5. COVID-19 Testing Guidance for Local Confinement Facilities

Testing for SARS-CoV-2, the virus that causes COVID-19, can be used as part of an infection control toolkit when paired with sanitation, personal protective equipment (PPE), and social distancing. Please note that testing, by itself, is not an intervention that can stop the spread of COVID-19. The goal of testing within Local Confinement Facilities, commonly known as jails or detention centers, is to identify active cases and guide interventions that reduce viral transmission within the jail staff and detainee population and into the community. Local Confinement Facilities should coordinate with their local health departments (LHD) when considering facility wide testing. If testing is not performed through the LHD, the jail should report any positive test results of staff or detainees to the LHD.

Contents

- Testing Overview .......................................................................................................................... 1
- Testing Methods.......................................................................................................................... 1
- Testing Strategies ........................................................................................................................ 1
- Testing should be used to inform actions. .................................................................................. 2
- COVID-19 Testing of Staff ........................................................................................................... 3
- COVID-19 Testing of Detainees ................................................................................................. 3
- Testing of COVID-19 during an Outbreak in Local Confinement Facility ............................ 4
- Testing at the Start of an Outbreak of COVID-19 ..................................................................... 4
- Repeat Testing During an Outbreak of COVID-19 in Local Confinement Facilities .............. 5
- Proposed Testing Prioritization for Limiting Viral Impact on Local Confinement Facilities .... 5
- Tips for Testing Events ............................................................................................................... 6
- Figure 1. Sample Layout of COVID-19 Testing Event (CDC 2020) ........................................ 6
- For More Information: ................................................................................................................. 8

Testing Overview

Testing Methods

Viral testing for COVID-19 in jail staff and detainees by diagnostic methods can help determine current cases. Antibody (serologic) testing determines past COVID-19 infections and should not be used to inform placement of individuals in isolation or quarantine versus within the general population. Testing protocols should be aimed at rapid turnaround times paired with immediate response to positives to prevent further spread of the virus in the confined population.

Testing Strategies
There are three scenarios where COVID-19 testing may be needed. Local Confinement Facilities should always test individuals in the first scenario (someone with symptoms of COVID-19) and the second scenario (someone who is a close contact of a COVID-19 case). The third testing scenario can be considered when there is COVID-19 identified in a Local Confinement Facility or if COVID-19 is extensively circulating in the community. Testing strategies should take into account the resources (testing supplies and funds to cover, staff to test, etc.), size and type of the facility, turn-over rates (time to release, time to transfer, etc.), the reasons for testing, and the ability to act on the test results.

1. To confirm and isolate suspected cases, all individuals with signs or symptoms consistent with COVID-19 should be tested.

2. To help limit viral transmission, testing asymptomatic individuals who are close contacts of COVID-19-positive or symptomatic individuals is strongly recommended.

3. For early identification and prevention, consider broad-based testing of asymptomatic individuals without known or suspected exposure to the virus, especially where there is extensive community spread. If there are limited resources for broad based testing, staff and detainees entering into or moving out of the facility should be prioritized for testing.

Testing should be used to inform actions.

Prior to COVID-19 testing, jails and detention centers should ensure that there are resources to engage in follow-up activities including:

- Communicating results confidentially with staff and detainees.
- “Cohorting” (grouping) positive and negative detainees separately according to CDC guidance. Cohorting is the practice of isolating multiple laboratory-confirmed COVID-19 cases together or quarantining close contacts together. Designate a portion of the facility (e.g., a wing, ward, floor or end of a hallway) to care for detainees with COVID-19. The COVID-19 care area should be physically separated from the rest of the facility with clear signage.
- Assigning dedicated staff to work only on the COVID-19 care unit.
- Creating separate common areas and bathrooms for positive and negative detainees.
- Limiting movement of positive detainees out of the facility until medically cleared.
- Cleaning and disinfecting shared devices such as telephones and tablets between uses.
- Designating a separate space for staff to eat if they normally eat with detainees.
- Managing staff with positive test results, which may include explaining the facility’s leave options related to COVID-19.
Notifying your LHD to make sure they know about the testing event and have sufficient contact tracing resources to follow up on any positives.

**COVID-19 Testing of Staff**

Because staff move daily between the facility and their families and communities, COVID-19 outbreaks in jails or detention centers often start with the staff. Therefore, testing should be made readily available to staff, and they should be encouraged to be tested regularly.

- At the beginning of each shift, the shift supervisor, jail health provider, or administrator should take temperatures of all staff and ask about the presence of COVID-19 symptoms. If a jail employee has any of these symptoms, then he or she should go home and follow the [CDC-recommended steps for people who are sick with COVID-19 symptoms](https://www.cdc.gov/coronavirus/2019-ncov/sick-at-work/sick-people.html).

- Viral testing should be administered for any jail staff who has signs or symptoms of COVID-19 or known close contact to a confirmed case of COVID-19. Any staff with positive test results should follow [CDC guidance](https://www.cdc.gov/coronavirus/2019-ncov/sick-at-work/sick-people.html) for when they can return to work.

- Jails should coordinate closely with their local health department (LHD) to report confirmed or suspected cases among jail staff as soon as possible.

- Detention facilities should follow guidance from the [Equal Employment Opportunity Commission](https://www.eeoc.gov) when instituting and offering testing to staff. Testing should be coordinated with the occupational health provider or LHD with a plan for staff notification of test results.

- Jail administrators and LHD staff should work together to perform contact tracing to determine close contacts of the jail staff with COVID-19.

- Staff who have been identified as a close contact of a confirmed case should self-quarantine at home for 14 days after their last exposure to the confirmed case. Facilities with staffing challenges should explore temporary staffing options in addition to ongoing recruitment efforts.

- In a severe staffing shortage, staff are permitted to work if asymptomatic after potential exposure to a confirmed COVID-19 case. This is an exception only for extreme cases in which the facility could not operate without that employee. The staff member should take precautions to avoid COVID-19 transmission, such as use of a cloth mask and strict adherence to social distancing. Under no circumstances should a symptomatic person report to work. For more information refer to [CDC guidance for Essential Critical Workers who have been exposed to COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/effective-infection-prevention.html).

**COVID-19 Testing of Detainees**
• Incorporate COVID-19 viral testing into intake processing for incoming detainees. If space permits, incoming detainees should be quarantined to prevent the possible spread of the virus to the rest of the jail.

• Whenever possible, test detainees with a scheduled court appearance, release into the community, or transfer to prison at least 3 days before movement or more if needed to get test results back, to allow for medical isolation of COVID-19-positive individuals before movement out of the facility.

• Do not transfer detainees with pending test results to prison. Do not transfer COVID-19-positive detainees to prison until they have completed their medical isolation period. Notify the Transportation Manager (Joni Penny, joni.penny@ncdps.gov) at DPS if a detainee due for transfer to prison has tested positive for COVID-19.

• All detainees should be monitored daily for the presence of a fever or other COVID-19 symptoms by the jail health nurse or administrator. Viral testing should be administered for any detainee who has signs or symptoms of COVID-19. The healthcare provider is encouraged to test symptomatic individuals for other respiratory illnesses (i.e. influenza) at the same time as the COVID-19 test is administered.

• If a detention center has limited or no onsite healthcare, then these centers should coordinate closely with their LHD to test, report, and manage confirmed or suspected cases among detainees.

• Detainees should be notified of their own test results. Jail staff should work with the LHD to perform contact tracing for close contacts of detainees diagnosed with COVID-19.

• Detainees with suspected or confirmed COVID-19 positive should be provided with cloth masks (unless contraindicated) if they are not already wearing one, be connected to appropriate medical care as soon as possible, and placed in medical isolation.

• If a detainee refuses testing, continue temperature and symptom checks and reoffer testing if the detainee’s health changes. The jail health provider should use clinical judgement to determine if the detainee shows signs of infection with COVID-19 and should be isolated or had exposure to COVID-19 and should be quarantined.

Testing of COVID-19 during an Outbreak in Local Confinement Facility

Testing at the Start of an Outbreak of COVID-19

COVID-19 in the jail population is a serious public health concern. Jails with two or more cases of COVID-19 in the facility within 28 days are considered to have an outbreak. Because of the high risk of viral transmission from any infected individuals living or working in congregate living settings, this definition is applied regardless of whether the positive individuals are all
detainees, all staff, or both staff and detainees, and regardless of whether exposure can be traced to the facility or not.

- If an outbreak is suspected, test all symptomatic individuals and their close contacts. Other individuals could be infected with COVID-19 and continue to spread the virus, even if they appear asymptomatic.

- Targeted testing of all individuals in a housing unit is recommended when an individual in a large, open dorm tests positive, since contact tracing would be almost impossible. In situations in which the positive individuals may have had contact with many people at the facility (i.e. a staff member who worked in several dorms while symptomatic), broad based, facility-wide testing of all staff and detainees is advised according to CDC guidance.

- If your facility is not able to purchase needed specimen collection supplies, go to the ReadyOp portal to submit a request for specimen collection supplies including test kits. Medical volunteers to support specimen collection sites for COVID-19 testing, long-term care staffing support and other medical staffing missions should go through NCSPARTA.

**Repeat Testing During an Outbreak of COVID-19 in Local Confinement Facilities**

Because exposed individuals may occasionally take several days to test positive with COVID-19, repeat viral testing of negative contacts is encouraged when possible. The jail administrator should coordinate with the jail’s communicable disease nurse or with the LHD to determine when the outbreak is considered closed and repeat testing is no longer necessary. Perform viral testing on any staff or detainees who develop new symptoms of COVID-19.

CDC recommends repeating testing of negative contacts every 3-7 days until no new cases are identified for 14 days after the most recent positive result. The specific re-testing time interval that a facility chooses could be based on:

- The stage of the ongoing outbreak (i.e., more frequent testing in the context of escalating outbreaks, less frequent testing when transmission has slowed)
- The availability of testing supplies and capacity of staff to perform repeat testing without negatively impacting other essential health care services
- Financial resources to fund repeat testing, including procurement of testing supplies, laboratory testing services, and personal protective equipment (PPE)
- The testing capacity of laboratories that will be performing the tests
- The expected wait time for test results (and timely action based on the results)

**Proposed Testing Prioritization for Limiting Viral Impact on Local Confinement Facilities**

- 1st – test symptomatic employees and detainees and their contacts, as well as those at high risk for medical complications due to COVID-19 infection.
• 2nd – test asymptomatic new inmates and asymptomatic staff with no contacts to known symptomatic person.
• 3rd – test asymptomatic inmates sharing cells with other inmates and/or contacting other inmates during meals or recreation.
• 4th – test asymptomatic inmates in individual cells without physical barriers to airflow.

**Tips for Testing Events**

• For 80-100 people, it is recommended to have a team of 3-5 testers and at least 3 other staff directing traffic. Plan for extra staff to assist if necessary.

• Have a central location for the testing. Bring the staff and detainees to the testers in groups or cohorts by housing unit to prevent cross-exposure between groups.

• Hold the testing event where there is space for social distancing, outside or inside in a large, well-ventilated area where you can space out testing stations.

• Keep the flow of testing going in one door and out another, which makes the process go quickly and avoids crowding. Pilot the sample collection procedures before the detainee testing event, possibly while testing staff.

• Create a barrier between testing stations using curtains or plexiglass. Keep others more than 6 feet away from testing stations since people being tested may cough or sneeze during testing. Have people being tested face away from others.

• Have paperwork and labels filled out for everyone and supplies ready ahead of time. If testing detainees and staff at the same event, clearly delineate paperwork and labels for staff vs. detainees (using different colored paper or labels, etc.) to simplify notification and reporting of results.

• Consider whether you want to track refusals and how to do so (i.e. form, list).

• Keep testing materials and other supplies out of the specimen collection area to prevent contamination. If possible, have the person being tested bring up their own testing supplies from a registration table to the testing station.

*Figure 1. Sample Layout of COVID-19 Testing Event (CDC 2020)*

*See CDC’s broad-based testing for SARS-CoV-2 in congregate settings*
**Figure. Example of layout and flow of individuals being screened.** Station tables should always be at least 6 feet apart. Keep as much distance as possible between staff and participants. Use physical barriers (e.g., plexiglass) where appropriate. Place chairs at an angle to reduce face-to-face exposure.
For More Information:


https://covid19.ncdhhs.gov/guidance#correctional-facilities