

April 15, 2020

Interim Guidance for Management of COVID-19 in Correctional and Detention Facilities in Georgia

GUIDANCE SUBJECT TO CHANGE. Please read this guidance in its entirety.

The ever-expanding global outbreak of respiratory infections due to a novel coronavirus (COVID-19) has been declared a pandemic and is being closely monitored by state public health officials. Correctional and detention facilities are considered at very high risk for COVID-19 spread and outbreaks due to having a high volume of people within a close, congregate setting. All correctional and detention facility personnel should be preparing for the possibility of a COVID-19 outbreak within their facility. All employees should be on high alert for potential COVID-19 cases within their population, including among staff. COVID-19 clinical presentation varies in severity from asymptomatic infection or mild illness to severe or fatal illness. Symptoms include fever and signs of respiratory illness (e.g., cough, shortness of breath); case-patients can also develop pneumonia. This document, along with the links, provides multiple options for the management of COVID-19 in Correctional/Detention Facilities. DPH understands the recommended guidance may not always be feasible. Please contact your local Health District to discuss additional recommendations, if needed. **Any cases of COVID-19 in correctional or detention facilities should be immediately reported to your local Health District.**

Management of Cases

If active or suspected cases of COVID-19 are present at the facility, the following actions should occur:

- Facilities should take steps to isolate symptomatic inmates/detainees IMMEDIATELY. All suspect and confirmed cases should wear a facemask, when available.
- All staff should wear a facemask at all times if supplies are available.
- Every effort should be made to isolate confirmed and suspect COVID-19 cases individually, when possible. All movement should be restricted, and the inmate/detainee should wear a mask when movement outside of the isolation area is required.
- Confirmed and suspect cases must remain isolated until they have been free from fever for at least 72 hours without the use of fever-reducing medications **AND** the individual's other symptoms have improved (e.g., cough, shortness of breath) **AND** at least 7 days have passed since the first symptoms appeared.
- Cohorting should only be practiced if there are no other available options. Only individuals who are laboratory-confirmed COVID-19 cases should be placed together under medical isolation as a cohort. **Do not cohort confirmed cases with suspected cases or case contacts.**

Management of Contacts

- All close contacts, including staff, should be quarantined through 14 days after their last exposure to a case.
 - A close contact is someone who was within 6 feet of a confirmed case for greater than 10 minutes.
 - Quarantined for staff would mean staying home for 14 days. Quarantine for an inmate means they should be housed independently and kept apart from other inmates as space permits for 14 days.
- To reduce transmission risk of COVID-19, make every possible effort to quarantine close contacts of cases individually. Cohorting of contacts should only be done if there are no other available options. **Contacts should not be cohorted with confirmed cases.**
- Contacts, including staff, should wear a mask, when available. Particularly, contacts should wear a mask when movement outside of the quarantine space is required.
- If a quarantined contact becomes symptomatic, isolate them IMMEDIATELY and follow the “Case Management” recommendations. **The 14-day quarantine period for exposed contacts restarts.**

Inmate/Detainee Intake

- Every effort should be made to limit the intake of new inmates/detainees into a facility. However, if a facility must intake new individuals, every attempt should be made to perform a symptom check upon arrival. **Do not place them with COVID-19 or inmates/detainees currently being quarantined.**

Reporting a COVID-19 suspect case or outbreak to your Local Health District:

- If you have not already done so, determine what health district the facility is in and who you would contact. Please find a list of districts (including a list of each county in the district) and contacts here: <https://dph.georgia.gov/district-office-directory>
- If any individuals in the facility, including employees, begin to exhibit symptoms described above, please call the health district immediately and ask to speak to an Epidemiologist.
- The Epidemiologist will help facilitate COVID-19 testing if warranted and help your facility perform a risk assessment to determine how to best mitigate any spread.

Important CDC COVID-19 Guidelines:

- Interim Guidance on Preparedness, Prevention and Management of COVID-19 in Correctional and Detention Facilities: <https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html>
- Disinfecting your Facility if Someone is Sick: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/disinfecting-building-facility.html>
- EPA Disinfectants for Use Against COVID-19: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>
- Information for Law Enforcement: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html>

For more information, please visit our website at <https://dph.georgia.gov/> or CDC’s website at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.