Department of Public Safety and Correctional Services

Office of the Secretary

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OOS IB # 2020-08 **Effective**: May 20, 2020

Expiration: When Declaration of State of Emergency—COVID-19 is ended.

OOS INFORMATION BULLETIN

SUBJECT: DSPCS Worksite Exposure Tracing

This Information Bulletin replaces the *DPSCS COVID19 Worksite Exposure Tracing protocol for State Employees* dated March 29, 2020 from Dr. Jessica Dempsey. Medical contractors, and the inmates they are treating, should continue to use the *COVID-19 Contact Tracing Protocol for Inmates and Contractor Staff*, dated April 13, 2020 (attached).

1. When a new case of COVID19 is reported to Occupational Health and Safety Unit, the DPSCS COVID19 Response is activated.

2. The Occupational Health and Safety Unit activates the team by notification of an email that communicates with the members of the COVID19 Response team that includes: Secretary, Assistant Secretaries, DPDS/DOC Commissioners, Facility Appointing Authority and Assistant Warden/Security Chief, Chief Medical Officer, Director of Nursing for Clinical Inmate Health, Region Clinical Inmate Health ACOM, Regional Occupational Health Nurse, Facility ECSO, Regional ECSO, and Emergency Management Director.

3. The communication email that activates the COVID19 Response will include the following instructions, as well as the timeframe that the investigation will include.

4. The facility Appointing Authority shall designate a staff person to investigate custody staff who meet the definition “close contact”.

5. The definition for “close contact” is below, as identified by Maryland Department of Budget and Management, Maryland Department of Health, and Centers for Disease Control prior to the initiation of Door Entry Protocol (May 14, 2020).

Close contact: close (less than 6 feet/face to face) for more than 2 minutes or a prolonged period of time in a closed setting without wearing the ordered PPE (mask and face shield).

6. Tracing will be initiated by the identified facility staff.

    a. The designated facility investigator will begin with interviewing the case that has been newly reported as a positive case, asking the case if he/she was compliant with mandatory PPE and who worksite close contacts were, to include breaks and meal times.

    b. The designated facility investigator will review post assignment worksheets, supervising staff, and video (if available to confirm close contacts and PPE compliance.

    c. Employees that meet close contact without wearing mandatory PPE are entered on the tracing form.

    d. Employees that meet close contact definition without wearing PPE are notified of the possible exposure, and asked to self-monitor for symptoms for 14 days, including checking temperature twice a day, and report symptoms immediately.

    e. If close contact staff demonstrate symptoms they are sent home to self-quarantine, for a minimum of 3 days, instructed to reach out to a provider per CDC guidelines, and notify the facility of daily status.

    f. Close contact staff can continue working as long as symptoms do not develop.

    g. The designated facility investigator will investigate for patterns of shift assignment, assignment location, and meal/break contacts.

    h. Questions regarding departmental staff exposure will contact assigned Occupational Health Registered Nurse.

    i. The close contact, the date of contact, the contacts phone numbers, and the observation of symptoms (or already identified report of COVID positive outcome) will be submitted on the form and submitted to the DPSCS Occupational Health and Safety Office.

    j. The form is attached to this procedure.

7. The designated Clinical Inmate Health Regional ACOM will coordinate contact tracing with the medical contractor's Infection Control Coordinator, who is responsible for conducting contact tracing for inmates and contractual staff.

    a. Close contact inmates without symptoms will be housed in designated quarantine area for 14 days and assessed by Inmate medical staff for new onset of symptoms.

b. Close contact inmate demonstrating symptoms will be housed in designated isolation area.

8. The facility Environmental Compliance and Safety Officer (ECSO) will ensure that the quarantine and isolation areas have adequate PPE and will coordinate with the regional COVID19 Response ECSO and Director of Emergency Response to request urgent need for supplies to maintain safety.

Attachments:

- Exposure Tracing Form
- COVID-19 Contact Tracing Protocol for Inmates and Contractor Staff

Robert L. Green
Secretary

Distribution: A
B – All Employees
S – Executive Leadership Team

Exposure Tracing Form

* Staff Compliant with required PPE (to include the face mask and faces shield) do not meet close contact definitions.

Employee Name	Facility	Exposed Date	Phone #	Symptomatic / Asymptomatic

COVID-19 CONTACT TRACING PROTOCOL FOR INMATES AND CONTRACTOR STAFF

When to Begin Contact Tracing

Contact tracing may begin as soon as an inmate or contractor staff presents with symptoms likely to be COVID-19 related and has been sent for testing or immediately upon receipt of a positive COVID-19 test result.

How to Proceed with Contact Tracing

1. **Upon receipt of information on a symptomatic inmate or staff tested for COVID-19, the Regional Medical Director (RMD) will activate the Regional multidisciplinary COVID response team and begin the process of contact tracing as below led by the facility's Infection Control Coordinator:**
    - **Identify close contacts who were 6 feet or less from the case for a duration of 2 minutes or longer during the 7-day period preceding the onset of symptoms (if not known, then use testing date, and if that is not known, use last day of work).**
    - **If the positive case is a staff, determine if this staff was using full PPE at the time of contact with inmates and during the 7-days before the onset of symptoms. Based on the findings, determine close contacts that may have been exposed- inmates, other staff and officers.**
    - **Obtain information on the dates and shifts that the staff worked including the assignments completed during each shift. Based on this information, determine all inmates and staff that met criteria for close contact based on the definition of close contact above.**
    - **Interview all identified contacts and determine exposure taking into account the staff's use of PPE**
    - **If the positive case is an inmate, conduct the investigation as above identifying all contacts: staff and other inmates that met criteria for close contact.**
2. **Upon gathering the information above the IC coordinator or designee shall present the information to the Regional Medical Director.**
3. **The Regional Medical Director shall consult with the Corizon Director of Infection Control, Corizon Statewide Medical Director and the Corizon Infectious Disease Consultant regarding findings and necessary actions related to quarantine or isolation decisions.**

Decision Making Following Contact Investigation

1. **The Regional medical director will make decisions on inmate quarantine or isolation based on findings and consultation with the ID consultant, Director of Infection Control and statewide MD.**
2. **Inmates that met criteria for quarantine (close contact determined but asymptomatic) shall have a quarantine order written by the RMD**
3. **Inmates that met criteria for isolation (exposed and symptomatic) shall have isolation orders written by the RMD.**
4. **All orders above shall have nursing parameters for monitoring of temperatures and symptoms two times a day for inmates identified to be quarantined.**
5. **RMD shall write appropriate orders for inmates identified for isolation.**
6. **The nurse shall communicate the list of inmates identified for quarantine and for isolation to the facility Warden or designee by completing and submitting the transfer of housing forms.**
7. **The Regional multidisciplinary COVID response team shall complete and report all contact tracing activities within 24 hrs of notification of a positive COVID-19 report.**
8. **The Custody administration shall house the inmates in the established quarantine and isolation housing and shall update the quarantine/isolation roster and forward the completed roster to the IC coordinator and the facility Agency Contract Operations Manager (ACOM).**
9. **Nursing staff will conduct rounds in the quarantine and isolation areas as ordered by the RMD and shall report and document all findings in the patient electronic health record.**
10. **The RMD or designated medical provider shall document all orders, test results and assessments in the patient electronic health record.**
11. **For health care staff identified through contact tracing; if asymptomatic the IC coordinator will notify the staff of exposure to a COVID positive inmate or staff and shall provide the following direction:**
    - **Check temperature and symptoms, if asymptomatic, advise to continue to come to work in full personal protective equipment (PPE) which must include: face shield, surgical or cloth mask, gown, gloves, and N-95 mask when indicated; monitor temperature and symptoms two times a day, if afebrile and asymptomatic, come to work.**
    - **If staff becomes febrile or symptomatic must stay home, contact PCP and get tested as a health care worker.**
    - **Symptomatic staff will stay home until COVID testing result is received.**
    - **If result is negative, may return to work**

- **If COVID-19 result is positive, will call contractor administrator and report testing result, and follow PCP orders and established contractors' HR protocol for clearance to return to work.**
- **If health care staff is in the facility at work at the onset of symptoms, the staff must report to the appropriate supervisor and must leave the work area immediately and carefully remove the PPE in the appropriate waste disposal prior to exiting the facility.**
- **The RMD will report all positive reports to the Regional Response team, and shall follow the communication cascade in the reporting to custody and to the office of inmate health.**
- **The Regional response team shall again commence contact investigation as above for every positive case.**

12. **Please note that all reports of positive COVID-19 and associated contact tracing activity must embrace the multivendor and multidisciplinary approach to include custody, psychology, and other departments within the facility.**
13. **The IC coordinator or designee will share information regarding staff work schedule and assignments to custody and the Regional COVID-response team within 8 hours of receipt of positive result from staff.**

Reporting and Documentation

- **The RMD or designated member of the Regional COVID response team will provide a daily written report of inmates on quarantine and isolation with disposition for each inmate.**
- **The RMD or designee shall disseminate the isolation and quarantine report to every member of the team, the IC Director, DPSCS Director of Clinical Services/CMO, Director of Nursing for Inmate Health, and Ms. Joyce Thompson by 11:00 a.m. daily for review before the 12:00 noon multi-vendor conference call.**
- **The IC Director shall compile and report all reports related to contact tracing and shall provide an epidemiological update to DPSCS Director of Clinical Services/CMO daily.**
- **DPSCS Director of Clinical Services/CMO shall review and disseminate the epidemiological report as deemed necessary.**