



Department of Public Safety and Correctional Services

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OOS IB # 2024-01

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OOS INFORMATION BULLETIN

SUBJECT: Guidance for Correctional Operations COVID-19 Management and Strategies for Enhanced Respiratory Virus Prevention

Personal Protective Equipment (PPE) Requirements and Respiratory Virus Management in Correctional Facilities

Note: According to updated [CDC guidance rendered March 1, 2024](#), it is recognized that the federal Public Health Emergency for COVID-19 expired on May 11, 2023 and disease severity and death have continued at reduced levels through an entire respiratory virus season since then, permitting updated guidance below.

I. PPE in Correctional Facilities.

PPE is not required in a correctional facility except:

- As required by the Department's Mandatory Respiratory Protection Program, which shall continue as normal in accordance with [ADM.055.0007—DPSCS Respiratory Protection Program](#);
- When working in medical and mental health areas as described below; and
- When transporting certain incarcerated individuals as described below.

However, the Department will continue to:

- Provide quality surgical masks for employees and incarcerated individuals whose personal preference is to be masked;
- Make soap and water or sanitizer routinely available and easily accessible throughout correctional facilities; and
- Encourage all employees, visitors, and incarcerated individuals to practice good hand hygiene.

II. PPE Requirements in Medical and Mental Health Areas of a Correctional Facility.

- PPE is not routinely required for medical and mental health staff for patient encounters. However, if a patient presents to the medical area with symptoms of respiratory infection (e.g. runny nose, cough, fever) the treating personnel shall wear surgical mask or N-95 respirator and other appropriate PPE during care provision.
- Incarcerated individuals approaching the medical spaces who have symptoms of respiratory infection (runny nose, cough, fever) shall don a surgical mask upon arrival if not already wearing one, and as directed by a healthcare provider.
- Incarcerated individuals are not required to mask when obtaining medication through a pass-through window or when meeting for group-therapy sessions, unless directed otherwise by a healthcare professional. The incarcerated individual is encouraged to notify a healthcare professional if having symptoms of respiratory infection (runny nose or cough) not otherwise evaluated.
- Employees and incarcerated individuals whose personal preference is to be masked may don a surgical mask.
- For the purposes of this IB, “medical and mental health treatment areas” include a hospital, clinic, designated treatment area, mental health unit, and dispensaries when face-to-face contact is required.
- For the purposes of this IB, “face-to-face contact” means less than 6 feet away for more than 5 minutes, or when providing treatment in a confined space, such as an examination or treatment room.

III. PPE Requirements when Transporting Incarcerated Individuals.

Medical Transport—Respiratory Virus

- When transporting incarcerated individuals with a respiratory virus, correctional officers in the transport vehicle shall wear the appropriate PPE per the specific Infectious Disease Protocol.
- Incarcerated individuals shall wear a surgical mask except when a healthcare provider advises otherwise.

Other Transport

- During transport, employees and incarcerated individuals whose personal preference is to be masked may wear a surgical mask.

IV. Infection Control Practices.

- Contractual medical/mental health staff will collaborate with custody and/or the environmental compliance and safety officers (ECSOs) to ensure that locations where individuals are required to wear PPE are properly stocked with the necessary items.
- Correctional Staff and/or the ECSOs will ensure that sufficient hygiene and cleaning supplies are available to all employees and incarcerated individuals.
- As stated above, the Department's Mandatory Respiratory Protection Program will continue as normal in accordance with [ADM.055.0007 — DPSCS Mandatory Respiratory Protection Program.](#)

V. Respiratory Virus Vaccinations.

As suggested by the Centers for Disease Control and Prevention dated March 1, 2024, anyone working in, residing in, or visiting a correctional facility is encouraged to be vaccinated and keep up-to-date with Respiratory Virus vaccines and recommended boosters (Flu, COVID19, etc.).

The Department shall continue to ensure that all incarcerated individuals are offered all routine vaccinations and recommended boosters.

Respiratory Virus Testing Diagnostic PCR testing (influenza, COVID19 and possibly other respiratory viruses) will be pursued for incarcerated individuals who:

- Shows signs or symptoms of respiratory infection, that is influenza-like illness or COVID-19, have been potentially exposed to another individual known to have contracted influenza, influenza-like illness or COVID-19; or
- Have been identified as being in close contact with someone known to have contracted influenza or COVID-19.

The Department will no longer require screening COVID-19 antigen testing prior to transfer from another jurisdiction or facility.

VI. Additional Respiratory Virus Management Practices and Strategies for Respiratory Virus Prevention.

The Department will continue to waive incarcerated individual medical fees and co-pays.

The Department will continue to follow the CDC's recommendations regarding isolation and quarantine periods for incarcerated individuals:

- Each of the Department's correctional facilities shall identify and maintain isolation and quarantine housing for incarcerated individuals recovering from or being evaluated for respiratory viruses. Duration of isolation and/or quarantine may be adjusted in further guidance as data becomes available.

- Managing officials may consider enhanced Respiratory Virus prevention strategies when the Respiratory Virus hospital admission rate is medium or high, or when facility-level factors indicate increased risk.
- Because respiratory virus hospital admission rates do not always reflect the Respiratory risk in correctional and detention facilities, managing officials should also assess facility-level factors that reflect its unique characteristics, operations, and populations to guide decisions about when to add or remove additional prevention measures.

Facility-level factors that may indicate that enhanced prevention measures are needed include, but are not limited to:

- The facility’s vaccination coverage;
- The current level of transmission within the facility;
- The risk of severe health outcomes for the people in the facility; and
- The facility’s structural and operational characteristics.

Managing officials implementing enhanced prevention strategies should consult [ADM.055.0012– Utilization of Protective Equipment and Additional Levels of Protection.](#)

Approved:  _____ Date: 8/6/2024
Carolyn J. Scruggs, Secretary

Distribution:

A – Facility/Agency Reference Set

S – All Correctional Facility Staff