Considerations for Modifying COVID-19 Prevention Measures in Correctional and Detention Facilities

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This interim guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19) as of June 22, 2021.

The US Centers for Disease Control and Prevention (CDC) will update this guidance as needed and as additional information becomes available. Please check the CDC website periodically for updated interim guidance.

cdc.gov/coronavirus
Agenda

- Current COVID-19 context
- CDC guidance on creating long-term COVID-19 prevention plans in correctional and detention facilities
  - Applying CDC’s guidance for fully-vaccinated persons
  - Indicators for modifying facility-level COVID-19 prevention measures
- Q & A

Current COVID-19 context

Daily Trends in Number of COVID-19 Cases in the US Reported to CDC

- Declining cases
- Increasing access to vaccination
- Strong vaccine performance against known viral variants
- Vaccine confidence challenges (staff and incarcerated people)
- Continued identification of new variants
- Vaccine breakthrough infections

https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases
Unique COVID-19 challenges in corrections

- **High risk of viral introduction**
  - Contact between people from different parts of the facility, state, country

- **High risk of rapid transmission**
  - 24/7 congregate living
  - Difficulty enforcing prevention policies (masking, physical distancing)

- **High risk of severe illness**
  - High prevalence of conditions associated with severe COVID-19 illness

- **Unique risks to mental health from prolonged COVID-19 prevention measures**
  - Repeated, lengthy periods of quarantine
  - Reduced programming and visitation
  - Minimal ability to make individual decisions

Risk Balance

Designing a long-term COVID-19 prevention plan in corrections

- SARS-CoV-2 transmission
- Severe illness
- Death
- Post-COVID-19 conditions
- Mental health
- Quality of life
- Operational needs
- Institution’s mission
CDC Guidance

Considerations Modifying COVID-19 Prevention Measures in Corrections

Released June 9, 2021


**Stratify prevention measures based on vaccination status**
- More conservative approach

**Modify prevention measures for everyone at the same time, based on local data**
- When vaccination status is unknown
- When it is not operationally feasible to stratify based on vaccination status
- When there is higher risk tolerance
Baseline COVID-19 Prevention Strategies to Continue

Regardless of transmission or vaccination coverage

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintain basic infection control</td>
<td>Handwashing, cleaning, and disinfection</td>
</tr>
<tr>
<td>Track cases in the community</td>
<td>Be prepared for intermittent outbreaks</td>
</tr>
<tr>
<td>Restrict symptomatic staff from working</td>
<td>Prevent introduction of the virus</td>
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<tr>
<td>Continue diagnostic testing, movement-based testing</td>
<td>Prevent introduction, identify outbreaks early</td>
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<tr>
<td>Conduct prompt case investigation and contact tracing</td>
<td>Prevent transmission and reduce risk of outbreaks</td>
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<tr>
<td>Plan for isolation and quarantine</td>
<td>Know where isolation and quarantine spaces will be if there is an outbreak, and be ready to scale up</td>
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COVID-19 Prevention Strategies that Could be Modified

Based on local context

<table>
<thead>
<tr>
<th>Routine symptom screening and temperature checks</th>
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<tbody>
<tr>
<td>For people with no known exposure</td>
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</table>

<table>
<thead>
<tr>
<th>Administrative quarantine</th>
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</thead>
<tbody>
<tr>
<td>At intake, before transfer and release</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Mask policies</th>
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<table>
<thead>
<tr>
<th>Group activities</th>
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<tbody>
<tr>
<td>Education, programming, rec, meals</td>
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<table>
<thead>
<tr>
<th>In-person visitation</th>
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<table>
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<tr>
<th>In-person community contact</th>
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</thead>
<tbody>
<tr>
<td>Court appearances, work release</td>
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</table>
Modifying COVID-19 prevention measures in corrections
Based on vaccination status

Someone is “fully vaccinated” 2 weeks after receiving a single-dose COVID-19 vaccine or completing a 2-dose vaccine series

Modifying COVID-19 prevention measures in corrections
Regardless of vaccination status

If vaccination status of incarcerated people and staff is known:

**Fully vaccinated people no longer need to:**
- Quarantine at any time if asymptomatic (after exposure or at intake, transfer, or release)
- Wear masks outdoors
- Participate in **random** screening testing

**Fully vaccinated people can safely:**
- Resume group activities with other vaccinated people from other housing units
  - Group programming, education
  - Group recreation
  - Group meals
  - In-person visitation

**Fully vaccinated people STILL need to:**
- Be tested routinely at intake and before transfer/release
- Be tested once after exposure
- Wear masks indoors
Modifying COVID-19 prevention measures in corrections
Regardless of vaccination status

4 key indicators to guide prevention modifications:

- Vaccination coverage
- Transmission levels
- Population risk profile
- Facility characteristics & movement

Consider these factors together to decide when and how to loosen or strengthen COVID-19 prevention measures
Modifying COVID-19 prevention measures in corrections
Regardless of vaccination status

- COVID-19 vaccines are safe and prevent infection and severe illness
- Staff vaccination helps prevent introduction of the virus into a facility
- High vaccination coverage is critical in congregate settings
- Data are not yet available to set a threshold

Keep prevention measures in place longer where vaccination coverage is low
COVID-19 Vaccination Resources for Corrections

The COVID-19 shot may cause side effects in some people. Side effects should go away in a few days.

**What to Expect after Getting a COVID-19 Vaccine**

**COMMON SIDE EFFECTS**

- On the arm where you got the shot:
  - Pain
  - Redness
  - Swelling
- In the rest of your body:
  - Fever
  - Chills
  - Headache
  - Muscle pain
  - Nausea

**Ask the facility healthcare provider (or facility staff) for help if:**

- The redness or pain where you got the shot gets worse after 24 hours
- Your side effects are worrying you
- Your side effects do not seem to be going away after a few days

**HELPFUL TIPS**

**If you have pain, headache, or fever:**
- Ask a healthcare provider (or facility staff) if you can have medicine.

**If you are sore where you got the shot:**
- Apply a clean, cool, wet washcloth over the area
- Use or move your arm gently

**If you have a fever:**
- Drink a lot of water
- Get plenty of rest
- Dress lightly
Modifying COVID-19 prevention measures in corrections Regardless of vaccination status

Transmission levels

- Viral transmission inside the facility (current, historical)
- Ability to respond rapidly to cases to prevent outbreaks
- Community transmission (county-level data: https://covid.cdc.gov/covid-data-tracker/#county-view)

Keep prevention measures in place if there is transmission in the facility
Modifying COVID-19 prevention measures in corrections
Regardless of vaccinations status

Population risk profile

- Older age
- Medical conditions associated with high risk of severe COVID-19 (chronic lung disease, cancer, diabetes)

Keep prevention measures in place longer where there is a high proportion of unvaccinated people at higher risk (staff and incarcerated people)

Modifying COVID-19 prevention measures in corrections
Regardless of vaccination status

Facility characteristics & movement

• Housing styles
• Occupancy level
• Ventilation
• Movement in and out, and across facility

Keep prevention measures in place longer where physical distancing and optimal air exchange are hard to maintain

Each facility is unique – prevention is not “one size fits all”
Creating a Plan to loosen COVID-19 prevention measures incrementally:

1. **VACCINATE** as many staff and incarcerated people as possible
2. **LIST** existing COVID-19 prevention measures
3. **PRIORITIZE** which to loosen first
4. **CONTINUE TESTING** to monitor for transmission
5. **WAIT** to see if there is an increase in cases
6. **EVALUATE** the data collected
7. **REINSTATE** prevention measure if cases have increased
8. **CONTINUE** the plan to loosen the next prevention measure on the list if there is no transmission
Why Keep Testing?

Case data are critical to make your approach evidence-based:

- Determine what is working and what isn’t
- Know when you need to pivot
- Share best practices with the field
- Know what works for next time
Finding our way forward

COVID-19 Corrections Unit
eocevent366@cdc.gov

Let us know if we can help you:
• Apply CDC guidance to your facility
• Develop a long-term COVID-19 prevention plan
• Design testing strategies
• Respond to outbreaks
Q & A

with questions: eocevent366@cdc.gov