



ALL CORRECTIONS SERVICE STAFF
DEPARTMENT OF JUSTICE

COVID-19 Response – Corrections Service

Given the heightened concerns over COVID-19, we want to assure all staff that contingency plans are in place and are being updated as the situation unfolds. Standing Orders/Directives have been updated for all correctional facilities and community corrections offices. Additional processes and procedures are being put into place to assist in this area.

In the interest of the health and safety of our staff, inmates, offenders and the public, the following precautions are being put into place for a minimum of 14 days (to be reviewed on an ongoing basis and as more information becomes available), effective Wednesday, March 18, 2020.

The following measures will be implemented:

1. Volunteers

Use of volunteers in correctional facilities and community corrections offices will be suspended (e.g. community AA).

2. Work Crews/Appointments

The activities of any facility off grounds work crews will be suspended. Essential appointments will continue as scheduled (e.g. medical).

3. Temporary Absences (TA's)

All temporary absences to/from correctional facilities will be suspended (e.g. work release).

4. Visitors (personal)

All personal visits for inmates/offenders will be suspended.

5. Legal Counsel/Spiritual Advisors/Elders

Confidential in-person meetings with official visitors (such as lawyers, spiritual advisors, Elders) will be accommodated as much as possible in exceptional circumstances, without permitting direct personal contact. The Visitor and Contractor Questionnaire must be completed prior to entry.

6. Contractors

Contractors providing essential services within the correctional facilities (physical building) will be permitted; however, the Visitor and Contractor Questionnaire must be completed prior to entry.

7. Community Corrections Reporting

Community corrections clients will be reporting by telephone. Each office will be responsible for notifying their local community RCMP detachment of this policy change.

8. Corrections Northern Recruit Training Program (CNRTP)

CNRTP at the NSCC is scheduled to begin April 1, 2020, though the program may be cancelled or rescheduled as necessary.

9. Leave

Staff leave requests will continue to be considered based on operational requirements. Due to the evolving nature of COVID-19, previously approved leave may be subject to change to ensure we are able to maintain our facilities operational requirements.

10. Inmate Transfers

Regularly scheduled road transfers within the NWT will be suspended; however, air transfers will be considered, when required on a case-by-case basis.

These measures apply to all correctional facilities and community corrections offices in the Northwest Territories.

These measures are being made in consultation with public health officials, other correctional jurisdictions, and best practices, and will be reassessed on an ongoing basis. The GNWT is monitoring the status of COVID-19 in the NWT, and the Corrections Service will ensure that employees are updated as new information becomes available.

The GNWT has supports in place through the Employee Family Assistance Program. For immediate and confidential assistance 24 hours a day, 7 days a week, call 1-844-880-9142 or visit www.workhealthlife.com.

If you have questions, please do not hesitate to contact your Supervisor, Warden or Regional Manager.

I would like to thank everyone for their professionalism and ongoing hard work during this time.



Blair Van Metre
Director of Corrections
Department of Justice

Additional resources:

NWT Public Health Website:

<https://www.hss.gov.nt.ca/en/advisories>

Coronavirus Updates:

<https://www.hss.gov.nt.ca/en/services/coronavirus-disease-covid-19/information-travellers>

GNWT Public Safety Notice:

<https://www.gov.nt.ca/en/public-safety-notices>

GNWT Coronavirus (COVID-19) Update for Employees website:

<https://my.hr.gov.nt.ca/node/5577>



NORTH SLAVE CORRECTIONAL COMPLEX

Chapter:	7 – Contingency Planning
Standing Order:	7.02.03
Subject:	Epidemics and Outbreaks
Authority:	Directive 7.02 – Contingency Planning & Response Model
Units:	Adult & Youth

1.0 **STATEMENT OF POLICY**

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken in the event that an outbreak of a contagious disease at the NSCC. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at the NSCC a facility wide lockdown may be initiated for the duration of the situation.

2.0 **AUTHORITIES**

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 **ADDITIONAL DEFINITIONS**

- 3.1 **Epidemic**: a disease that spreads at a rate far in excess of the expected rate.
- 3.2 **Influenza-like illness outbreak**: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.
- 3.3 **Facility Lockdown**: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.
- 3.4 **Shift supervisor**: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift for the designated area of the complex (e.g. Corrections Supervisor, Deputy Warden of Operations in charge of the shift).

4.0 **PROVISIONS**

- 4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical pandemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.



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- 4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident. The roles and responsibilities of the Adult Unit Shift Supervisor and Youth Unit Shift Supervisor shall be defined using the chart in Appendix A.

PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to be in need of immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, or symptoms of influenza. Inmates with ILI symptoms should be placed directly into a unit designated for symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in units with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform medical services of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, fever or sweating they will immediately be given a mask, gown and gloves to wear by intake staff. Inmates will wear this for the duration of the intake process until they are cleared by nurses. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to medical for clearance the officers shall use an antiviral/antimicrobial wipe to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a sealed biohazard bag. This bag will be given to medical to dispose of.



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- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a melt away bag and placed in a laundry bag to be washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Infection Precautions". Staff shall ensure that gloves and masks are worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that all inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product.
- 4.10 Once the intake procedure has been completed, the inmate(s) shall be secured in a designated area until medically cleared by the medical staff. Medical staff shall advise the inmate(s) of the symptoms of the possible contagious disease and the precautions he/she should use to contain the spread of the illness. Once cleared, the inmate(s) will be moved to the living unit. If an inmate is symptomatic of a communicable disease, he/she will be housed in a separate area.
- 4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

- 4.12 Staff who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.
- 4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the Health Services Supervisor. Inmate shall be placed on contact and droplet precautions by DWO until Health Services supervisor or other medical can be consulted.
- 4.14 Authorized persons will advise the Department of Health and Social Services, Office of the Chief Public Health Officer (867-767-9063 ext. 49215).
- 4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.



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- 4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.
- 4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services, Office of the Chief Public Health Officer advises that they are no longer required.
- 4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with reverse air intake or separate ventilation system.
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Pending extent of the outbreak it may result in the facility not being in a position to have inmates admitted to the facility for a period of time. If this is the case the RCMP will be notified and alternate arrangements confirmed with other facilities.



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4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic the areas listed below will be used to separate these inmates from non-symptomatic inmates. Should larger numbers of inmates be symptomatic then living units will be designated for the purpose of quarantine. Potential locations include:

- 1) Adult Unit (adult inmates)
 - a. medical holding cells;
 - b. Secure Cells;
 - c. Secure Living Unit vs. D Pod;
 - d. C Pod vs. other living units; or
 - e. other area as directed by authorized persons

- 2) Youth Unit (youth inmates)
 - a. secure cells (youth inmates); or
 - b. or other area as directed by authorized persons



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4.24 During an outbreak all staff shall:

- a) Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b) Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently and before exiting and entering the pod. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c) Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using approved solution;
- d) Ensure that inmates sanitize the use of phones with approved solution before and after use;
- e) Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f) Ensure that mattresses are sanitized when passed from inmate to inmate and mattresses are not to be moved from a pod housing symptomatic inmates to any other pod;
- g) Ensure all cells are sanitized using approved solution when they are vacated and assigned to a different inmate;
- h) Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i) Ensure that laundry is washed in hot water each evening.

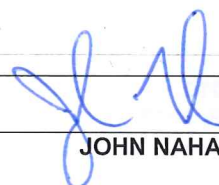
4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after consultation with the Office of the Chief Public Health Officer.

4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

EFFECTIVE DATE: MARCH 30, 2010
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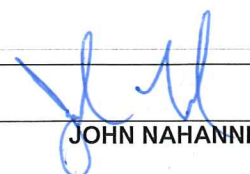
- 4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.
- 4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).
- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake;
 - b) Medical Holding and Isolation;
 - c) Units designated to hold symptomatic inmates (masks for inmates and staff); and
 - d) Kitchen (gloves only).
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Medical staff shall arrange for medical staff coverage by contacting relief nursing staff should medical staff become unavailable.
- 4.32 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or Soapopular are readily available for facility use. Non-alcoholic hand sanitizers will be used in inmate living areas. Staff and inmates shall be encouraged to wash their hands with soap and water often, as opposed to using hand sanitizers. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.33 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.34 The Food Services Supervisor shall ensure that a sufficient number of staff are orientated in the use of kitchen equipment in the event that cooks are not available.
- 4.35 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.

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- 4.36 The Food Services Supervisor shall contact In-flight Services or Northern Food Services for readymade meals as required. In-flight Services requires twenty-four (24) hour notice to deliver the meals while other suppliers require one (1) week.
- 4.37 Ensuring additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.38 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.39 Inmates who are symptomatic will be given extra fluids as directed by health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.40 ^{s 20(1)(e)} [REDACTED] ^{s 20(1)(e)} [REDACTED] Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.
- 4.41 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.
- 4.42 If there are insufficient NSCC staff members available to maintain essential operations, a ^{s 20(1)(e)} [REDACTED]
- 4.43 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.



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5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

- A Major Incident – Location Responsibility Chart
- B Health Screening Questionnaire



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APPENDIX A Major Incident – Location Responsibility Chart

Location of Major Incident	Immediate Reporting Structure	Role of Shift Supervisor
Adult Unit	<ul style="list-style-type: none">➤ Staff report to Adult Unit Shift Supervisor;➤ Adult Unit Shift Supervisor will notify appropriate parties (including, Youth Unit Shift Supervisor of incident and potential effect on the Youth Unit operations);➤ Youth Unit Shift Supervisor will notify staff<ul style="list-style-type: none">➤ on shift in the Youth Unit area;➤ Youth Unit staff shall limit movements as<ul style="list-style-type: none">➤ much as possible and may be required to lockdown inmates (pending the type of incident).	Adult Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate
Youth Unit (0000-0800hrs)	<ul style="list-style-type: none">➤ Staff report to Adult Unit Shift Supervisor;➤ Adult Unit Shift Supervisor will direct Youth Unit staff on response required.	Adult Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate
Youth Unit (0800-0000hrs)	<ul style="list-style-type: none">➤ Staff report to Youth Unit Shift Supervisor;➤ Youth Unit Shift Supervisor will notify Adult Unit Shift Supervisor of incident and potential effect on the Adult Unit operations;➤ Youth Unit Shift Supervisor will notify staff on shift in the Youth Unit area;➤ Youth Unit staff shall lockdown inmates and ensure that everyone is accounted for➤ Adult Unit staff may be required to lockdown inmates (pending the type of incident), as per direction from Adult Unit Shift Supervisor.	Youth Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate

Note: Should a major incident occur that affects the entire complex (e.g. bomb threat, evacuation) the **Adult Unit Shift Supervisor** shall manage the incident until the Warden or designate has assumed the role of **Crisis Manager**.

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APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by medical staff.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to Medical staff for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, sweating, sore throat, coughing or fatigue)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled domestically or internationally or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Are you taking any medications that we should be immediately aware of?	Yes No
5.	Do you have any allergies that you are aware of?	Yes No

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Medical Staff Signature: _____ **Date:** _____



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1.0 **STATEMENT OF POLICY**

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3.0 **ADDITIONAL DEFINITIONS**

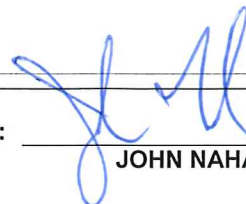
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- 3.4 **Shift supervisor**: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift for the designated area of the complex (e.g. Corrections Supervisor, Deputy Warden of Operations in charge of the shift).

4.0 **PROVISIONS**

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PREVENTION

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SUSPECTED OUTBREAK

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- 4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.
- 4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services, Office of the Chief Public Health Officer advises that they are no longer required.
- 4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with reverse air intake or separate ventilation system.
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Pending extent of the outbreak it may result in the facility not being in a position to have inmates admitted to the facility for a period of time. If this is the case the RCMP will be notified and alternate arrangements confirmed with other facilities.

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NORTH SLAVE CORRECTIONAL COMPLEX

Chapter:	7 – Contingency Planning
Standing Order:	7.02.03
Subject:	Epidemics and Outbreaks
Authority:	Directive 7.02 – Contingency Planning & Response Model
Units:	Adult & Youth

4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic the areas listed below will be used to separate these inmates from non-symptomatic inmates. Should larger numbers of inmates be symptomatic then living units will be designated for the purpose of quarantine. Potential locations include:

- 1) Adult Unit (adult inmates)
 - a. medical holding cells;
 - b. Secure Cells;
 - c. Secure Living Unit vs. D Pod;
 - d. C Pod vs. other living units; or
 - e. other area as directed by authorized persons

- 2) Youth Unit (youth inmates)
 - a. secure cells (youth inmates); or
 - b. or other area as directed by authorized persons



NORTH SLAVE CORRECTIONAL COMPLEX

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4.24 During an outbreak all staff shall:

- a) Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b) Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently and before exiting and entering the pod. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c) Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using an antiviral/antimicrobial wipe/solution;
- d) Ensure that inmates sanitize any multi-use item with antiviral/antimicrobial wipe/solution before and after use;
- e) Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f) Ensure that mattresses are sanitized using antiviral/antimicrobial wipe/solution when passed from inmate to inmate and mattresses are not to be moved from a pod housing symptomatic inmates to any other pod;
- g) Ensure all cells are sanitized using antiviral/antimicrobial wipe/solution when they are vacated and assigned to a different inmate;
- h) Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i) Ensure that laundry is washed in hot water each evening.

4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after consultation with the Office of the Chief Public Health Officer.

4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

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NORTH SLAVE CORRECTIONAL COMPLEX

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Units:	Adult & Youth

- 4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.
- 4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).
- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake;
 - b) Medical Holding and Isolation;
 - c) Units designated to hold symptomatic inmates (masks for inmates and staff); and
 - d) Kitchen (gloves only).
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Medical staff shall arrange for medical staff coverage by contacting relief nursing staff should medical staff become unavailable.
- 4.32 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or antiviral/antimicrobial wipe/solution are readily available for facility use. Staff and inmates shall be encouraged to wash their hands with soap and water often. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.33 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.34 The Food Services Supervisor shall ensure that a sufficient number of staff are orientated in the use of kitchen equipment in the event that cooks are not available.
- 4.35 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.



NORTH SLAVE CORRECTIONAL COMPLEX

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- 4.36 The Food Services Supervisor shall contact In-flight Services or Northern Food Services for readymade meals as required. In-flight Services requires twenty-four (24) hour notice to deliver the meals while other suppliers require one (1) week.
- 4.37 Ensuring additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.38 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.39 Inmates who are symptomatic will be given extra fluids as directed by health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.40 ^{s 20(1)(e)} [REDACTED] ^{s 20(1)(e)} [REDACTED] Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.
- 4.41 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.
- 4.42 If there are insufficient NSCC staff members available to maintain essential operations, a ^{s 20(1)(e)} [REDACTED]
- 4.43 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.



NORTH SLAVE CORRECTIONAL COMPLEX

Chapter:	7 – Contingency Planning
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Units:	Adult & Youth

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

A Major Incident – Location Responsibility Chart

B Health Screening Questionnaire




NORTH SLAVE CORRECTIONAL COMPLEX

Chapter:	7 – Contingency Planning
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Subject:	Epidemics and Outbreaks
Authority:	Directive 7.02 – Contingency Planning & Response Model
Units:	Adult & Youth

APPENDIX A Major Incident – Location Responsibility Chart

Location of Major Incident	Immediate Reporting Structure	Role of Shift Supervisor
Adult Unit	<ul style="list-style-type: none"> ➤ Staff report to Adult Unit Shift Supervisor; ➤ Adult Unit Shift Supervisor will notify appropriate parties (including, Youth Unit Shift Supervisor of incident and potential effect on the Youth Unit operations); ➤ Youth Unit Shift Supervisor will notify staff <ul style="list-style-type: none"> ➤ on shift in the Youth Unit area; ➤ Youth Unit staff shall limit movements as <ul style="list-style-type: none"> ➤ much as possible and may be required to lockdown inmates (pending the type of incident). 	Adult Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate
Youth Unit (0000-0800hrs)	<ul style="list-style-type: none"> ➤ Staff report to Adult Unit Shift Supervisor; ➤ Adult Unit Shift Supervisor will direct Youth Unit staff on response required. 	Adult Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate
Youth Unit (0800-0000hrs)	<ul style="list-style-type: none"> ➤ Staff report to Youth Unit Shift Supervisor; ➤ Youth Unit Shift Supervisor will notify Adult Unit Shift Supervisor of incident and potential effect on the Adult Unit operations; ➤ Youth Unit Shift Supervisor will notify staff on shift in the Youth Unit area; ➤ Youth Unit staff shall lockdown inmates and ensure that everyone is accounted for ➤ Adult Unit staff may be required to lockdown inmates (pending the type of incident), as per direction from Adult Unit Shift Supervisor. 	Youth Unit Shift Supervisor = Crisis Manager until relieved by Warden or designate

Note: Should a major incident occur that affects the entire complex (e.g. bomb threat, evacuation) the **Adult Unit Shift Supervisor** shall manage the incident until the Warden or designate has assumed the role of **Crisis Manager**.


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NORTH SLAVE CORRECTIONAL COMPLEX

Chapter: 7 – Contingency Planning
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Subject: Epidemics and Outbreaks
Authority: Directive 7.02 – Contingency Planning & Response Model
Units: Adult & Youth

APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by medical staff.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to Medical staff for further assessment.

Inmate Name: _____ **Date of Birth:** _____

Circle One

1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, coughing or fatigue)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled domestically or internationally or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes No
5.	Are you taking any medications that we should be immediately aware of?	Yes No
6.	Do you have any allergies that you are aware of?	Yes No

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Medical Staff Signature: _____ **Date:** _____

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JOHN NAHANNI

Confidential

Pandemic Influenza

Contingency Plan

For the

Fort Smith Correctional Complex

March 20, 2020

Pandemic Contingency Plan

The following contingency plan has been developed in the event of staff shortages at the FSCC due to COVID-19.

The following staff shall be deemed as essential services:

Normal Shift Compliments:

Cooks /Head Cook	2 per day 7 days a week 1 Supervisor 5 days a week
Deputy Warden of	Day Shift 2 Afternoon Shift 0 s 20(1)(e)
Corrections Officers	Day Shift 6 Afternoon Shift 6 s 20(1)(e)
Corrections Supervisors	Day Shift 2 Afternoon Shift 2 s 20(1)(e)
Institutional Nurse	Day Shift 1
Program Delivery Officers	Mon-Fri 2
Institutional Instructor	Mon-Fri 1
Case Managers	Mon-Fri 2
Day shift	1 Cook 6 Corrections Officers 1 Corrections Supervisor 1 Case Manager
Afternoon Shift	6 Corrections Officers 1 Corrections supervisor

Night Shift

s 20(1)
(e) Corrections Officers

Regular Hours of work

Warden	0830 - 1700
Administrative Assistant	0830 - 1700
Cook Days	0830 - 1700
Corrections Officers days	0800 - 1600
Corrections Supervisors days	0800 - 1600
Corrections Officers afternoons	1600 - 2400
Corrections Supervisors afternoons	1600 - 2400
Corrections Officers nights	2400 - 0800
Corrections Supervisors nights	2400 - 0800
Case Managers	0830 - 1700
Program Delivery Officers	0830 - 1700
Nurse	0830 - 1700

The Administration & Support Services will be responsible for all administration items, Inmates trust and welfare funds, canteen, and all concerns in regards to the kitchen in the event of decreased staffing levels.

All other excluded staff members assigned to assist at the Fort Smith Correctional Centre will be assigned tasks by the Warden based on their experience.

Fort Smith Correctional Centre
Operational Shift Duties

Normal operations will continue until such time as staffing levels decrease.

Excluded staff should be identified and a schedule assigning work during pandemic planning will be developed for immediate implementation should this occur.

Security trained staff in programming positions to be identified for possible redeployment.

Case Managers will ensure those inmates that are eligible for Early Temporary Releases are identified. The Case Managers will have Early Release documentation ready for those identified.

The following information is simply a general list of operational duties performed by our Correctional Officers at the Fort Smith Correctional Centre.

Daily Common Tasks in the Male and Female units:

➤ *Handover*

- *Conducted in the living Units*
- *Counts conducted by off going shift and ongoing shift*
- *Verify and receive keys/radio/sharps*
- *Discuss any concerns from previous shift*
- *Ensure all concerns and follow-up are recorded in log pass on book prior to end of shift*
- *Conduct Radio Check*
- *Assume Responsibility for Unit*

➤ *Routine*

- *Administer Inmate Requests*
- *Control and log all inmate movement in/out of unit*
- *Control Inmate Movement to Programs/Classroom*
- *Review copy of scheduled events*
- *Review COMS reports*
- *Supervise up to 18 offenders*
- *Supervise the delivery of the meals ensuring inmates only receive one meal*

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- *Conduct a round of cells in the living unit hourly*
 - *Ensure all cells meet appropriate cleanliness and are free of contraband*
 - *Circulate throughout the pod ensuring the safety and security of all inmates*
 - *Plan and conduct a minimum of 2 cell searches daily*
- *Specific Nigh tasks*
- *Complete area searches as detailed by the shift supervisor*
 - *Update inmate board as required (inmate status, Job Placement)*
 - *Process mail*
- *Specific Day Tasks*
- *Start Shift Summary, Phone Log, and Sharps Log*
 - *Ensure inmates clean their cells and make their beds*
 - *Ensure inmates complete chores*
- *Specific Afternoon Tasks*
- *Confirm list of chores still needing to be completed*

Male Unit
Daily Contingency Routine

- 2345 – 2400 Formal Count Taken
- 0745 – 0800 Formal Count Taken
- 0815 - Open Cells – Breakfast time
- 0830 - Medications Issued
- 0900 - Program time TV/Games Off
- 1000 -1030 Break Time
- 1030 - Program Time
- 1000 -Brunch (Weekends)
- 1200 - Lunch Time
- 1230 - Medications Issued
- 1300 - Program Time
- 1500 - Break Time
- 1530 - Lock Down
- 1615 - Doors open (Formal Count Taken)
- 1630 - Shopping (Thursdays)
- 1700 – Dinner and Cleanup
- 1730 – Medication Issued

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- 1900 – 2100 (Visits on Monday, Thursday and Saturday)
 - 2100 – Evening Break
 - 2100 Medication Issue
 - 2320 – Phone Calls End
 - 2330 - Lock Down/Counts for the night
- (Hourly Physical Inmate Checks and Hourly Calls between Facilities between 2400 and 0700)

Female Unit
Daily Contingency Routine

- 2345 – 2400 Formal Count Taken
 - 0745 – 0800 Formal Count Taken
 - 0815 - Open Cells – Breakfast time
 - 0830 - Medications Issued
 - 0900 - Program time TV/Games Off
 - 1000 -1030 Break Time
 - 1030 - Program Time
 - 1000 -Brunch (Weekends)
 - 1200 - Lunch Time
 - 1230 - Medications Issued
 - 1300 - Program Time
 - 1500 - Break Time
 - 1530 - Lock Down
 - 1615 - Doors open (Formal Count Taken)
 - 1630 - Shopping (Thursdays)
 - 1700 – Dinner and Cleanup
 - 1730 – Medication Issued
 - 1900 – 2100 (Visits on Monday, Thursday and Saturday)
 - 2100 – Evening Break
 - 2100 Medication Issue
 - 2320 – Phone Calls End
 - 2330 - Lock Down for the night
- (Hourly Physical Inmate Checks and Hourly Calls between Facilities between 2400 and 0700)

Pandemic Planning Staffing Compliment

The following will be the staffing compliment in the event of decreased staffing levels.

The Warden, will coordinate the rotation of essential service persons through a schedule in an equitable manner. Schedule will be attached.

- Day shift
- 1 Cook
 - 1 Warden
 - 1 Deputy Warden Operations
 - 1 Deputy Warden Administration
 - 2 Corrections Officers
 - 1 Corrections Supervisor
 - 1 Case Manager
 - 1 Nurse
 - 2 Program Delivery Officers
- Afternoon Shift
- 1 Cook
 - 1 Corrections Supervisor
 - 2 Corrections Officers
- Night Shift
- S 20 Corrections Supervisor

Plan A

Essential Services Staff Reporting

Whenever there is the potential of pandemic/influenza at the Fort Smith Correctional Centre the RCMP will be notified.

Essential Services staff will be identified and a schedule assigning work during the Pandemic will be developed for immediate implementation should this occur.

Administration & Support Services will be responsible for all administration items, Inmates trust and welfare funds, canteen, inmate release travel and all concerns in regards to the kitchen.

Cooks will be rotated through the shifts on an equitable basis.

Case Managers will ensure those inmates that are eligible for Early Releases are identified and have Early Release documentation ready for those identified.

All excluded staff members assigned to assist at the Fort Smith Correctional Complex will be assigned tasks by the Warden based on their experience.

Operational Shift Duties

Staff will complete duties and routines in accordance to Divisional directives and FSCC Standing Orders. The following information is simply a general list of operational duties performed by Correctional Officers at the Fort Smith Correctional Complex.

Corrections Supervisor Daily Common Tasks:

➤ Shift change

- Complete formal counts conducted by off going shift and ongoing shift
- Verify and receive keys/radio/sharps
- Discuss any concerns from previous shift
- Ensure all movement and counts are recorded in the daily log
- Conduct Radio Check
- Assume Responsibility for the centre

- Ensure work placement sheet is updated for the following day shift

Corrections Officer Daily Common Tasks

➤ Routine

- Administer Inmate Requests
- Control and log all inmate movement in/out of facility
- Control Inmate Movement to and from Programs.
- Review copy of scheduled events
- Review COMS reports
- Supervise the delivery of the meals
- Complete scheduled formal and hourly informal face counts of inmates
- Ensure all institutional areas meet appropriate cleanliness and are free of contraband
- Circulate throughout inmate dorms and common areas ensuring the safety and security of all inmates
- Plan and conduct searches daily
- Process mail in accordance to procedures

➤ Specific Night tasks

- Complete area searches as per search log
- Wake up kitchen workers to report for work - ensure inmate showers before work
- Night filing
- Complete scheduled formal and informal counts of inmates
- Nightshift related duties as outlined in the Nightshift checklist

➤ Specific Day Tasks

- Maintain all logs.
- Ensure inmates clean their cells and make their beds
- ensure inmates complete cleaning chores
- Dispatch kitchen workers - ensure inmate showers before work
- Ensure laundry worker is completing work and clothing and bedding changes are completed as per schedule.

➤ Specific Afternoon Tasks

- Ensure inmate evening cleaning chores are completed

Other Duties that may occur from time to time

Other Routines for Contingency Plan "A"

The programming at FSCC will continue.

Meals

The Institutional Cooks will provide meals with the assistance of inmate kitchen workers. The Head Cook will be responsible to ensure that all meals meet the standards set and are ready for serving at regular meal times.

Week Days	Breakfast	-	0815
	Lunch	-	1200
	Supper	-	1700
Weekends	Brunch	-	1000
	Supper	-	1700

Health Care

Doctor, Dentist and wellness appointments will continue as required, and escorted by staff.

Fort Smith Medical Clinic: 872-6205

Dentist Clinic: 872-2887

Medications

Medications will be dispensed by the Shift Supervisor, or other staff as delegated by the Supervisor. The Supervisors are to ensure that this procedure is followed and that the inmates receive their medications. Medication prescribed by Physicians will be picked-up from the Pharmacy by security staff and stored in the Medical Room.

Canteen

The Administration Officer will provide canteen services every Thursday afternoon.

Visits

Visits will not be allowed.

Telephone Privileges

Telephone privileges will continue.

Case Management

The Case Manager will complete Case Management for all inmates. Only those inmates that present low risk will be considered for any form of Temporary Release. Transfers to other Territorial Correctional Centre's and Federal Institutions will be completed as per present policies.

Building and Vehicle Maintenance

Maintenance: PWS staff has been declared essential for emergency situations only. This would include any operational malfunction of the physical plant that could jeopardize the health, safety and security of inmates, staff, or the institution.

In consultation with the Regional Superintendent of the Fort Smith region the following Managers will be contacted if maintenance was required:

Shane Johnson Facilities and Maintenance Coordinator (867) 872-7412

Between the hours of 1700 and 0830, all maintenance issues should be reported to the Public Works duty officer.

Assuming that public works are ill due to Pandemic all building maintenance will be done by hiring contractors to perform emergency maintenance work only. Only emergency vehicle maintenance will be conducted during a Pandemic.

Media Contact

Media will be directed to the Director's office. The names and numbers of the media contacting the centre will be asked for and provided to the Director of Corrections

- Director/Designate: Assistant Director Parker Kennedy
- 1-867-767-9263 ext. 82250 Cell: 447-0187

Record of Telephone Conversations

Attached is a form that will record telephone conversations of persons contacted, the time of the call, time reached and response of them being able to report to work. Following the form is a list of all FSCC staff and phone numbers.

Record of Telephone Conversations

Date: _____

Name of Person Contacted	Time Called	Time Reached	Response

Male unit Staff Home and Cell Phone Numbers

FSCC Management		
Gillis, Warren	Warden	s 23(1)
MacDonald, Toko	Deputy Warden - Male Unit	
Minute, Janelle	Deputy Warden - Female Unit	
Administrative		
Tourangeau, Eileen	Admin Officer	
Nurse		
El Mostapha, Klaled	Nurse	
Cook		
Ambawalage, Nilam	Cook Supervisor	
Rose, Trudy	Cook	
Case Manager		
Modeste, Kelvyn	Case Manager	
Corrections Supervisor		
Brake, Brad	Supervisor	
Burke, Duncan	Acting Supervisor	
Norn, Dwight	Supervisor	

Corrections Officers		
Emile, Freda	CO1	s 23(1)
Heidema, Chris	CO1	
Hunter, Ed	CO1	
Wasylyshyn, Tom	CO1	
Villeneuve, Gordon	CO1	
Phinney, Travis	CO1	
Rajasekaran, Balaji	Relief CO1	
Wiedrick, Adam	Relief CO1	
Relief Corrections Officers		
Brown, Krystal	Relief CO1	
Cumming, Paul	Relief CO1	
Davenport, Sonia	Relief CO1	
Dul, Diane	Relief CO1	
Gagnon, Eugene	Relief CO1	
Hudson, Millie	Relief CO1	
Mandeville, Shane	Relief CO1	
Mabbitt, Thomas	Relief CO1	
Meidl, Doug	Relief CO1	

Paulette, Cheyeanne	Relief CO1	s 23(1)
Phinney, Tyrrell	Relief CO1	
Ziemann, Margo	Relief CO1	
CNRTP GRADS		
Bird, Treyton	Relief CO1	
Dion, Jerry	Relief CO1	
Durno-Allen, Robin	Relief CO1	
Laviolette, Kyle	Relief CO1	
Okolie, Augustine	Relief CO1	
Relief cooks		
Germo, Linda	Relief Cook	
Mabbitt, Bev	Relief Cook	
Bourke, Judy	Relief Cook	
Mabbitt, Beverly	Relief Cook	
Mabbitt, Margaret	Relief Cook	

Female unit Staff Home and Cell Phone Numbers

FSCC Management		
Gillis, Warren	Warden	s 23(1)
Minute, Janelle	Deputy Warden Female unit	
MacDonald, Toko	Deputy Warden Male unit	

Administrative		
Tourangeau, Eileen	Admin Officer	s 23(1)
Case Manager		
Steed, Andrea	Case Manager	
Corrections Supervisor		
Van Mourik, Saskia	Supervisor	
Laviolette, Loretta	Supervisor	
Taylor, Delores	Acting Supervisor	
Corrections Officer		
Abraham, Flora	C01	
Laviolette, Colinda	C01	
Bennett, Kim	C01	
Douglas, Michaela	C01	
Kaaser, Courtney	Relief C01	
MacDonald, Michelle	C01	
Mezenberg, Lois	Relief C01/Cook	
Norn, Miranda	C01	
Relief Corrections Officers		
Belyea, Jenny	Relief C01	
Berton, Mary-Lynn	Relief C01	

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Brown, Krystal	Relief C01	s 23(1)
Bruno, Laura	Relief C01	
Cote, Genevieve	Relief C01	
Davenport, Sonia	Relief C01	
Dul, Dianne	Relief C01	
Evans, Kristy	Relief C01	
Froese, Kristen	Relief C01	
Hudson, Millie	Relief C01	
Kindopp, Rhona	Relief C01	
Koehler, Gaby	Relief C01	
Lepine-McFeeters, Karen	Relief C01	
MacDonald, Mary Beth Cochran	Relief C01	
MacKay-Johnson, Brenna	Relief C01	
Pischinger, Ann	Relief C01	
Relief cooks		
Germo, Linda	Relief Cook	
Mabbitt, Bev	Relief Cook	
Bourke, Judy	Relief Cook	
Mabbitt, Beverly	Relief Cook	

Mabbitt, Margaret	Relief Cook	s 23(1)
Program Staff		
Shymkiw, Jessica	Program staff	
Jones, Anthony (Tony)	Program staff	
McDonald, Erica	Teacher	
Schaefer, Doreen	Supervisor	
CNRTP GRADS		
Grant, Marie-Pier	Relief C01 - Term	
Kenny, Kelly	Relief C01 - Term	
Lapointe, Katherine	Relief C01 - Term	
MacLoed, Anna	Relief C01 - Term	
Skippings, Georgina	Relief C01 - Term	
Sharp, Athena	Relief C01 - Term	

Emergency and Other Contact Numbers:

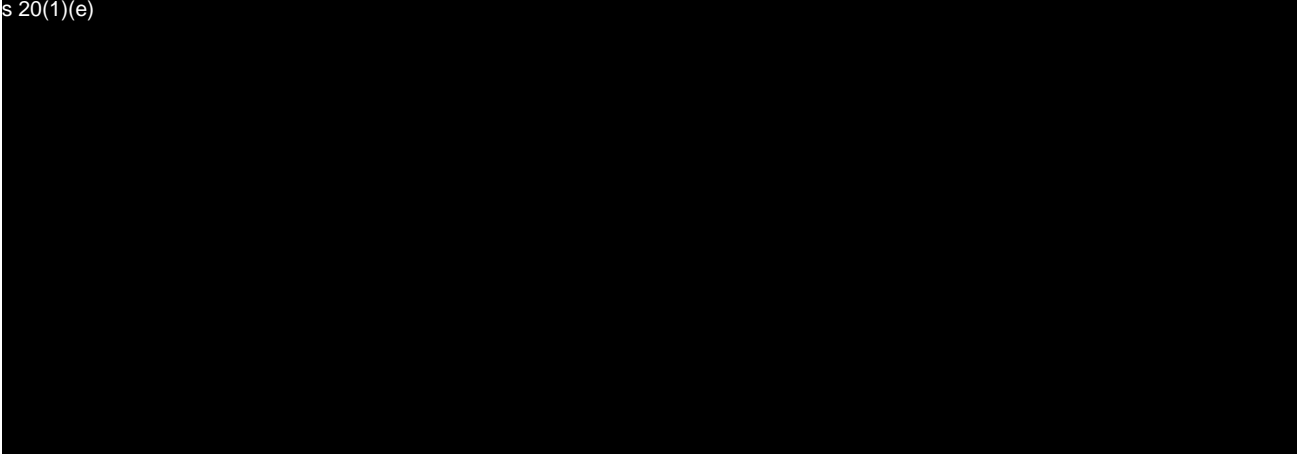
RCMP Complaints & Emergencies	872-1111 or (911)
Fire	872-2222
Ambulance	872-3111
Hospital	872-6200 or Emergency 872-6212
T.S.C.	867-920-4408
D.P.W.	867-872-7412
Telehealth	1-888-255-1010
SMCC	867-874-2798
FSCC – Women’s Unit	867-872-6565
FSCC – Male Unit	867-872-6557
NSYOF	867-766-6050
NSCC Escort Officer Cell	867-445-6636
NSCC Southern Escort Cell	867-445-1787

Plan "B"


Restricted Movement/Rotating Lockdowns

In the event that staffing levels decrease to the point where regular service delivery cannot continue, movement restrictions and rotating lockdowns will need to be implemented.

s 20(1)(e)



s 20(1)(e)




Normal routine of the centre will be restored as quickly as possible.

Restricted Movement/Rotating Lockdown Staffing Compliment:

Day shift

s
20(1)
(e)



Cook

Warden

Corrections Officers

Deputy Wardens

s 20

Nurse

Case Manager

Afternoon Shift

s 20

Cook

Corrections Officers

Corrections Supervisor

Night Shift

Corrections Supervisor

Corrections Officer

Facility Lockdown

s 20

s 20(1)(e)

Day Shift 0800 – 2000

Warden

s 20(1)(e)

Night Shift 2000 – 0800

Deputy Warden

s 20(1)(e)

Facility Lockdown

s 20(1)(e)

s 20(1)(e)

Day Shift 0800 – 2000

Warden

s 20(1)(e)

Night Shift 2000 – 0800

Headquarters Designate

s 20(1)(e)

Fort Smith Correctional Centre

Operational Shift Duties

The following information is simply a general list of operational duties performed by Excluded staff at the Fort Smith Correctional Complex.

Replacement Officer Briefing

Key Control:

s 20(1)(k)

The Warden will conduct this briefing.

Area Familiarization:

s 20(1)(e)

The Warden will conduct this briefing.

Radio Procedures:

s 20(1)(e)

The Warden will conduct this briefing.

➤ *Handover*

- *Conducted in the living Units*
- *Counts conducted by off going shift and ongoing shift*
- *Verify and receive keys/radio/sharps*
- *Discuss any concerns from previous shift*
- *Ensure all concerns and follow-up are recorded in log pass on book prior to end of shift*
- *Conduct Radio Check*
- *Assume Responsibility for Unit*

➤ *Routine*

- *Administer Inmate Requests*
- *Control and log all inmate movement in/out of unit*
- *Review copy of scheduled events*
- *Review COMS reports*
- *Supervise up to 18 offenders*
- *Supervise the delivery of the meals ensuring inmates only receive one meal*
- *Conduct a round of cells in the living unit hourly*
- *Provide showers, fresh air and phone calls to each inmate*
- *Ensure all cells meet appropriate cleanliness and are free of contraband*
- *Circulate throughout the inmate area ensuring the safety and security of all inmates*

➤ *Specific Night tasks*

Confidential

- *Complete area searches as detailed by the shift Supervisor*
- *Update inmate board as required (Inmate status, Job Placement)*
- *Process mail*

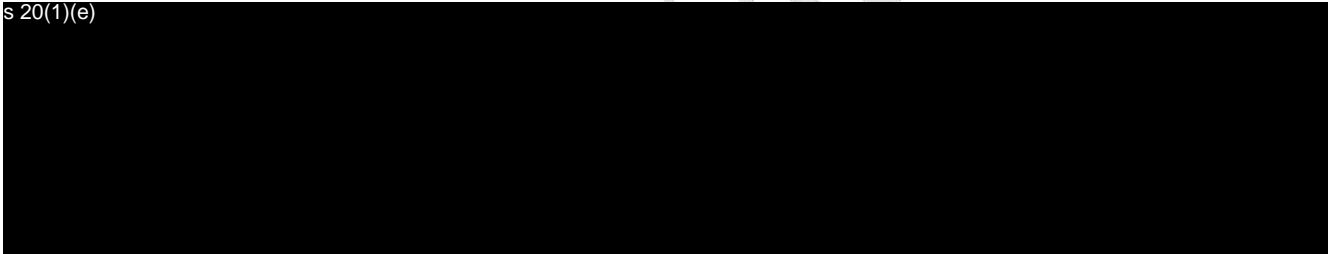
➤ *Specific Day Tasks*

- *Start Shift Summary, Phone Log, and Sharps Log*
- *Ensure inmates clean their cells and make their beds*
- *Ensure inmates complete chores as required*
- *Bed Sheet exchange as per schedule*

➤ *Specific Afternoon Tasks*

- *Confirm list of chores still needing to be completed*

s 20(1)(e)



Plan "C"

s 20(1)(k)





FORT SMITH CORRECTIONAL COMPLEX

Chapter:	7 – Contingency Planning
Standing Order:	7.02.03
Subject:	Epidemics and Outbreaks
Authority:	Directive 7.02 – Contingency Planning & Response Model
Units:	Adult & Youth

1.0 **STATEMENT OF POLICY**

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken in the event that an outbreak of a contagious disease at the FSCC. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at the FSCC a facility wide lockdown may be initiated for the duration of the situation.

2.0 **AUTHORITIES**

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 **ADDITIONAL DEFINITIONS**

- 3.1 **Epidemic**: a disease that spreads at a rate far in excess of the expected rate.
- 3.2 **Influenza-like illness outbreak**: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.
- 3.3 **Facility Lockdown**: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.
- 3.4 **Shift supervisor**: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift for the designated area of the complex (e.g. Corrections Supervisor, Deputy Warden of Operations in charge of the shift).

4.0 **PROVISIONS**

- 4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical pandemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.

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- 4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident. The roles and responsibilities of the Adult Unit Shift Supervisor and Youth Unit Shift Supervisor shall be defined using the chart in Appendix A.

PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to be in need of immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, shortness of breath or symptoms of influenza. Inmates with ILI symptoms should be placed directly into a unit designated for symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in units with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform medical services of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, shortness of breath, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, shortness of breath, fever or sweating they will immediately be given a mask, gown and gloves to wear by intake staff. Inmates will wear this for the duration of the intake process until they are cleared by nurses. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to medical for clearance the officers shall use an antiviral/antimicrobial wipe/solution to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a sealed biohazard bag. This bag will be given to medical to dispose of.

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- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a melt away bag and placed in a laundry bag to be washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Contact Precautions". Staff shall ensure that gloves, masks and gown are worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that all inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product.
- 4.10 Once the intake procedure has been completed, the inmate(s) shall be secured in a designated area until medically cleared by the medical staff. Medical staff shall advise the inmate(s) of the symptoms of the possible contagious disease and the precautions he/she should use to contain the spread of the illness. Once cleared, the inmate(s) will be moved to the living unit. If an inmate is symptomatic of a communicable disease, he/she will be housed in a separate area.
- 4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized with an antiviral/antimicrobial wipe to clean after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

- 4.12 Staffs who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.
- 4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the **Facility Nurse and Health Services Supervisor**. Inmate shall be placed on contact and droplet precautions by DWO until Health Services supervisor or other medical can be consulted.
- 4.14 Authorized persons will advise the Department of Health and Social Services, Office of the Chief Public Health Officer (867-767-9063 ext. 49215).
- 4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.

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- 4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.
- 4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services; Office of the Chief Public Health Officer advises that they are no longer required.
- 4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with reverse air intake or separate ventilation system.
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Pending extent of the outbreak it may result in the facility not being in a position to have inmates admitted to the facility for a period of time. If this is the case the RCMP will be notified and alternate arrangements confirmed with other facilities.



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4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic the areas listed below will be used to separate these inmates from non-symptomatic inmates. Should larger numbers of inmates be symptomatic then living units will be designated for the purpose of quarantine. Potential locations include:

- 1) Adult Unit (adult inmates)
 - a. Calm Cells;
 - b. Wet Cells;
 - c. other area as directed by authorized persons

4.24 During an outbreak all staff shall:

- a) Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b) Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently and before exiting and entering the pod. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c) Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using an antiviral/antimicrobial wipe/solution;
- d) Ensure that inmates sanitize any multi-use item with antiviral/antimicrobial wipe/solution before and after use;
- e) Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f) Ensure that mattresses are sanitized using antiviral/antimicrobial wipe/solution when passed from inmate to inmate and mattresses are not to be moved from a pod housing symptomatic inmates to any other pod;
- g) Ensure all cells are sanitized using antiviral/antimicrobial wipe/solution when they are vacated and assigned to a different inmate;
- h) Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i) Ensure that laundry is washed in hot water each evening.



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- 4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after consultation with the Office of the Chief Public Health Officer.
- 4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

- 4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.
- 4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).
- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake;
 - b) Medical **Unit** and Isolation;
 - c) Units designated to hold symptomatic inmates (masks for inmates and staff); and
 - d) Kitchen (gloves only).
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Medical staff shall arrange for medical staff coverage by contacting relief nursing staff should medical staff become unavailable.

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- 4.32 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or antiviral/antimicrobial wipe/solution is readily available for facility use. Staff and inmates shall be encouraged to wash their hands with soap and water often. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.33 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.34 The Food Services Supervisor shall ensure that a sufficient number of staff is orientated in the use of kitchen equipment in the event that cooks are not available.
- 4.35 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.
- 4.36 The Food Services Supervisor shall purchase readymade meals as required. Facility staff with possibly assistance from inmate kitchen staff shall prepare these meals.
- 4.37 Ensuring additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.38 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.39 Inmates who are symptomatic will be given extra fluids as directed by health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.40 ^{s 20(1)(e)} ^{s 20(1)(e)} Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.
- 4.41 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.

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4.42 If there are insufficient FSCC staff members available to maintain essential operations, a

s 20(1)(e)

4.43 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

A Major Incident – Location Responsibility Chart

B Health Screening Questionnaire

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APPENDIX A Major Incident – Location Responsibility Chart

Location of Major Incident	Immediate Reporting Structure	Role of Shift Supervisor
Adult Unit	<ul style="list-style-type: none">➤ Staff report to FSCC Shift Supervisor;➤ FSCC Shift Supervisor will notify appropriate parties;	FSCC Shift Supervisor = Crisis Manager until relieved by Warden or designate

Note: Should a major incident occur that affects the entire complex (e.g. bomb threat, evacuation) **FSCC Shift Supervisor** shall manage the incident until the Warden or designate has assumed the role of **Crisis Manager**.



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APPENDIX B

Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by medical staff.

- The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to Medical staff for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, difficulty breathing, new or worsening cough, fatigue, runny nose, headache, diarrhea, loss of sense of smell, generally feeling unwell)	Yes / No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes / No
3.	Have you recently travelled out of the Northwest Territories within the last 14 days or come into contact with someone who has? If so where did you/they travel?	Yes / No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes / No
5.	Are you taking any medications that we should be immediately aware of?	Yes / No
6.	Do you have any allergies that you are aware of?	Yes / No
7.	Temperature taking is required prior to any entrance of the FSCC. Any temperature that has been taken that is 37.8 Celsius or higher will require the individual to be placed Droplet Precautions and PPE will be required for staff and the inmate until assessed by medical staff.	Temp is: _____

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Medical Staff Signature: _____ **Date:** _____

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APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by the Nurse.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to the Nurse for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, difficulty breathing, new or worsening cough, fatigue, runny nose, headache, diarrhea, loss of sense of smell, generally feeling unwell)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled out of the Northwest Territories within the last 14 days or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes No
5.	Are you taking any medications that we should be immediately aware of?	Yes No
6.	Do you have any allergies that you are aware of?	Yes No
7.	Temperature taking is required prior to any entrance of the FSCC. Any temperature that has been taken that is 38.0 Celsius or higher will require the individual to be placed Droplet Precautions and PPE will be required for staff and the inmate until assessed by medical staff.	Temp is: _____ _____

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Nurse Signature: _____ **Date:** _____



Fort Smith Correctional Complex
Male Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

1.0 STATEMENT OF POLICY

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken if an outbreak of a contagious disease at the FSCC Male Unit. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at the FSCC Male Unit, a facility wide lockdown may be initiated for the duration of the situation.

2.0 AUTHORITIES

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 ADDITIONAL DEFINITIONS

3.1 Epidemic: a disease that spreads at a rate far in excess of the expected rate.

3.2 Influenza-like illness outbreak: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.

3.3 Facility Lockdown: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.

3.4 Shift supervisor: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift for the designated area of the complex (e.g. Corrections Supervisor, Deputy Warden).

4.0 PROVISIONS

4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical pandemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.

4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident.



Fort Smith Correctional Complex
Male Unit

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PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to need immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, or symptoms of influenza. Inmates with ILI symptoms should be placed directly into a unit designated for symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in units with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform the Nurse of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, fever or sweating they will immediately be given a mask, gown and gloves to wear. Inmates will wear this for the duration of the intake process until they are cleared by the Nurse. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to the Nurse's office for clearance the officers shall use an antiviral/antimicrobial wipe to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a sealed biohazard bag. This bag will be given to medical to dispose of.
- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a melt away bag and placed in a laundry bag to be washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Contact Precautions". Staff shall ensure that gloves and masks are worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product.



Fort Smith Correctional Complex
Male Unit

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4.10 Once the intake procedure has been completed, inmates shall be secured in a designated area until medically cleared by the Nurse. The Nurse shall advise inmates of the symptoms of the possible contagious disease and the precautions they should use to contain the spread of the illness. Once cleared, inmates will be moved to general population. If an inmate is symptomatic of a communicable disease, they will be housed in a separate area (e.g. wet cells).

4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized with an antiviral/antimicrobial wipe to clean after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

4.12 Staff who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.

4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the Facility Nurse and Health Services Supervisor. Inmate shall be placed on contact and droplet precautions by DWO until Health Services supervisor or other medical can be consulted.

4.14 Wardens or designate will advise the Department of Health and Social Services, Office of the Chief Public Health Officer (867-767-9063 ext. 49215).

4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.

4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.

4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services, Office of the Chief Public Health Officer advises that they are no longer required.

4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.



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Male Unit

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Authority: Directive 7.02

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with reverse air intake or separate ventilation system (wet cells).
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Depending on the extent of the outbreak it may result in the facility not being able to have inmates admitted. If this is the case the RCMP will be notified and alternate arrangements shall be confirmed with other facilities.
- 4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, the areas listed below will be used to separate these inmates from non-symptomatic inmates.
Potential locations include:
- a. Wet Cells;
 - b. Other areas as directed by authorized persons



Fort Smith Correctional Complex
Male Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

4.24 During an outbreak all staff shall:

- a. Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b. Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently and before exiting and entering the pod. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c. Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using an antiviral/antimicrobial wipe/solution;
- d. Ensure that inmates sanitize any multi-use item with antiviral/antimicrobial wipe/solution before and after use;
- e. Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f. Ensure that mattresses are sanitized using antiviral/antimicrobial wipe/solution when passed from inmate to inmate and mattresses are not to be moved from a pod housing symptomatic inmates to any other pod;
- g. Ensure all cells are sanitized using antiviral/antimicrobial wipe/solution when they are vacated and assigned to a different inmate;
- h. Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i. Ensure that laundry is washed in hot water each evening.

4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after consultation with the Office of the Chief Public Health Officer.

4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.

4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).



Fort Smith Correctional Complex
Male Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- Intake Area;
 - Wet Cells; and
 - Kitchen (gloves only).
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or equivalent are readily available for facility use. Non-alcoholic hand sanitizers will be used in inmate living areas. Staff and inmates shall be encouraged to wash their hands with soap and water often, as opposed to using hand sanitizers. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.32 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.33 The Food Services Supervisor shall ensure that staff are orientated in the use of kitchen equipment if cooks are not available.
- 4.34 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.
- 4.35 The Food Services Supervisor shall ensure that additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.36 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.37 Inmates who are symptomatic may be given extra fluids as directed by the health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.38 s 20(1)(e)
s 20(1)(e) Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.



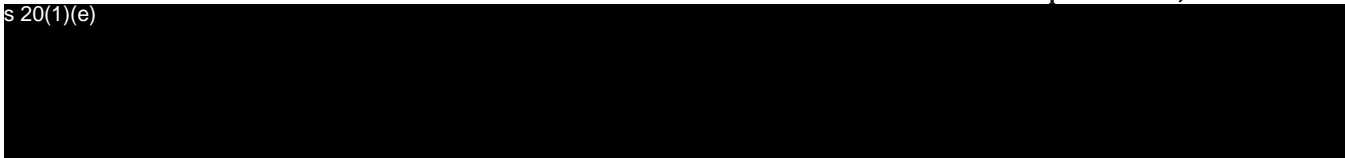
Fort Smith Correctional Complex
Male Unit

Chapter: 7 - Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

4.39 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.

4.40 If there are insufficient FSCC staff members available to maintain essential operations, a
s 20(1)(e)



4.41 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 - Contingency Planning & Response Model
- 9.01 - Admission
- 9.05 - Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

- A Major Incident - Location Responsibility Chart
- B Health Screening Questionnaire



Chapter: 7 - Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

APPENDIX A

Major Incident – Location Responsibility Chart

Location of Major Incident	Immediate Reporting Structure	Role of Shift Supervisor
Adult Unit	<ul style="list-style-type: none"> ➤ Staff report to FSCC Shift Supervisor; ➤ FSCC Shift Supervisor will notify appropriate parties; 	FSCC Shift Supervisor = Crisis Manager until relieved by Warden or designate

Note: Should a major incident occur that affects the entire complex (e.g. bomb threat, evacuation) **FSCC Shift Supervisor** shall manage the incident until the Warden or designate has assumed the role of **Crisis Manager**.



Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by the Nurse.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to the Nurse for further assessment.

Inmate Name: _____ **Date of Birth:** _____

Circle One

1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, difficulty breathing, new or worsening cough, fatigue, runny nose, headache, diarrhea, loss of sense of smell, generally feeling unwell)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled out of the Northwest Territories within the last 14 days or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes No
5.	Are you taking any medications that we should be immediately aware of?	Yes No
6.	Do you have any allergies that you are aware of?	Yes No
7.	Temperature taking is required prior to any entrance of the FSCC. Any temperature that has been taken that is 38.0 Celsius or higher will require the individual to be placed Droplet Precautions and PPE will be required for staff and the inmate until assessed by medical staff.	Temp is: _____

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Nurse Signature: _____ **Date:** _____



APPENDIX C Temperature Taking Protocol

All individuals that require access to the Fort Smith Correctional Complex (FSCC) are required to comply with temperature taking. Temperature screening will be conducted during the screening assessments for all inmates, staff and visitors/contractors that require access to the FSCC. The purpose of the temperature screening is to help ensure that we manage any potential concerns related to the symptoms of the COVID-19.

- The following protocol is mandatory for all staff

Inmate/Youth Assessments

Adult Services

1. Staff completing the Inmate Health Screening Questionnaire shall complete the assessment and temperature screening at the RCMP cells and/or courthouse.
2. Prior to completing the assessment and temperature screening staff shall don a surgical mask and gloves. PPE shall be worn at all time when conducting assessments at the RCMP and/or Courthouse.
3. Staff shall point the temperature device at the right temporal region of the inmate from a distance of approximately 3 cm – 5 cm and press the button.
4. If an inmate has a temperature reading of 38 degrees Celsius or higher they must don PPE for contact and droplet precautions until assessed by medical staff.
5. Inmates that have a negative assessment must be isolated from other inmates until assessed by medical staff.



Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

Staff Assessments

1. Staff delegated for completing the Essential Services - Occupational Questionnaire shall complete the assessment and temperature screening at the base of the stairs leading to the security envelope. Under no circumstances shall any staff member enter any secure door of the FSCC without being assessed and cleared for duty.
2. The staff member completing the assessment shall be required don a cloth mask, gloves and the staff member being assessed shall also don a cloth mask for the assessment process.
3. In the event that the staff member being assessed does not have a cloth mask the assessor shall don a procedural mask to complete the temperature screening. Staff without a cloth mask shall be advised to see the supervisor to address the need of a cloth mask.
4. If a staff member has a temperature reading of 38 degrees Celsius or higher they must be directed to leave the FSCC and contact public health. The staff member shall also be advised that a manager from the FSCC will be in contact with them to make arrangements for the return to work processes. The staff member that has completed the assessment shall fill out the Denied Entry Tracking Form and submit the form to the Warden.

Visitor and Contractor Assessments

1. Staff completing the Visitor and Contractor Questionnaire shall complete the assessment and temperature screening through the bubble of the administration area (glass enclosed area inside of the administration area). Under no circumstances shall any visitor or contractor enter the security envelope of the FSCC without being assessed and cleared for access.
2. Staff shall point the temperature device at the right temporal region of the visitor/contractor through the opening of the glass partition, with the visitor/contractor facing to their left so the temperature device can be aimed at the appropriate area and press the button.
3. If a staff member is completing the assessment in a different location from the bubble area both the visitor/contractor and the assessor shall don cloth masks, in the event that cloth mask is not being worn by the visitor/contractor a procedural mask will be required for the assessment process.
4. If a visitor/contractor has a temperature reading 38 degrees Celsius or higher they must be directed to leave the FSCC and contact public health.



Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

1.0 STATEMENT OF POLICY

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken if an outbreak of a contagious disease at the FSCC Women's Unit. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at the FSCC Women's Unit, a facility wide lockdown may be initiated for the duration of the situation.

2.0 AUTHORITIES

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 ADDITIONAL DEFINITIONS

3.1 Epidemic: a disease that spreads at a rate far in excess of the expected rate.

3.2 Influenza-like illness outbreak: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.

3.3 Facility Lockdown: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.

3.4 Shift supervisor: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift for the designated area of the complex (e.g. Corrections Supervisor, Deputy Warden).

4.0 PROVISIONS

4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical pandemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.

4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident.



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to need immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, or symptoms of influenza. Inmates with ILI symptoms should be placed directly into a unit designated for symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in units with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform the Nurse of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, fever or sweating they will immediately be given a mask, gown and gloves to wear. Inmates will wear this for the duration of the intake process until they are cleared by the Nurse. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to the Nurse's office for clearance the officers shall use an antiviral/antimicrobial wipe to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a sealed biohazard bag. This bag will be given to medical to dispose of.
- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a melt away bag and placed in a laundry bag to be washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Contact Precautions". Staff shall ensure that gloves and masks are worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product.



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 - Contingency Planning
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4.10 Once the intake procedure has been completed, inmates shall be secured in a designated area until medically cleared by the Nurse. The Nurse shall advise inmates of the symptoms of the possible contagious disease and the precautions they should use to contain the spread of the illness. Once cleared, inmates will be moved to general population. If an inmate is symptomatic of a communicable disease, they will be housed in a separate area (e.g. Calm cells).

4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized with an antiviral/antimicrobial wipe to clean after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

4.12 Staff who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.

4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the Facility Nurse and Health Services Supervisor. Inmate shall be placed on contact and droplet precautions by DWO until Health Services supervisor or other medical can be consulted.

4.14 Wardens or designate will advise the Department of Health and Social Services, Office of the Chief Public Health Officer (867-767-9063 ext. 49215).

4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.

4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.

4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services, Office of the Chief Public Health Officer advises that they are no longer required.

4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION - CONTROLLED MOVEMENTS



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with reverse air intake or separate ventilation system (Calm cells).
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Depending on the extent of the outbreak it may result in the facility not being able to have inmates admitted. If this is the case the RCMP will be notified and alternate arrangements shall be confirmed with other facilities.
- 4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, the areas listed below will be used to separate these inmates from non-symptomatic inmates.
Potential locations include:
- a. Calm Cells;
 - b. A Wing of the Living Quarters
 - c. Other areas as directed by authorized persons



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

4.24 During an outbreak all staff shall:

- a. Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b. Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently and before exiting and entering the pod. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c. Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using an antiviral/antimicrobial wipe/solution;
- d. Ensure that inmates sanitize any multi-use item with antiviral/antimicrobial wipe/solution before and after use;
- e. Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f. Ensure that mattresses are sanitized using antiviral/antimicrobial wipe/solution when passed from inmate to inmate and mattresses are not to be moved from a pod housing symptomatic inmates to any other pod;
- g. Ensure all cells are sanitized using antiviral/antimicrobial wipe/solution when they are vacated and assigned to a different inmate;
- h. Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i. Ensure that laundry is washed in hot water each evening.

4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after consultation with the Office of the Chief Public Health Officer.

4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.

4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake Area;
 - b) Calm Cells;
 - c) Units designated to hold symptomatic inmates (masks for inmates and staff); and
 - d) Kitchen (gloves only).
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or equivalent are readily available for facility use. Non-alcoholic hand sanitizers will be used in inmate living areas. Staff and inmates shall be encouraged to wash their hands with soap and water often, as opposed to using hand sanitizers. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.32 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.33 The Food Services Supervisor shall ensure that staff are orientated in the use of kitchen equipment if cooks are not available.
- 4.34 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.
- 4.35 The Food Services Supervisor shall ensure that additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.36 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.37 Inmates who are symptomatic may be given extra fluids as directed by the health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.38 s 20(1)(e)
s 20(1)(e) Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
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4.39 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.

4.40 If there are insufficient FSCC staff members available to maintain essential operations, a

s 20(1)(e)

4.41 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

- A Major Incident – Location Responsibility Chart
- B Health Screening Questionnaire
- C Temperature Taking Protocol



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

APPENDIX A

Major Incident – Location Responsibility Chart

Location of Major Incident	Immediate Reporting Structure	Role of Shift Supervisor
Adult Unit	<ul style="list-style-type: none"> ➤ Staff report to FSCC Shift Supervisor; ➤ FSCC Shift Supervisor will notify appropriate parties; 	FSCC Shift Supervisor = Crisis Manager until relieved by Warden or designate

Note: Should a major incident occur that affects the entire complex (e.g. bomb threat, evacuation) **FSCC Shift Supervisor** shall manage the incident until the Warden or designate has assumed the role of **Crisis Manager**.



Chapter: 7 – Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by the Nurse.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to the Nurse for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, difficulty breathing, new or worsening cough, fatigue, runny nose, headache, diarrhea, loss of sense of smell, generally feeling unwell)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled out of the Northwest Territories within the last 14 days or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes No
5.	Are you taking any medications that we should be immediately aware of?	Yes No
6.	Do you have any allergies that you are aware of?	Yes No
7.	Temperature taking is required prior to any entrance of the FSCC. Any temperature that has been taken that is 38.0 Celsius or higher will require the individual to be placed Droplet Precautions and PPE will be required for staff and the inmate until assessed by medical staff.	Temp is: _____

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Nurse Signature: _____ **Date:** _____



APPENDIX C Temperature Taking Protocol

All individuals that require access to the Fort Smith Correctional Complex (FSCC) are required to comply with temperature taking. Temperature screening will be conducted during the screening assessments for all inmates, staff and visitors/contractors that require access to the FSCC. The purpose of the temperature screening is to help ensure that we manage any potential concerns related to the symptoms of the COVID-19.

- The following protocol is mandatory for all staff

Inmate Assessments

Adult Services

1. Staff completing the Inmate Health Screening Questionnaire shall complete the assessment and temperature screening at the RCMP cells and/or courthouse.
2. Prior to completing the assessment and temperature screening staff shall don a surgical mask and gloves. PPE shall be worn at all time when conducting assessments at the RCMP and/or Courthouse.
3. Staff shall point the temperature device at the right temporal region of the inmate from a distance of approximately 3 cm – 5 cm and press the button.
4. If an inmate has a temperature reading of 38 degrees Celsius or higher they must don PPE for contact and droplet precautions until assessed by medical staff.
5. Inmates that have a negative assessment must be isolated from other inmates until assessed by medical staff.



Fort Smith Correctional Complex
Women's Unit

Chapter: 7 - Contingency Planning
Standing Order: 7.02.03

Subject: Epidemics & Outbreaks
Authority: Directive 7.02

Staff Assessments

1. Staff delegated for completing the Essential Services - Occupational Questionnaire shall complete the assessment and temperature screening at the base of the stairs leading to the security envelope. Under no circumstances shall any staff member enter any secure door of the FSCC without being assessed and cleared for duty.
2. The staff member completing the assessment shall be required don a cloth mask, gloves and the staff member being assessed shall also don a cloth mask for the assessment process.
3. In the event that the staff member being assessed does not have a cloth mask the assessor shall don a procedural mask to complete the temperature screening. Staff without a cloth mask shall be advised to see the supervisor to address the need of a cloth mask.
4. If a staff member has a temperature reading of 38 degrees Celsius or higher they must be directed to leave the FSCC and contact public health. The staff member shall also be advised that a manager from the FSCC will be in contact with them to make arrangements for the return to work processes. The staff member that has completed the assessment shall fill out the Denied Entry Tracking Form and submit the form to the Warden.

Visitor and Contractor Assessments

1. Staff completing the Visitor and Contractor Questionnaire shall complete the assessment and temperature screening through the bubble of the administration area (glass enclosed area inside of the administration area). Under no circumstances shall any visitor or contractor enter the security envelope of the FSCC without being assessed and cleared for access.
2. Staff shall point the temperature device at the right temporal region of the visitor/contractor through the opening of the glass partition, with the visitor/contractor facing to their left so the temperature device can be aimed at the appropriate area and press the button.
3. If a staff member is completing the assessment in a different location from the bubble area both the visitor/contractor and the assessor shall don cloth masks, in the event that cloth mask is not being worn by the visitor/contractor a procedural mask will be required for the assessment process.
4. If a visitor/contractor has a temperature reading 38 degrees Celsius or higher they must be directed to leave the FSCC and contact public health.



SOUTH MACKENZIE CORRECTIONAL CENTRE

Chapter:	7 – Contingency Planning
Standing Order:	7.02.03
Subject:	Epidemics and Outbreaks
Authority:	Directive 7.02 – Contingency Planning & Response Model
Units:	Adult

1.0 STATEMENT OF POLICY

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken in the event that an outbreak of a contagious disease occurs at SMCC. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at SMCC a lockdown may be initiated for the duration of the situation.

2.0 AUTHORITIES

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 ADDITIONAL DEFINITIONS

- 3.1 Epidemic: a disease that spreads at a rate far in excess of the expected rate.
- 3.2 Influenza-like illness outbreak: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.
- 3.3 Facility Lockdown: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.
- 3.4 Shift supervisor: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift (e.g. Corrections Supervisor, Deputy Warden of Operations in charge of the shift).

4.0 PROVISIONS

- 4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical pandemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.



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- 4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident. The roles and responsibilities of the Shift Supervisor shall be defined using the chart in Appendix A.

PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to be in need of immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, or symptoms of influenza. Inmates with ILI symptoms should be placed directly into medical holding or designated area for holding symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in general population with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform medical services of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, shortness of breath, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, shortness of breath, fever or sweating they will immediately be given a mask, gown and gloves to wear by intake staff. Inmates will wear this for the duration of the intake process until they are cleared by nurses. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to medical for clearance the officers shall use an antiviral/antimicrobial wipe/solution to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a biohazard bag. This bag will be given to medical to dispose of.

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- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a water soluble bag and washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Infection Precautions". Staff shall ensure that a mask, gloves, gowns (and other PPE determined by medical) is worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that all inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product, secondary officer to witness.
- 4.10 Once the intake procedure has been completed, the inmate(s) shall be secured in a designated area until medically cleared by the medical staff. Medical staff shall advise the inmate(s) of the symptoms of the possible contagious disease and the precautions he should use to contain the spread of the illness. Once cleared, the inmate(s) will be moved to general population. If an inmate is symptomatic of a communicable disease, he will be housed in a separate area.
- 4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized with an antiviral/antimicrobial wipe to clean after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

- 4.12 Staff who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.
- 4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the Institutional Nurse. Inmate shall be placed on contact and droplet precautions by DWO until Institutional Nurse or other medical can be consulted.
- 4.14 Authorized persons will advise the Department of Health and Social Services, Office of the Chief Public Health Officer (867-767-9063 ext. 49215).
- 4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.



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- 4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.
- 4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services; Office of the Chief Public Health Officer advises that they are no longer required.
- 4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with a separate ventilation system.
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Pending extent of the outbreak it may result in the facility not being in a position to have inmates admitted to the facility for a period of time. If this is the case the RCMP will be notified and alternate arrangements confirmed with other facilities.



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4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic the areas listed below will be used to separate these inmates from non-symptomatic inmates. Should larger numbers of inmates be symptomatic then other areas will be designated for the purpose of quarantine. Potential locations include:

- a. Medical holding cell;
- b. Secure Cells;
- c. Remand unit;
- e. other area as directed by authorized persons

4.24 During an outbreak all staff shall:

- a) Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b) Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c) Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using an antiviral/antimicrobial wipe/solution;
- d) Ensure that inmates sanitize any multi-use item with antiviral/antimicrobial wipe/solution before and after use;
- e) Wear masks, gloves and gowns (and other PPE determined by medical) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f) Ensure that mattresses are sanitized using antiviral/antimicrobial wipe/solution when passed from inmate to inmate and mattresses are not to be moved from dorms or areas housing symptomatic inmates;
- g) Ensure all cells are sanitized using using antiviral/antimicrobial wipe/solution when they are vacated and assigned to a different inmate;
- h) Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i) Ensure that laundry is washed in hot water each evening.



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- 4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear masks and gloves (and other PPE determined by medical) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after authorized persons consult with the Office of the Chief Public Health Officer.
- 4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in authorized area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

- 4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.
- 4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).
- 4.29 Issuance of masks and gloves shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake;
 - b) Medical Holding and Isolation;
 - c) Areas designated to hold symptomatic inmates (masks for inmates and staff) and
 - d) Kitchen (gloves only)
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Medical staff shall inform the Warden or designate of need for casual nursing staff.
- 4.32 Authorized persons shall ensure that adequate supplies of masks and gowns are available. Hand sanitizer or antiviral/antimicrobial wipe/solution are readily available for facility use. Staff and inmates shall be encouraged to wash their hands with soap and water often. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

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MEAL PROVISIONS

- 4.33 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.34 The Food Services Supervisor shall ensure that a sufficient number of staff are orientated in the use of kitchen equipment in the event that cooks are not available.
- 4.35 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.
- 4.36 The Food Services Supervisor shall contact local providers for readymade meals as required.
- 4.37 Ensuring additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.38 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.39 Inmates who are symptomatic will be given extra fluids as directed by health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

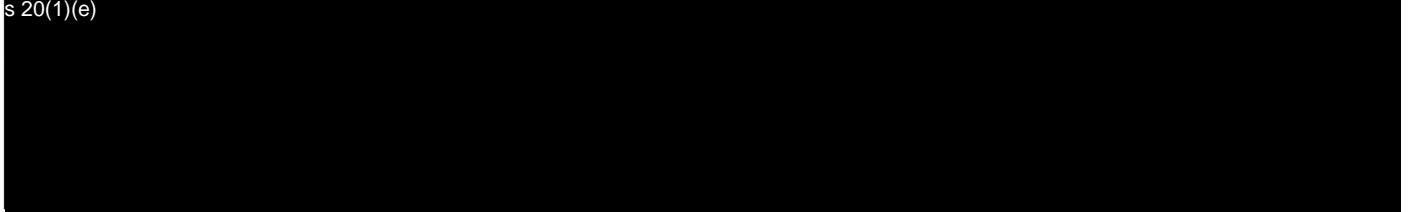
- 4.40 ^{s 20(1)(e)} [REDACTED] ^{s 20(1)(e)} Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.
- 4.41 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.



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4.42 If there are insufficient SMCC staff members available to maintain essential operations, as s 20(1)(e)



4.43 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

Appendices Document Title

A Command Post Roles & Responsibilities

B Health Screening Questionnaire



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APPENDIX A Command Post Roles & Responsibilities

Role	General Description of Responsibilities
Crisis Manager	This role would normally be placed upon the Warden/Manager or designate. The shift supervisor may be required to act in this role until the designate arrives on the scene to assume control. This person in charge takes full responsibility of and remains in command of the situation unless relieved.
Assistant Crisis Manager	A senior officer appointed by the Crisis Manager to record events as they occur and to communicate with the Director and others as directed by the Crisis Manager (e.g. families of hostages). This person would relieve the Crisis Manager as required.
Recorder or Scribe	A person appointed by the Crisis Manager to document the entire situation in chronological order.
Primary Negotiator	A person trained in negotiations designated to communicate directly with the aggressor(s) of the incident (e.g. hostage takers) and reports directly to the Crisis Manager. RCMP contacts and divisional trained negotiators shall be listed in facility standing orders.
Secondary Negotiator	A person trained in negotiations that takes direction from the Primary Negotiator, records all pertinent information during the negotiations and replaces the Primary Negotiator if required.
Communications Officer	A senior officer who reports to the Crisis Manager that is responsible for all communications equipment, communications between the Command Post and other areas, logging all communications to and from the Command Post and briefing the Crisis Manager on all reports received.
RCMP	A designated RCMP Officer who shall liaison between the facility personnel and the RCMP negotiator(s) and/or RCMP Emergency Response Team.

Note: All command post roles are not required to be filled for each incident. The crisis manager shall staff the command post with any personnel that he/she sees fit to assist in resolving the situation.

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APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by medical staff.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to Medical staff for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, vomiting, bone or joint aches, muscle aches, shortness of breath, sweating, sore throat, coughing or fatigue)	Yes No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes No
3.	Have you recently travelled domestically or internationally or come into contact with someone who has? If so where did you/they travel?	Yes No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes No
4.	Are you taking any medications that we should be immediately aware of?	Yes No
5.	Do you have any allergies that you are aware of?	Yes No

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Medical Staff Signature: _____ **Date:** _____



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1.0 STATEMENT OF POLICY

This policy is a continuation of Directive 7.02 – Contingency Planning & Response Model and describes the contingency measures to be taken in the event that an outbreak of a contagious disease occurs at SMCC. The facility will need to work closely with the Department of Health and Social Services, Office of the Chief Public Health Officer should this contingency be enacted. In the event of an epidemic/outbreak at SMCC a lockdown may be initiated for the duration of the situation.

2.0 AUTHORITIES

Public Health Act (NWT) (2008)
Corrections Service Regulations (NWT)
Director of Corrections

3.0 ADDITIONAL DEFINITIONS


- 3.1 Epidemic: a disease that spreads at a rate far in excess of the expected rate.
- 3.2 Influenza-like illness outbreak: a viral infection that attacks the respiratory system; nose, throat and lungs. Influenza, commonly called the flu, is not the same as the stomach "flu" viruses that cause diarrhea and vomiting.
- 3.3 Facility Lockdown: when the facility confines all inmates to his/her cell/room (or specified location within the building) for the purpose of verifying count and gaining control of a major incident.
- 3.4 Shift supervisor: for the purpose of contingency policies this terminology is used for the "Officer in charge" or supervisor on shift (e.g. Corrections Supervisor, Deputy Warden of Operations in charge of the shift).

4.0 PROVISIONS

- 4.1 Authorized persons shall ensure that all essential services are delivered in the event of a medical epidemic and that inmates displaying symptoms of a communicable disease are dealt with according to this standing order.

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- 4.2 All provisions detailed in Directive 7.02 – Contingency Planning & Response Model shall be applied based on the nature of the emergency, location and time of the major incident. The roles and responsibilities of the Shift Supervisor shall be defined using the chart in Appendix A.

PREVENTION

- 4.3 Authorized persons shall ensure that no inmate will be admitted who appears to be in need of immediate medical attention unless accompanied by a medical certificate of treatment signed subsequent to a medical examination (9.01 – Admission).
- 4.4 All inmates on admission to the facility shall be checked for influenza-like illness (ILI), that is, fever and cough, shortness of breath or symptoms of influenza. Inmates with ILI symptoms should be placed directly into medical holding or designated area for holding symptomatic inmates.
- 4.5 All inmates transferred from other facilities shall be seen by the nurse to confirm medical clearance prior to placement in general population with other medically cleared inmates. No inmate who is showing signs of Influenza type illness shall be transferred to another correctional facility until cleared by medical.
- 4.6 Admitting staff shall ensure that all admitted inmates are searched and placed into a holding cell separate from all other inmates. Each inmate must have a health screening questionnaire completed upon admission to a facility (Appendix B). Inmates shall not be placed in general population until this questionnaire is completed and there does not appear to be any signs of communicable disease.
- 4.7 Staff shall immediately inform medical services of any inmate with medical symptoms for illnesses/diseases (e.g. draining wounds, fever, cough, shortness of breath, sweating, bleeding, boils, injuries, and any stated illness). If an inmate is showing any symptoms of cough, shortness of breath, fever or sweating they will immediately be given a mask, gown and gloves to wear by intake staff. Inmates will wear this for the duration of the intake process until they are cleared by medical services. Officers will also wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) for the duration of the intake process on that specific inmate. Once the inmate is taken to medical for clearance the officers shall use an antiviral/antimicrobial wipe/solution to clean the intake area where inmate was assessed, and the officers will dispose of their PPE into a biohazard bag. This bag will be given to medical to dispose of when full.



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- 4.8 Admitting staff shall ensure that all potentially contaminated clothing is sealed in a water soluble bio-hazard bag and washed in hot water with detergent. The admitting officer shall tape the inmate's name and number and label the laundry bag as "Use Infection Precautions". Staff shall ensure that PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) is worn when handling potentially contaminated clothing.
- 4.9 Admitting staff must ensure that all inmates are showered and use a delousing lotion over the entire body, concentrating on hair covered areas. The inmate will be supervised by an officer of the same sex as the inmate to ensure proper usage of the product, secondary officer to witness.
- 4.10 Once the intake procedure has been completed, the inmate(s) shall be secured in a designated area until medically cleared by the medical staff. Medical staff shall advise the inmate(s) of the symptoms of the possible contagious disease and the precautions he should use to contain the spread of the illness. Once cleared, the inmate(s) will be moved to general population. If an inmate is symptomatic of a communicable disease, he will be housed in a separate area.
- 4.11 Admitting staff must ensure that all surfaces are cleaned and sanitized after each admission. Areas that shall be cleaned include: desk/counter surfaces, keyboards, telephones, shower and washroom areas, and any other area in which the inmate has been in contact.

SUSPECTED OUTBREAK

- 4.12 Staff who have reasonable grounds to believe that a larger than expected number of inmates are ill and exhibit the same or similar symptoms such as those associated with an influenza-like illness will inform the Shift Supervisor.
- 4.13 The Shift Supervisor shall notify the Warden or designate who will consult with the Institutional Nurse. Inmate shall be placed on contact and droplet precautions by DWO until Institutional Nurse or other medical can be consulted.
- 4.14 Authorized persons will advise the Department of Health and Social Services, Office of the Chief Public Health Officer.
- 4.15 The Department of Health and Social Services, Office of the Chief Public Health Officer will determine if there is an outbreak and advise accordingly.

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- 4.16 Based on advice and recommendations of the Department of Health and Social Services, Office of the Chief Public Health Officer and until risks of disease spread to others are clear, authorized persons may quarantine individuals, limit movements and establish additional precautions to limit the spread of outbreak.
- 4.17 Authorized persons shall ensure that all precautions remain in place until the Department of Health and Social Services, Office of the Chief Public Health Officer advises that they are no longer required.
- 4.18 Authorized persons shall contact the Director of Corrections as soon as possible regarding any epidemics. A detailed report shall be submitted to the Director of Corrections within 24 hours of the incident and not more than five (5) days from the time of the incident if circumstances exist preventing earlier reporting.

SEPARATION – CONTROLLED MOVEMENTS

- 4.19 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic, authorized persons shall assign areas to separate these inmates from non-symptomatic inmates preferably in an area with a separate ventilation system.
- 4.20 Medical staff shall ensure that all inmates are assessed for symptoms and that all suspected infectious individuals are isolated until the individual has been symptom free for at least twenty-four (24) hours and medical has determined that the inmate can be removed from isolation and precautions.
- 4.21 In accordance with section 16 of the Corrections Service Regulations (NWT) those inmates that are due for discharge, but are suffering from symptoms, will not be discharged until cleared by the Chief Medical Officer (9.05 – Discharge).
- 4.22 During an outbreak staff shall minimize movement inside the facility wherever possible. Pending extent of the outbreak it may result in the facility not being in a position to have inmates admitted to the facility for a period of time. If this is the case the RCMP will be notified and alternate arrangements confirmed with other facilities.

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4.23 Separating and isolating inmates that are symptomatic is necessary to prevent the spread of a contagious illness. If an inmate is symptomatic the areas listed below will be used to separate these inmates from non-symptomatic inmates. Should larger numbers of inmates be symptomatic then other areas will be designated for the purpose of quarantine. Potential locations include:

- a. Medical holding cell;
- b. Secure Cells;
- c. Remand unit;
- e. other area as directed by authorized persons

4.24 During an outbreak all staff shall:

- a) Ensure signage is used directing proper PPE and precautions to be used by staff, visitors, and inmates. This shall be clearly posted at cell where inmate is housed.
- b) Ensure that all inmates/staff use hand sanitizers regularly or wash their hands with soap and water frequently. Ensure visitors (if approved for entrance) use hand sanitizer before entering the building;
- c) Ensure that all common areas are cleaned and surfaces are sanitized three (3) times per day using approved solution;
- d) Ensure that inmates sanitize the use of phones with approved solution before and after use;
- e) Wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) provided at all times when working in areas that house symptomatic inmates and other areas as directed;
- f) Ensure that mattresses are sanitized when passed from inmate to inmate and mattresses are not to be moved from dorms or areas housing symptomatic inmates;
- g) Ensure all cells are sanitized using approved solution when they are vacated and assigned to a different inmate;
- h) Ensure that food service gloves are worn by staff and inmates at all times while serving meals; and
- i) Ensure that laundry is washed in hot water each evening.



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- 4.25 Symptomatic inmates will be locked down 23 hours per day. They will be offered use of daily showers and fresh air in the exercise yard; however, they must wear PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) when leaving his/her cell. Lockdown beyond 23 hours a day may occur only after authorized persons consult with the Office of the Chief Public Health Officer.
- 4.26 Authorized persons may cancel all programs and visits as required during an outbreak situation. Special visits (held in a secure visiting area) will only be allowed at the discretion of Wardens or designates.

MEDICAL PROVISIONS

- 4.27 Medical staff shall arrange for staff and inmate orientations on symptoms and preventative measures for contagious diseases. In addition to orientations, information pamphlets will be circulated to all staff and inmates on potential contagious diseases.
- 4.28 Medical staff shall arrange for appropriate inoculations for all staff (when available).
- 4.29 Issuance of PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) shall remain contingent on the level of need. Use will commence first in the areas below:
- a) Intake;
 - b) Medical Holding and Isolation;
 - c) Areas designated to hold symptomatic inmates and
 - d) Kitchen
- 4.30 Medical staff shall ensure that arrangements are completed for filling prescriptions. Medication stockpiling will be necessary as there could be a supply chain interruption. All prescriptions are to be prepared in bubble packs that will allow for controlled dispensing by operational staff if this is required due to medical staff shortages.
- 4.31 Medical staff shall inform the Warden or designate of need for casual nursing staff.



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- 4.32 Authorized persons shall ensure that adequate supplies of PPE for droplet and contact precautions (protective eye wear, gown, mask, gloves) are available. Hand sanitizer or “Anti-Microbe” are readily available for facility use. Non-alcoholic hand sanitizers will be used in inmate living areas. Staff and inmates shall be encouraged to wash their hands with soap and water often, as opposed to using hand sanitizers. Visitors (if approved) shall be requested by staff to use the hand sanitizer provided by the facility.

MEAL PROVISIONS

- 4.33 Authorized persons shall ensure that there is a sufficient supply of cleaning supplies, disposable plates and utensils.
- 4.34 The Food Services Supervisor shall ensure that a sufficient number of staff are orientated in the use of kitchen equipment in the event that cooks are not available.
- 4.35 The Food Services Supervisor shall ensure that a contingency menu is created that serves all inmates twice per day.
- 4.36 The Food Services Supervisor shall contact local providers for readymade meals as required. In-flight Services requires twenty-four (24) hour notice to deliver the meals while other suppliers require one (1) week.
- 4.37 Ensuring additional stock of food supplies will be necessary as supply chain could be interrupted.
- 4.38 Disposable plates and utensils will be used to serve inmates in units holding symptomatic inmates. Food Carts shall be sanitized before leaving a unit that is housing symptomatic inmates.
- 4.39 Inmates who are symptomatic will be given extra fluids as directed by health care staff.

STAFFING DEPLOYMENT DURING FACILITY LOCKDOWN

- 4.40 s 20(1)(e) [REDACTED] Authorized persons shall implement a staffing strategy that will meet the needs of maintaining Facility standards.



SOUTH MACKENZIE CORRECTIONAL CENTRE

Chapter:	7.00 – Contingency Planning
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4.41 It may be necessary to cancel vacation or other leave if there is insufficient healthy staff to provide essential services.

4.42 If there are insufficient SMCC staff members available to maintain essential operations, a

s 20(1)(e)

4.43 Staff shall not communicate with the media in any way unless approval has been granted by the Director. All media inquiries shall be referred to the Department of Justice Communication Advisor.

5.0 RELATED POLICIES & DIRECTIVES

- 7.02 – Contingency Planning & Response Model
- 9.01 – Admission
- 9.05 – Discharge
- Contingency Manual

6.0 ATTACHMENTS

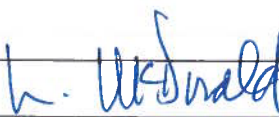
Appendices Document Title

A Command Post Roles & Responsibilities

B Health Screening Questionnaire

EFFECTIVE DATE: MARCH 30, 2010
PREVIOUS ISSUE: FEBRUARY 2015
REVISED DATE: MAY 27, 2020

APPROVED BY:


LORRAINE MCDONALD

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SOUTH MACKENZIE CORRECTIONAL CENTRE

Chapter: 7.00 – Contingency Planning
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APPENDIX A Command Post Roles & Responsibilities

Role	General Description of Responsibilities
Crisis Manager	This role would normally be placed upon the Warden/Manager or designate. The shift supervisor may be required to act in this role until the designate arrives on the scene to assume control. This person in charge takes full responsibility of and remains in command of the situation unless relieved.
Assistant Crisis Manager	A senior officer appointed by the Crisis Manager to record events as they occur and to communicate with the Director and others as directed by the Crisis Manager (e.g. families of hostages). This person would relieve the Crisis Manager as required.
Recorder or Scribe	A person appointed by the Crisis Manager to document the entire situation in chronological order.
Primary Negotiator	A person trained in negotiations designated to communicate directly with the aggressor(s) of the incident (e.g. hostage takers) and reports directly to the Crisis Manager. RCMP contacts and divisional trained negotiators shall be listed in facility standing orders.
Secondary Negotiator	A person trained in negotiations that takes direction from the Primary Negotiator, records all pertinent information during the negotiations and replaces the Primary Negotiator if required.
Communications Officer	A senior officer who reports to the Crisis Manager that is responsible for all communications equipment, communications between the Command Post and other areas, logging all communications to and from the Command Post and briefing the Crisis Manager on all reports received.
RCMP	A designated RCMP Officer who shall liaison between the facility personnel and the RCMP negotiator(s) and/or RCMP Emergency Response Team.

Note: All command post roles are not required to be filled for each incident. The crisis manager shall staff the command post with any personnel that he/she sees fit to assist in resolving the situation.

EFFECTIVE DATE: MARCH 30, 2010
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APPROVED BY:


LORRAINE MCDONALD

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SOUTH MACKENZIE CORRECTIONAL CENTRE

Chapter: 7.00 – Contingency Planning
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 Subject: Epidemics and Outbreaks
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APPENDIX B Health Screening Questionnaire

To assist with ensuring the health, safety and security of the facility, each corrections officer delegated to process new inmates shall complete the following screening procedures immediately when admitting an inmate. All newly admitted inmates must remain separate from all medically cleared inmates until cleared by medical staff.

The following questions must be answered by each inmate upon admission. Once completed this form must be signed by the staff and the inmate. The form is to immediately be forwarded to Medical staff for further assessment.

Inmate Name: _____ **Date of Birth:** _____

		Circle One
1.	Are you experiencing any flu-like symptoms? (e.g. fever, new or worsening cough, shortness of breath, generally feeling unwell, muscle aches, fatigue, sore throat, runny nose, headache, diarrhea, vomiting, loss of sense smell/taste, loss of appetite)	Yes/No
2.	Do you know or have you been in contact with anyone with flu-like symptoms? Symptoms described in question #1.	Yes / No
3.	Have you recently travelled out of the Northwest Territories within the last 14 days or come into contact with someone who has? If so where did you/they travel?	Yes / No
4.	Have you had close contact with a confirmed case or case under investigation of COVID-19?	Yes/No
5.	Are you taking any medications that we should be immediately aware of?	Yes/ No
6.	Do you have any allergies that you are aware of?	Yes/ No
	Temperature taking is required prior to any entrance of SMCC. Any temperature that has been taken that is 38 Celsius or higher will require the individual to be placed Droplet Precautions and PPE will be required for staff and the inmate until assessed by medical staff.	Temp is: _____

Admitting Staff Signature: _____ **Date:** _____

Inmate Signature: _____ **Date:** _____

Medical Staff Signature: _____ **Date:** _____

APPENDIX C

Temperature Taking Protocol

All individuals that require access to South Mackenzie Correctional Centre (SMCC) are required to comply with temperature taking. Temperature screening will be conducted during the screening assessments for all inmates, staff and visitors/contractors that require access to SMCC. The purpose of the temperature screening is to help ensure that we manage any potential concerns related to the symptoms of the COVID-19.

- The following protocol is mandatory for all staff

Inmate Assessments

Adult Services

1. Staff completing the Inmate Health Screening Questionnaire shall complete the assessment and temperature screening at the RCMP cells and/or courthouse.
2. Prior to completing the assessment and temperature screening staff shall don a surgical mask and gloves. PPE shall be worn at all time when conducting assessments at the RCMP and/or Courthouse.
3. Staff shall point the temperature device at the right temporal region of the inmate from a distance of approximately 3 cm – 5 cm and press the button.
4. If an inmate has a temperature reading of 38 degrees Celsius or higher they must don PPE for contact and droplet precautions until assessed by medical staff.
5. Inmates that have a negative assessment must be isolated from other inmates until assessed by medical staff.

Staff Assessments

1. Staff delegated for completing the Essential Services - Occupational Questionnaire shall complete the assessment and temperature screening at the staff entrance hallway. Under no circumstances shall any staff member enter any door of SMCC without being assessed and cleared for duty.
2. The staff member completing the assessment shall be required don a cloth mask, gloves and the staff member being assessed shall also don a cloth mask for the assessment process.
3. In the event that the staff member being assessed does not have a cloth mask the assessor shall don a surgical mask to complete the temperature screening. Staff without a cloth mask shall be advised to see the supervisor to address the need of a cloth mask.

4. If a staff member has a temperature reading of 38 degrees Celsius or higher they must be directed to leave SMCC and contact public health. The staff member shall also be advised that a manager from SMCC will be in contact with them to make arrangements for the return to work processes. The staff member that has completed the assessment shall fill out the Denied Entry Tracking Form and submit the form to the Warden.

Visitor and Contractor Assessments

1. Staff completing the Visitor and Contractor Questionnaire shall complete the assessment and temperature screening at the front entrance to the building, through the first door. Under no circumstances shall any visitor or contractor enter SMCC without being assessed and cleared for access.
2. Staff shall point the temperature device at the right temporal region of the visitor/contractor with the visitor/contractor facing to their left so the temperature device can be aimed at the appropriate area and press the button.
3. For the duration of the assessment area both the visitor/contractor and the assessor shall don cloth masks, in the event that cloth mask is not being worn by the visitor/contractor a surgical mask will be required for the assessment process.
4. If a visitor/contractor has a temperature reading 38 degrees Celsius or higher they must be directed to leave SMCC and contact public health.

From: [Lorraine McDonald](#)
To: [Alvina Sibbeston](#); [Angela Hamilton](#); [Diane Chisholm](#); [Joseph Fourstar](#); [Justin Minute](#); [Laverne Cameron](#); [Michelle J. Smith](#); [Noella Cayen](#); [Sharon Caudron](#); [Curtis Gill](#); [Don Mabbitt](#); [Jeff Lamoureux](#); [Orlando Kerr](#); [Trenna Corrigal](#); [Andy McKay](#); [Anthony Beck](#); [Brent Townend](#); [Brian Morin](#); [Cheryl Melanson](#); [Daniel Beck](#); [David Sanguiez](#); [Deloris Shiels](#); [Dennis Parker](#); [Faye Johns](#); [Garett Flaherty](#); [Heather Johnson](#); [Ian Thiesson](#); [Jack Bassett](#); [Jacqueline Carriere](#); [Jason Salter](#); [Jeanette Mandeville](#); [Jonathan Wallington](#); [Kenneth Boyer](#); [Kirk Alcos](#); [Kristy Cooper](#); [Luke Campbell](#); [Marek Napiorkowski](#); [Norenda Unka](#); [Robert Haley](#); [Serena Skavinski](#); [Therese Fordy](#); [Tristan Cross](#); [Vanin Gill](#); [Vince Mckay](#); [Warren Durocher](#)
Cc: [Kristy Cooper](#); [Brent Townend](#)
Subject: RE: Standing Order 7.02.03 Epidemics and Outbreaks Updated
Date: Wednesday, March 25, 2020 5:38:03 PM
Attachments: [Precautions - Droplet.pdf](#)
[PPE Putting on and removing.pdf](#)
[Precautions - Contact.pdf](#)
[Correctional Facility SMCC Screening Questionnaire for Contractor and Vi....pdf](#)

In addition, moving forward there will be a new folder that will be created tomorrow for any updated information that this circulated – Titled “SMCC Pandemic Communication”. Please ensure that you take the time to review this folder.

Prior to the beginning of shift, supervisors have been tasked to provide oncoming supervisor and staff verbally of any new changes. It is imperative that we continue to work closely together in managing our operation so that we can keep all the occupants of SMCC as safe as possible.

If there are any questions or concerns, please discuss with your supervisor. If they are unable to provide you with the answer, they will assist in getting you a response as soon as possible.

These are trying times for all the staff and inmates at SMCC; as well as other correctional facilities as we all work through the challenges before us. We do appreciate your patience and recognize that this is a very stressful time for everyone.

Please remember to use EFAP to help manage your well-being. Self-isolation when you are away from work, will only help support your home life as well as protect your work environment and colleagues.

Thank you,

Lorraine

From: Lorraine McDonald
Sent: March 25, 2020 5:13 PM
To: [Alvina Sibbeston](#); [Angela Hamilton](#); [Diane Chisholm](#); [Joseph Fourstar](#); [Justin Minute](#); [Laverne Cameron](#); [Michelle J. Smith](#); [Noella Cayen](#); [Sharon Caudron](#); [Curtis Gill](#); [Don Mabbitt](#); [Jeff Lamoureux](#);

Orlando Kerr; 'Trenna Corrigan'; Andy McKay; Anthony Beck; Brent Townend; Brian Morin; Cheryl Melanson; Daniel Beck; David Sanguiez; Deloris Shiels; Dennis Parker; Faye Johns; Garrett Flaherty; Heather Johnson; Ian Thiesson; Jack Bassett; Jacqueline Carriere; Jason Salter; Jeanette Mandeville; Jonathan Wallington; Kenneth Boyer; Kirk Alcos; Kristy Cooper; Luke Campbell; Marek Napiorkowski; Norenda Unka; Robert Haley; Serena Skavinski; Therese Fordy; Tristan Cross; Vanin Gill; Vince Mckay; Warren Durocher

Cc: Kristy Cooper; Brent Townend

Subject: Standing Order 7.02.03 Epidemics and Outbreaks Updated

Importance: High

To all staff,

Attached is updated Standing Order 7.02.03 Epidemics and Outbreaks which is to be read and **signed off ASAP**. Supervisors of are ensure this is done with each corrections staff on duty, prior to March 31, 2020.

New sign off sheet at Control.

Lorraine

From: Lorraine McDonald

Sent: March 14, 2020 12:53 PM

To: Alvina Sibbeston; Angela Hamilton; Diane Chisholm; Joseph Fourstar; Justin Minute; Laverne Cameron; Michelle J. Smith; Noella Cayen; Sharon Caudron; Curtis Gill; Don Mabbitt; Jeff Lamoureux; Orlando Kerr; 'Trenna Corrigan'; Andy McKay; Anthony Beck; Brent Townend; Brian Morin; Cheryl Melanson; Daniel Beck; David Sanguiez; Deloris Shiels; Dennis Parker; Faye Johns; Garrett Flaherty; Heather Johnson; Ian Thiesson; Jack Bassett; Jacqueline Carriere; Jason Salter; Jeanette Mandeville; Jonathan Wallington; Kenneth Boyer; Kirk Alcos; Kristy Cooper; Luke Campbell; Marek Napiorkowski; Norenda Unka; Robert Haley; Serena Skavinski; Therese Fordy; Tristan Cross; Vanin Gill; Vince Mckay; Warren Durocher

Cc: Kristy Cooper; Brent Townend

Subject: Standing Order 7.02.03 Epidemics and Outbreaks - Sign Off Sheet

Sign off sheet has been placed in Standing Order binder at Control. All staff to are to have read and signed off by March 31, 2020.

From: Lorraine McDonald

Sent: March 13, 2020 5:19 PM

To: Alvina Sibbeston; Angela Hamilton; Diane Chisholm; Joseph Fourstar; Justin Minute; Laverne Cameron; Michelle J. Smith; Noella Cayen; Sharon Caudron; Curtis Gill; Don Mabbitt; Jeff Lamoureux; Orlando Kerr; 'Trenna Corrigan'; Andy McKay; Anthony Beck; Brent Townend; Brian Morin; Cheryl Melanson; Daniel Beck; David Sanguiez; Deloris Shiels; Dennis Parker; Faye Johns; Garrett Flaherty; Heather Johnson; Ian Thiesson; Jack Bassett; Jacqueline Carriere; Jason Salter; Jeanette Mandeville; Jonathan Wallington; Kenneth Boyer; Kirk Alcos; Kristy Cooper; Luke Campbell; Marek Napiorkowski; Norenda Unka; Robert Haley; Serena Skavinski; Therese Fordy; Tristan Cross; Vanin Gill; Vince Mckay; Warren Durocher

Cc: Kristy Cooper; Brent Townend

Subject: Standing Order 7.02.03 Epidemics and Outbreaks

Importance: High

To all staff,

You are to review that attached new standing order for Directive 7 Contingency Planning, 7.02.03 Epidemics and Outbreaks.

This will be uploaded onto Share Point and sign off sheet to follow.

Supervisors are to ensure that staff have reviewed and understand.

Appendix B Health Screening Questionnaire has been added to forms and is implemented effectively immediately.

Thank You | Mársı | Kinanāskomitin | Merci | Hąı' | Quana | Qujannamiik | Quyanainni | Máhsı | Máhsı | Mahsı

Lorraine McDonald
Warden
Corrections
Department of Justice
Government of the Northwest Territories

South Mackenzie Correctional Centre
34 Studney Drive
Hay River, NT. Canada X0E 0R6
Phone 867-874-2774 or 867-874-2798
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**SOUTH MACKENZIE CORRECTIONAL CENTRE
STANDING ORDER – Sign Off Sheet**

Chapter: **7 Contingency Planning**
 Subject: **7.02.03 Epidemics and Outbreaks**
 Authority: **Directive 7.02 – Contingency Planning & Response Model**

I, the undersigned acknowledge that I have read and understand the Standing Order 7.02.03 Epidemics and Outbreaks.
 Supervisors are responsible for staff and relief staff on shift to read and sign off.

Staff	Staff Signature	Date
Anthony Beck		
Laverne Cameron		
Robert Haley		
Don Mabbitt		
Vince McKay		
Danny Beck		
Jacqueline Carriere		
Luke Campbell		
Warren Durocher		
Andy McKay		
Brian Morin		
David Sanguiez		
Kenneth Boyer		
Therese Fordy		
Cheryl Melanson		
Marek Napiorkowski		
Jason Salter		
Serena Skavinski		
Norenda Unka		
Sharon Caudron		
Noella Cayen		
Diane Chisholm		
Joseph Fourstar		
Angela Hamilton		
Justin Minute		

**SOUTH MACKENZIE CORRECTIONAL CENTRE
STANDING ORDER – Sign Off Sheet**

Chapter: **7 Contingency Planning**
Subject: **7.02.03 Epidemics and Outbreaks**
Authority: **Directive 7.02 – Contingency Planning & Response Model**
