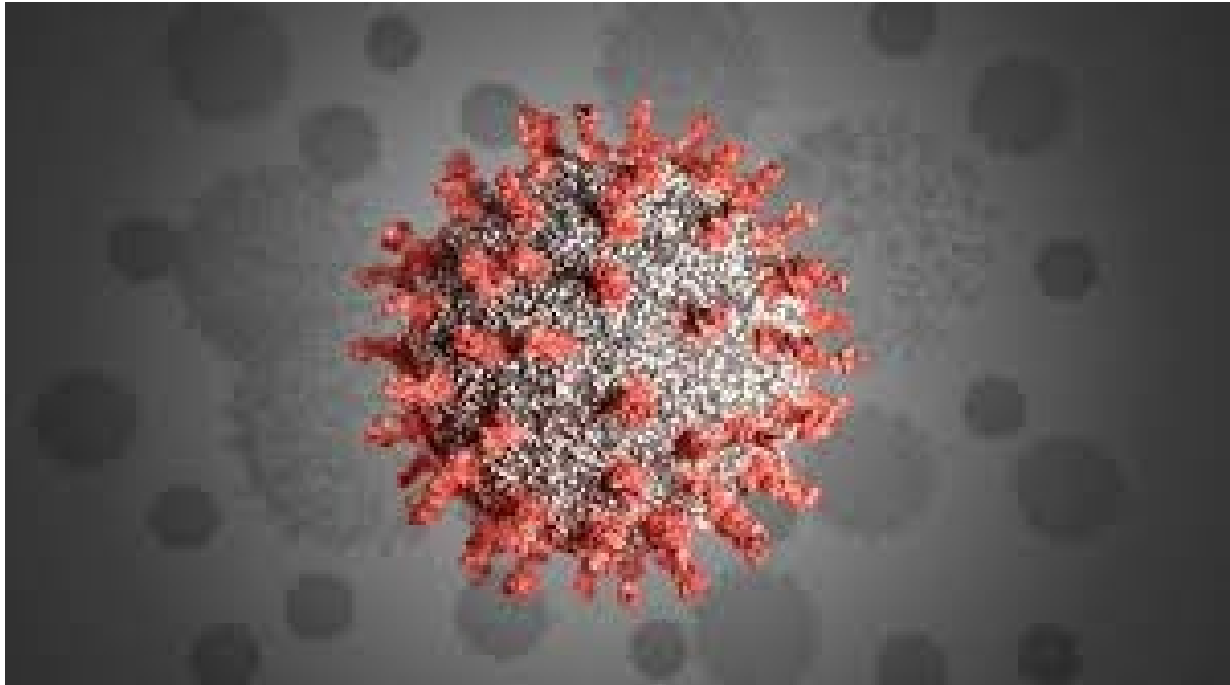


# COVID-19 Guidance

Washington Department of Corrections



June 15, 2023

100-GU005

The main purpose of this document is to create a cohesive resource to assist in operational guidance and management. As the department’s response is transitioned to implement strategies that manage COVID-19 as a “new normal”, it is important to balance the wellbeing of staff and incarcerated individuals with the need to mitigate risk of severe disease. The goal is to provide a thoughtful and informed approach to guide employees and instruct employee interactions while maximizing the safety. These safeguarding procedures are based on recommendations and guidance from government public health resources as well as information from Washington DOC Executive Leadership.

This plan is a listing of current authorized response strategies and actions guiding the Washington State Department of Corrections public health strategies.

Employees while on duty, are required to follow the COVID-19 protocols in place as applicable in the workplace. Staff should use caution and consult a supervisor when unsure of the guidance for mitigating COVID-19 risk. These guidelines will be in place until additional authorized guidance supersedes them.

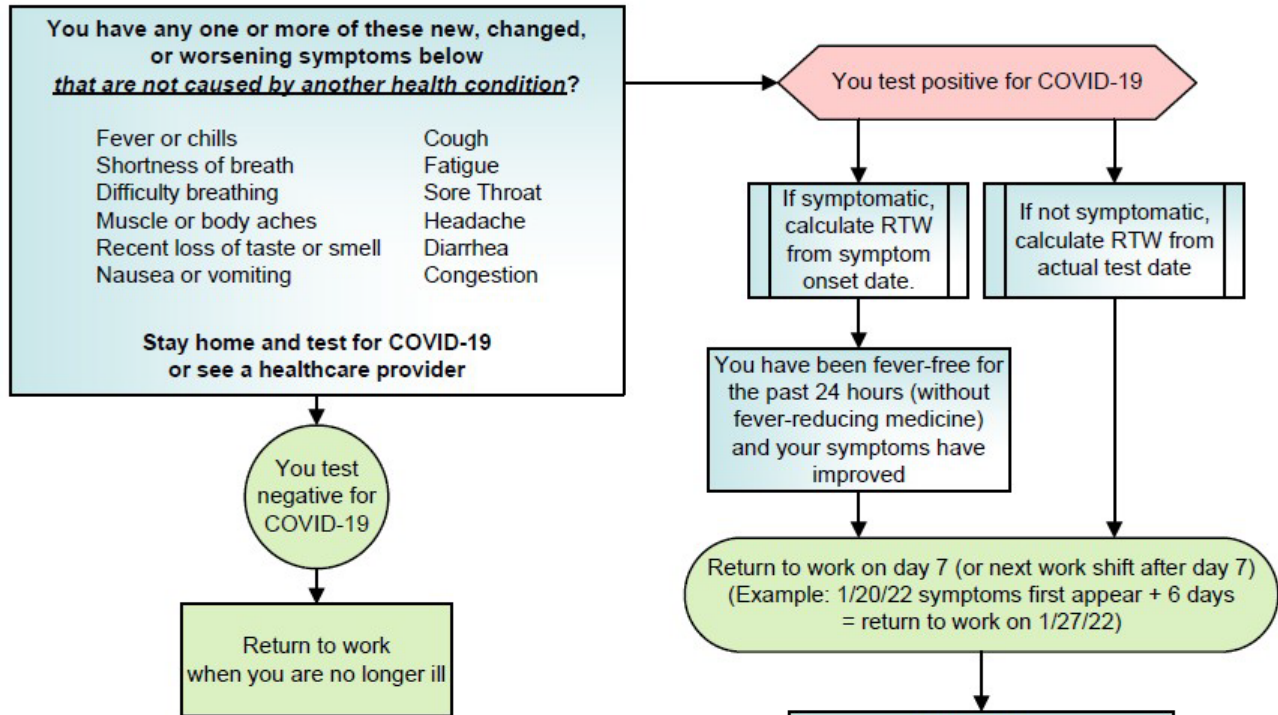
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# Section 1 – General Workplace Guidance

This guidance applies to all DOC employees in addition to any applicable division specific guidance. Much of this latest guidance is represented in the following decision tree:

The Department of Corrections is no longer conducting contact tracing or mapping for exposures. All staff are encouraged to review and follow DOH Exposure Guidance. All staff should follow the following decision tree and guidance when entering DOC facilities



### Masking/PPE

- Staff are **encouraged** to wear a mask when they are experiencing any symptoms of or have been exposed to COVID-19
- Staff are **required** to wear masks/respirators in the following circumstances:

**Respirator required**  
Wear appropriate, fit-tested, and NIOSH-approved respirators (N95) when providing care to, working near, or transporting individuals known or suspected to have COVID-19

**Mask required**  
Staff returning to work: For 10 days after originally testing positive

Review DOC 16-891 COVID Job Safety Analysis for additional information

## Events for incarcerated

Incarcerated events return to normal unless the event involves CRCC Sage Unit. If an event involves Sage incarcerated individuals, an event plan must be sent to and approved by the following:

- The Prison's Division COVID Deputy Assistant Secretary
- Health Services COVID Medical Duty Officer

## Staff Events

Staff interactions during breaks, meetings, conferences, and events should be conducted with physical distancing in mind, when appropriate. During periods of identified or increased COVID-19 infection, the following factors should be considered during events for staff:

- Meals should be boxed in a grab and go fashion.
- If seating for meal consumption at an event, physical distancing is encouraged.
- Serve food in rotations or shifts.
- Maximize the use of outdoor opportunities for events, as appropriate.

# Infection Control

## Environmental Cleaning and Disinfecting - Medical Isolation Areas

- Wait as long as possible before cleaning/disinfecting areas vacated by someone with suspected or known COVID-19.
- Increase the frequency of routine cleaning in these areas.

## Infection Control in Health Services

The Health Services Division follows the WA State COVID-19 Screening, Testing & Infection Control Guideline, which outlines strategies for congregate settings for management of COVID-19 infection as a "new normal" practice. This document balances the well-being of the agency's incarcerated population with the need to mitigate risk of severe disease. Contact Health Services for more information.

## Clusters and Outbreaks

The following designations are discontinued:

- Local Area Outbreak, Facility Wide Outbreak
- Local Area Cluster, Facility Wide Cluster

Any future outbreak designations will be made in joint consultation with the Health Services COVID Medical Duty Officer AND the HQ Emergency Operations Center Manager

## Mapping and Contact Tracing

- Mapping and contact tracing of staff is discontinued
- Health Services will continue mapping and contact tracing of incarcerated individuals

*See resource section for applicable links*

## Masking Guidance for everyone

Masks must be worn in compliance with state and federal guidelines

Staff are required to wear appropriate, fit-tested, and NIOSH-approved respirators:

- When providing care to or working near someone known/suspected to have COVID-19
- Transporting someone known/suspected to have COVID-19

Staff are required to wear a well-fitting and high-quality mask:

- When staff have returned to work prior to day 10, any time they are around other people.

## Masking Recommendations

<b>No known activity</b> <ul style="list-style-type: none"><li>• 0 Known Cases</li></ul>	<b>Masks are available</b> <i>Recommended for those with underlying health conditions</i>
<b>Identified COVID-19 Activity</b> <ul style="list-style-type: none"><li>• 1-3 Cases in Low-risk Areas</li><li>• 1 Case in High-risk Areas</li><li>• Per CDC when county hospital admission level is medium or high</li></ul>	<b>Masking encouraged for all staff</b>  <i>Especially recommended for those with underlying health conditions</i>
<b>Increased COVID-19 Activity</b> <ul style="list-style-type: none"><li>• 4 or more cases in Low-risk Areas</li><li>• 2 Cases in High-risk Areas</li><li>• Per CDC when county hospital admission level is HIGH</li></ul>	<b>Masking Strongly Recommended for all staff</b>  <i>Especially recommended for those with underlying health conditions</i>

- Low-risk areas consist of all living units (except high-risk units Sage East and MCC-WSR), all non-clinical areas and Reentry Centers (RCs).
- High-risk areas consist of all infirmaries (IPUs), all Health Services clinic areas where direct patient interaction occurs, as well as CRCC-Sage East and MCC-WSR living units.
- Masking is encouraged for individuals who are high risk for severe COVID-19.
- Voluntary N95 use is still authorized for staff and incarcerated.

## Personal Protective Equipment (PPE)

Personal protective equipment (PPE) is necessary to prevent the spread of COVID-19. PPE is necessary when interacting with people who have confirmed or suspected COVID-19 or are at higher risk of developing COVID-19 than the general public.

## COVID Job Safety Analysis

Per DOC Policy 890.130, the completed 16-891 COVID-19 Job Safety Analysis contains expanded details of required and recommended masking and PPE.

*See resource page for applicable links*

## Return to Work

### WA COVID-19 Return to Work Guidance FOR STAFF WHO TEST POSITIVE FOR COVID-19

*Guidance is in alignment with current Washington Department of Health and Labor and Industries guidance for state employees.*

ISOLATION = Positive/COVID-19 test	
If you test POSITIVE for COVID-19 Notify your supervisor/shift office/work location or _____ (fill in, if different), and immediately leave the workplace	
↓	
If test POSITIVE at home or in the community	If test POSITIVE at work
↓	↓
COMPLETE DOC form 03-110 <a href="#">COVID-19 Case Positive Workplace Denial</a> (DO NOT COMPLETE IF AGENCY ADMINISTERED RAT) AND ROUTE as indicated on the form	COMPLETE the <a href="#">COVID-19 Point of Care Test Result Report Form</a> (POC Form) AND ROUTE as indicated on the form
↓	↓
Isolate* for 6 full days	
CALCULATE A RETURN-TO-WORK DATE: <b>IF SYMPTOMATIC</b> and subsequently test positive, calculate from <b>symptom onset date</b> <b>IF NOT SYMPTOMATIC</b> and subsequently test positive, calculate from <b>actual test date</b>  IF: Your symptoms are improving AND you have been fever-free for 24 hours without fever-reducing medicine THEN: Return to work on day 7 (or next work shift after day 7). (Example: 1/20/22 symptoms first appear + 6 days = return to work on 1/27/22)  DAY 7 RETURN DATE IS: _____	
NOTE: If you are still too sick to return to work, follow your facility/work location call-in procedures for absence	
↓	
DAY 7: Complete facility administered RAT prior to facility entry (curbside testing if possible). If negative, return to work. FOLLOW STRICT MASKING ADHERENCE, IN ADDITION TO THE PPE MATRIX, BY WEARING A MASK THROUGH DAY 10 AT ALL TIMES WHEN AROUND OTHERS (surgical mask or voluntary N95). If Day 7 RAT is positive, isolate for that day plus 3 more days. Return to work on day 11. Additional RAT test is not needed.  DAY 11 RETURN DATE IS: _____	

**If you test negative for COVID-19 but have been exposed or are a close contact of someone w/ COVID-19:**

*If you were exposed to someone with COVID-19 at work, home or elsewhere, follow the advice in:*

<https://doh.wa.gov/sites/default/files/2022-02/COVIDexposed.pdf>

*If you were very ill with COVID-19, were hospitalized, are immune compromised or have other serious health conditions you should consult with your medical provider before returning to work. If you are hospitalized for COVID-19, notify shift commander or supervisor.*

*Facilities/Reentry Centers/Correctional Industries are responsible to follow notification requirements per DOC 890.000*

Further information can be obtained at: <https://doh.wa.gov/sites/default/files/2022-02/COVIDcasepositive.pdf>

Employees are expected to contribute to a healthy workplace by complying with all safety and health practices the employer establishes. This includes not knowingly exposing co-workers and the public to conditions that would jeopardize their health or the health of others.

- If staff are feeling unwell, they should call in to work via telephone.

When an employee/contract staff self-reports or is tested to have COVID the following applies:

- A return-to-work date will be calculated based upon the Return-to-Work guidance.
- If telework options are available and the employee/contract staff can perform those duties, they should telework until they can return to the worksite. Employees are encouraged to work directly with their supervisor to determine if telework is an option.

*See resource section for applicable links*

## Signage

Signage is important for communicating health and safety information and serves to educate and remind. Signage should be consistent throughout all department offices and facilities.

Current signage available includes COVID-19 Identified and COVID-19 Increased signage.

## Testing

The department uses COVID-19 testing as a strategy to mitigate transmission and to reduce the impact on employees, those under the department's jurisdiction, and department operations.

The department established testing protocols to allow employees to receive testing during work time when testing is needed including return to work or symptomatic scenarios. Each facility has a liaison, staff testing team, and a designee that coordinates test scheduling and provides the results.

- When possible, testing will occur PRIOR to entry into the worksite.
- Other than for early return-to-work purposes (prior to day 10), staff and volunteers are not required to have tested negative prior to entry to a DOC facility or office.
- Visitors are not required to have tested negative prior to entry to a DOC facility or office.
- This section provides guidance for specific scenarios when Rapid Antigen Tests (RAT) are positive, or other situations when additional guidance may be needed.
- For staff or contractor RAT positive results, the testing team must fill out the Washington State COVID-19 Point of Care Test Result Report Form (POC Form).
- RAT results are firm. Re-tests will NOT be performed.
- RAT tests may be scheduled to be completed curbside with the facility by following their facility/office testing procedures or contact their healthcare provider for follow up.
- For staff/contractor results, reporting of RAT positives will be sent exclusively to the Occupational Health and Wellness Unit (OHWU) and to the Department of Health via the POC Form. Staff who test positive will be provided with Return-to-Work guidance and follow the indicated process.
- All staff case positive test results will be entered into the DOC Outbreak Tracing System (DOTS) by the facility designated contributor.

*See resource section for applicable links*

## Section 2 – Resources

The links below are intended to provide staff with information and resources that will assist them in the continued management of COVID-19.

### External Resources

[Centers for Disease Control and Prevention](#)

[Washington Department of Health](#)

[DOH Exposure Guidance](#)

[Washington Department of Labor and Industries,](#)

### Masking/PPE Resources

[16-891 COVID-19 Job Safety Analysis](#)

[DOC 890.130 Job Safety Analysis, Hazard Assessments, and Personal Protective Equipment](#)

[Washington State L&I Requirements and Guidance for Preventing COVID-19](#)

[Washington Dept. of Health Masking Guidance](#)

[CDC Guidance on Management of COVID-19 in Correctional and Detention Facilities](#)

### Return to Work/Screening/Testing

[Return to Work](#)

[Washington State COVID-19 Point of Care Test Result Report Form \(POC Form\)](#)

[DOC 03-110 COVID-19 Positive Workplace Denial Form](#)