

## Coronavirus Screening Form

Date/Time: \_\_\_\_\_

Inmate Full Name: Last, First, Middle

Date of Birth

### Inmate Travel History

Have you traveled or had contact with anyone that has traveled outside the country within the last month? Y\_\_ N\_\_

Have you had contact with a person with suspected or known Coronavirus within the last month? Y\_\_ N\_\_

\*Summon an ADD nurse to the area if "yes" to any of the above questions for further follow-up.

\*Deputy staff will escort and provide security for ADD nursing staff while in the security garage.

Deputy JS# \_\_\_\_\_

## Coronavirus Screening Form

Date/Time: \_\_\_\_\_

Inmate Full Name: Last, First, Middle

Date of Birth

### Inmate Travel History

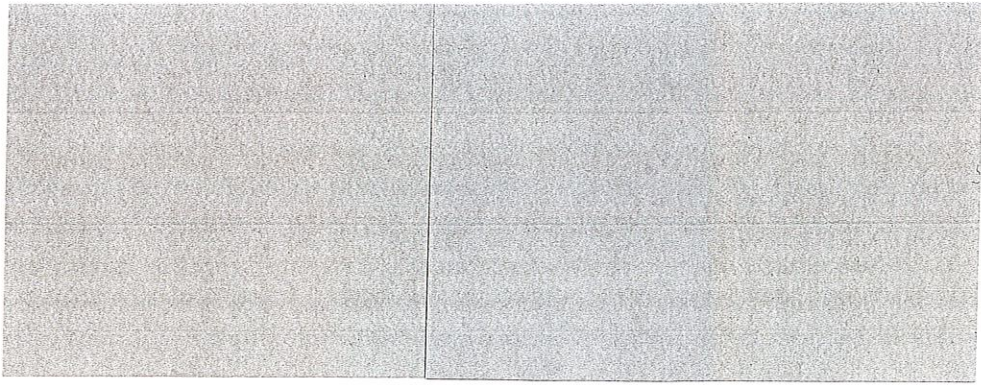
Have you traveled or had contact with anyone that has traveled outside the country within the last month? Y\_\_ N\_\_

Have you had contact with a person with suspected or known Coronavirus within the last month? Y\_\_ N\_\_

\*Summon an ADD nurse to the area if "yes" to any of the above questions for further follow-up.

\*Deputy staff will escort and provide security for ADD nursing staff while in the security garage.

Deputy JS# \_\_\_\_\_



# Adult Detention Division Coronavirus Pandemic

Approved by

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Sheriff's Office

Date

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dated \_\_\_\_\_

# CORONAVIRUS Pandemic Plan

## Hennepin ADD (Operations)

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In an effort to prevent the spread of the CORONAVIRUS in the Hennepin County Jail, the following plan will be implemented when determined to do so by Sheriff's Administration.

### Definitions/Explanations

**Coronaviruses (CoVid19):** any of a family of single-stranded RNA viruses that have lipid envelope studded with club-shaped projections, infect birds and many mammal including humans, and include the causative agents of MERS and SARS. Symptoms include fever, cough, shortness of breath, and appear 2-14 days after exposure.

**Influenza-like-Illness (ILI) "Sick":** An inmate with the occurrence of a fever greater than 100.4 degrees Fahrenheit and the presence of either cough, or sore throat, nasal congestion/runny nose, or shortness of breath.

**Sick:** designated status for inmates that exhibit signs/symptoms of illness. Sick inmates will need separation from well and unknown inmates.

**Unknown:** designated status for inmates, who, **after exposure**, are symptom free at the time of screening.

**Well:** designated status for inmates who are symptom free 2 to 14 days from their initial screening.

### General

The categories of sick, well, and unknown inmates shall be kept separate from one another.

Staff are encouraged to wash their hands frequently and utilize PPE (masks and gloves) when in close proximity of sick inmates.

All inmates identified as sick will be encouraged to wear a surgical mask, particularly when moving about the facility.

A nurse will be notified immediately if an inmate has a fever, cough or has shortness of breath. A nurse will implement HennepinHealthcare protocol titled "Foreign Travel-COVID119" (attached below).

A nurse will assess inmates before placement into sick housing and before release from sick housing.

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Inmates refusing to cooperate with the screening process will be handled the same way refusals for TB testing are handled. The inmate will be placed in administrative segregation housing until they cooperate with the screening process.

All inmates will be provided with continued education and supplies to sanitize their living areas.

“Flu Kits” containing wristbands, IFST forms, safety scissors, thermometer, and inventory sheet will be placed at all quad control rooms and intake. Flu kit supplies will be kept in the PSF 2<sup>nd</sup> floor command center and City Hall 4<sup>th</sup> control. Deputies will ensure the safety scissors and thermometers are present in the flu kit at the beginning of each shift and document on the inventory sheet. Notify a sergeant if either item is missing.

Hand sanitizer (foam) will be available at various areas throughout the jail for staff and inmates to use. The canister holders will be affixed to the walls. Any problems associated with the hand sanitizers will be reported to the FMU.

Surgical masks and gloves will be disposed of in trash cans.

Once the plan is implemented, all inmates entering the jail will have a color coded wristband applied to their right wrist following their initial screening. The wristbands will provide staff with a visual identifier regarding their health status. An inmate's wristband will be change as soon as possible when their health status changes.

RED-SICK  
YELLOW-UNKNOWN  
GREEN-WELL

Implementation of coronavirus screening at intake will begin at 0600 hours on the selected day.

From 0200-0600 just prior to commencing with screening inmates at intake, all inmates currently in the jail will have an initial screening and two subsequent daily screenings. The two subsequent screenings will also occur from 0200-0600. Four two-deputy teams will complete these screenings. Two teams will be in the City Hall and two teams will be in the PSF. The PSF teams will also screen inmates in the intake area. Movement of inmates from intake to housing will cease from 0200-0600. On the first night, dogwatch deputies assigned to housing units will fill in the name, DOB, and booking number on an IFST form for each inmate in their quad. This will expedite the process for the screening teams.

All inmates will have a corresponding wristband applied immediately following their initial screening. The screening teams will generate a list of the names and housing locations of those inmates identified as sick. Any inmates identified as sick will be referred to the nurse and subsequently moved to sick housing.

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## Intake/Nurse Referral Processes

### Screening

All arrestees entering the facility will continue to be screened using the current med screen form and will be screened for the coronavirus using the Inmate Flu Screening/Tracking (IFST) form in the sallyport. Deputies will take temperature of arrestees using a temporal thermometer, ask the inmate the inmate flue screening questions, and document the results on the IFST form.

If the inmate is determined to be symptomatic (sick) based on the screening criteria the deputy will:

- Document the temperature and the symptoms the inmate answered “yes” to in the space underneath the “referred to nurse” section at the bottom of the medical screening form.
- Check the “yes” box for the “referred to nurse” section on the med screen form.
- Place a red sticker dot on the yellow copy of the med screen form.
- Place a red wristband on the inmate’s right wrist signifying flu status, and left wrist signifying nurse referral (current practice).
- Offer and encourage the inmate to wear a surgical mask.
- Place the inmate in a designated sick cell(s) in intake.

REMEMBER: If the inmate has a temperature of 101.6 or greater and/or has shortness of breath, notify a nurse immediately.

If the inmate is symptom free the deputy will:

- Place a yellow wristband on the inmate’s right wrist.
- Place a yellow sticker dot on the yellow copy of the med screen form.
- Place the inmate in a designated unknown cell(s) in intake.

The IFST form will be delivered by the sallyport deputies to the fingerprint station. The IFST form will be paper clipped to the 4X6 cards as the inmates move from the

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fingerprinting station to Post Booking. The IFST form will follow the inmate as he/she moves to housing to be used for subsequent screenings. When the inmate gets released the IFST form will be placed in the inmate's release pack.

#### Inmate Housing in Intake

All newly admitted inmates will either be categorized as "sick" or "unknown". Inmates in these two categories will be separated as soon as practical into designated holding cells or areas as they move through the booking process. These designated cells/areas will change depending on the number of inmates in these two categories.

#### PPE for Staff

Staff (deputies, property clerks, nurses, etc.) working in the intake area are encouraged to wash their hands frequently and use rubber gloves. Masks will be available.

#### Information for Inmates

At Post Booking, inmates going to housing will be provided information (flyer) during the initial classification interview outlining precautions and preventative measures regarding the flu.

#### Sanitation

Frequent sanitation will occur throughout the intake area, particularly for high-touch surfaces and holding cells designated for the sick.

### **Classification/Tracking Process**

Dayshift classification staff will be responsible for tracking the flu status of the sick inmate population.

Upon entry into the facility, newly admitted inmates will either be categorized as sick or unknown and subsequently placed in designated housing areas.

Inmates will remain in unknown housing for at least 48 hours following their initial screening. Inmates in unknown housing will be screened daily and moved to sick housing if symptomatic. The inmate will be moved to well housing if symptom free for at least 48 hours following their initial screening. A classification officer and nurse will be notified anytime an inmate is screened and identified as sick.

Dayshift Classification staff will maintain an electronic data base for inmates determined to be sick.

Classification officers on the middle shift and the midnight shift will send an e-mail to SH.PSF.Classification anytime an inmate is classed to sick housing. Information needed in this e-mail is name, booking number, and bed assignment. Dayshift CO's will update the sick inmate tracking sheet on a daily basis.

## **Housing**

As much as practical, male inmates in the unknown category will be housed in Quads 11-14, male sick inmates will be housed in Quad 1. Female inmates in the unknown category will be housed in Quad 7B and sick female inmates will be housed in Quad 7E. Adjustments may be necessary as needs dictate.

### Sick Housing

Inmates in sick housing will be provided with amenities such as supplement drinks and hot water for soup broth. Sick inmates may be vomiting and have diarrhea which may result in the need for clean linens and uniforms. Kitchen/laundry staff will make these items available to deputies working in sick inmate areas. Routine uniform and linen exchange will occur every third day.

### Unknown Housing

Inmates in unknown housing will be locked into their cells (one inmate per cell unless jail population doesn't allow for it) and will be let out for shower and exercise daily. Inmates will be unlocked from their cells in small groups (6-8), determined by their classification level. Classification levels can be determined by accessing "IMS", "Inquiry", and "Browse Housing Assignment" in JMS. The following inmates with these classification levels can be unlocked together: 1-2 or 2-3 or 3-4. When unlocked from their cells, inmates will be offered masks and instructed to maintain at least 6 feet from one another. Quad deputies will make an entry in JMS Inmate History documenting time out for shower and exercise.

### Well Housing

Inmates in well housing will continue on with normal day-to-day operations unless directed otherwise.

## **Screening in Housing**

### Unknown Housing

Inmates in unknown housing will be screened daily during AM roll call/feeding process by deputy staff and document the results on the IFST form. PSF 4<sup>th</sup> and 6<sup>th</sup> floor rovers and floor control room deputies will assist the quad deputies with completing the screening process. On a daily basis, deputies conducting the screenings will maintain a list of inmates who are symptom free for at least 48 hours from their initial screening and a list of inmates who are identified as sick. These lists of inmates will be forwarded to a CO as soon as the screening process is completed. The CO will notify a nurse of those inmates who are symptomatic. A nurse will assess the sick inmates and the CO will assign the inmate to sick housing. The CO will also reassign inmates determined to be well.

### Sick Housing

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Inmates in sick housing will be screened daily at AM roll call/feeding process. When a sick inmate is symptom free for at least 24 hours, a nurse and CO will be notified. A nurse will assess the inmate and the CO will assign the inmate to well housing.

#### Well Housing

Anytime deputies have reason to believe an inmate may have the flu or an inmate states he/she may be sick, deputies will screen the inmate. The results of the screening will be documented on the IFST form. If the inmate is symptomatic, notify a nurse and a CO.

### **Inmate Movement**

Inmate categories of well, unknown, and sick will be kept separate as they move about the facility and to court. Color coded wristbands will be used as identifiers by deputies to maintain separation.

Sick inmates will be encouraged to wear surgical masks as they move about the facility and to court. Unknown and well inmates will be offered a mask as they move about the facility and to court.

Movement of sick inmates from housing (primarily Q1 and Q7) to courts will occur in smaller groups and will be moved directly to A-level or PSF 1<sup>st</sup> floor court holding on an as needed basis. Sick inmates will not lay over in Court Staging. Court security deputies will communicate with Quad 1 and Quad 7 deputies when and if sick inmates will be needed in court.

### **Inmate Programming/Visitation**

Inmate social visiting and volunteer programming will continue as normal unless determined otherwise by Sherriff's Administration.

Religious programming provided by Chaplain Dave will be determined on a case-by-case basis.

Professional visitation will continue. However, visitors will be encouraged to have non-contact visits and have surgical masks provided them if a contact visit is necessary.

Careful attention will need to be given by staff working control rooms during visitation to avoid close contact between inmates in the visiting areas.

Commissary will continue as normal unless determined otherwise by Jail Administration.

### **Inmate Workers**

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On a daily basis, before going to work in the morning, kitchen/laundry workers, intake workers, and floor workers, will be screened by custody staff. Screening results will be documented on the IFST form. A nurse and a classification officer will be notified if inmates are symptomatic. These screenings will continue until the pandemic has subsided.

### **Inmate Release**

At the release desk, inmates will be provided information regarding flu precautions.

Inmates will be allowed to take their surgical mask with them if they choose.

A nurse will conduct an assessment before a sick inmate is released to the street. Deputies working in housing areas designated for sick inmates will notify the City Hall nurse before the sick is moved from the quad for release to the street.

### **Color Coding Court Tabs**

#### Booking Process

Court security will need to know the flu status of inmates prior to the inmates being moved from their housing areas to court. Flu status information will be provided to court security deputies through the use of color coded identifiers to each inmate's court tab. These color coded identifiers will mirror the color coded wristbands: green-well, yellow-unknown, and red-sick.

As the flu status of inmates change, just as the colored wristbands change, the colored identifiers on the court tabs will also need to change.

When ICR staff book-in inmates and print out court tabs, they will look at the yellow copy of the med screen form to determine the inmate's flu status. The booking clerk will then use either a yellow (unknown) or red (sick) "bingo dobber" to mark the court tab.

#### Flu Status Changes

Classification officers will notify ICR staff by FAX when the flu statuses of inmates change. ICR staff will locate the court tab and place the appropriate colored sticker dot over top of the existing flu status identifier.

Dayshift Classification officers will notify court staging deputies of inmate flu changes if the inmate is at court. Court staging deputies will place an appropriate colored dot over top of the existing flu status dot when the inmate's court tab returns.

#### Color Coding Court Tabs (First 3 days of Plan Implementation)

Flu screening will begin at 0600 on the day of implementation. All inmates currently in jail the morning of implementation will be screened from 0200-0600 and will be on unknown status for at least 48 hours unless they are symptomatic. It will not be

necessary to color code the court tabs of those inmates currently in jail unless they are symptomatic (a red sticker dot).

Screenings of all inmates in jail will occur daily from 0200-0600 for the first 3 days (48 hours). On the third day, after the final screening, all inmates will be placed on well status if not symptomatic. At this point, the court tabs will need to have a green sticker placed on them. ICR staff will place a green sticker on all court tabs that have not yet had a flu identifier mark placed on it. Classification staff will notify ICR staff when to do this.

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## JAIL HEALTH SERVICES

Authority: Melissa Caffes, BSN, RN, PHN – Nurse Manager & Rachel Silva, MD, MPH – Medical Director

TITLE: Foreign Travel-COVID-19

REFERENCE: ACA: 4C-14

Revised on: February 20, 2020

### PURPOSE:

A written plan that addresses the management of infectious and communicable diseases upon intake at the jail. This plan includes prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting requirements to applicable local, state, and federal agencies.

### BACKGROUND:

The jail medical staff will follow Hennepin Healthcare System's policies and procedures on infection prevention and work with HCMC's Infection Prevention and Control department when indicated. This can include but not limited to: Education programs for staff and inmates, prevention, control and treatment strategies, which may include; screening and testing, special housing, and protection of individual confidentiality and media relations.

### PROTOCOL:

If a patient endorses foreign travel and/or symptoms (fever, shortness of breath, cough), a nurse should be called to the sally port by deputy staff and complete these steps:

1. Put a mask on prior entering the sally port area.
2. Put a mask on the patient.
3. Obtain a detailed history of travel, possible exposure, and symptoms. Include the following questions:
  - a) Where have you traveled? If China, ask for specific regions (specifically Hubei/Wuhan). Ask for travel dates and flight information. The most critical window for travel is in the last 14 days.  
Have you had any contact with people who have COVID-19 or who have been placed on quarantine within the past 2 weeks?
  - b) Do you have any of the following: fever, cough, shortness of breath?
4. Check a temperature.

If the patient answers YES AND explains these answers to both questions in a and b, **then they are considered a potential COVID-19 case.**

If the patient answers YES, **but cannot or will not give details, place patient in the ASM cell until willing/able to provide additional history.**

In either case, follow Influenza, TB, and other infection policies should the patient meet criteria.

**In a potential COVID-19 case, page the Medical Director (Dr. Silva) via TelMediq with an explanation of the case.**

If you have not heard from Dr. Silva within 15 minutes or Dr. Silva is out of the office, page Dr. Winkelman.

Generally, we will attempt NOT to transfer these patients to the ED.

**Notify security that you will house the patient in the infirmary until we receive further instruction from public health. Use contact, droplet, and airborne precaution.**

The infirmary has negative pressure rooms that are appropriate for housing potential cases of COVID-19.

**SEE SEPARATE POLICIES FOR:**

Health Assessments

Influenza

C. Diff

MRSA

Tuberculosis