notes (e.g. symptom, travel or contact information): _____ _____ _____ _____ _____	
Follow-up Checklist of initial health education advice to give to client (see protocol for more details): Inform client that public health team will contact them with more information and guidance. Inform client not to leave home or have others visit and answer any questions (see script). Provide advice regarding hand hygiene and respiratory etiquette. Ask if they have enough food and supplies on hand. Consider family services referral as needed. Advise to seek medical attention if symptoms worsen or in medical distress. Provide COVID19 isolation fact sheet and other documents* (Click here to access fact sheet)	
Completed by (print name, signature and designation)	
Reporting HCP phone number	
Scan and email form immediately to RCDC and cdsurveillance@gov.nu.ca. Can upload to meditech if feasible. After hours, call PHO on-call for any concerns, any probable / confirmed case results, as well as any PUI with hospitalization or international travel.	

Note: this form is intended to be used for persons under investigation including symptomatic individuals and high-risk contacts of COVID-19 cases. There is a version of the form in Meditech that can be filled out instead if preferable. Abbreviations: PUI=person under investigation, PHO = Public Health Officer, HCP= health care provider, RCDC = Regional Communicable Disease Coordinator, DOB=date of birth, TCDS=Territorial Communicable Disease Specialist, OOT=out-of-territory, Epi=epidemiologist.

* Including COVID-19 fact sheet, Self-isolation fact sheet, and daily monitoring guidance.



STEPS FOR SCREENING AT ENTRY

- **The screener should don a new pair of gloves prior to screening. Masks are mandatory.**
- **Ensure to maintain 6 feet between yourself and the person to be screened. Masks are mandatory.**
- **Ask all questions identified on the COVID 19 screening questionnaire ensuring the answer is received for each question prior to proceeding to the next question.**
- **Observe hand hygiene for a minimum of 20 seconds.**
- **Check infrared temperature screening last. Ensure the thermometer is disinfected after each use.**
- **Once the screening is complete the screener is to remove gloves and perform good hand hygiene.**
- **Record screening in electronic record.**
- **Area should be paper free (Other than required documents)**
- **Area should be clean and tidy and free of any unnecessary items.**
- **Hand sanitizer, a box of surgical masks, disinfecting wipes and a box of gloves (size appropriate for the screener) should be always made available.**



Department of Justice COVID 19 Facility Precautions Isolation Requirement Changes

August 13, 2020

Effective immediately, as per the Director of Corrections, the following isolation requirement changes have been made for all Correctional Facilities.

New Intakes from within Nunavut

Inmates arriving for intake into any Correctional Facility within Nunavut no longer require a mandatory 14-day isolation.

The process for new intakes arriving into a facility will be as follows:

- The inmate must be fitted with a surgical mask prior to entry into any facility. Inmates will be required to perform hand hygiene on arrival. Once this has been completed, an intake will be done based on the individual facility A&D process. They will be placed in an intake/ISO cell until assessed by the nursing team.
- A COVID 19 screening will be completed on the inmate by the nursing team. If the inmate is asymptomatic, he will be cleared for placement.
- Daily monitoring of the inmate and screening for development of any COVID 19 related symptoms will be completed by the nursing team for a period of 14 days.
- If symptoms develop the inmate will be fitted with a surgical mask and moved immediately to a designated droplet and contact area. The nursing team will contact Public Health for further direction.

Court Movements in Iqaluit

Court services has reopened as of July 7th, 2020. Corrections has made the decision that inmates who are attending court in Iqaluit must wear surgical masks. Surgical masks are the only masks currently available. These will be used until corrections has enough stock of hand made masks for use.

- Inmates will be fitted with a mask prior to leaving the facility.
- Sheriff's will be subject to the screening process prior to entry into the facility.
- Inmates are encouraged to keep the mask on throughout the court proceedings until returned to the facility.
- The inmate must perform hand hygiene on return.
- No COVID 19 screening or nursing assessment is needed for these inmates.

Community Court Movements within Nunavut Communities

Community Court Circuits have resumed within Nunavut. Inmates will be transported to community court via RCMP. RCMP have COVID 19 protocols in place to protect the safety of inmates. For inmates returning from community court the following process will occur:

- The inmate must be fitted with a surgical mask prior to entry into any facility. Inmates will be required to perform hand hygiene on arrival. Once this has been completed, an intake will be done based on the individual facility A&D process. They will be placed in an intake/ISO cell until assessed by the nursing team.
- A COVID 19 screening will be completed on the inmate by the nursing team. If the inmate is asymptomatic, he will be cleared for placement.
- Daily monitoring is not required to be completed once the inmate returns from community court, but the inmate will be advised to report any symptoms that develop to the nursing team.

New Intakes from Outside of Nunavut

Inmates returning from outside of Nunavut will only be accepted if the following has been validated prior to transfer:

- The transferring facility must be COVID 19 free for a minimum of 28 days.
- A COVID 19 screening must be completed on the inmate and received prior to transfer.
- Transportation of the inmate must be from the sending facility to the airport then to the North with no stops or deviation on route.
- Transport Canada guidelines must be adhered to whether the inmate is transferred via RCMP or Commercial flight.

Once the inmate arrives to the accepting facility within Nunavut the following process will occur:

- The inmate must be fitted with a surgical mask prior to entry into any facility. Inmates will be required to perform hand hygiene on arrival. Once this has been completed, an intake will be done based on the individual facility A&D process. They will be placed in an intake/ISO cell until assessed by the nursing team.
- A COVID 19 screening will be completed on the inmate by the nursing team.
- If the inmate is asymptomatic and there was no incident during transport no isolation period is required, and the inmate can be cleared for placement. Daily monitoring of the inmate and screening for development of any COVID 19 related symptoms will be completed by the nursing team for a period of 14 days.
- If an incident occurred during transport, then the inmate will be required to complete a 14-day isolation period.

If a positive COVID 19 infection is identified within Nunavut, then the Isolation requirements of the facilities will be reassessed and changed accordingly.

General

- Entrance to all facilities is no longer restricted but requires screening and masks are mandatory.
- In person visitation for all Iqaluit facilities can resume if a physical barrier is present in the facility. All visitors will be required to complete the screening and maintain masking throughout the visit. Contact visits will not be permitted at this time. Exceptions to this can be made on a case-by-case bases, in collaboration between the Director, Facility Warden and COVID Lead Nurse.
- Outside activity at all facilities will resume. Masks for staff and clients are mandatory. Physical distancing and hand hygiene is to be always practiced. Direct contact with the Public should be avoided during these activities.
- Isolation requirements for new intakes have changed for Iqaluit facilities. Clients arriving from within the territory will no longer require isolation if there are no concerns voiced after the COVID screening is completed by a member of the medical team. PPE requirements for A&D for these clients arriving is a surgical mask and gloves. An arriving client must always maintain a mask until medically cleared by a Nurse. Clients arriving from outside of the territory apart from the NWT will require isolation. Clients arriving from outside the territory must be received with full PPE. Clients who are vaccinated will be swabbed and if negative, can be then released to the general population. Clients who are not vaccinated will require a 7-day isolation with swabbing on day 1 and day 7 prior to being cleared for the general population.
- Outside activity at all facilities will resume. Masks for staff and clients are mandatory. Physical distancing and hand hygiene is to be always practiced. Direct contact with the Public should be avoided during these activities.
- Staff pick ups/drop offs will no longer be required.
- Outside employment can resume outside of Corrections other than health-related positions where direct contact with possible COVID cases can occur such as paramedics or hospital staff. Employees wishing to resume their employment outside of Corrections must provide proof of full vaccination status to the Corrections COVID Lead Nurse.
- Surgical masks are mandatory for all staff entering the facility.
- Screening is longer required for staff. Screening is however required for all personnel, visitors, and contractors prior to entry into the facilities; Screening questionnaire, observation of hand hygiene followed by infrared temperature reading. Screeners are to maintain 6 feet throughout this process, wear a surgical mask, eye protection and gloves. Gloves are to be changed after each screening. Paper is prohibited. Documentation is to be completed on an electronic log sheet.
- Correctional staff are expected to follow all regional CPHO guidelines.

Delta

- Delta unit is now open for placement of clients and is considered a clean unit. This unit is to operate as per normal operating procedures.
- Staff working in this unit must wear a surgical mask.
- Clients are responsible for cleaning this unit. Deep cleaning should be done twice per shift. High touch areas should be disinfected a minimum of 4 times per shift.
- Social distancing should be encouraged in this area especially during mealtimes and leisure time.

- Client movement out of this unit into the secure hallway should be minimum.
- Prior to exiting the unit clients are to perform hand hygiene.
- Staff working in this unit should not enter Flex.
- Medication times are to be adhered to. Clients are to come to the medication hatch at designated times through 163 only.

Flex

- The Flex unit has been designated the isolation unit that houses new intakes who require isolation.
- Capacity of this unit varies. There are 6 cells.
- Co horting must be avoided, if possible, as per CPHO. If co horting is required related to space only clients arriving on the same day can be housed together.
- Entry into this unit requires PPE.
- Staff working in this unit must wear PPE attire within the unit.
- Signage, infection control trolleys and biohazard bins are placed throughout the unit.
- The area is to be free of all unnecessary items including paper or fabric products.
- Staff are responsible for all cleaning in this unit.
- Masks are mandatory for clients prior to opening the hatch or door of the cell.
- Clients must don masks prior to allowing access. Masks are to be always maintained. Clients are to maintain 6 feet from staff and not interact with other cells. Failure to follow this and access is to be prohibited.
- Laundry: Clean laundry is to enter this unit in a set placed and tied in a clear bag. Once it enters it is to be given to the client immediately.
- To remove dirty laundry, it is to be placed in a clear bag, tied, and moved immediately for laundry services.
- To remove biohazard from the unit, secure biohazard bag once $\frac{3}{4}$ full. Cover with a clean biohazard bag. Remove PPE at designated exit. Don a new surgical mask and gloves. The biohazard can then be removed from the unit and placed in the designated area.
- Meals are to be provided to each client in this unit with disposable trays and utensils.
- The meals are to be provided by a 2 staff approach. 1 staff is to don PPE attire and enter the unit. Another staff is to remain in the secure hallway and pass items requested to the flex officer. This officer is not to enter the unit nor does the meal trolley.
- Medication is to be given to clients on designated medication times by the Nurses. This will be done through the hatch.
- Daily assessment of each client is to be done by the Nurse including temperature checks with a tympanic thermometer.
- It is the responsibility of the medical team to ensure all required PPE attire for staff and infection control trolleys are stocked for staff use.
- Movement out of this unit for clients is restricted.
- No sharps will be provided to the clients during this placement such as razors, nail clippers or hair clippers.

Charlie

- Charlie unit is to operate as per normal operating procedures.
- Staff working in this unit must wear a surgical mask.
- Clients are responsible for cleaning this unit. Deep cleaning should be done twice per shift. High touch areas should be disinfected a minimum of 4 times per shift.
- Social distancing should be encouraged in this area especially during mealtimes and leisure time.
- Client movement out of this unit into the secure hallway should be minimum.
- Prior to exiting the unit clients are to perform hand hygiene
- Staff working in this unit should not enter either Flex.
- Medication times are to be adhered to. Clients are to come to the medication hatch at designated times through 167 only.

Makigiarvik

- Maki is to operate as per normal operating procedures.
- Staff working at Maki must wear a surgical mask.
- Clients are responsible for cleaning this unit. Deep cleaning should be done twice per shift. High touch areas should be disinfected a minimum of 4 times per shift.
- Client movement out of these units into the secure hallway should be minimum.
- Prior to exiting the unit clients are to perform hand hygiene
- Social distancing should be encouraged in this area especially during mealtimes and leisure time

Biohazard Removal

- Please follow Warden's instructions on Biohazard waste disposal.

A&D Process

- Please follow the procedure for A&E during an outbreak.

Transportation of Symptomatic or Positive Clients

- If a client develops symptoms in either the Charlie, Delta, or Maki units, they will be moved immediately to an empty isolation cell (Flex). The Nurse on duty will inform the IC and movement will take place.
- If the client is in Charlie or Delta. Ensure a mask is in place, hand hygiene is to be performed by the client and the client is to don gloves. Client will be escorted by the staff to the isolation unit.
- If transportation from Maki to BCC is required 1 staff and the nurse is to go to Maki. They are to don PPE.
- Staff working in the unit are to get the client and bring to the secure hallway. They are to perform hand hygiene and don gloves. They are to be transferred in the white van. Symptomatic clients are to enter through 115.
- Please follow procedure for disinfecting corrections vehicles following transport.

Cleared Clients from Flex

- Once the clients have cleared isolation they will be moved to Charlie, Delta or Maki pending classification.
- They are to leave their assigned flex cell. No items can accompany the client to the clean unit.
- They are to shower in Flex shower and change into a new set of institutional clothing and mask. This includes footwear. Once this has been completed a staff will escort them through 115 and they will enter the front door and placed in Charlie

Cleaning of Cells After Client Movement

- If a client has tested positive or has become symptomatic and movement had to occur, thorough cleaning of the client's cell is to be done.
- This includes all clothing and bedding. This is to be placed in a clear bag, secured, then moved for laundry services.
- All items that can be disinfected are to be thoroughly wiped and placed in a clear bag and secured.
- All items unable to be disinfected which includes paper products are to be disposed of in a biohazard bin.
- Walls, floors, and all surfaces are to be thoroughly disinfected including the mattress.
- If staff identify a tear in the mattress, then the mattress should be disposed of in a biohazard bag.

Lawyer Calls or Phone Court BCC

Lawyer calls/phone court can be done in the phone booth if required for a client. No matter which unit the client comes from the same procedure should be in place. Prior to exiting the unit, the clients must perform hand hygiene and don gloves. Masks are mandatory for the flex unit only. They can be placed in the phone booth ensuring they understand that they can not remove the mask or gloves. Once they are done, they are to be escorted back to their unit. Gloves are to be removed and hand hygiene performed. The phone booth must be thoroughly disinfected after use including all surfaces, door, bench, and phone.

Maki – Lawyer calls/phone court can be done at the designated program room. Please ensure area is disinfected after each use.

Mechanical Restraints & Client Movements

In cases where mechanical restraints are required for the safe & secure movement of clients, staff will clean the cuffs with disinfecting wipes and then dry them before going onto the unit and applying on the client. Once the movement has been completed, and immediately upon removing the restraints from the client, staff are to clean them again using disinfecting wipes and ensuring they are dried.

Assessment

Clients requiring to be placed on assessment, will be housed in one of the I units in intake.

Medical Care

It is the Correction's medical team's responsibility to ensure all up to date infection control guidelines are in place and being followed. As Corrections remains a vulnerable sector and isolation requirements will be ongoing depending on the departure location of the client, as well as a critical shortage of Nurses within Nunavut, the CPHO has recommended the following be implemented within staffing.

1. All Nursing staff are encouraged to be vaccinated.
2. Eliminate unnecessary face to face interaction among Nursing staff unless required for emergencies or necessary consultations. If 2 Nursing staff are on shift, 1 Nurse will be assigned BCC and 1 Nurse will be assigned Maki.
3. When Nursing staff need to work together, they MUST always wear the appropriate PPE required for location and situation.
4. Nursing staff are encouraged to take breaks separate and avoid interactions in any size group.
5. Only one Nurse should be assigned COVID lead to communicate with the Public Health team and CPHO to avoid miscommunication and follow a standardized approach. COVID Nurse Lead As requested by the office of CPHO, 1 Nurse has been assigned this role within corrections to minimize miscommunication and provide adequate guidelines throughout the outbreak. This nurse will be responsible for communicating directly with CPHO and Public health on all positive cases, recovery daily reviews, contact tracing, coordinating staff and client swabbing and tracking, as well as facilitating Moderna clinics. Other Correctional Nurses will report all suspected or positive cases to the COVID lead who will immediately communicate directly with the CPHO.

Assessments of clients from a clean unit require masking for both the Nurse and client. Assessments of clients on isolation should be done in flex with full PPE attire required by the Nurse.

Medical and dental appointments will continue. Escorting staff and clients are required to wear masks and to practice social distancing and good hygiene.

Physician visits can resume August 3rd, 2021. Community call forms and on call physician services should be utilized as per procedure and only clients requiring non urgent physician assessment should be added to the physician list, otherwise community call forms should be used.

Mental Health Services

Mental Health Services can resume face to face interaction for clients housed in clean units only. Spacing areas for assessments must allow for 6 feet distancing. Masks are mandatory for both Mental Health Clinicians and clients during same. Small office spaces that do not allow for adequate spacing should not be used. A program room will be made available for use at Maki for assessments and the program room in the rec area at BCC will also be available. The Mental Health Nurse and Elders Counsellor will communicate with the IC on shift to coordinate assessments and times for clients.

Mental health services will for clients on isolation will be accommodated. No face-to-face interactions will occur. All consults will be done via phone. The mental health nurse is to coordinate these consults with the IC and should correlate with access time to avoid any schedule conflict.



Department of Justice COVID 19 Facility Precautions

Isumaqsunngittikkuvik Young Offenders

Staff

Please ensure staff are self monitoring at home for signs and symptoms of COVID 19. Staff who are sick should not be attending the facilities for work. These centers are vulnerable and at high risk if COVID 19 is introduced. Currently the biggest risk to these areas are staff. Entrance to these facilities is strictly monitored by staff. Currently there is a 4-step screening process for entrance into the facility. This screening process applies to all staff, visitors, contractors, maintenance, and delivery personnel.

1. COVID 19 screening questionnaire

If a person answers "YES" to any of these questions entry into the facility is prohibited.

- Do you have a cough (with or without shortness of breath)?
- Do you have a fever?
- Do you have a sore throat?
- Do you have a runny nose, nasal congestion, or sneezing?
- Do you have joint pain or muscle aches?
- Have you been feeling unwell or have unusual tiredness?
- Have you travelled outside of Nunavut in the last 14 days?
- Have you had any contact with a person who has travelled outside of Nunavut in the last 14 days who has become sick (cough, fever, sneezing or sore throat)?
- Have you had close contact with a person who has been tested for COVID 19 (results pending) or has been diagnosed with COVID 19?
- Have you been tested for COVID 19 or have been asked by Public Health to self isolate for 14 days?

2. Observe hand hygiene for a minimum of 20 seconds

If the answer to all questions are "NO" then staff need to move onto the next step, observing hand hygiene for proper technique and timing for a minimum of 20 seconds.

- Please have the person wait until the screening questionnaire is complete.
- Staff should observe and time hand hygiene for a minimum of 20 seconds.
- This should not be done during the questions as staff will be unable to properly visualize and time appropriately.

3. Ensure mask is applied properly if required for entering the facility.

- All personnel entering the facility MUST wear a mask. The only exception is Department of Justice employees who have completed all steps.
- Staff need to ensure the mask is properly applied prior to the personnel entering the facility.

4. Infrared temperature check

- Temperature screening using an infrared thermometer has been added based on recommendations from Corrections Canada.

- This is the last step for staff to complete. If the temperature is 37.7 or less entrance is permitted. If the temperature is 37.8 or higher entry is prohibited.
- To ensure the safety of the staff completing screening this step MUST be done last.

All entrances of CRC, NWCC and YO are equipped with purell stations, signage, a box of masks and gloves.

It is crucial that staff continue to self monitor for any symptoms to decrease the chance of COVID 19 entering the facilities.

Self Monitoring

It is imperative that staff and inmates are self monitoring for symptoms daily. If any of the above-mentioned symptoms develop while on shift the staff should put a mask on, contact duty and once relieved, immediately leave work. They are encouraged to contact Public Health for instruction and possible testing.

Staff Education

Staff within the facilities are provided with training to ensure compliance of all Public Health and Corrections Canada recommendations. This will be continuing throughout the next coming months to avoid compliancy. The following is available and mandatory for all staff.

- PPE equipment “Donning and Doffing” video.
- PPE training with drills.
- Hand hygiene mandatory online course and quiz.
- COVID 19 precautions for each facility
- Regular supervisor meetings to review any changes or recommendations

Good Hand Hygiene and Social Distancing

These are 2 of the most important things the staff and inmates can do to stop the spread of COVID 19. COVID 19 is a virus that is transmitted by droplet and contact from infected people. An infected person can shed the virus through coughing, sneezing, or contaminating surfaces such as phones and keyboards. The virus can live on surfaces for hours or days.

Good hand hygiene: All staff and inmates need to be diligent in practicing good hand hygiene and avoid touching their face. This can be accomplished through soap and water or sanitizer that is a minimum of 60% alcohol content.

Social distancing: All visitation have been cancelled except for emergencies. Activities that are occurring outside such as walking or recycling is occurring without contact with members of the public and ensuring social distancing is maintained. Within the facilities encouragement of social distancing should still occur. 2 meters of length is recommended.

Facility Precautions

As noted above there is a 4-step screening process for entry into any Corrections Facility. In addition to this, signage has been placed on the front entrance to advise staff and the public to the restrictions of entry to the facility.

- COVID 19 screening questionnaire
- Hand hygiene observation
- Mandatory masks if applicable
- Infrared temperature reading

The entry points of each facility is also equipped with the following.

- Hand sanitizer stations
- A box of surgical masks
- Gloves
- A waste bin
- Blue air unit – air purifier
- Signage

Signage for COVID 19 resources have been posted throughout the facilities to help educate staff and the inmates on COVID 19.

The following screening tools have been developed for use within the facilities with resources from Nunavut Public Health and Corrections Canada.

- COVID 19 screening questionnaire
- Initial inmate screening tool
- 14-day isolation, daily monitoring tool for inmates
- Weekly employee screening tool

Cleaning of the Facilities

All facilities have been directed to do a thorough cleaning with any of the approved products from the Health Canada website. A thorough cleaning should be done twice per shift. Cleaning schedule/routines have been provided to the facilities. More commonly touched surfaces such as counters, keyboards, doorknobs, light switches, and radio systems should be wiped down with hospital grade wipes at least 4 times per shift.

All unnecessary items should be removed from areas of high traffic such as common areas, control rooms and entry ways. COVID 19 can live on numerous surfaces and products for hours to days. Below is a list of items that should be removed or stored in a closed area.

- Clothes such as outer wear should be kept in dressers, closets, or lockers.
- Fabric items that are not able to be washed should be removed from common areas.
- Food and drink should be limited to kitchen/dinning area.
- Paper products. COVID 19 can survive on these products especially if wet. Remove all paper products. Laminate or cover in protective sheets when able.

Cleaning of Facility Vehicles

Vehicles should be cleaned thoroughly. General cleaning should be done once per shift if vehicle is not in use. After each use it should be thoroughly cleaned as well using a hospital grade wipe/cleaner.

Laundry Services

Laundry should be washed in hot water whenever possible. Normal laundry detergent available in the facilities is sufficient. Any contaminated clothing or clothing from an isolation area should be washed separately.

PPE Equipment

PPE stands for personal protective equipment. This equipment is needed in each center for staff and inmate protection against the spread of COVID 19. Each facility is equipped with the following items.

- Surgical/procedural masks
- Face shields (Important for instances when staff can encounter bodily fluids example spitting)
- Surgical or yellow gowns
- Gloves, available in all sizes. Nitrile, latex free
- Hospital grade disinfecting wipes. Example, Cavi wipes, Germicide
- Health Canada approved cleaning supplies. Example, Virex, Germosolve, Lysol, Bleach
- Hand sanitizing stations and easy access to hand sanitizer throughout the facilities
- An isolation cart/trolley for easy access of equipment

Hand Made Masks

In addition to the above listed equipment, hand made (non-medical) masks have been approved for use within the centers once available. These will be made available for staff and inmates throughout each facility. Once available staff will be issued 2-4 masks that will become part of their uniform for added protection.

These masks are to be worn by asymptomatic inmates under a 14-day isolation only. If symptoms are present that are consistent with COVID 19 or COVID 19 is confirmed the only approved masks are surgical masks.

Hand made masks need to be washed in hot water and normal detergent daily. When possible, masks should be washed separately from normal laundry.

Court Movements

Court services has reopened as of July 7th, 2020. Corrections has made the decision that inmates who are attending court must wear masks. Surgical masks are the only ones currently available. These will be used until corrections has enough stock of hand made masks for use.

- Inmates will be fitted with a mask prior to leaving the facility.
- Sheriff's will be subject to the screening process prior to entry into the facility.

- Inmates are encouraged to keep mask on throughout the court proceedings until returned to the facility.
- The inmate must perform hand hygiene on return.

Medical Appointments

Inmates attending any medical appointment outside of the facility must wear a mask. Surgical masks are to be worn at present until adequate stock of hand made masks are available. Mask wearing for staff is optional depending on their comfort unless transporting an inmate who is symptomatic, then masks are mandatory.

Dental Appointments

Dental services during COVID 19 is a higher risk activity. Related to these concerns, inmates and escorting staff must wear a mask when attending any dental appointments. Surgical masks are to be worn at present until adequate stock of hand made masks become available.

Outside Activity

Outside activity is limited at present. Walks, traditional activities, and recycling is occurring at select facilities. Ensure limited contact with the public occurs. Encourage social distancing and good hand throughout activities.

Designated Droplet/Contact Precaution Areas

Each facility should have a minimum of 2 areas that are reserved and designated as droplet and contact precautions. In the likelihood of multiple inmates needing isolation other areas should also be identified for use.

- A sign identifying the room as Droplet/contact precaution should be present.
- Donning and doffing instructions for PPE use should be present.
- An isolation trolley and biohazard waste bin should be located outside the door when in use.
- Any item that enters this room needs to be disinfected prior to returning to the floor. Items that can not be disinfected will be thrown out (books, paper etc). Items entering this room should remain in this room until isolation is complete except garbage.
- Only disposable cutlery, plates and cups will be used.
- Fans or humidifiers are not permitted for use in this room.
- Any garbage that is removed from this room must be placed in the biohazard waste bin.
- If in use, the door must always be closed.
- After isolation, the room must be thoroughly disinfected including all surfaces, walls, floor etc.
- During isolation daily disinfecting by the inmate should be encouraged.

Mandatory 14-day Isolation of New Inmates

The Department of Justice has mandated that all new inmates entering facilities **MUST** undergo a 14-day isolation period. This is in place to protect the staff, inmates, and facility from the potential exposure to COVID 19. The only facilities exempt from this rule currently is CRC, KIC and RIHF if inmates are coming from another facility within Nunavut and have a completed a COVID 19 screening form. Inmates coming from an institution outside of Nunavut will be required to complete a 14-day isolation period.

During this 14-day isolation period they will be assessed daily by the medical team. There is an exception to this 14-day isolation period if Nunavut remains COVID 19 free. On days 8-10, if the inmate remains asymptomatic the medical team can consult the CPHO to remove the inmate from the isolation period.

Young Offenders Designated Areas

Designated droplet/contact areas

ISO cell 159 has been designated as a droplet and contact room. This room should be used for all new inmates entering the facility. The isolation trolley is kept inside the cell when not in use and should be removed and placed just outside the door on the adjacent wall prior to the arrival of the new inmate.

Room 1 has been designated as a droplet and contact room. Inmates will be moved into this room once the medical assessment is complete in ISO cell 159.

Room 4 has been designated as a droplet and contact room.

Process of Arrival of a New Inmate into Young Offenders

The inmate will arrive via the front door with the RCMP. RCMP should **not** enter the facility. Staff should ensure the inmate puts on a mask prior to entering the facility. A box of masks is in the porch. Once the mask is on the inmate, they must perform good hand hygiene observed by staff. After these have been completed, the inmate should be immediately moved to ISO cell 159. Once the inmate is placed in the ISO cell, their clothes are removed, and the inmate is placed in baby dolls. Their street clothes will be placed in a bag by staff, ensuring gloves are worn. The clothes will be immediately washed in hot water with normal laundry detergent available at the facility. Staff must follow good hand hygiene after this has been done. The inmate is to wait in the cell until the Nurse arrives to clear them. The inmate can remove the mask if the door is closed and no staff is present. Do not open the door to the cell until the inmate has secured their mask.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Inmate Belongings on Arrival

When the new inmate arrives to the facility, until staff are ready to go through their personal belongings place the luggage in a large clear bag. Once ready to be searched have a garbage bag ready. All washable items place in a garbage bag. These items will be washed in hot water with normal laundry detergent that is available at the facility. All items that can be disinfected should be thoroughly wiped with Cavi wipes. Place these items in a clear bag and seal. Any paper products or items unable to be disinfected place in a clear bag and seal. Duffle bags or book bags should be washed as per laundry. Luggage that cannot be placed in the washer should be thoroughly wiped inside and out with Cavi wipes. Then place the luggage in a clear bag. The luggage should remain in this clear bag until the inmate is released or transferred.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask during this process.

Movement of Inmates to Designated Room for 14-day Isolation Period

The Nurse will assess the inmate in ISO cell 159. Once this assessment is done and there are no contraindications addressed by the nurse, the inmate will be cleared to be moved to room 1. The inmate must be agreeable to follow the infection control policies and shower immediately after being moved to room 1, for movement to occur. The infection control policies will be explained to the inmate by the Nurse.

Once they agree to this process, the inmate can be moved to room 1 by corrections staff. Ensure the isolation trolley and biohazard bin is outside of room 1 prior to moving the inmate. The inmate must always wear a mask when outside of a designated room and in the presence of staff. Once the inmate is moved to room 1 they must then shower. Ensure the following toiletries/clothing are present.

- Towel
- Face cloth
- Bedding (if approved by Nurse)
- Facility clothing
- Toothbrush and toothpaste
- Shampoo
- Body wash
- Deodorant

Interacting with an Inmate on 14-day Isolation

By placing an inmate on a 14-day isolation we are treating them as if they could potentially have COVID 19. Precautions should always be taken serious as a person can become symptomatic at any point. If symptoms arise the nursing staff will inform the IC and Duty. Staff should be aware of all infection protocols in place and follow them strictly.

Inmates will be assessed daily by the nursing staff. Each day the mask will be changed after the assessment. Staff should not give an inmate a new mask unless the mask becomes wet or soiled. If this occurs the nurse must be notified. The inmate must always remain in their designated droplet and contact room with the door closed, unless coming out for phone calls or fresh air. Interactions with an inmate should be minimal and follow all direction set out by the infection control protocol.

Providing Meals and Snacks

Meals will be eaten in the designated room. Paper plates, cups and utensils are only permitted to be used. A clear garbage bag/bin should be present within the room. Once this is full, it should be placed in a biohazard bag located outside of the designated area.

To provide meals to inmates placed inside these designated areas, staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the food placed on the floor just inside the door. If 6 feet can be maintained and the inmate wears their mask staff are only required to wear gloves during this process and ensure good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Medication Administration

Medication administration at young offenders should only be done by nursing staff or the IC on shift. Inmates should receive medication in their room. To minimize risk to staff, the IC dispensing the medication should wear gloves. Staff need to ask the inmate to don their surgical mask and stand 6 feet away from the door. Once staff can visually see this has been complete, the door can be opened, and the medication (in a medication cup) placed on the floor just inside the door. The staff can then close the door and have the inmate show the staff they have swallowed the medication through the window. Ensure staff perform good hand hygiene after removing gloves.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Telephone Calls

Telephone calls should be accommodated even for those on a 14-day isolation. The inmate will have to come out of the designated area for this to occur. Staff should wear gloves for this process and maintain social distancing. Prior to opening the door have the inmate don their surgical mask. Once the door is open have the inmate perform hand hygiene with Purell located on the isolation trolley. Once this is complete the inmate needs to don gloves while using the phone. Once the phone calls are complete have the inmate remove their gloves and dispose in the biohazard bin located outside of their designated room and again perform hand hygiene before entering back into the room. The telephone used should be disinfected thoroughly with Cavi Wipes immediately after use by staff.

PPE requirement during this process: Gloves only. No mask is needed if the inmate is wearing a mask and standing 6 feet away from the door during this process.

Fresh Air for Inmates

Fresh air should still occur during a 14-day isolation period. The inmate will have to exit out of the designated area for this to occur. Prior to opening the door have the inmate don their surgical mask. Once the door is open have the inmate perform hand hygiene with purell located on the isolation trolley. No gloves are needed for inmates after this step. They must maintain wearing their mask on exiting the cell until they are outside of the facility. Once outside the facility they can remove their mask. Escorting staff will be required to wear a mask. The reason behind this is if an inmate at any point is unable to maintain 6 feet or if an incident occurs the staff has access to a surgical mask. Once fresh air is complete the inmate must put on the mask again prior to entering the facility. All items used such as balls etc must be thoroughly disinfected with cavi wipes after use. Both the inmate and staff should perform thorough hand hygiene on entry to the facility

PPE requirement during this process: Masks only.

Washroom/Hygiene for Inmates on 14-day Isolation Housed in rooms other than room 1

Room 1 at Young offenders is equipped with its own bathroom so there is no movement needed for washroom/hygiene concerns for this inmate.

For inmates under a 14-day isolation that are not housed in room 1, they can use the staff washroom at the end of the admin hallway for washroom and to shower. The washroom used must have a door that can completely close to maintain infection control. The intake shower located in the secure hallway can not be used as it does not have a full door.

The inmate must wear a mask when exiting their designated room and hand hygiene prior to movement. Once the inmate is in the washroom and the door is closed, they can then remove their mask to shower. They must then put the mask back on prior to opening the door to return to their designated area. Staff escorting the inmate should wear gloves and maintain social distancing.

The washroom must be deep cleaned following use. This includes counters, walls, floor, shower, and toilet. No wait time is needed prior to cleaning.

For cleaning the washroom, the following PPE equipment should be used depending on the inmate.

Inmates in isolation with no symptoms:

PPE requirement during this process: Gloves only

Inmates in isolation that the nurse has identified as symptomatic:

PPE requirement during this process: Gloves, mask, and an isolation gown

Housing Multiple Inmates that Require Isolation at Young Offenders

There may be occasions that multiple inmates require isolation at the same time at young offenders. The options to house these inmates if necessary are listed below.

- Room 1 (preferred as has own washroom)
- Room 4
- Room 3
- Iso cell 159

Placement will be decided by the Nurse depending on presence of symptoms and/or need for swabbing.

Co-hording is the process of placing multiple inmates in the same room for isolation. This will be avoided as this could cause transmission from one inmate to the other especially when inmates are on different days of the 14-day isolation. Co-hording should only be practiced if the inmates arrive to youth offenders from the same community and on the same day.

Transporting Inmates for Medical Attention Under a 14-day Isolation Who are Asymptomatic

For precautions an inmate being transported for emergency issues, DI/Lab or urgent clinic appointments should be transported with a surgical mask. At this point it is optional for staff to wear a mask; their comfort level will dictate this. There is no need at present with no confirmed case within the territory to have them change clothes on arrival back to the facility. Proper hand hygiene and social distancing with members of the public is mandatory for staff and inmates.

Once the territory has a confirmed case, arrival back to the facility should be done differently. In this situation when the inmate has arrived back to the facility, they should go into an ISO cell just as if they were a new inmate. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The guards who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Transporting Inmates for Medical Attention who are Symptomatic or High Suspicion of COVID 19

Any transfers to the hospital with an inmate who have symptoms of COVID 19 should be done with caution. The inmate should wear a surgical mask for the entire transfer. Guards should wear surgical masks, gowns, and gloves to protect their clothing from exposure. For transfers to QGH the accepting division should be made aware of the inmate's arrival. For non emergent cases the medical team should make these calls to appropriate hospital staff. In the event of an emergency transfer, the IC should call ahead to inform the ER staff. Once they arrive at QGH, QGH staff will direct the staff which room the inmate will go for assessment.

If the inmate is deemed medically cleared to return to the centre, then infection control should be strictly maintained. Guards should wear gowns, gloves, and surgical masks for transfers. The inmate must wear a mask until placed back into their designated room. Once the inmate has arrived back to the facility, they should go into an ISO cell just as if they were a new inmate. They should have the clothes worn to the medical appointment removed, placed into a bag, ensuring staff are wearing gloves. The clothes should be immediately washed in hot water with regular laundry detergent available at the facility. The inmate should shower and get dressed in clean facility attire. The guards who escorted the inmate should keep a change of clothes with them at work and change into a different uniform in case of exposure.

Correctional vehicles should be cleaned with hospital grade disinfecting wipes after every transfer.

Take Downs or Potential Violence with Inmates Under 14-day Isolation or Suspected/Known COVID 19

Staff safety should be priority in these incidents. **Full PPE** attire should be worn whenever possible prior to intervening or when a suspected take down of these inmates may occur. This includes gowns, gloves, surgical mask, and face shields. The donning procedure of this is laminated at each centre at the designated areas. If the inmate is spitting or is refusing to wear a mask, a spit hood should be placed on the inmate. Once the incident has resolved, staff should remove gear as identified in laminated papers. Staff should change into a different set of clothing when there was any contact with bodily fluids. The

staff should keep a change of clothes with them at work and change into a different uniform in case of exposure. If there was exposure to blood or bodily fluids during the take down, please inform duty immediately.