# RHODE ISLAND DEPARTMENT OF CORRECTIONS COVID-19

# Inmate Quarantine & Isolation Protocols Last Updated: 3/7/2022

All quarantine and isolation protocols are enacted by the RIDOC Medical Director based on Rhode Island Department of Health (RIDOH) and Centers for Disease Control and Prevention (CDC) guidelines; *however*, RIDOC is unique as it is not only a correctional facility but is also considered a congregate living setting, thus there are multiple factors that contribute to this decision making. RIDOC routinely consults with the RIDOH to determine the best course of action based upon these factors and the individual circumstances surrounding an exposure.

Quarantine and isolation protocols for inmates differ depending on the facility and can change often for various reasons. In general quarantine and isolation for inmates entails a restriction in movement (e.g., smaller groups, meals taken in cells, programs curtailed). The level of restriction expands and contracts as needed, depending on the level of infection within a facility.

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## **MASK REQUIREMENTS**

All inmates should wear a surgical or K/N95 mask (no cloth masks) as much as possible while indoors.

- Masks should always be worn in high-traffic, congested areas.
- Masks should be worn when social distancing is not feasible.
- Masks may be worn at all times.

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### **VACCINATIONS**

"Up-to-date" on vaccination means having received a booster dose.

All three (3) types of COVID vaccines (Moderna, Pfizer and Johnson & Johnson), including boosters, will be available to all inmates.

## **QUARANTINE PROTOCOLS**

**Quarantine** is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick. People in quarantine should separate from others, their health is monitored regularly, and they should follow directions given by their healthcare provider.

**Quarantine Periods** start from the date of commitment to the Adult Correctional Facilities (ACI), or from last date of contact with a COVID positive person.

Quarantine will be split into two (2) categories:

- 1. Individual Quarantine for not up-to-date vaccinated individuals, and
- 2. Modified Cohort Quarantine for exposed cohorts, regardless of vaccination status.

## **Individual Quarantine\*** for NOT Up-to-Date Vaccinated Inmates:

- quarantine for 10 days,
- required to take an immediate rapid test, <u>and</u> take a rapid test on Day 5 or later (depending on current positivity rates) to clear quarantine,
- individuals who test positive during quarantine will be transferred to an isolation mod/unit to begin isolation protocols, as outlined below,
- limited access to programming,
- will be fed-in and have medications delivered if not in quarantine cohort, and
- will be unable to participate in work crews.

\*Up-to-Date Vaccinated Inmates will not need to individually quarantine, but will be required to undergo Modified Cohort Quarantine, as outlined below.

# **Modified Cohort\* Quarantine** (regardless of vaccination status):

- quarantine for 10 days,
- K/N95 mask required while in cohort quarantine,
- required to take a rapid and/or PCR test every 3-7 days, until no new cases for 10 days,
- inmates who test positive during quarantine will be transferred to an isolation mod/unit to begin isolation protocols, as outlined below,
- limited programming, and
- possible visitation restrictions.

\*Cohorts will be determined based on groups that recreate and eat together (cohort size is dependent upon facility).

Inmates placed on COVID Protocols will be immediately evaluated for available therapies.

- Monoclonal antibodies (mAB) will be offered for post-exposure prophylaxis for eligible inmates, and
- Evushield will be offered as a pre-exposure prophylaxis for eligible inmates.
- Adequate access to appropriate PPE will be provided to all inmates.

## **ISOLATION PROTOCOLS**

**Isolation** is used to separate people infected with COVID-19, or people who are sick with COVID-19 symptoms, from people who are not infected. People in isolation remain separate from others, their health is monitored regularly, and they should follow directions given by their healthcare provider.

**Isolation Period** is 10 days from the <u>first</u> positive test or from the start of symptoms, until symptoms improve. This may be extended by healthcare services, as necessary (e.g., immunocompromised patients).

Inmates placed on COVID Protocols will be immediately evaluated for available therapies.

- Monoclonal antibodies (mAB) and anti-virals will be provided to eligible inmates who test positive.
- Adequate access to appropriate PPE will be provided to all inmates.

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### **GENERAL TESTING INFORMATION**

- No asymptomatic testing (rapid or PCR) will be done for those individuals who have had a positive COVID result in the past 90 (ninety) days.
- ❖ All symptomatic individuals will take rapid and PCR tests, if negative.
- ❖ All close contacts will take a rapid test and follow Quarantine Protocols as outlined above.
- ❖ Inmate testing schedules **may** vary depending on the number of positives in the facility.

<u>All</u> New Commitments will take a rapid and PCR test upon commitment <u>and</u> again after Day 8 to clear commitment quarantine.

## For All Facilities:

Testing will be done **weekly** if community rates are greater than **200 / 100K** people (for the past week). \*

\*Determined based on https://ri-department-of-health-covid-19-data-rihealth.hub.arcgis.com/

## For Individual Facilities:

Testing will be done in facilities:

- weekly if they have had 5 or more total cases in the past 3 weeks,
- bi-weekly if there are less than 5 total cases in the past 3 weeks, or
- **monthly** if there are less than 2 total cases in the past 6 weeks.