



# Partner Webinar on the Coronavirus

July 16, 2020

# Agenda

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- **Welcome/Executive Update**
- **Frequently Asked Questions**
- **Clinical Update**
  - **COVID-19 Data Discussion**
  - **CDC July 14 Update**
  - **Review of Mitigation Fundamentals**
  - **New Ideas**
- **Open Q/A**





Welcome

Jorge Dominicis // CEO

RICHARDS & RICHARDS  
DESTRUCTION DIVISION

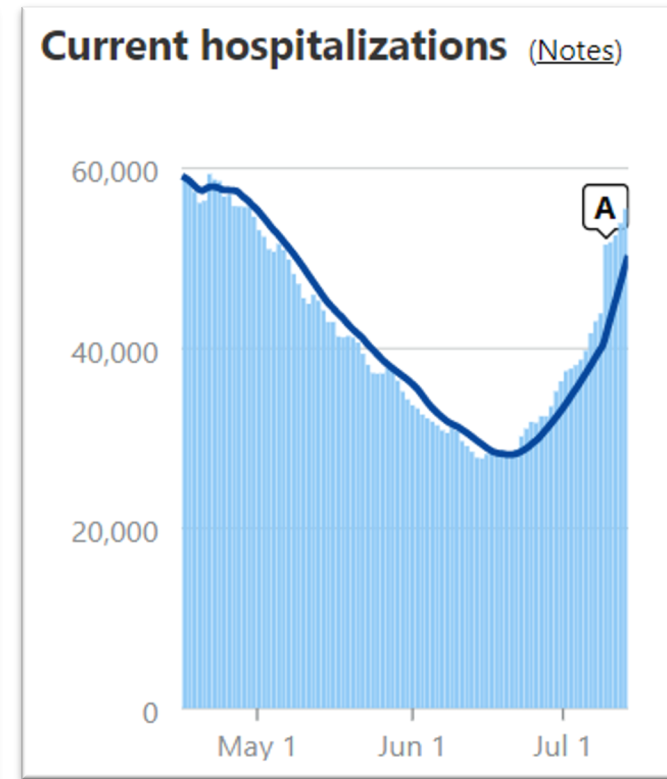
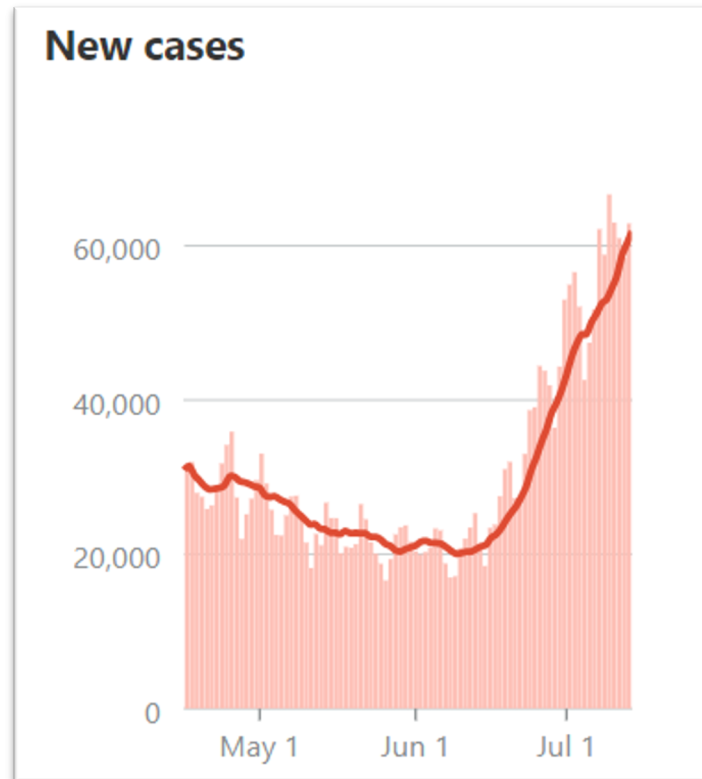
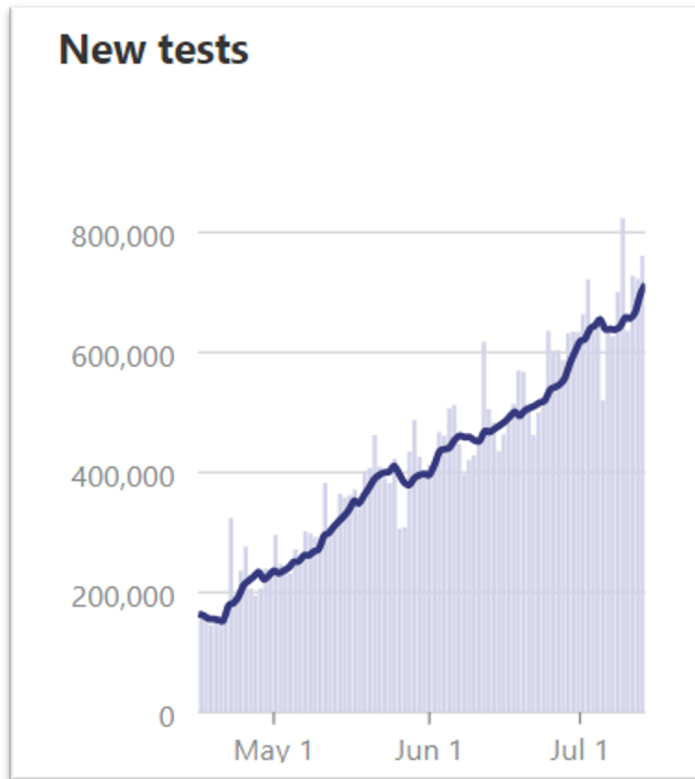


# Clinical



Kip Hallman // President

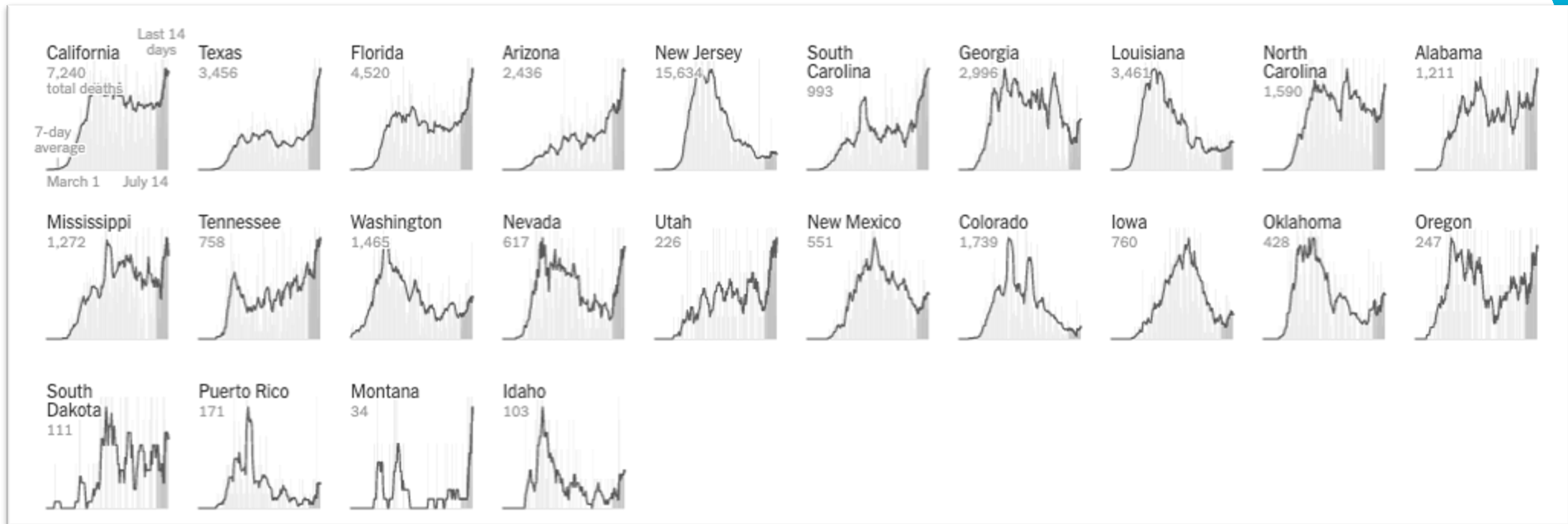
# It's Not Over



Kip Hallman // President  
Dr. Tom Pangburn // Chief Clinical Officer

# It's Not Over

## States where new deaths are now increasing



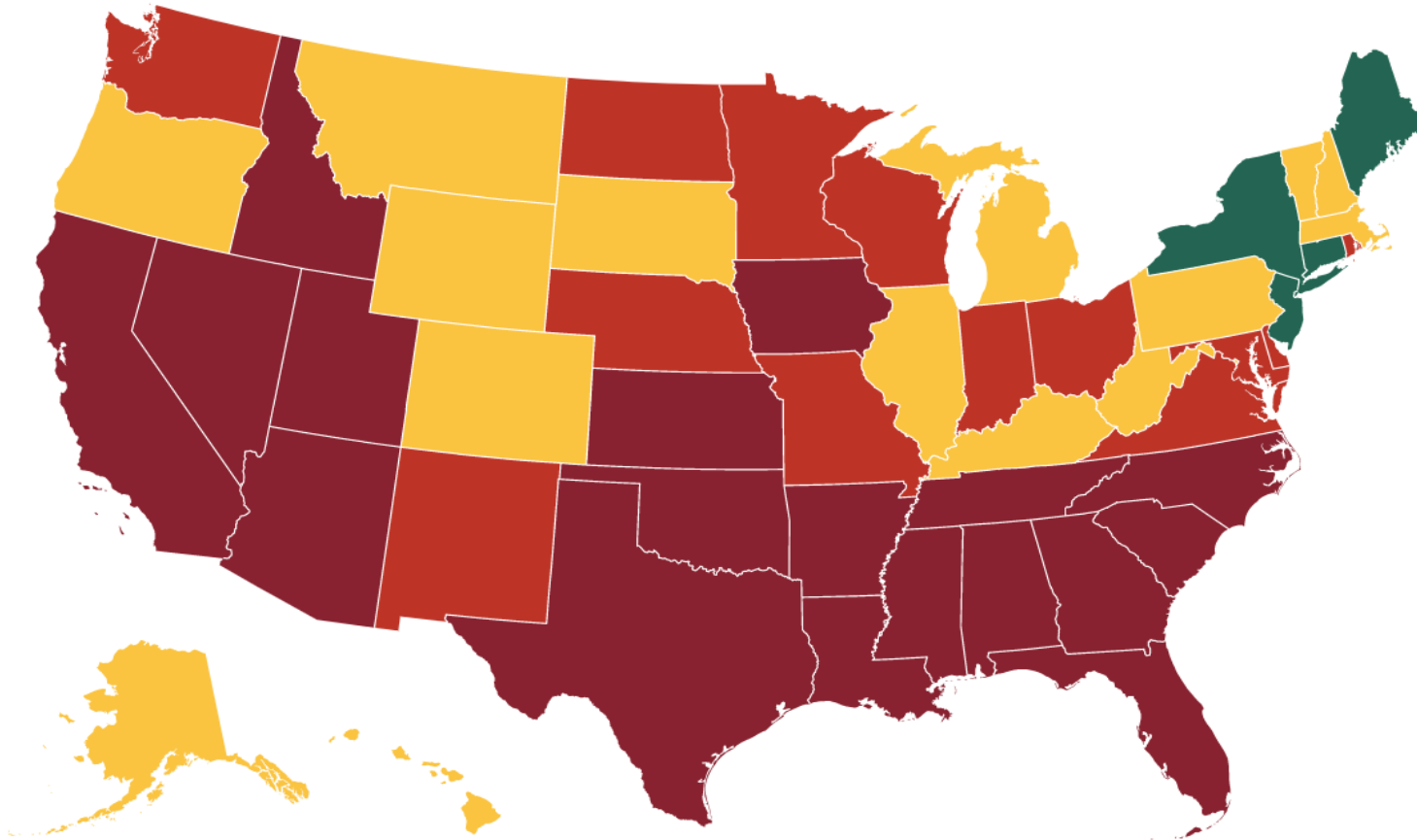
<https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html>

Kip Hallman // President  
Dr. Tom Pangburn // Chief Clinical Officer



# It's Not Over

[www.covidexitstrategy.org](http://www.covidexitstrategy.org)



Uncontrolled Spread

Trending Poorly

Caution Warranted

Trending Better

# CDC July 14 Update



## How we will address this today:

1. Review the fundamentals
2. Highlight new items

The screenshot shows the CDC website interface. At the top, the CDC logo and name are visible, along with a search bar and a 'Coronavirus' dropdown menu. Below this is a navigation bar with categories like 'Your Health', 'Community, Work & School', 'Healthcare Workers & Labs', 'Health Depts', 'Cases & Data', and 'More'. The main content area is titled 'Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities'. It includes a sidebar with a list of categories such as 'Community Mitigation Framework', 'Cleaning & Disinfecting', 'Businesses & Workplaces', 'Worker Safety & Support', 'Schools & Child Care', 'Colleges & Universities', 'Parks & Recreational Facilities', 'Gatherings & Community Events', 'Community & Faith-Based Organizations', 'First Responders, Law Enforcement & Public Services', and 'Shared & Congregate Housing'. The main text area contains the title of the guidance, the date 'Updated July 14, 2020', and social media sharing options. A yellow highlighted box contains the following text: 'This interim guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19) as of the date of posting, July 14, 2020. The US Centers for Disease Control and Prevention (CDC) will update this guidance as needed and as additional information becomes available. Please check the CDC website periodically for updated interim guidance. This document provides interim guidance specific for correctional facilities and detention centers during the outbreak of COVID-19, to ensure continuation of essential public services and protection of the health and safety of incarcerated and detained persons, staff, and visitors. Recommendations may need to be revised as more information becomes available.' To the right of the main text is a 'On This Page' section with links to 'Who is the intended audience for this guidance?', 'Why is this guidance being issued?', 'What topics does this guidance include?', 'Definitions', 'Facilities with Limited Onsite Healthcare Services', and 'COVID-19 Guidance for Correctional Facilities'.

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

Dr. Tom Pangburn // Chief Clinical Officer



# Masking Strategy

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- Everyone in the company of others should be masked. Includes patients and all correctional and medical staff
- All new intakes should be issued surgical masks and quarantined for 14-days before being moved to general population, until further guidance is provided. (This is one CDC suggested strategy. Each facility needs to determine the right ultimate solution).
- All corrections staff and Wellpath staff should wear masks in all situations where others are present, until further guidance is provided.
- All patients at high-risk of adverse outcomes from COVID-19 should wear N-95 or KN-95 respirators, until further guidance is provided. (This is a Wellpath recommendation, not a CDC strategy).

## Intake, Cohorting & Testing: Common Scenario

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- Patients screened at intake
- If symptomatic or have had close contacts of COVID-19 cases, they are tested and quarantined.
- Facilities making every effort to quarantine close contacts of COVID-19 cases individually.
- If they test positive, patient is placed in medical isolation. When possible avoid placing positives in different buildings or housing units, even if they are in single cells.

# Intake, Cohorting & Testing: Ideal Scenario

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- Quarantine cohort each day's intakes into one area and keep them together for 14 days.
- New individuals should not be added to an existing cohort.
- Patients will be monitored (Temp & Symptoms).
  - Movement outside quarantine space is minimal
    - Medical care inside quarantine space when possible
    - Meals inside quarantine space
    - No group activities
    - If possible, have a dedicated bathroom
- For each cohort, after 14 days, if patients are asymptomatic, release to general population, discontinue quarantine, No restrictions. This is one CDC strategy. The other strategy is to use test-based strategy.
- If a patient becomes symptomatic prior to 14 days, begin testing protocol for all patients in that cohort.\* remove symptomatic patient and place in medical isolation.
- Facilities should make every effort to quarantine close contacts of COVID-19 cases individually.



## Intake, Cohorting & Testing: Ideal Scenario

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- If a patient in a cohort develops symptoms, that patient should be removed from the group and placed in medical isolation.
  - If that patient is tested and is positive for COVID-19- Quarantine clock (New 14 Day) is reset to 0
  - If that patient is tested and is Negative for COVID-19 – Quarantine (Same 14 Day) clock does not reset
  - If that patient is not tested for COVID-19 – Quarantine clock (New 14 Day) resets to 0
- If someone in a housing unit becomes suspected or confirmed for COVID-19 the entire housing unit can be treated as a cohort and quarantine in place.

## Intake, Cohorting & Testing : Key Takeaways

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1. Upon intake, quarantine cohort patients by day for 14 days if possible. CDC offers this as one strategy
2. Minimize all patient movement for first 14 days
3. Avoid housing positive patients in different buildings
4. Use telehealth for social distancing within the facility and to help minimize movement



# Testing Update

Susan Patrick Harris // Director of Procurement



# Testing: Symptomatic

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Symptomatic **Patients** with significant exposure:

- Test immediately and quarantine until results.
  - - **Result:** Surgical mask, monitor for symptoms until 14 days.
  - + **Result:** Quarantine until 14 days. Return to population if 2 negative tests within 24 hours.

Symptomatic **Patients** no known exposure:

- Test immediately and quarantine until results.
  - - **Result:** Consider non-COVID illness.
  - + **Result:** Quarantine until 14 days. Return to population no fever 72 hours and negative test.

Symptomatic **Staff** with or without known exposure:

- Test immediately and home quarantine until results.
  - - **Result:** Return to work with surgical mask until 14 days.
  - + **Result:** Home quarantine until 14 days. Return to work if 2 negative tests within 24 hours

# Testing: Asymptomatic with Exposure

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Asymptomatic **Patients** with significant exposure:

- Quarantine and test day 7. Quarantine until results.
  - - **Result:** Surgical mask, monitor for symptoms until 14 days. Return to general pop.
  - + **Result:** Quarantine until 14 days. Return to population if 2 negative tests within 24 hours.

Asymptomatic **Staff** with significant exposure:

- Continue to work with mask, test immediately.
  - - **Result:** Continue to work with mask all of the time.
  - + **Result:** Continue to work with mask until 14 days if asymptomatic. **ONLY FOR CRITICAL STAFFING SHORTAGES.**



## Testing

***Testing asymptomatic individuals without known or suspected exposure to SARS-CoV-2 for early identification***

- Correctional and detention facilities may consider testing asymptomatic individuals without known or suspected SARS-CoV-2 exposure in communities with moderate to substantial levels of community transmission.
- The decision about testing strategies in correctional and detention facilities should be made in collaboration with state/local health departments.





## Retesting

*Consider re-testing individuals in quarantine cohort every 3-7 days to identify and isolate infected individuals and to minimize the amount of time infected individuals spend with the rest of the cohort.*

## Key Considerations

- 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**
- **Financial resources** to fund repeat testing
- The **capacity of on-site, contract laboratories or public health laboratories** that will be performing the tests
- The **expected wait time for test results**



- Pregnant people seem to have the same risk of COVID-19 as adults who are not pregnant.
- Clinicians are strongly encouraged to test for other causes of respiratory illness (e.g., influenza). However, presence of another illness such as influenza does not rule out COVID-19.

# CDC July 14 Update



## Facilities in communities with moderate to substantial levels of community transmission can consider:

- Initial testing of all current IDP and all new IDP at intake before going to gen. pop.
- Housing new IDP individually while test results are pending.
- Implementing a “routine 14 day intake quarantine” in which new IDP are housed separately
- Testing for COVID-19 and reviewing results before transferring anyone to another facility or release



## Decision Making Questions:

- Will specific housing units/pods be designated for people who test positive?
- How will the facility manage those who decline testing?
- What is your testing & re-testing strategy?
- How will housing areas be systematically and thoroughly cleaned and disinfected?
- How will the facility manage the logistics of moving large numbers of people into different housing arrangements?
- Will the facility use a test-based strategy or a time-based strategy to release asymptomatic infected persons from medical isolation?
- Who will report testing results to local or state health departments as required by state and local public health laws?
- How the facility will modify operations based on symptoms and test results?
- What are the plans for housing large numbers of infected individuals and quarantine options to house large numbers of close contacts?



# We all model the best practices

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Communicate to your team best practices when at work and when not at work.

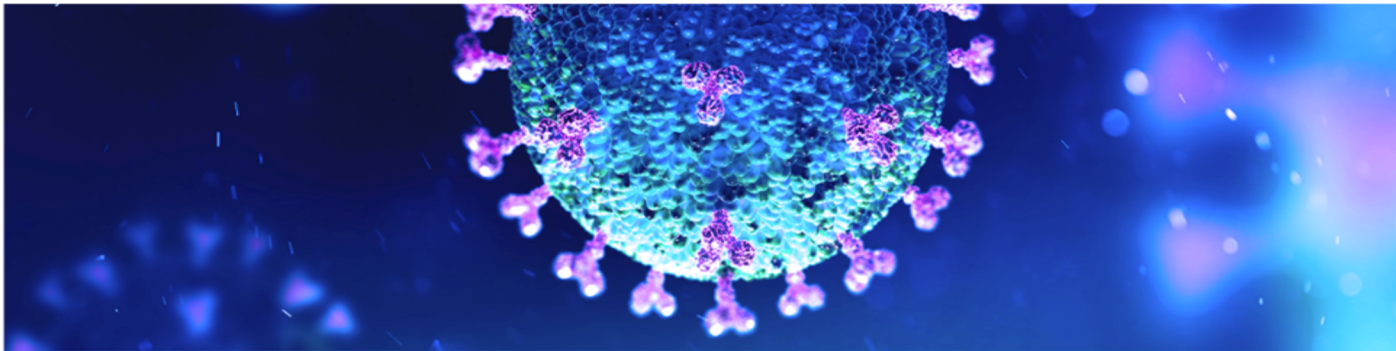
For example if our patients see us not wearing masks, they may feel it is not important to wear one.

Dr. Tom Pangburn // Chief Clinical Officer

# Frequently asked questions

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Numbers in my community are looking good. My team is tired of masking. How hard do I push?



## Wellpath COVID-19/Coronavirus Resource Page

Jump to: [NEW ADDITIONS](#) [CEO's MESSAGE](#) [PREPAREDNESS & ACTION PLANNING](#) [IMPORTANT TOPICS](#) [COVID-19 BASICS](#)

### NEW ADDITIONS

#### Partner Webinar Presentation Notes and Q&A – Friday, March 27, 2020

April 1, 2020



Thank you for joining Wellpath on the COVID-19/Coronavirus Partner Webinar on Friday, March 27, 2020. Click here to access the presentation slides. Click here to access the Q&A.

#### Keeping it Clean

March 30, 2020



Avoid infection with cleaning, disinfection, and hygiene One of the best ways to avoid infection with COVID-19 is keeping a safe distance – at least six feet – from an infected person. That may be difficult in most correctional or detention facilities. While the likelihood of contracting COVID-19 from hard surfaces or paper products is lower than airborne, the Centers...

### IMPORTANT LINKS/SITES

- [Interim Guidance on Management of Coronavirus Disease 2019 \(COVID-19\) in Correctional and Detention Facilities >>](#)
- [World Health Organization COVID-19 Q&A >>](#)
- [Strategies for eye protection, isolation gowns, facemasks, and N95 respirators >>](#)
- [American Jail Association list of COVID-19 Resources >>](#)
- [NCCHC COVID-19: What You Need to Know in Corrections >>](#)
- [The President's Coronavirus Guidelines for America – 15 Days to Slow the Spread >>](#)
- [OSHA COVID-19 Website >>](#)

[www.wellpathcare.com](http://www.wellpathcare.com)

Thank you!