

March 31, 2020 **UPDATE**

COVID 19 SCREENING DIRECTIONS FOR CORRECTIONAL HEALTH SERVICES

COVID19 Screening on Admission/Transfer INTO Center

To be used by all AHS corrections healthcare staff when incarcerated individuals are admitted or transferred to remand, correctional or youth correctional facilities in Alberta, as well as to all incarcerated individuals reporting for intermittent sentences.

Routine Practices¹ should always be followed, regardless of how patient presents.

These questions will be asked of all incarcerated individuals at the earliest possible contact on admission/transfer

1. Are you experiencing any of the following: fever, new cough that started within the last 14 days, sore throat, or difficulties breathing?
 - i. If yes, please advise patient to clean their hands and immediately put on a mask. Proceed with script.
 - ii. If no, proceed with question 2.
2. Ask the following:
 - In the last 14 days before illness onset, have you travelled anywhere outside of Canada?
 - In the last 14 days, have you had close contact with a confirmed or probable case of COVID-19?
 - Have you had close contact with a person who has had a fever, cough, sore throat or breathing difficulties who has travelled anywhere outside of Canada within the past 14 days?
3. When possible, or at earliest time, complete temperature check.
 - i. If the patient's temperature is greater than 38 degrees centigrade, please advise the patient to clean their hands and immediately put on a mask.

If NO to all questions in Number 1 & 2, and the patient's temperature is less than 38 degrees centigrade (Number 3), the patient may be housed in general population or other housing deemed appropriate by Corrections Services Division.

If YES to Number 1, or the patient's temperature is greater than 38 degrees centigrade (Number 3)

- i. Obtain a Nasopharyngeal (NP) swab in Universal Transport Medium and send it to Alberta Precision Laboratories for testing. The results are usually available within 24 – 48 hours. Maintain Contact Droplet Precautions when obtaining swab.
- ii. The patient is to remain in isolation on Contact Droplet Precautions until the result of the test is confirmed
 1. If the result is negative and the patient is asymptomatic, the patient may be placed in general population. Infection Prevention and Control (IPC) must be consulted prior to releasing the patient to general population.
 2. If the test is positive, the patient will remain in isolation and be monitored closely (i.e., active daily monitoring) by AHS corrections healthcare staff until the symptoms have

resolved AND two NP swabs (taken 24hr apart) are negative. IPC must be consulted before removing precautions.

If NO to Number 1, the patient's is afebrile (Number 3) and YES to any question in Number 2:

The patient is to remain in isolation for at least 14 days. The patient will be seen by the facility MD or Nurse Practitioner as soon as possible. AHS correctional healthcare staff will monitor the patient daily for signs and/or symptoms of COVID-19 including temperature check. If, at any time, the patient shows signs or symptoms consistent with COVID-19, obtain an NP swab in Universal Transport Medium and send it to Alberta Precision Laboratories for testing. The results are usually available within 24 -48 hours. NP swabs should NOT be obtained on asymptomatic patients.

Recommended Personal Protective Equipment (PPE) for COVID-19

<https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-ncov-ppe-facilty-scr-tasks-z0-res-topics-emerging-issues.pdf>

COVID-19 Screening of Asymptomatic Patients (Entire Inmate Population)

A daily assessment of the entire correctional/remand/youth offender population will be completed. Each individual will be asked the questions listed in Number 1 above and, when possible, a temperature reading will be obtained.

Follow the directions above **Admission Screening Actions** should a patient answer "yes" to any symptoms.

Documentation of screening and actions in Medical Document Record (MDR) is only required by exception, in the case of positive symptoms.

COVID-19 Screening of Asymptomatic Isolated Patients

Cohorted or co-housed patients who have been isolated based on contact with a presumptive or confirmed positive COVID-19 case will be screened **TWICE** daily for the following symptoms: fever, new cough, sore throat, or difficulties breathing. A temperature reading will be completed.

Documentation of the screening log will be completed.

COVID-19 Screening for Current Incarcerated/Remanded Patient Presenting with Symptoms:

Currently incarcerated or remanded patients who present to staff with possible COVID-19 symptoms of fever, new cough, sore throat, or difficulty breathing, should immediately be told to wash their hands, be given a mask and escorted to health services or directly to the designated isolation area. Temperature should also be obtained as soon as possible. Proceed with isolation and NP swab as above.

Documentation on MDR of actions and findings is required.

Screening upon Release, Transfer or Other Community Outings

Prior to release, transfer or other community outing, ALL patients will be screened for possible COVID-19 symptoms of fever, new cough, sore throat, or difficulty breathing, including temperature when possible.

For transfers or other community outings, should the patient answer “yes” to any of the symptoms, and/or present as febrile (temperature greater than 38 degrees centigrade), above noted precautions and steps must be taken and the transfer/outing must be put on hold.

Upon release, should the patient answer “yes” to any of the symptoms, and/or present as febrile, patient teaching regarding self-isolation and community follow up must be given and documented. Wherever possible, community agency/shelter or other associated partner should be notified for assistance in safe community transition.

Patients being released from a remand centre, correctional centre, or youth offender centre who are presumptive positive or positive for COVID-19 (currently isolated) must be advised of community self-isolation requirements. Health teaching and community follow-up must be given and documented. Wherever possible, community agency/shelter or other associated partners should be notified for assistance in safe community transition.

Court Appearances

AHS advocates that patients who are suspect of having or confirmed as having COVID-19 and have court appearances should have their court appearance postponed to minimize transmission risk. If this is not possible, CCTV should be considered. The CCTV booth should be cleaned and disinfected after each use. If social distancing is not possible when patients are being transported or are awaiting video court, IPC Contact and Droplet Precautions are to be maintained. The patient is to remain masked in common areas.

References (please note these are *Insite* links only available to AHS staff)

¹ Routine Practices: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-corr-routine-practices-info.pdf>

² AHS IPC Recommendations PPE Table for COVID-19 Assessment Centres and ERs with Pre-Triage <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-assmt-cntrs-covid-ppe-matrix-res-topics-z0-emerging-issues.pdf>

³ Aerosol Generating Medical Procedures: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-respiratory-additional-precautions-assessment.pdf>

⁴ Point of Care Risk Assessment: <https://insite.albertahealthservices.ca/main/assets/tms/ipc/tms-ipc-corr-point-of-care-risk-assessment.pdf>

Outbreak Management Guideline for Correctional Facilities
<https://insite.albertahealthservices.ca/ipc/Page11153.aspx>

COVID-19 Insite Page
<https://insite.albertahealthservices.ca/tools/Page24291.aspx>