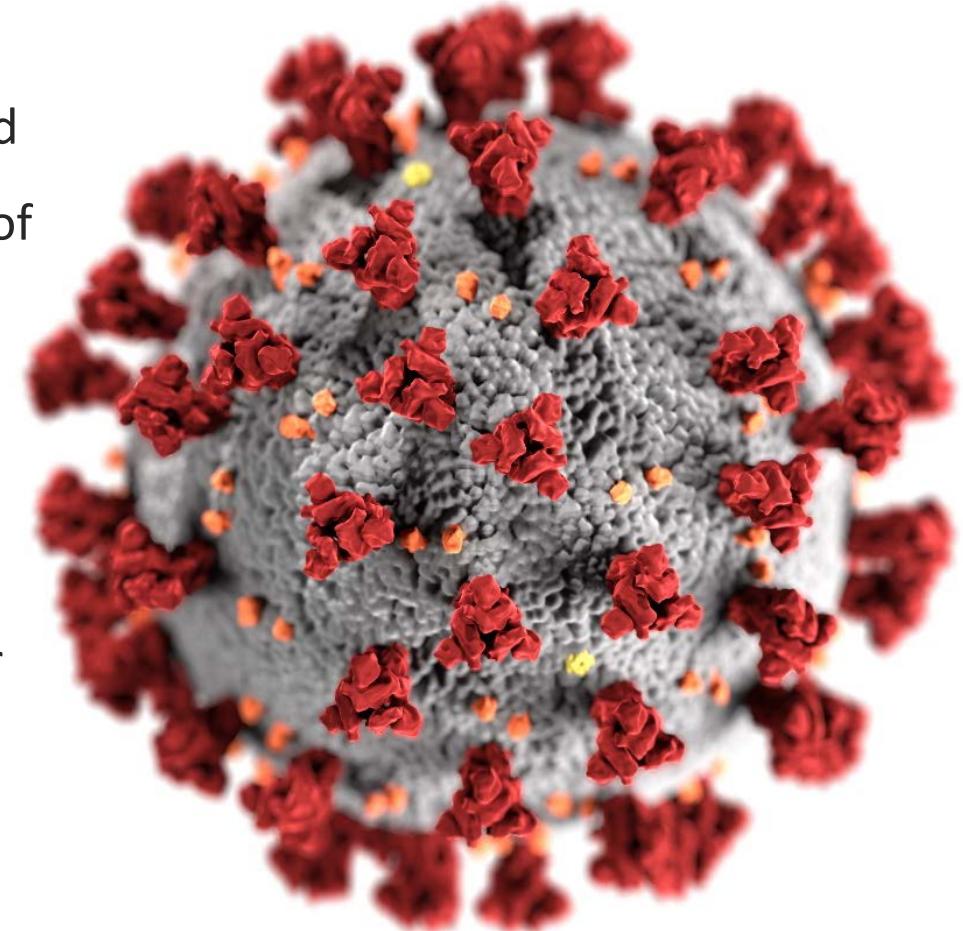


COVID-19 and Correctional Facilities

Infection Prevention & Control Training for Correctional and Detention Facility Workers

This training includes content from interim guidance that is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19) as of **April 28, 2021**.

The U.S. Centers for Disease Control and Prevention (CDC) will update this guidance as needed and as additional information becomes available. Please check the [CDC website](https://www.cdc.gov/coronavirus) periodically for updated interim guidance and resources.



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Disclaimer and operational considerations

- CDC does not regulate correctional and detention facilities; therefore, this information is meant to assist correctional and detention facilities in making decisions rather than establishing regulatory requirements.
- Correctional and detention facilities can determine, in collaboration with state and local health officials, whether and how to implement specific management and testing strategies.
- Implementation should be guided by what is feasible, practical, and acceptable, and be tailored to the needs of each facility.
- These considerations are meant to supplement—not replace—any federal, state, local, territorial, or tribal health and safety laws, rules, and regulations with which facilities must comply.

COVID-19 Basics

Coronavirus Disease 2019 (COVID-19)



What is COVID-19 and how does it spread?

- COVID-19 is an illness cause by a virus called SARS-CoV-2
- Since COVID-19 is a new disease that has not previously been seen in humans, people still largely lack the immunity to fight infections.
 - Vaccines are helping to change this!
- The virus is thought to spread mainly from person to person
 - Through respiratory droplets produced when an infected person coughs, sneezes, or talks
 - Between people who are in close contact with one another (within about 6 feet)
- COVID-19 may be spread by people who are not showing symptoms
- The virus may be spread in other ways
 - It may be possible for a person to get COVID-19 by touching a surface or object that has the virus on it, then touching their own mouth, nose, or possibly their eyes
 - Under certain circumstances (for example, in enclosed spaces with poor ventilation), COVID-19 can sometimes be spread by airborne transmission
 - This is not thought to be the main way the virus spreads, but we are still learning more about how this virus spreads

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html>

<https://www.cdc.gov/coronavirus/2019-ncov/faq.html#Spread>

<https://www.cdc.gov/coronavirus/2019-ncov/more/science-and-research/surface-transmission.html>

Know the signs, symptoms, and transmission of COVID-19*



- People with COVID-19 who never develop symptoms (asymptomatic) and those who are not yet showing symptoms (pre-symptomatic) can still spread the virus to other people.
- Not all possible symptoms are included here. Consult a medical provider for any other symptoms that are severe or concerning to you.

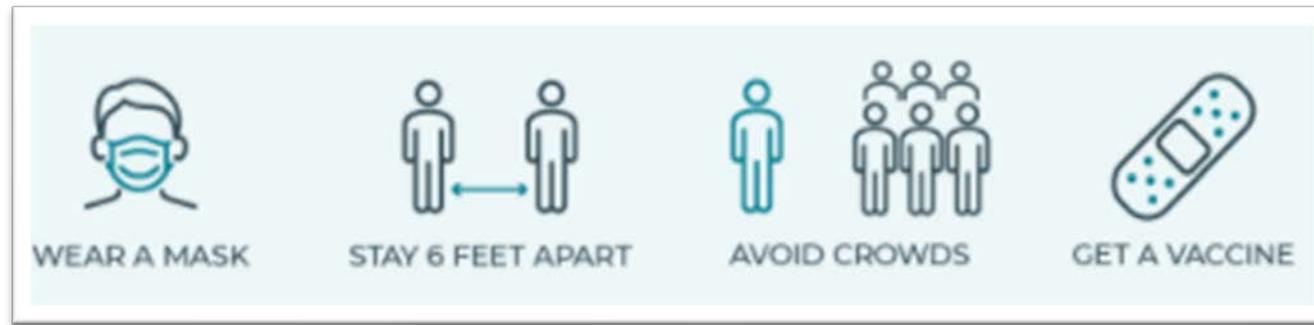
(*Other symptoms: fatigue, headache, sore throat, congestion or runny nose, nausea)

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms-11x17-en.pdf>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html#studies>

Prevention measures



- Get vaccinated
- Wear a fitted mask over your nose and mouth
- Stay at least 6 feet away from others
- Avoid crowds and poorly ventilated spaces
- Wash your hands often
- Cover coughs and sneezes
- Clean and disinfect
- Monitor your health daily

Healthcare providers caring for incarcerated/detained persons or staff should follow infection control guidelines.

Infection Prevention & Control Strategies

- Cleaning and Disinfecting
- Wearing, Taking Off, and Cleaning Masks
- Personal Protective Equipment (PPE) Use

Building PPE Stations

Coronavirus Disease 2019 (COVID-19)



Cleaning and disinfecting your facility (1)

Wear latex/nitrile gloves to clean and disinfect. Additional personal protective equipment might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash hazards.

- Clean any dirty surfaces using soap and water.
- Practice routine cleaning and disinfection of frequently touched surfaces.
 - For example, tables, chairs, door handles, light switches, stair rails, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks and enclosed spaces (e.g., cells).
 - Frequency of cleaning and disinfection will depend on level of use.
- Train cleaning staff on appropriate use of cleaning and disinfection chemicals.
 - Ensure proper ventilation during and after application.
 - Use only the amount recommended on the product label.
 - Review appropriate use of personal protective equipment as recommended by the product's safety data sheets (SDS).

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

Cleaning and disinfecting your facility (2)

- Disinfect only when someone who is sick or is positive for COVID-19 has been in the area in the preceding 24 hours.
- Disinfect with a disinfectant on EPA List N: Disinfectants for Coronavirus (COVID-19). Follow instructions on label to ensure safe and effective use of the product.
- Diluted household bleach solutions may also be used if appropriate for the surface.
 - **Never mix household bleach with ammonia or any other cleanser.**
 - Bleach solutions will be effective for disinfection up to 24 hours.
 - Leave solution on the surface for at least 1 minute.
- Clean according to label instructions, including for pre-cleaning steps, product dilution, contact time, and potable water rinse directions, if applicable, in order to **ensure the product is effective and does not present an undue risk to users and others.**



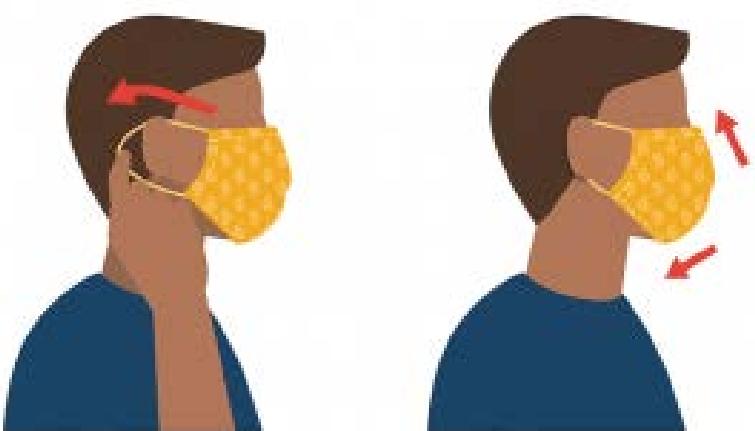
<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

<https://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-methanol>

When to clean and when to disinfect

- If no individual with confirmed or suspected COVID-19 is known to have been in a room, cleaning once a day is usually sufficient to remove virus that may be present on surfaces.
- You may want to either clean more frequently or choose to disinfect (in addition to cleaning) in shared spaces if certain conditions apply that can increase the risk of infection from touching surfaces:
 - High transmission of [COVID-19 in your community](#)
 - Low number of people wearing masks
 - Infrequent hand hygiene
 - The space is occupied by certain populations, such as [people at increased risk](#) for severe illness from COVID-19
- **If there has been a sick person or someone who tested positive for COVID-19 in your facility within the last 24 hours, you should clean AND disinfect the space.**

How to wear masks

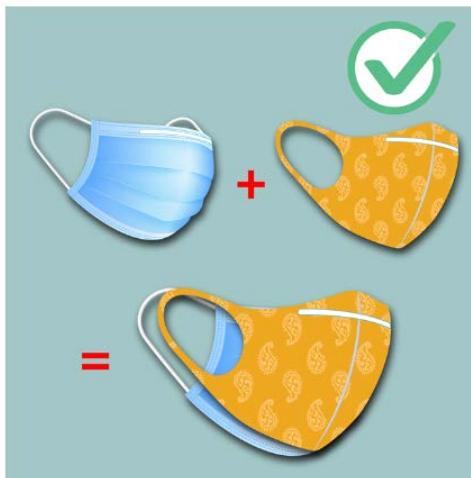


- Masks are a critical step to help prevent people from getting and spreading COVID-19.
- A cloth mask offers some protection to you as well as protecting those around you.
- Wear a mask correctly :
 - Wash your hands or use hand sanitizer before putting on your mask.
 - Put the mask over your nose and mouth and secure it under your chin.
 - Fit the mask snugly against the sides of your face, slipping the loops over your ears or tying the strings behind your head.
 - Find a different mask type or brand if you have to continually adjust your mask or it doesn't fit properly.
 - Make sure you can breathe easily.

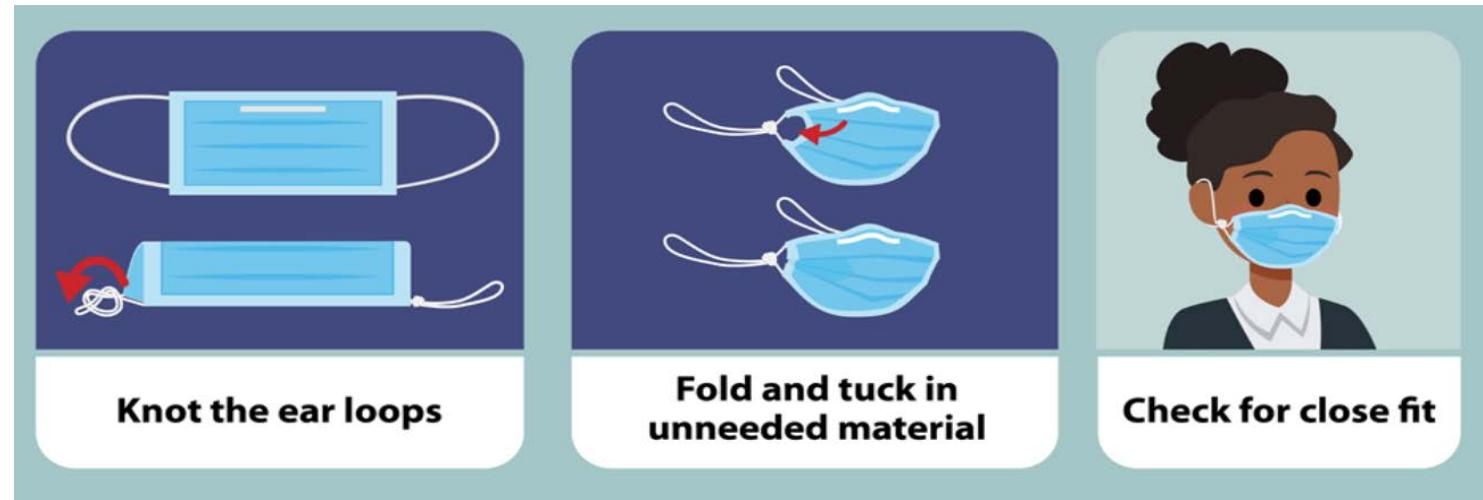
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html#studies>

Ways to have better mask fit and extra protection



- Wear two masks (disposable mask underneath and a cloth mask on top)
- Combine a cloth mask with a filter or brace
- Knot and tuck ear loops of a 3-ply mask where they join the edge of the mask



Your Guide to Masks: Special Considerations for Gaiters & Face Shields

For more details visit the CDC “How to Select, Wear, and Clean your mask” [website](#).



Wear a gaiter with two layers,
or fold it to make two layers



Face shield not recommended: Evaluation
of face shields is ongoing, but
effectiveness is unknown at this time.

People with beards

- Certain types of facial hair, like beards, can make mask fitting difficult. Masks that fit well protect you better. To have a better fit, people with beards can shave their beards or trim their beards close to the face.

Other ways to improve fit:



Use a mask fitter or brace.



Wear one disposable mask underneath a cloth mask that has multiple layers of fabric. The second mask should push the edges of the inner mask against the face and beard.

For people with beards that are not trimmed close to the face, masks may fit loosely around the beard. **However, people with beards should still wear a mask.** Masks designed for people with beards are being evaluated, and information will be provided when it becomes available.

How NOT to wear a mask



Around your neck



On your forehead



Under your nose



Only on your nose



On your chin



Dangling from one ear



On your arm

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>

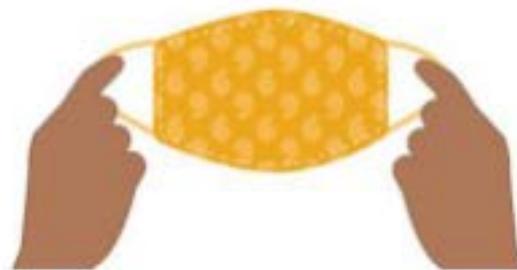
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>

How to take off a mask



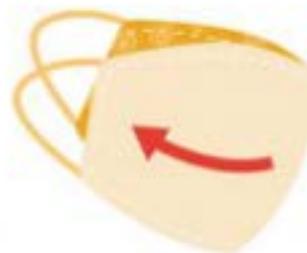
1

Carefully, untie the strings behind your head or stretch the ear loops



2

Handle only by the ear loops or ties



3

Fold the outside corners together



4

Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing

How to clean

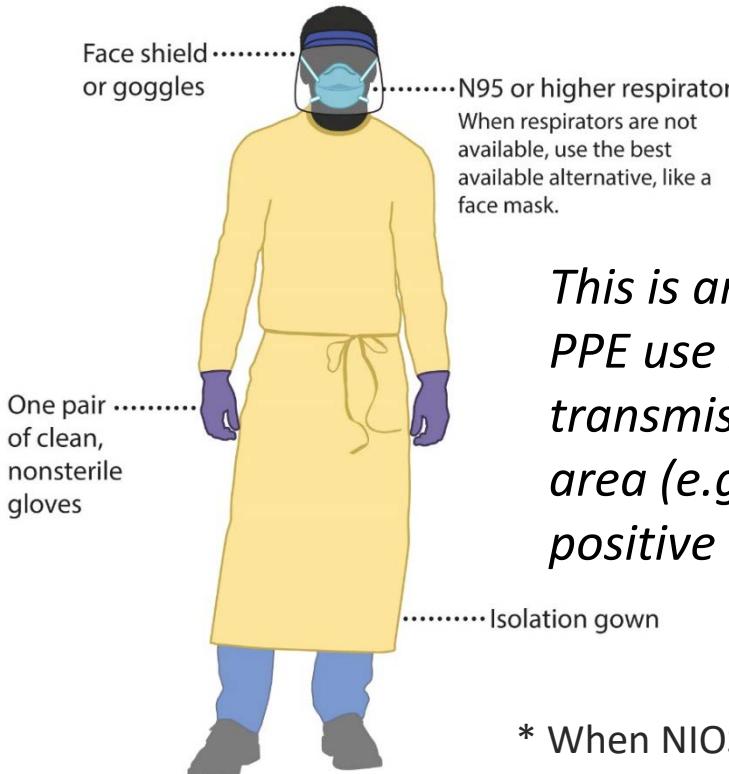
- Reusable masks should be washed regularly. Always remove masks correctly and wash your hands after handling or touching a used mask.
 - Include your mask with your regular laundry
 - Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the mask
 - Use the highest heat setting and leave in the dryer until completely dry
- For more information, visit our How to Wash Masks web page.



<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>
<https://www.cdc.gov/handwashing/index.html>
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>

Using preventive measures in the workplace

Clean anything you touch including duty belts, gear, shoes and any other clothing that potentially came into contact with confirmed or possible COVID-19 infection during the shift.



This is an example of PPE use in a high transmission level area (e.g., COVID-19 positive unit).

Below are examples of personal protective equipment (PPE) that are recommended:

Gowns

(e.g., isolation gown)

Gloves

Eye Protection

(e.g., goggles, face shield, safety glasses)

Surgical Mask/Respirator*

CDC also recommends frequent hand hygiene with soap and water or hand sanitizer if handwashing is not available before and after PPE use.

* When NIOSH becomes aware of counterfeit respirators or those misrepresenting NIOSH approval on the market, they will be posted on the [Counterfeit Respirators / Misrepresentation of NIOSH-Approval webpage](#).

Brainstorming PPE use in a correctional facility

Click [here](#) for recommended PPE in a correctional facility (see Table 1)

PPE recommended for staff and incarcerated/detained persons **depends on the level of COVID-19 transmission risk**, including contact with individuals infected with SCOVID-19 or contaminated materials. Thus, the task being conducted affects the level of risk.

Availability of resources will also determine PPE use for each activity.

Example Activities*	Respirator	Surgical Masks	Gown/ Coveralls	Eye Protection	Gloves
COVID-19 testing					
Symptom screening (staff vs. incarcerated/detainees)					
Transfers					
Mealtime					
Medication distribution					
Clinic visits/Programs					
Reentry classes					
Laundry					
Recreation					

*Any infection, prevention, and control issues (e.g., PPE breaches) in the facility should be reported immediately to management and/or a safety officer

Optimizing PPE supplies

- Refer to [CDC's guidance on optimizing PPE supplies:](#)
 - [N95s](#)
 - [Face masks](#)
 - [Isolation gowns](#)
 - [Gloves](#)
 - [Eye protection](#)
- PPE Burn Rate Calculator [is a spreadsheet-based model](#) that will help healthcare facilities plan and optimize the use of PPE for response to COVID-19. Non-healthcare facilities such as correctional facilities may also find this tool useful.
 - Also available:
 - [PPE Burn Rate Calculator Tutorial](#)
 - [NIOSH PPE Tracker mobile app](#)



Understanding the Difference



Surgical Mask

N95 Respirator

Testing and Approval	Cleared by the U.S. Food and Drug Administration (FDA)	Evaluated, tested, and approved by NIOSH as per the requirements in 42 CFR Part 84
Intended Use and Purpose	Fluid resistant and provides the wearer protection against large droplets, splashes, or sprays of bodily or other hazardous fluids. Protects the patient from the wearer's respiratory emissions.	Reduces wearer's exposure to particles including small particle aerosols and large droplets (only non-oil aerosols).
Face Seal Fit	Loose-fitting	Tight-fitting
Fit Testing Requirement	No	Yes
User Seal Check Requirement	No	Yes. Required each time the respirator is donned (put on)
Filtration	Does NOT provide the wearer with a reliable level of protection from inhaling smaller airborne particles and is not considered respiratory protection	Filters out at least 95% of airborne particles including large and small particles
Leakage	Leakage occurs around the edge of the mask when user inhales	When properly fitted and donned, minimal leakage occurs around edges of the respirator when user inhales
Use Limitations	Disposable. Discard after each patient encounter.	Ideally should be discarded after each patient encounter and after aerosol-generating procedures. It should also be discarded when it becomes damaged or deformed; no longer forms an effective seal to the face; becomes wet or visibly dirty; breathing becomes difficult; or if it becomes contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.

What is an N95 respirator?

- An N95 respirator is a tight-fitting respirator facepiece that can filter out at least 95% of airborne particles when worn properly.
- Closing all gaps, especially around the nose, and being clean-shaven are important parts of getting a proper fit.
 - Beards and mustaches can make it hard to get a proper mask fit.*
- N95 respirators must be used in conjunction with an OSHA-compliant Respiratory Protection Program ([29 CFR 1910.134](#))[†] that includes medical evaluation, training, and fit testing.
- For some considerations for extended use or reuse of N95 respirators due to limited supplies, follow these NIOSH guidelines.

* Infographic of “[Facial hairstyles and filtering facepiece respirators](#).”

<https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html>

† Some states may have applicable [Federal OSHA-approved State plans](#).

<https://www.cdc.gov/niosh/npptl/pdfs/UnderstandDifferenceInfographic-508.pdf>
<https://blogs.cdc.gov/niosh-science-blog/2020/03/16/n95-preparedness/>

Counterfeit Respirators

Counterfeit respirators are products that are falsely marketed and sold as being NIOSH-approved. Many are not capable of providing appropriate respiratory protection to users.

- When NIOSH becomes aware of counterfeit respirators or those misrepresenting NIOSH approval on the market, they will post them [here](#) to alert users, purchasers, and manufacturers.
- **Signs that a respirator may be counterfeit:**
 - No markings at all on the filtering facepiece respirator
 - No approval (TC) number on filtering facepiece respirator or headband
 - No [NIOSH markings](#)
 - NIOSH spelled incorrectly
 - Presence of decorative fabric or other decorative add-ons (e.g., sequins)
 - Claims for the approval for children (NIOSH does not approve any type of respiratory protection for children)
 - Filtering facepiece respirator has ear loops instead of headbands



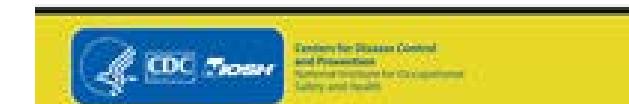
<https://www.cdc.gov/niosh/npptl/usernotices/counterfeitResp.html>

Can a respirator with an exhalation valve be used to protect others?

- An N95 filtering facepiece respirator will protect you and others. A NIOSH-approved N95 filtering facepiece respirator with an exhalation valve offers the same protection to the wearer as one that does not have a valve.
- As source control, findings from [NIOSH research](#) suggest that, even without covering the valve, N95 respirators with exhalation valves provide the same or better source control than surgical masks, procedure masks, cloth masks, or fabric coverings.
- In general, individuals wearing NIOSH-approved N95s with an exhalation valve should not be asked to use one without an exhalation valve or to cover it with a face covering or mask.

Technical Report

[Filtering Facepiece Respirators with an Exhalation Valve: Measurements of Filtration Efficiency to Evaluate Their Potential for Source Control](#)



What are gowns?



- Gowns are a type of PPE that are easy to put on and take off.
- Healthcare workers frequently use gowns during patient care to protect from infectious disease.
- Gowns should have sufficient fabric overlap to:
 - Wrap around the body
 - Cover the back
 - Ensure that if the wearer squats or sits down, the gown still protects the back of the body.

What are gloves and eye protection?

- Eye protection provides a barrier to infectious materials entering the eye and is often used in conjunction with other personal protective equipment (PPE) such as gloves, gowns, masks or respirators.
 - Face shields provide full face coverage. Goggles protect the eyes but can commonly fog up when wearing a respirator.
- Gloves provide protection for the hands. When used as PPE, gloves should cover the cuff (wrist) of the gown.
 - Gloves are not a substitute for hand hygiene, which should be performed prior to putting on (donning) gloves and after taking them off (doffing).
 - Gloves should be removed carefully to prevent hand contamination.

https://www.cdc.gov/coronavirus/2019-ncov/downloads/A_FS_HCP_COVID19_PPE_11x17.pdf

<https://www.cdc.gov/handhygiene/providers/index.html>

Donning (putting on PPE)

A full-body illustration of a person wearing personal protective equipment. The person is wearing a yellow long-sleeved gown with a belt, a blue surgical mask, a blue face shield, and blue gloves. They are also wearing blue leggings and brown boots. The background is a solid teal color.

**How to Safely Put On
Personal Protective Equipment
(PPE)**

The logo for the Centers for Disease Control and Prevention (CDC). It features a blue rectangular background with a white stylized eagle graphic on the left and the letters "CDC" in a white box on the right.

Doffing (taking off PPE)



PPE competency validation

- Train and evaluate staff in PPE competency in the workplace.
- Implement booster trainings throughout the year.

Personal Protective Equipment (PPE) Competency Validation
Donning and Doffing
Standard Precautions and Transmission Based Precautions

Type of validation: Return demonstration Orientation Annual Other

Employee Name: _____ Job Title: _____

Donning PPE

1. Perform Hand Hygiene
2. Don Gown: Fully covering torso from neck to knees, arms to end of wrists
3. Tie/fasten in back of neck and waist
4. Don Mask/Respirator: Secure ties/elastic bands at middle of head & neck
5. Fit flexible band to nose bridge
6. Fit snug to face and below chin (Fit-check respirator if applicable)
7. Don Goggles or Face Shield: Place over face and eyes; adjust to fit
8. Don Gloves: Extend to cover wrist of gown

Doffing PPE

9. Remove Gloves: Grasp outside of glove with opposite gloved hand; peel off
10. Hold removed glove in gloved hand
11. Slide fingers of ungloved hand under remaining glove at wrist
12. Peel glove off over first glove
13. Discard gloves in waste container
14. Remove Goggles or Face Shield: Handle by head band or ear pieces
15. Discard in designated receptacle if re-processed or in waste container
16. Remove Gown: Unfasten ties/fastener
17. Pull away from neck and shoulders, touching inside of gown only
18. Turn gown inside out
19. Fold or roll into bundle and discard
20. Remove Mask/Respirator (respirator removed after exit room/closed door): Grasp bottom, then top ties or elastics and remove
21. Discard in waste container
22. Perform Hand Hygiene

Standard Precautions & Transmission Based Precautions

	Competent	YES	NO
23. Staff correctly identifies the appropriate PPE for the following scenarios: a. Standard Precautions (PPE to be worn based on anticipated level of exposure)* b. Contact/Contact Enteric Precautions (gown & gloves) c. Droplet Precautions (surgical mask) d. Airborne Precautions (fit-tested respirator if applicable)			

*NOTE: Examples include: mask for coughing/vomiting patient, goggles/face shield for irrigating draining wound, gown for dressing change if scrubs may touch patient, etc.

Comments or follow up actions:

Employee Signature
CDC at <http://www.cdc.gov/HAI/gloves/ppe/ppeposter148.pdf>

Validator Signature
/ Date
NC SPICE; 9-2016 2



Hand hygiene competency validation

- Train and evaluate staff in hand hygiene competency in the workplace.
- Implement booster trainings throughout the year.

Hand Hygiene Competency Validation		
Alcohol Based Hand Rub (ABHR) (60% - 95% alcohol content)		
Soap & Water		
Type of validation: Return demonstration	<input type="checkbox"/> Orientation	<input type="checkbox"/> Job Title: _____
Employee Name: _____	<input type="checkbox"/> Annual	<input type="checkbox"/> Other
Hand Hygiene with Soap & Water		
Competent		
YES	NO	
1. Checks that sink areas are supplied with soap and paper towels		
2. Turns on faucet and regulates water temperature		
3. Wets hands and applies enough soap to cover all surfaces of hands		
4. Vigorously rubs hands for at least 15 seconds including palms, back of hands, between fingers, and wrists		
5. Rinses thoroughly keeping fingertips pointed down		
6. Dries hands and wrists thoroughly with paper towels		
7. Discards paper towel in wastebasket		
8. Uses paper towel to turn off faucet to prevent contamination to clean hands		
Hand Hygiene with ABHR		
9. Applies enough product to adequately cover all surfaces of hands		
10. Rubs hands including palms, back of hands, between fingers until all surfaces dry		
General Observations		
11. Direct care providers—no artificial nails or enhancements		
12. Natural nails are clean, well groomed, and tips less than $\frac{1}{4}$ inch long		
13. Skin is intact without open wounds or rashes		
Comments or follow up actions:		
Employee Signature _____		
CDC at http://www.cdc.gov/mmwr/PDF/cr/cr5116.pdf		
Validator Signature _____ / _____ Date _____		
NC SPICE; 9-2016		



What is a PPE Station?

- PPE stations can help serve as a visual reminder to employees of when donning and doffing PPE.
 - PPE stations also help correctional staff to identify when areas may change from lower to higher risk of exposure.
- PPE stations may be set up directly outside of spaces requiring PPE.
 - Train staff on how to use a PPE station if they must re-use PPE due to shortages.
- PPE stations will vary by COVID-19 status (e.g., areas of quarantine versus isolation), location, facility task, and risk of exposure.



Key Considerations for Implementing PPE Stations

Donning and doffing stations must be located separately from each other.

Functionality

- What is the purpose of this station?
- Have correctional workers been properly trained on how to use the PPE station? (e.g., donning versus doffing)

Usability

- Are correctional workers consistently and adequately using the PPE station?

Security

- Does the PPE station add to the health and safety of the correctional workers without compromising physical safety?

How to Build a PPE Station

- Each station should contain easy-to-read safety instructions. For example, this [poster](#) demonstrates an example of a proper sequence for putting on and removing PPE.
- Place separate donning and doffing PPE stations in designated locations:
 - For example, don in the control room and doff at the PPE station right outside of a “hot” (high exposure) area.
- Customize each station by placing PPE instructions based on the level of protection appropriate for the task at hand.
- Stations can be built to be mobile (e.g., place wheels on stations) and specs are up to you.
 - Specs: The size of the PPE station and what materials will be placed are up to the facility management to determine based on its functionality.
- Posters in [Spanish](#).

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



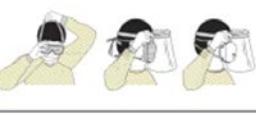
2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown

USE SAFE WORK PRACTICES AND LIMIT THE SPREAD OF INFECTION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily soiled
- Perform hand hygiene

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. Remove all PPE before exiting the patient room and closing the door. Remove PPE in the following sequence:

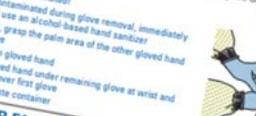
1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Use a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand over first glove under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggles or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head or ear straps
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown free, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container



4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastic of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE

PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



CDC

Materials for a PPE Station

Click [here](#) for recommended PPE in a correctional facility (also see [Table 1](#))

Recommended materials*:

- PPE
 - N95 respirator/surgical masks
 - Gloves
 - Face shields
 - Gowns
- Hand sanitizer
- Sanitizing wipes
- Bins
 - One for laundry
 - One for trash or biohazard
- PPE donning /doffing instructions

Other materials to consider:

- Disinfectant spray and/or secured isopropyl alcohol in a spray bottle
- Hooks to store PPE
- Paper towels
- Extra PPE
- Mirror (to check mask fitting)
- Wheels (to make it mobile)



* <https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html>

Where should PPE stations be placed?

Consult with your local and/or state health department officials on how to set up PPE stations and plan for optimal utilization of PPE materials.



Remember: Donning and doffing stations must be located separately from each other since cross contamination can occur.

Ensure PPE accessibility for staff throughout all shifts, including weekends. Check and restock PPE stations at end of each shift.

- Entrance/exit to main facility
- Dormitories/Units
- Control room
- Booking area
- Laundry room
- Kitchen
- Dispatch area
- Staff break rooms
- Recreational areas
- Medical clinics
- Other

Infection Prevention Control after Vaccination in Correctional Facilities

Coronavirus Disease 2019 (COVID-19)



COVID-19 vaccination

- COVID-19 vaccines are an important tool to help get us back to normal.
- There are currently three COVID-19 vaccines that are authorized and recommended for use in the United States.
 - Pfizer-BioNTech: 2 doses, given 3 weeks (21 days) apart*
 - Moderna: 2 doses, given 4 weeks (28 days) apart*
 - Johnson & Johnson's Janssen: 1 dose (For updates visit [J&J's COVID-19 Vaccine Overview and Safety webpage](#))
- These vaccines are safe and effective.
 - Millions of people in the United States have received COVID-19 vaccines, and these vaccines have undergone the most intensive safety monitoring in U.S. history.
 - These vaccines cannot give you COVID-19.
 - After vaccination, side effects can occur, but these are normal.
- People who had COVID-19 and recovered should still get vaccinated.

*You should get your second shot as close to the recommended interval as possible. However, your second dose may be given up to 6 weeks (42 days) after the first dose, if necessary.



Continue infection, prevention, and control strategies after receiving a COVID-19 vaccine

- Why continue prevention strategies even after receiving a vaccine?
 - It's important for everyone to continue using all the tools available to help stop this pandemic as we learn more about how COVID-19 vaccines work in real-world conditions.
 - What we're still learning about COVID-19 vaccines includes:
 - How effective they are against variants of the virus that causes COVID-19
 - How well they keep people from spreading the virus that causes COVID-19
 - How long they can protect people
- Together, COVID-19 vaccination and following CDC's recommendations for how to protect yourself and others will offer the best protection from getting and spreading COVID-19.
- Frequently asked questions about COVID-19 vaccination in correctional & detention centers are available on the CDC Corrections Website.



COVID-19 Resources



Resources

How to Safely Wear and Take Off a Mask
Accessible: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

WEAR YOUR MASK CORRECTLY

- Wash your hands before putting on your mask
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- Do not place a mask on a child younger than 2



USE A MASK TO HELP PROTECT OTHERS

- Wear a mask over your nose and mouth to help prevent getting and spreading COVID-19
- Wear a mask in public settings when around people who don't live in your household, especially when indoors and when it may be difficult for you to stay six feet apart from people who don't live with you
- Don't put the mask around your neck or up on your forehead
- Don't touch the mask, and, if you do, wash your hands or use hand sanitizer



FOLLOW EVERYDAY HEALTH HABITS

- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Avoid crowds and places with poor ventilation
- Wash your hands often



TAKE OFF YOUR MASK CAREFULLY, WHEN YOU'RE HOME

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place mask in the washing machine
- Wash your hands with soap and water

Personal masks are not surgical masks or N-95 respirators, both of which should be saved for health care workers and other medical first responders.

For instructions on making a mask, see: [cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



CDC

**It's a two-way street
Masks protect you & me**

When we all wear masks, we take care of each other



Wear masks, avoid crowds, stay 6 feet apart, and wash your hands



Take all four steps for the most protection



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



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WASH YOUR HANDS

- 1 Wet** 
- 2 Get Soap** 
- 3 Scrub for at least 20 seconds** 
- 4 Rinse** 
- 5 Dry** 

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



KEEP CALM AND WASH YOUR HANDS



 U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CS243041B

Communications Resources

<https://www.cdc.gov/coronavirus/2019-ncov/communication/factsheets.html>

Frequently Asked Questions



The information provided in the [FAQs website](#) does not cover all questions or issues faced by custodial settings (prisons, jails, and detention facilities). As with the full CDC guidance document, this information may need to be adapted based on individual facilities' physical space, staffing, population, operations, and other resources and conditions.

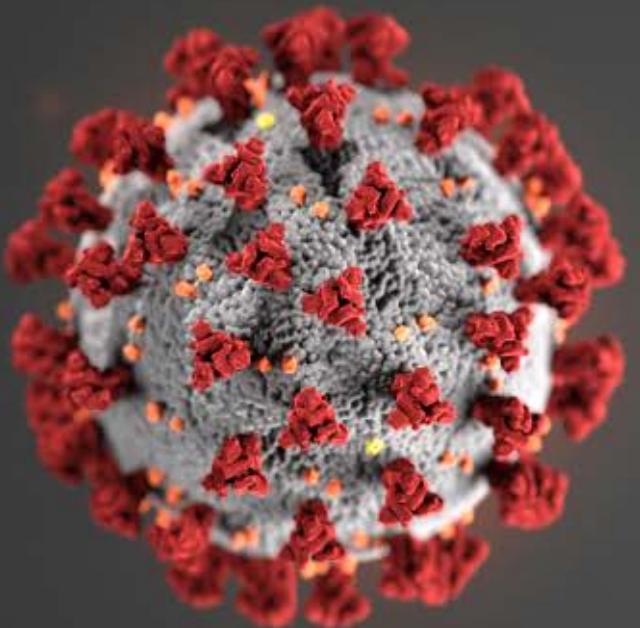
Additional assistance for correctional facilities



Facilities should contact CDC or their state, local, territorial, and/or tribal public health department if they need assistance in applying the principles or addressing topics that are not specifically covered in [the Interim Guidance on Management of Coronavirus Disease 2019 \(COVID-19\) in Correctional and Detention Facilities.](#)

<https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html>

<https://www.cdc.gov/cdc-info/index.html>



For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

