

# **State of Iowa Department of Corrections**

## **Policy and Procedures**

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Applicability: Institutions, CBC, CO, IPI

Policy Code: Public Access

Iowa Code Reference: N/A

Chapter 3: INSTITUTIONAL OPERATION

Sub Chapter: SAFETY & EMERGENCY PROCEDURES

Related DOC Policies: HSP-905

Administrative Code Reference: N/A

Subject: EPIDEMIC AND PANDEMIC ACTION PLAN

PREA Standards: N/A

Responsibility: Donald Stolley, Dr. Michael Riley

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Authority:

### **1. PURPOSE**

To develop and proactively implement an action plan for institutions in the Iowa Department of Corrections (IDOC) to respond to epidemic and pandemic acute respiratory infections.

### **2. POLICY**

It is the policy of the IDOC to have procedures in place to prevent the transmission of epidemic and pandemic respiratory infections to enable continued institutional operations.

Enhanced prevention strategies may be implemented based on community-level spread of infection and the facility-level factors reflecting the unique characteristics, operations, and populations of each facility.

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### **3. PROCEDURES**

#### **A. Communication**

1. The IDOC will consult with Iowa Health and Human Services (IHHS) regarding any epidemic infection prevalence in the state and seek guidance on measures to prevent transmission and control outbreaks.
2. The IDOC will also coordinate planning with Iowa Homeland Security and Emergency Management, as well as other state agencies to ensure an integrated and uniform strategic plan.
3. IDOC incarcerated individuals and staff will receive routine updates about the current known status of epidemic or pandemic infections as well as infection control measures to implement.
4. Information will be disseminated to incarcerated individuals and staff about the status of IDOC planning to respond to outbreaks of these contagious respiratory infections.

#### **B. Infection Control**

Each institution shall develop an infection control plan outlining procedures to follow in the event of an epidemic and/or pandemic, to include the following:

1. Education - Institutional Health Services departments shall distribute educational information to incarcerated individuals and staff about the steps they should use to prevent transmission of the virus. Posters may be displayed in highly visible areas.
  - a. Wash your hands often with soap and water.
  - b. Avoid touching your eyes, nose and mouth.
  - c. Cover your nose and mouth with a tissue when you cough or sneeze. After using a tissue, throw it in the trash and wash your hands.
  - d. Avoid close contact (within 6 feet) with sick people.

- e. While sick, limit contact with others as much as possible to keep from infecting them.
- f. Frequently clean and disinfect surfaces and objects that may be contaminated with the virus with an approved chemical effective against the virus.

## 2. Engineering Controls

- a. Review movement of staff and incarcerated individuals within institutions including discharges and admissions.
- b. Determine whether to modify all visiting, vendors, contractors, volunteer support and outside trips.
- c. All phones, radios and electronic equipment should be routinely sanitized.
- d. Staff should be instructed to wash their uniforms daily.
- e. Influenza vaccines shall be offered to staff and incarcerated individuals based on available supplies in conjunction with state and local county health authorities.
- f. COVID-19 vaccines shall be offered to incarcerated individuals based on available supplies in conjunction with state and local health authorities.
- g. Institutional executive staff will develop a plan to assure essential duties of operation can be delivered with a significantly reduced workforce.
- h. Health and Safety Officers will assure the means for appropriate hand cleansing readily available within the facility, including intake areas where incarcerated individuals are booked and processed, visitor entries and exits, visitation rooms, common areas, and staff-restricted areas, in addition to lavatories and food preparation and dining areas. The means for hand cleansing are ideally running water, soap, and hand drying machines or paper towels and wastebaskets; alternatively, except in lavatories and food preparation areas, hand sanitizers may be used as an interim means until soap and water is available.

## 3. Administrative controls

### **C. Personal Protective Equipment**

1. Each institution shall maintain an adequate supply of gloves, masks gowns, and eye protection in order to prevent the transmission of the disease.
2. Train and fit test designated staff in the use of approved N-95 respirators as deemed appropriate.
3. Personal Protective Equipment may be required when interacting with cases. This includes N95, protective eye wear, isolation gown, and gloves.

### **D. Staff Isolation Requirements**

1. Facilities shall follow the CDC guidelines for staff isolation following any positive test of a respiratory illness.
2. The Administrator of Nursing shall notify all facilities when the guidelines are updated.

### **E. Response**

Upon notification of a pandemic within IDOC facilities.

1. Immediately isolate (or cohort) incarcerated individuals with the illness using Strict Isolation Protocol (explained in **HSP-905, Disease Specific Precautions**) including N95 masks as per IHHS guidance.
2. Reinforce education on infection control procedures for all staff who would, in the course of their work, have direct contact with those in isolation.
3. Assure adequate infection control supplies and personal protective equipment are available.
4. Continue to triage at sick call to identify incarcerated individuals with respiratory symptoms and immediately implement procedures for isolating suspected cases.
5. IDOC Incident Command will update the SEOC as necessary.
6. Consider Restricted Movement in affected areas.

7. As deemed medically appropriate distribute appropriate PPEs or surgical masks to staff and incarcerated individuals.
8. Continue staff and incarcerated individual training on infection control.
9. Monitor adherence to Safety and Infection Control guidelines.
10. Monitor daily PPE supply.