

## Emma Small

---

**From:** Deena Hinshaw  
**Sent:** April 14, 2020 5:55 AM  
**To:** Sherri Wilson  
**Subject:** Fwd: Question re: operational guidance to correctional facility settings re: COVID Admission Assessment-Short Form for Pandemic Tier 4 - PILOT March 2020.docx; ATT00001.htm; Screening Script 27th as of 1300.docx; ATT00002.htm; IPC COVID-19 FINAL march 26th.docx; ATT00003.htm; Directive COVID-19.docx; ATT00004.htm; New Brunswick Correction Facilities - Summary April 3 - 2020.docx; ATT00005.htm  
**Attachments:**

N/R

---

**From:** Higdon, Penny (DH/MS) <penny.higdon@gnb.ca>  
**Sent:** Monday, April 13, 2020 4:58:02 PM  
**To:** Russell, Dr. Jennifer (DH/MS) <Jennifer.Russell@gnb.ca>; Landsburg, Shelley (DH/MS) <Shelley.Landsburg@gnb.ca>

**Subject:** RE: Question re: operational guidance to correctional facility settings re: COVID

Hi Dr. Russell,

Attached are a couple of documents from Corrections. The RHA have developed their own guidance and we reviewed it. I have attached a situational awareness summary April 3 of activities happening in Corrections that Dr Hinshaw might find useful.

Penny

---

**From:** Russell, Dr. Jennifer (DH/MS)  
**Sent:** April 13, 2020 4:29 PM  
**To:** Landsburg, Shelley (DH/MS) <Shelley.Landsburg@gnb.ca>; Higdon, Penny (DH/MS) <penny.higdon@gnb.ca>  
**Subject:** FW: Question re: operational guidance to correctional facility settings re: COVID  
Can we share ours?

*Jennifer Russell, BA, BSc, MD, CCFP*

**Chief Medical Officer of Health**

**Médecin-hygiéniste en chef**

**NB Department of Health/Ministère de la santé**

**Ph/Tél: (506) 444-2112**

**e-mail/courriel : [jennifer.russell@gnb.ca](mailto:jennifer.russell@gnb.ca)**

---

**From:** Deena Hinshaw <[Deena.Hinshaw@gov.ab.ca](mailto:Deena.Hinshaw@gov.ab.ca)>  
**Sent:** April-13-20 3:55 PM  
**To:** Henry, Bonnie [EXT] <[bonnie.henry@gov.bc.ca](mailto:bonnie.henry@gov.bc.ca)>; Hanley, Brendan [EXT] <[brendan.hanley@gov.yk.ca](mailto:brendan.hanley@gov.yk.ca)>; Kami kandola@gov.nt.ca [EXT] <[Kami\\_kandola@gov.nt.ca](mailto:Kami_kandola@gov.nt.ca)>; Micahel Patterson <[mpatterson@gov.nu.ca](mailto:mpatterson@gov.nu.ca)>; [saqib.shahab@health.gov.sk.ca](mailto:saqib.shahab@health.gov.sk.ca) [EXT] <[saqib.shahab@health.gov.sk.ca](mailto:saqib.shahab@health.gov.sk.ca)>; Dr. Brent Roussin <[brent.roussin@gov.mb.ca](mailto:brent.roussin@gov.mb.ca)>; David Williams <[Dr.David.Williams@ontario.ca](mailto:Dr.David.Williams@ontario.ca)>; Barbara Yaffe <[barbara.yaffe@ontario.ca](mailto:barbara.yaffe@ontario.ca)>; Yves Jalbert <[yves.jalbert@msss.gouv.qc.ca](mailto:yves.jalbert@msss.gouv.qc.ca)>; Russell, Dr. Jennifer (DH/MS) <[Jennifer.Russell@gnb.ca](mailto:Jennifer.Russell@gnb.ca)>; Muecke, Dr. Cristin (DH/MS) <[Dr.Cristin.Muecke@gnb.ca](mailto:Dr.Cristin.Muecke@gnb.ca)>; Gustafson, Reka [BCCDC] <[reka.gustafson@phsa.ca](mailto:reka.gustafson@phsa.ca)>; [robert.strang@gov.ns.ca](mailto:robert.strang@gov.ns.ca) [EXT] <[robert.strang@gov.ns.ca](mailto:robert.strang@gov.ns.ca)>; [HGMORRISON@gov.pe.ca](mailto:HGMORRISON@gov.pe.ca) [EXT] <[HGMORRISON@gov.pe.ca](mailto:HGMORRISON@gov.pe.ca)>; Janice Fitzgerald <[janice.fitzgerald@gov.nl.ca](mailto:janice.fitzgerald@gov.nl.ca)>; James Worthington <[Dr.James.Worthington@CSC-SCC.GC.CA](mailto:Dr.James.Worthington@CSC-SCC.GC.CA)>  
**Cc:** Marcia Johnson <[Marcia.Johnson@gov.ab.ca](mailto:Marcia.Johnson@gov.ab.ca)>; Jing Hu <[Jing.Hu@gov.ab.ca](mailto:Jing.Hu@gov.ab.ca)>  
**Subject:** Question re: operational guidance to correctional facility settings re: COVID

**ATTENTION! External email / courriel externe.**

Colleagues,  
I have been asked if I could create a document that gives advice on best practices in correctional settings for prevention of COVID transmission. We have outbreak guidelines in this context, but I have not prepared general operational guidelines for this particular setting. Do any of you have such a document that you would be willing to share?  
Thanks in advance,  
Deena

---

Dr. Deena Hinshaw  
Chief Medical Officer of Health, Alberta Health  
Associate Clinical Professor, Department of Medicine, University of Alberta  
Clinical Assistant Professor, Department of Community Health Sciences, Cumming School of Medicine, University of Calgary

[Redacted]  
Office: [Redacted] 18(1)(a); 18(1)(b) Cell Phone: [Redacted] 17(1)

This email and any files transmitted with it are confidential and intended solely for the use of the individual or entity to whom they are addressed. If you have received this email in error please notify the system manager. This message contains confidential information and is intended only for the individual named. If you are not the named addressee you should not disseminate, distribute or copy this e-mail.

**Corrections Health Services  
Admission Assessment – Short Form for Pandemic Tier 4**

<b>Demographics</b>		
Last Name	First Name	
Date of Birth (month/dd/yy)		
Medicare	CIS	
Allergies	Reactions	
<b>Vital Signs</b>		
Temp	BP	Pulse
SpO <sub>2</sub>	Resp	POC Glucose
<b>Health History (Check all that apply)</b>		
<input type="checkbox"/> Above age 65 <input type="checkbox"/> Cancer <input type="checkbox"/> Cardiac <input type="checkbox"/> Diabetes <input type="checkbox"/> Respiratory	Notes	
<b>Self Harm Thoughts</b>		
<input type="checkbox"/> Current <input type="checkbox"/> History <input type="checkbox"/> Treatment	Notes	
<b>Medication</b>		
<input type="checkbox"/> BPMH completed <input type="checkbox"/> Methadone <input type="checkbox"/> Suboxone		

Completed on \_\_\_\_\_ at \_\_\_\_\_ h by \_\_\_\_\_  
 Month/dd/yy

**LEGEND:** POC=Point of Care      BPMH=Best Possible Medication History

March 27<sup>th</sup> , 2020

**SCRIPT FOR CORRECTIONS HEALTH SERVICES**

Admission Screening

*To be used by all staff when clients are admitted to remand, correctional or youth correctional facilities in New Brunswick, as well as to all clients reporting for intermittent sentences.*

**These questions will be asked of all clients by the admissions officer in the correctional centre:**

1. Are you experiencing a fever, new cough that started within the last 14 days, sore throat, or difficulties breathing?
2. Ask the following:
  - o Have you travelled outside of New Brunswick on or after March 24th?
  - o In the last 14 days, have you had close contact with a confirmed or probable case of COVID-19?
  - o Have you had close contact with a person who has had a fever, cough, sore throat or breathing difficulties who has travelled anywhere outside of New Brunswick within the past 14 days?

**Correctional Officers & Nursing Staff to DON full protective gear per our Infection Prevention and Control Guidelines from the arrival at centre through the entire admission process. This includes; mask, face shield, gloves and gown.**

Rationale: You will be in close contact with this client for an extended period of time so extra precautions are being taken to ensure your safety throughout the admission process

**NO RISK:** NO to all in 1 & 2: Proceed as normal through admission

**AT RISK:** YES to any of 1: escort to risk assessment room

**AT RISK:** YES to any of 1 and YES to any of 2: escort to risk assessment room

**AT RISK:** NO to any of 1 and YES to any of 2: escort to risk assessment room

<p><b>AT RISK - During hours where nursing is on duty:</b></p> <ol style="list-style-type: none"> <li>I. Client to be escorted into risk assessment room by officer and door is to be closed.</li> <li>II. Nursing staff to don PPE per infection prevention protocol</li> <li>III. Nursing staff to complete designated assessment and record vital signs in at risk assessment room</li> <li>IV. Swab if yes to any of #1</li> <li>V. Call physician for direction</li> </ol>	<p><b>AT RISK - During hours where there is NO nursing on duty:</b></p> <ol style="list-style-type: none"> <li>I. Client to be escorted into risk assessment room by officer and door is to be closed.</li> <li>II. Call 811 for direction.</li> </ol>
---	--

### PREAMBLE

The following IP&C guideline provides interim direction for the management of clients presenting with suspect COVID-19 in a corrections health setting. Currently what we know is that among humans, Coronaviruses are most readily transmitted via respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory pathogens spread. Presently these respiratory infections are managed in our corrections health settings following IP&C Droplet/Contact Precautions.

COVID-19 is a rapidly evolving outbreak and this guidance is based on the information available about this illness related to disease severity, transmission efficiency, and shedding duration. It will be revised and updated as more information becomes available and as our response needs change.

Correctional centers are a unique setting with many variables that are difficult to account for. This client group, when outside of correctional centers, does not usually practice safe distancing and/or social isolation. This group also may have other reasons to be dishonest in travel history; for instance, if the client had criminal connections outside of New Brunswick. They also tend to present in varying degrees of intoxication and/or altered mental status. The correctional setting itself, is more akin to a cruise ship, with large volumes of people using a shared space, unable to distance themselves. It is different than practicing self distancing in a suburban setting. An honest risk assessment is very difficult; therefore, it is very important to be proactive in this population.

Prior to every client interaction, Corrections Health Services (CHS) have a responsibility to perform a Point of care Risk Assessment (PCRA) to assess the infectious risk posed to themselves and others. A PCRA will help determine the correct PPE required to protect the CHS in their interaction with the client and client environment.

Setting	Individual	Activity	Type of PPE or procedure
<b>Corrections Health Centres</b>			
<b>In Sheriff's van</b>	Sheriff	To provide mask to all clients in vehicle.	<ul style="list-style-type: none"> <li>Surgical/procedure mask</li> </ul>
<b>Arrival at correctional centre</b>	Admissions officer	Admissions officer to ask designated screening questions with full PPE.  If <b>RISK</b> : correctional officer to escort client into risk assessment room	<p><b>NO RISK &amp; AT RISK</b></p> <p>Droplet and Contact precautions, which include:</p> <ul style="list-style-type: none"> <li>Surgical/procedure mask</li> <li>Isolation gown</li> <li>Gloves</li> <li>Eye protection (goggles or face shield)</li> </ul>
<b>NO RISK</b>	CHS Nursing Staff & Correctional officer (CO)	If <b>NO RISK</b> : correctional officer to escort client into health centre for admission during hours with nursing present. Outside of these hours, to go directly to unit.  Nursing to complete admission assessment with CO present in full PPE.	<p><b>NO RISK &amp; AT RISK</b></p> <p>Droplet and Contact precautions, which include:</p> <ul style="list-style-type: none"> <li>Surgical/procedure mask</li> <li>Isolation gown</li> <li>Gloves</li> <li>Eye protection (goggles or face shield)</li> </ul>
<b>Admission assessment in health centre</b>			

## Infection Prevention & Control Guidance of Suspect of COVID-19

<b>AT RISK Assessment room</b>	CO	Perform normal admission procedure in designated at <b>RISK</b> assessment room.  Escort client to designated isolation room per DPS once assessment by nursing is complete. Remove PPE after client is secured in isolation.	<ul style="list-style-type: none"> <li>• Droplet and Contact precautions, which include:</li> <li>• Surgical/procedure mask</li> <li>• Isolation gown</li> <li>• Gloves</li> <li>• Eye protection (goggles or face shield)</li> </ul>
	CHS Nursing Staff	Preliminary assessment of clients with suspected or confirmed COVID- 19	<ul style="list-style-type: none"> <li>• Droplet and Contact precautions, which include:</li> <li>• Surgical/procedure mask</li> <li>• Isolation gown</li> <li>• Gloves</li> <li>• Eye protection (goggles or face shield)</li> </ul>
	Client	Clients suspected or confirmed to have COVID-19	<ul style="list-style-type: none"> <li>• Placed in assessment room with door closed</li> <li>• Provide surgical/procedure mask if tolerated.</li> <li>• Perform hand hygiene</li> </ul>
	Environmental service Workers	After and between consultations with clients suspected or confirmed to have COVID-19 <ul style="list-style-type: none"> <li>• Clean chair and client care equipment with Quat PRO or designated cleaner</li> </ul>	<ul style="list-style-type: none"> <li>• Droplet and Contact precautions, which include:</li> <li>• Surgical/procedure mask</li> <li>• Isolation gown</li> <li>• Gloves</li> <li>• Eye protection (goggles or face shield)</li> </ul>
<b>Isolation Room Suspected or confirmed COVID-19</b>	CHS Nursing Staff & CO	Provide direct care to clients with suspect or confirmed COVID- 19 who has been assessed to have mild/moderate symptoms.	<ul style="list-style-type: none"> <li>• Droplet and Contact precautions, which include:</li> <li>• Surgical/procedure mask</li> <li>• Isolation gown</li> <li>• Gloves</li> <li>• Eye protection (goggles or face shield)</li> </ul>
	Environmental service workers	Entering the room of patients with suspect or confirmed COVID- 19 who have been assessed to have moderate/severe symptoms and who are on Droplet/Contact Precautions. <ul style="list-style-type: none"> <li>• Room to be cleaned X 2/day</li> </ul>	<ul style="list-style-type: none"> <li>• Droplet and Contact precautions, which include:</li> <li>• Surgical/procedure mask</li> <li>• Isolation gown</li> <li>• Gloves</li> <li>• Eye protection (goggles or face shield)</li> </ul>

**References:**

- Centers for Disease Control and Prevention - *Interim Infection Prevention and Control Recommendations for Clients with Confirmed 2019 Novel Coronavirus (COVID-19) or Clients Under Investigation for COVID-19 in Corrections health Settings* – Updated March 10, 2020  
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>
- Public Health Agency of Canada - *Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute corrections health settings* – Modified February 24, 2020  
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-corrections-health-settings.html>
- Government of Canada - Interim national case definition: Coronavirus Disease (COVID-19) – Modified February 25, 2020  
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/national-case-definition.html>
- Public Health Ontario - *Technical Brief Updated IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19* - Modified March 12, 2020  
<https://www.publichealthontario.ca/-/media/documents/ncov/updated-ipac-measures-covid-19.pdf?1a=en>



## Corrections Health Services – Department of Public Safety

### COVID-19 Active Screening

Assessment Clinic and Emergency Department  
Clinical Order Set – DIRECTIVE

#### Instructions

1. The following actions will be carried out only **by the authorized health professional identified** below.
2. A bullet preceding an order indicates the order is standard and should always be implemented.
3. All dates must be written m/d/y e.g. May 30, 2018. All times must be on the 24 hour clock hr/min
4. A copy of this directive is to be kept on patient's clinical record.
5. The person completing transcription acknowledges with initials (column to right) and signifies the order with signature, date and time transcribed.

Authorizing Physician(s) / Administrative Authority	
Department of Public Safety Interim COVID-19 Medical Director	
Authorized to Health Professional(s)	
Corrections Health Registered Nurses and Licensed Practical Nurses	
Patient Description/Population	
All clients presenting with signs and symptoms of COVID-19 requiring assessment and testing who meet screening criteria for corrections health.	
Clinical Condition(s) [Screening criteria for COVID-19]	
Incarcerated clients who meet the following criteria, nasopharyngeal swab for COVID-19 to be obtained and sent for testing for any the following: <ul style="list-style-type: none"> <li>• Fever greater than 38 degrees <b>AND/OR</b></li> <li>• New onset of cough and worsening of chronic cough <b>AND/OR</b></li> <li>• Shortness of breath</li> </ul>	

Approved Prescribing Authority (Print and Sign): \_\_\_\_\_

Date: \_\_\_\_\_

## New Brunswick Correctional Facilities Preventive Measures for COVID-19 Summary – Situational Awareness

OCMOH  
April 3, 2020

### Background

NB Correctional Facilities are following public health guidance and are working hard to ensure the health and safety of staff and residents are protected. Public Health and Infection Prevention Control (IPC) consultant have been designated by health authorities to corrections health team.

### Key Points

- NB Correctional Facilities are actively monitoring and planning, and have been engaged with Public Health and IPC on precautions they can take to minimize risks associated with the virus.
- A COVID-19 screening process is in place. The screening process determines if testing is required, and if residents are required to be isolated.
  - Residents of correction facilities have been identified as a high priority group for testing.
  - Screening occurs for ALL admissions/transfers to all centers using script supported by Public Health and IPC.
  - Currently, interprovincial transfers are at a minimum to net zero. If they receive an order for an inmate from another province to appear in NB set a video conference (which is successful 99% of the time). If the move of the inmate is paramount to the outcome (as per the judge), that inmate is kept in isolation from the general inmate population until he/she returns from his place of origin.
  - Staff are screened before entering each day e.g. checking temperatures.
  - Staff are instructed to stay home if: they have if they are ill , have a cough , fever, or milder symptoms of headache, runny nose or sore throat; if they've traveled outside of New Brunswick in the past 14 days, or if they have had close contact with a known or suspected COVID-19 case
  - Risk assessment rooms and isolation rooms are designated and prepared in each centre
- If a resident develops symptoms, isolation rooms are available to care for mild to moderate cases in the facility.
- Health care providers at each prison have made a list of all residents who have chronic conditions that are low risk to society, that could be released with ankle bracelets if they had a safe place to go, should they get cases within the facility.
- **Institutional visits have been suspended.**

- It is recommended that health-care workers be provided with two surgical masks per shift, and that the masks be used during direct patient care during their routine practice.
- It is recommended that medical masks be provided for essential personnel, volunteers and visitors. Everyone should be provided with two medical masks per shift and continue to use appropriate infection prevention guidelines when putting them on and removing them.
- Social distancing of 2m is being exercised. The number of residents and staff in the large yard at one time is being staggered throughout the day.
- Regular education regarding COVID 19 including handwashing, coughing, and other prevention is occurring,
- Signage advising social distancing and cough etiquette practices is in all correctional centres provincially.
- Cleaning and disinfecting protocol is in place.
- Health care staff are practicing donning and doffing PPE with prison guards.