



APPENDIX 8

ALASKA DOC COVID-19 RECOVERY PLAN TRANSPORTATION AND TRANSFERS

EFFECTIVE 12/16/2020

OVERVIEW: Screening and testing of transfers will ensure we do not knowingly introduce someone who is contagious into the general population of another facility. Intake quarantining ensures they do not develop symptoms during the 14 days after entering a facility. There is always the possibility that a person with COVID-19 will initially test negative and remain asymptomatic, so in certain cases we retest before releasing from quarantine to ensure a person has not become contagious during the incubation period.

GENERAL INSTRUCTIONS

OUTBREAK PROTOCOLS: No inmates shall be moved out of a facility during an outbreak unless they are past positives and meet the criteria outlined on page two.

CLOTH vs SURGICAL MASKS: A cloth face covering must be worn by inmates during movement outside the facility (i.e. outside medical care, court appearance). A surgical mask must be worn by inmates during inter-infirmatory transfers.

PTO PPE: Transport staff must wear a surgical mask at a minimum and adhere to EMS protocols for PPEs when riding with EMS/life flights.

STATUS REPORTS: The inmate's COVID-19 screening status must be shared with the transporting officer and the outside entity with whom the inmate will be interacting, such as the medical clinic or imaging center.

REFUSALS: Refusal by an inmate to take a COVID test or participate in screening does not block a transfer or change quarantine procedures. Inmates shall be quarantined with symptom checks as below. Each inmate shall be offered testing again prior to release to the general population.

URGENT/EMERGENT MOVES: Urgent/emergent moves shall not be delayed while awaiting test results.

MENTAL HEALTH MOVES: Mental health moves shall not be delayed while awaiting test results.

20 DAY RULE: Past positive individuals are not considered contagious beginning 20 days after onset of illness.

SCREENING AND TESTING PROCEDURES

INTERFACILITY TRANSFERS: movement of persons from one facility to another

1. Inmates who are on intake quarantine; contact quarantine; or isolation may not be transferred.
2. Inmates may not transfer from a facility where there is ongoing internal transmission of COVID-19 (general population positives or staff positives) unless the transferred inmate meets the 20 Day Rule.
3. Inmates shall be screened for COVID-19 symptoms before leaving facility.
4. Inmates must wear a cloth face covering during the transfer (note: a surgical mask is required in some situations—see infirmatory transfers below).
5. Inmates shall be re-screened for COVID-19 at the receiving facility during the *Health Care Evaluation Upon Transfer Arrival* (policy 807.14 VII.F.3).

6. Inmates from a facility which is unable to maintain full intake quarantine procedures (minimum 14 days as a cohort) may not be transferred without approval and a transfer plan from HARS & DOI Directors or designee.

INTER-INFIRMARY TRANSFERS—movement of patient from one infirmary to another

1. Criteria for inter-infirmary transfers:
 - a. Transfers will be restricted to essential medical purposes only
 - b. Symptomatic persons or persons under quarantine for contact-tracing purposes will not be transferred
 - c. The patient should be tested for COVID within 48 hours prior to transfer; negative results are required prior to transfer
 - d. The patient shall be transferred alone with both the inmate and the PTO wearing surgical masks

Note: If all four criteria are met, the patient does not need to be quarantined or retested for COVID-19 as part of General Transfer Protocols.

2. General transfers to an infirmary, or any inter-infirmary transfers who do not meet the four criteria outlined above (i.e. admits from the hospital, returning to the infirmary from outside medical appointments, transfer from another facility for observation, etc.), will be quarantined for up to 14 days. Quarantine does not need to be completed within the infirmary if the patient otherwise meets criteria for discharge from the infirmary; however, to whatever extent possible, the inmate should complete 14 days of quarantine prior to release back into the general population.
3. Patients admitted to the infirmary or moved for observation to the infirmary from general population at the same facility do not need to be quarantined unless part of a contact investigation.

PAST POSITIVE MOVES

1. Inmates who have been confirmed COVID positive in the past 90 days may be moved to other facilities.
2. Inmates should be 20 days past the onset of symptoms (or test date if asymptomatic, whichever is later).
3. Inmates shall be screened for COVID symptoms before leaving the facility. Inmates with symptoms consistent with COVID-19 shall not be moved.
4. Inmates must wear a cloth mask during the transfer.
5. Past positive inmates within the 90-day window do not need to be quarantined at the receiving facility.

MEDICAL MOVES

1. Inmates who are hospitalized overnight must quarantine for 14 days upon return to the facility.
2. Inmates who are transported to the ER but who are returned to the facility the same day, do not need to quarantine upon return.
3. Inmates who leave the facility for one-time outside medical appointments do not need to quarantine upon return to the facility. Inmates who leave for a series of outside medical appointments (physical therapy; methadone bridging; radiation therapy or chemotherapy; etc) should be quarantined until 14 days after the final appointment.

COURT TRANSPORTS

1. Inmates shall be screened for COVID-19 symptoms before leaving facility for a court appearance.
2. Inmates must wear a cloth face covering during the transport.
3. Inmates who are transported for court appearances (hearings, trials, etc) must remain on quarantine during the days of the court proceedings plus fourteen days following the last court appearance.
4. Inmates must be tested for COVID on day 10 following the final court appearance.

5. If an inmate develops no symptoms during the quarantine period and tests negative, he or she may be returned to general population on the fifteenth day following the final court appearance.

API TRANSFERS

1. Transfers to API shall receive a physical exam by a DOC health practitioner or physician.
2. Patients shall have a negative COVID test result within 48 hours of transfer to API. Rapid testing is acceptable when necessary.
3. Patients may refuse testing. API shall be notified immediately of patient refusal.

FURLOUGH/RELEASE TO TREATMENT

For inmates entering a treatment facility, DOC will follow the testing protocols required by the treatment facility.

CRC TRANSFERS

1. Transfer to CRCs shall have a negative COVID test result within 48 hours of transfer to the CRC.
2. If inmate refuses testing, the inmate must be quarantined for 14 days prior to transfer to the CRC.
3. If an inmate transfers directly from completed *Intake* Quarantine to a CRC, re-testing is not required.

NOTE: When test results are delayed, the inmate may still transfer to the CRC but only if two conditions are met:

4. The inmate passes the symptom screen; AND
5. The inmate has completed their *Intake* Quarantine.

SHORT TERM SIGN OUT (STSO) TRANSPORTS

1. Inmates may be transported to another facility for urgent dental or medical treatment by a DOC dentist or medical provider and returned to the originating facility on the same day if the following criteria are met:
 - a. Transports are restricted to urgent or time-sensitive treatments.
 - b. Inmates must wear a cloth face covering during transport and during movement through a facility.
 - c. Transported inmates do not mix with the general population while in waiting areas, holding cells, or transport vehicles.
2. Inmates on an STSO transport do not require intake quarantine upon return to the home facility unless the inmate has had close contact (< 6 ft for greater than 10 min.) with a non-clinical individual from outside the home facility. For example, if an inmate sits in a common waiting area with inmates from another facility or returns to the home facility on a transport van with new remands, these new exposures would trigger a need for intake quarantine and other interfacility transfer procedures as described above.