8. Monitoring of High-Risk Individuals for COVID-19

Everyone is at risk for getting COVID-19 if they are exposed to the virus. Some people are more likely than others to become severely ill, which means that they may require hospitalization, intensive care, or a ventilator to help them breathe, or they may even die. Each jail should develop a COVID-19 response plan with their local health department, as part of the jail health plan. Part of this plan should include how to monitor and care for high-risk individuals susceptible to severe illness due to COVID-19.

This guidance is provided to North Carolina jails and is intended to give a clear understanding of at-risk populations so they can be closely monitored while incarcerated. It is based on current CDC guidelines and recommendations.

Among adults, the risk for severe illness and hospitalization from COVID-19 increases with age, with older adults at highest risk. For example, people in their 50s are at higher risk for severe illness than people in their 40s. Similarly, people in their 60s or 70s are, in general, at higher risk for severe illness than people in their 50s. The greatest risk for severe illness from COVID-19 is among those aged 85 or older.

People of any age with certain underlying medical conditions are at increased risk for severe illness from COVID-19. Medical conditions include, but are not limited to:

- Cancer
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Immunocompromised state (weakened immune system)
- Obesity (body mass index [BMI] of 30 or higher)
• Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
• Sickle cell disease
• Type 2 diabetes mellitus

As you are aware, COVID-19 is a new disease. Currently there are limited data and information about the impact of underlying medical conditions and whether they increase the risk for severe illness from COVID-19. People with the following conditions might also be at an increased risk for severe illness from COVID-19:

• Asthma (moderate-to-severe)
• Cerebrovascular disease (affects blood vessels and blood supply to the brain)
• Cystic fibrosis
• Hypertension or high blood pressure
• Neurologic conditions, such as dementia
• Liver disease
• Pregnancy (prenatal and postnatal care should be provided)
• Pulmonary fibrosis (having damaged or scarred lung tissues)
• Smoking
• Thalassemia (a type of blood disorder)
• Type 1 diabetes mellitus

**Jail** staff must ensure that everyone, especially people at an increased risk for severe disease if they get COVID-19, knows how to protect themselves from getting COVID-19 and has an adequate supply of soap, cleaning supplies, and masks or cloth face coverings. Detained persons must understand how the disease spreads, know its symptoms, clearly understand the procedures in the jail that will be instituted to prevent the spread of COVID-19 and be aware of how their care will be managed should they develop COVID-19.

**Know how it spreads**

The virus is thought to spread mainly from person-to-person through respiratory droplets produced when an infected person coughs, sneezes, or talks. These droplets can land in the mouths or noses of people who are nearby and can possibly be inhaled into the lungs. Some people with COVID-19 do not have any symptoms, but they can still spread COVID-19 even if they do not feel sick.

At present there is no vaccine to prevent COVID-19. The best way to prevent illness is to avoid being exposed to this virus. Because an incarcerated individual may not have the ability to avoid exposure, reducing the population of high-risk individuals in jail is encouraged to the extent possible while balancing public safety needs.

**Watch for Symptoms**
All detainees, especially high-risk individuals, should be encouraged to monitor themselves for symptoms of COVID-19 and notify jail staff if they experience any of the following:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

**Emergency warning signs for COVID-19.** If someone is showing any of these signs, they should seek emergency medical care immediately:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

These lists do not include all possible symptoms. The CDC continues to update this list as more is learned about COVID-19.

**Prevent Spread of COVID-19**

Encourage all persons in the jail, both staff and detainees, to take the following actions to protect themselves and others from COVID-19. Post signs throughout the facility and communicate this information verbally on a regular basis. Sample signage and other communications materials are available on the [CDC website](https://www.cdc.gov). Ensure that materials can be understood by non-English speakers and those with low literacy and make necessary accommodations for those with cognitive or intellectual disabilities and those who are deaf, blind, or have low vision.

- **For all:**
  - Practice good cough and sneeze etiquette: Cover your mouth and nose with your elbow (or ideally with a tissue) rather than with your hand when you cough or sneeze, and throw all tissues in the trash immediately after use.
  - Practice good hand hygiene: Regularly wash your hands with soap and water for at least 20 seconds, especially after coughing, sneezing, or blowing your nose; after
using the bathroom; before eating; before and after preparing food; before taking medication; and after touching garbage.
  o Wear a cloth face mask, unless contraindicated due to breathing concerns.
  o Avoid touching your eyes, nose, or mouth without cleaning your hands first.
  o Avoid sharing eating utensils, dishes, and cups.
  o Avoid non-essential physical contact. Practice social distancing whenever possible as it is important for preventing COVID-19.

- **For detained persons:**
  o Monitor your health and report symptoms immediately to staff,
  o Remember that the purpose of quarantine and medical isolation is to prevent spread of disease, not a punishment.

- **For staff:**
  o Stay at home when sick.
  o If symptoms develop while on duty, leave the facility as soon as possible.
    - Follow CDC-recommended steps for persons who are ill with COVID-19 symptoms including self-isolating at home, contacting their healthcare provider as soon as possible to determine whether they need to be evaluated and tested, and contacting their supervisor.

**Clinical Care for Individuals with COVID-19**

- **Facilities should ensure that incarcerated/detained individuals receive medical evaluation and treatment at the first signs of COVID-19 symptoms.**
  o If a facility is not able to provide such evaluation and treatment, a plan should be in place to safely transfer the individual to another facility or local hospital (including notifying the facility/hospital in advance). See NC DHHS Guidance on Inmate Transfers. The initial medical evaluation should determine whether a symptomatic individual is at increased risk for severe illness from COVID-19.

- **Staff evaluating and providing care for individuals with confirmed or suspected COVID-19 should follow the CDC’s Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19) and monitor the guidance website regularly for updates to these recommendations.**

- **Healthcare staff should evaluate persons with COVID-19 symptoms and those who are close contacts of someone with COVID-19 in a separate room, with the door closed if possible, while wearing recommended PPE and ensuring that the individual being evaluated is wearing a cloth face mask.**
  o If possible, designate a room near each housing unit to evaluate individuals with COVID-19 symptoms, rather than having symptomatic individuals walk through the facility to be evaluated in the medical unit.

- **Clinicians are strongly encouraged to test for other causes of respiratory illness (e.g., influenza).** However, presence of influenza or another illness does not rule out COVID-19.

- **When evaluating and treating persons with symptoms of COVID-19 who do not speak English, use a language line or provide a trained interpreter when possible.**
Sources: