Caribbean Public Health Agency Technical Guidance: COVID-19 Series No 34

Admission of Visitors to Prisons in The Caribbean Region - Health Considerations During the COVID-19 Pandemic

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Admission of Visitors to Prisons in The Caribbean Region -
Health Considerations during the COVID-19 Pandemic

10th August, 2020

This guidance document provides information on key health considerations for admission of visitors in prisons in CARICOM Member States in the context of the COVID-19 pandemic in the Caribbean. This information is based on currently available scientific evidence and expert opinion and is subject to change as new information becomes available. It should be read in conjunction with relevant national legislation, regulations, and policies. This document has been adapted for the Caribbean situation, and therefore may differ from guidance developed by other agencies.

For an infographic version of this guideline to help with messaging to the public go to the CARPHA website:


Background

On 11 March 2020, the Director-General of the World Health Organization (WHO) declared the outbreak of a novel coronavirus, COVID-19 as a pandemic. The majority of Caribbean countries have reported at least one confirmed case of COVID-19. CARPHA has assessed the risk of continued transmission in and to the Caribbean Region as Very High. Most countries in the region have implemented significant and effective measures in this regard to stop transmission and prevent the spread of the virus. While some CARPHA Member States (CMS) have succeeded in stopping transmission of the virus, some have reported sporadic cases, others have clusters, while only one CMS has reported community transmission. Within this context, several Member States have begun a phased lifting of in-country restrictions, initiated repatriation of nationals and some countries have opened their borders to travellers.

What is COVID-19?
The virus belongs in the same family of coronaviruses as Severe Acute Respiratory Syndrome (SARS), 2002/03 outbreak (Reuters, CDC) and Middle East Respiratory Syndrome (MERS-CoV), 2012 outbreak. This 2019 virus is a new strain of coronavirus that has not been previously
identified in humans. The cases in the Wuhan pneumonia outbreak have tested negative for both SARS and MERS-CoV. ¹,²

**How is it transmitted?**
The virus can be spread by individuals from 2 days before and until 14 days after the onset of symptoms.³ Precautions must therefore be taken to prevent human-to-human transmission of the disease. Currently, COVID-19 has been shown to spread by:

- Large respiratory droplets often produced by coughing or sneezing which land on a person or surface and transferred to the mouth or nose
- Direct or indirect contact with infected secretions
- Body fluids (e.g., blood, sweat, saliva, sputum, nasal mucus, vomit, urine, or diarrhoea)
- Increasing evidence has led the WHO to indicate recently that airborne transmission cannot be ruled out at this point³.
- The COVID-19 virus may be spread by individuals that exhibit no symptoms
- **There is no evidence that COVID-19 is spread by water, mosquitoes, or food.**

**Brief background and context on the subject to be discussed**
Due to the large numbers and close proximity of inmates to each other in a confined setting the risk of COVID-19 infection spreading rapidly from person to person is higher than the general population. It is important to prevent the spread of COVID-19 in the prisons setting to protect the health and well-being of staff, inmates, and visitors. Visitors to the prison facility increase the risk for the introduction of COVID-19 within the prison population and also for the spread of COVID-19 from the prison setting to the community.

**Preventing COVID-19 transmission in Prison settings**
The purpose of this interim guidance, on health considerations for readmission of visitors in prisons in CARICOM Member States, is to assist custodial staff working in places of detention to implement public health measures to prevent the transmission of COVID-19 infection in this setting. The public health measures are outlined using PRICCT mnemonic. This guidance can be adapted or modified to align with national guidance on COVID-19 infection.

**Considerations for preventing COVID-19 infection (PRICCT Measures)**
1. **P- Prepare**
   1.1. Evaluate preparedness for receiving visitors in the prison setting using checklist see **Appendix A.**

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1.2. Conduct a risk assessment of the potential for spread of COVID-19 within the prison setting. This should ideally be carried out with the local or national health authority.

1.3. After conducting a risk assessment, develop a COVID-19 Response Plan for your organisation and identify risk mitigation measures to address the risks. These measures should include at minimum the ACTIONS listed in this document.

1.4. Consider establishing mechanism to link data on COVID-19 that is collected in the prison system to the local/national epidemiological surveillance system in collaboration with the local/national health authorities.

2. **R- Reconfigure/Restructure for social distancing and to practice preventative measures**

2.1. Put in place a process and space to screen all persons entering your facilities in keeping with national health authority guidelines.

2.1.1. Establish a register for Entry / exit screening to track all persons coming in and out of the facility. For e.g. prison staff, visitors, vendors and service providers. See Appendix B for minimum information that it should be included in the register.

2.1.2. For Screening, consider collecting information on any history of cough and/or shortness of breath, visitors’ recent travel history and possible contact with confirmed cases in the last 14 days. (Your National Health Authority may already have tools that can be adopted).

2.1.3. Screening stations should be established outside the entrance to the prison.

2.1.4. Any person showing symptoms of COVID-19 or who has been in contact with a confirmed or suspected case of COVID-19 MUST NOT BE ALLOWED TO ENTER the prison.

2.2. Establish a mandatory hand washing station for staff, inmates, and visitors at the entrance/exist and throughout the prison to allow for regular washing of face and hands (see Appendix C1 and C2), to include:

2.2.1. A hand washing station with soap or hand sanitiser containing between 60% to 80% alcohol (either ethanol, isopropanol or a combination).

2.2.2. Wall-mounted liquid-soap dispensers in communal areas e.g. toilets, cafeterias, prayer rooms.

2.2.3. Provide single use tissue dispensers and no-touch garbage bins.

2.2.4. Place visual reminders for visitors at entrance/exist and in visitation area to wash hands with soap and water or use alcohol hand sanitizer:

   - before touching a person in prison
   - after touching a person in prison
   - after exposure to anybody fluid of a person in prison
   - after touching surfaces and objects in prison

2.3. Limit access to the facility as far as possible. Provide physical guides, such as tape on floors or walkways and signs on walls, to ensure that staff, visitors and inmates remain at least 6 feet or 2 metres (about 2 arms’ length) feet apart in lines and at other times. Where applicable, consider using guides for creating “one-way routes” in hallways and where to sit).
2.4. Ensure the visitation space allows enough distance (6 feet or 2 metres) between inmates and visitors.

2.5. Ensure that ventilation systems operate properly and where feasible, increase circulation of outdoor air as much as possible by opening windows and doors, using fans, removing obstacles that impede air flow from windows, grills and doors, fences, and gates.

2.6. Identify location to temporarily isolate visitors if found with symptoms of COVID-19 after entering the prison. The location should be in a separate building from inmates. If such space is not available in existing buildings, consider temporary solutions such as large tents located away from areas regularly frequented by staff, and other visitors.

2.7. Restrict contact between visitors and inmates with symptoms or recovering from COVID-19, until they have met the national criteria for recovery.

2.8. Assign teams (champions) to monitor, enforce and promote healthy hygiene and social distancing.

2.9. Establish Standard Operating procedures for Infection Prevention and Control i.e. standard precautions to prevent the transmission of COVID-19 e.g. hand hygiene, cleaning and sanitation, Personal Protective Equipment among other areas in collaboration with local/national Health Authorities.

3. Institute use of facial covering according to National guidelines

3.1. Institute the use of facial covering among staff, visitors and inmates in keeping with prison safety protocols and based on National Health authority’s guidelines. Face masks when used with other measures, protects against persons who may have COVID-19 and are not aware due to having no symptoms. Facial masks are essential when social distancing is difficult. For more information see CARPHA guidance on mask (see Appendix D).

   - Masks should not be used in the following situations:
     - on children younger than 2 years old
     - a person who has trouble breathing, unconscious,
     - anyone who is incapacitated,
     - anyone unable to remove the facial mask without assistance.

4. Cleaning and sanitization

4.1. Routinely clean within the facility (see Appendix E) by:

   4.1.1. Disinfecting surfaces and objects that are frequently touched especially in common areas.

   4.1.2. Disinfecting objects and surfaces not ordinarily cleaned (e.g. cell doors / bars, doorknobs, light switches, sink handles).

   4.1.3. Use recommended methods to clean and sanitize after general use (no known exposure to anyone with Coronavirus symptoms.

   4.1.4. Ensure that cleaners are not in a vulnerable group or self-isolating.
4.1.5. Ensure all cleaners are provided with gloves (ideally disposable) to protect their skin from exposure to cleaning materials.

4.1.6. Provide cleaners with masks and other personal protective equipment as appropriate.

4.1.7. Ensure to use cleaning materials based on guidance from National authorities.

4.2. Cleaning and sanitization of the facility after known exposure to someone with coronavirus symptoms.

4.2.1. If possible, close the area in the facility that the visitor visited for 72 hours with no access permitted.

4.2.2. After 72 hours then carry out cleaning as per routine cleaning procedures (see Appendix E).

5. C- Communicate with Visitors

5.1. Provide advice on contact restrictions and presence of symptoms provided at least one week in advance of their arrival at the prison, where possible.

5.2. Consider establishing a hotline for visitors to the prison.

5.3. Inform them about the impact of COVID-19 on regular prison visits.

5.4. Discourage physical contact and visits in the interest of their own, the inmates’ and their family’s health.

5.5. Consider facilitating virtual / telephone visits. When providing virtual / telephone visiting services, disinfect electronic equipment regularly.

5.6. Place posters/reminders informing visitor of procedures at main entrance, in visitation area, restrooms and any other major entrance. Ensure they see and understand the information posters.

5.7. Ensure visitors see and understand the information posters. Bring to their attention through regular announcements, where possible.

5.8. Educate on the COVID-19 basic facts and signs and symptoms

   - Links to Public Education Resources https://www.carpha.org/What-We-Do/Public-Health/Novel-Coronavirus
   - Links to Media https://www.carpha.org/More/Media/Articles
   - Links to Videos https://www.youtube.com/user/CARPHACampus

6. T- Train staff

6.1. Staff should be trained at minimum on:

   6.1.1. basic information on COVID-19 infection e.g. transmission route, signs, symptoms and clinical disease progression, isolation and quarantine
   6.1.2. how to communicate basic information on COVID-19
   6.1.3. hand and healthy hygiene practice
   6.1.4. requirements for, Personal Protective Equipment including appropriate use and disposal
   6.1.5. environmental prevention measures, including cleaning and disinfection
   6.1.6. stress management and psychosocial first aid (as appropriate)
6.1.7. national public health policies and procedures to prevent COVID-19 infection

REMEMBER!

- Review routinely your national authorities’ guidance and instructions on specific COVID-19 prevention activities relative to your community and adapt the plan accordingly.
- These activities if implemented can reduce the risk of spread and contracting COVID-19 infection. Please note that they cannot however eliminate the risk totally.

Main references:

1. World Health Organization Regional Office for Europe, Preparedness, prevention and control of COVID-19 in prisons and other places of detention Interim guidance 15 March 2020
# Appendix A – Preparedness Checklist

<table>
<thead>
<tr>
<th>CHECKPOINT</th>
<th>RESPONSE</th>
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<tbody>
<tr>
<td>1. Is there a detailed registry of all people moving in and out of prison?</td>
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<td>2. Are risk assessments/screening undertaken on all visitors entering the prison?</td>
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<td>3. Are such assessments carried out in the case of prison staff entering the facility, at each access?</td>
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<td>4. Is there a dedicated area for these risk assessments?</td>
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<td>5. Is information on symptoms in visitors over the previous seven days collected as part of this risk assessment?</td>
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<td>6. Is advice on contact restrictions and presence of symptoms provided to visitors well in advance (at least a week) of their arrival at the prison?</td>
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<td>7. Are symptomatic individuals prevented from visiting?</td>
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<td>8. Are data on COVID-19 that are collected in the prison system integrated in the local/national epidemiological surveillance system?</td>
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<td>9. Are facilities in place to allow hands to be washed with soap and water and dried using single-use towels?</td>
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<tr>
<td>10. Are facilities in place that allow hands to be cleaned with alcohol-based hand sanitizers where appropriate?</td>
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<td>11. Are wall-mounted liquid-soap dispensers available in communal areas?</td>
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<tr>
<td>12. Are there routines and facilities in place that allow appropriate physical distancing?</td>
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4 Adapted from the: World Health Organization Regional Office for Europe May 2020. Checklist to evaluate preparedness, prevention and control of COVID-19 in prisons and other places of detention
<table>
<thead>
<tr>
<th>CHECKPOINT</th>
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<tbody>
<tr>
<td>13. Are there spaces to isolate a visitor that may have symptoms of COVID-19?</td>
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<tr>
<td>14. Is there an infection control protocol in place?</td>
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<tr>
<td>15. Are staff and inmates provided with appropriate Personal Protective Equipment?</td>
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<td>16. Are masks available for use by all staff and inmates?</td>
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Appendix B – Screening Register Entry/Exit Registry

<table>
<thead>
<tr>
<th>No.</th>
<th>FIRST NAME</th>
<th>SURNAME</th>
<th>ID. Number (e.g. National/DL/Other)</th>
<th>CONTACT INFO</th>
<th>ENTRY TIME</th>
<th>EXIT TIME</th>
<th>SCREENED ** YES/NO</th>
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N.B. *Ask for most frequently used number or email.

**For Screening, consider collecting information on any history of fever, cough and/or shortness of breath, visitors’ recent travel history and possible contact with confirmed cases in the last 14 days in collaboration with local/national health authorities.
Appendix C1 – Infographics 1a: How to hand wash with soap and water

Appendix C2 – Infographics 1b: How to hand rub with alcohol-based sanitiser

Appendix D - Infographics 2: How to put on, use and take off a face mask
Appendix E - Infographics 3: Cleaning Process
Annex F – Infographics 4: Advice for persons with symptoms of COVID-19

**THE CLEANING PROCESS**

1. **Start by cleaning the surface of any dirt or visible soiling.**
   - Use a clean cloth or sponge
   - Use warm or hot water
   - Use an appropriate soap or detergent for the surface

2. **Make sure to change the water and cloth or sponge frequently.**
   - Remember to disinfect the sponge or cloth before reuse

3. **After cleaning the surface, or if not visibly soiled, it can be sanitised or disinfected.**
   - Bleach (sodium hypochlorite) should be diluted to 0.1% and in contact with surfaces for 10 minutes
   - Alcohol used should be at least 70% and should be allowed to dry on the surface to be effective

**Routine detergents and disinfectants are sufficient to remove and kill COVID-19.**

**Always follow the instructions on the cleaning agents for how to dilute and apply to different surfaces.**
The Coronavirus Disease (COVID-19)

The virus that causes COVID-19 is a new type that has never been found in humans before.

The Symptoms
The symptoms of COVID-19 include:

- Fever
- Dry cough
- Fatigue
- Shortness of breath
- Productive cough
- Muscle pain

ADVICE FOR PERSONS WITH SYMPTOMS OF COVID-19

- Seek medical attention
  Anyone who shows symptoms of COVID-19 should seek medical attention immediately. If you are a patient with symptoms of COVID-19 and your symptoms get worse, seek additional medical attention immediately.

- Keep an eye on symptoms
  If your illness gets worse, you should call the doctor who cared for you or the emergency department where you were seen. If you have shortness of breath at rest or difficulty breathing, you should call the local emergency number.

- Wear a surgical mask
  You should wear a surgical mask when you are in the same room with other people. You should wear a surgical mask when you visit a healthcare provider. If you cannot wear a surgical mask, let your healthcare provider know before you arrive.

- Stay at home
  You should limit activities outside of your home to seeking medical care. Do not spend time in areas that you must share with others. You should not go to work, school, or public areas. You should not use public transportation or taxis. You should stay at home until cleared by the public health unit or your doctor.

- Keep yourself away from other people where you live
  When possible, do not share areas with others. Try to stay in a different room from other people. Or, you should stay as far away as possible from other people. You should sleep in a separate bed. Use a different bathroom than others, if available. Wear a surgical mask when you are moving through rooms and other areas that have people. If you cannot wear a surgical mask, the people who live with you should wear one when they are in the same room with you. Clean any surfaces in shared areas immediately after use.

- Cover coughs and sneezes
  You should cover your mouth and nose with a tissue or your sleeve when you cough or sneeze. Used tissues should immediately be placed in a bin, and hands immediately washed with soap and water for at least 20 seconds.

- Wash your hands
  You should wash your hands often and carefully with soap and water for at least 20 seconds. If you cannot get to soap and water and your hands look clean, you can use an alcohol-based hand sanitiser. Wash your hands or use a hand sanitiser before and after entering an area or touching things used by other people.

- Do not share household items
  You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items with other people in your home. After using these items, you should wash them carefully with soap and water. You can use a dishwasher or washing machine. Or use soap and water to wash the items carefully by hand.

- Clean household surfaces
  Clean surfaces, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day with soap and water and sanitising wipes, or alternatively, diluted bleach.

- Throw away dirty items
  Place all used plastic gloves, face masks, and other used and/or unclean items into a waste bin that has a plastic bag or lining. Close the plastic bag when throwing it away. Wash your hands immediately after handling these items.