



# report

## **Correctional Officers Emergency Videoconference**

December 4, 2020

The National Union of Public and General Employees (NUPGE) is a family of 11 Component and 3 affiliate unions. Taken together, we are one of the largest unions in Canada. Most of our 390,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

Larry Brown, President

Bert Blundon, Secretary-Treasurer

**NUPGE Correctional Officers  
Emergency Videoconference  
December 4, 2020**

**PARTICIPANTS**

**SGEU/NUPGE**

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Glenn Billingsley  
Diane Beaulieu  
Corey McCafferty

**MGEU/NUPGE**

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**OPSEU/NUPGE**

Sandra Harper  
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Rick Wiseman

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Jeff MacDonald

**NAPE/NUPGE**

Scott Dwyer

**NUPGE**

Bert Blundon, Secretary-Treasurer  
Michael Temelini, National Representative

## **1. Welcome, Land Acknowledgment, and Introductions**

Michael Temelini, NUPGE National Representative, welcomed all the participants to the meeting and expressed gratitude for their participation on such short notice. He drew their attention to the land acknowledgment in the comments section of the video screen. He asked participants to introduce themselves, which they did. He then gave the floor to Bert Blundon.

## **2. National Update—Bert Blundon, NUPGE Secretary-Treasurer**

Blundon offered brief comments on the current situation across Canada. He pointed out that it is no coincidence that the escalating number of cases among the general population is happening in the provinces with right-wing governments (Alberta, Ontario, Quebec, Saskatchewan, and Manitoba), where governments are putting economic interests ahead of the citizens. Blundon mentioned the vaccines that will soon be available, and expressed some concern about who will have access, and to whom they will be made available. Blundon concluded by talking about the worrisome pandemic outbreaks in long-term care facilities and now correctional facilities. He welcomed everyone to the meeting and looked forward to the discussion.

## **3. COVID-19 Outbreak—Saskatchewan Correctional Facilities**

The participants from SGEU began the discussion. They explained that the reason they requested an emergency meeting is because of the growing COVID-19 outbreaks at several Saskatchewan adult correctional facilities. They provided a timeline of case numbers from March to the present, offering details of the COVID-19 outbreak, beginning in the first 2 weeks of November 2020 to now. They noted that the youth system is not seeing the same crisis.

Active COVID-19 cases have been [reported](#) at 4 adult jails and 3 youth correctional sites in Saskatchewan. But the outbreak declared November 17 at the Saskatoon facility is the system's largest. The Saskatoon Correctional Centre (SCC) has 26 correctional officers and 116 inmates with active Covid-19 positive tests.

The workers are being equipped with PPE, but SGEU still has a number of concerns:

- Failure to isolate: Because of the capacity per unit (overcrowding), the SCC cannot manage to isolate all those who tested positive for COVID-19 from all the other units in the facility.
- Mental injury: There are concerns about the overall mental health crisis in the facility, with rising anxiety among inmates, and increased risk to staff.
- Continually changing protocols: The protocols around transports, escorts, and even eating arrangements continue to change in this very live crisis.

**SGEU provided the following statistics on the outbreak:**

Facility	Staff Active	Staff Recovered	Offender Active	Offender Recovered	Released with Isolation Plan
Regina Correctional Centre	4	0	2	0	0
Saskatoon Correctional Centre	26	9	116	0	0
Prince Albert Correctional Centre	1	2	2	0	0
Pine Grove Correctional Centre	0	2	1	0	1
Whitespruce Provincial Training Centre	0	0	0	0	0
Besnard Lake Correctional Camp	0	0	0	0	0
Saskatchewan Hospital North Battleford	0	0	0	0	0
Paul Dojack Youth Centre	2	0	3	0	0
Kilburn Hall Youth Centre	1	1	0	0	1
Prince Albert Youth Residence	0	2	0	0	0
Drumming Hill Youth Centre	0	0	0	0	0
<b>Total</b>	<b>34</b>	<b>16</b>	<b>124</b>	<b>0</b>	<b>2</b>

**4. Discussion**

During the discussion, SGEU members provided detailed information about best practices adopted by SGEU members, so that workers in other facilities across Canada might learn something about how to handle this crisis. They explained all the protocols and practices implemented to deal with the crisis, including quarantine, lockdown measures, temperature checks on arrival, cleaning practices, and the testing of inmates and staff. They noted that one of the most worrisome aspects of testing was the discovery of so many asymptomatic cases in the correctional facilities. They explained that the practices around medical care have changed: medical staff are for the time administering care in the dorms and units themselves, not in the medical units.

They explained in detail their concerns about the mental health of inmates, whose anxiety levels increased because normal services have been suspended (such as visits from family members, chaplains, and elders). Inmates are expressing anger because they wanted to receive personal protective equipment a lot sooner. Some inmates have resorted to hunger strikes, while others have become violent and confrontational (pushing, shoving, and spitting), which exposes workers to greater risk of contracting the virus.

SGEU members talked about the significant pressure this is all having on the personal and family lives of workers. Because they worry about giving COVID to vulnerable spouses or elderly family members, some workers have been forced to find

accommodations outside their family home, requesting that these costs be covered. So far management has refused, which may lead to further union action.

## **5. COVID-19 Update: Other Provinces**

Participants from other Components offered updates on the pandemic in their respective provinces. And they provided information about the health and safety protocols, best practices, and management skills in their facilities across Canada to help deal with this crisis.

Overall, the situation is under control in Ontario and Atlantic Canada, with NAPE, PEI UPSE, and the NSGEU reporting no cases in correctional facilities. This has led to some worry about complacency and “pandemic fatigue,” which run the risk of spreading. In Nova Scotia, the Component was very diligent in its [media strategy](#) that focused attention on the provincial government’s failure to hire sufficient staff, which has led to the decline in mental health of inmates and staff. In Ontario, the rigorous protocols and practices reported in past videoconferences continue to be in place, thus ensuring the health and safety of inmates and workers at adult and youth facilities.

The MGEU participant expressed concern that the situation in Manitoba could get out of control and mirror the crisis in Saskatchewan. With cases rising overall in the province, they are now seeing a spike in cases at correctional facilities. This has led to the filing of multiple grievances about providing effective personal protective equipment such as N-95 masks.

# Appendix 1

## Component Reports

### 1. Component name: SGEU

### 2. COVID-19 outbreak – Saskatchewan correctional facilities

The SGEU requested an emergency meeting because of a growing COVID-19 outbreak at several Saskatchewan Correctional Facilities.

Active COVID-19 cases have been [reported](#) at four adult jails and three youth correctional sites in Saskatchewan. But the outbreak declared November 17 at the Saskatoon facility is the system's largest. The Saskatoon Correctional Centre (SCC) has 26 Correctional Officers and 116 inmates with active Covid-19 positive tests.

All of the staff are being equipped with PPE, but the SGEU still has a number of concerns:

- Failure to isolate: because of the capacity per unit (overcrowding), the SCC cannot manage to isolate all those who are tested COVID-19 positive from all the other units in the facility
- Mental injury: there are concerns about the overall mental health crisis in the facility, with rising anxiety among inmates, and increased risk to staff
- Continually changing protocols: the protocols around transports, escorts, and even eating arrangements continue to change in this very live crisis

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Saskatoon Correctional Centre	26		9	116	0	0
Prince Albert Correctional Centre	1		2	2	0	0
Pine Grove Correctional Centre	0		2	1	0	1
Whitespruce Provincial Training Centre	0		0	0	0	0
Besnard Lake Correctional Camp	0		0	0	0	0
Saskatchewan Hospital North Battleford	0		0	0	0	0
Paul Dojack Youth Centre	2		0	3	0	0
Kilburn Hall Youth Centre	1		1	0	0	1
Prince Albert Youth Residence	0		2	0	0	0
Drumming Hill Youth Centre	0		0	0	0	0
<b>Total</b>	<b>34</b>		<b>16</b>	<b>124</b>	<b>0</b>	<b>2</b>

### **3. Why SGEU requested December 10 meeting**

The SGEU would like:

- a. An update about the COVID-19 numbers in other provinces
- b. Advice and more information about the health and safety protocols, best practices, and management skills in other facilities across Canada in dealing with this crisis
- c. To provide information about best practices adopted by SGEU members, so that workers in other facilities across Canada might learn something about how to handle this crisis.



**Component name: MGEU**

## **Pandemic Operations – November 27, 2020**

### **I. General**

- For more information about COVID-19, visit the [Manitoba COVID-19](#) website.
- For health advice or guidance about whether you should self-isolate, staff should consult Health Links (204-788-8200, or 1-888-315-9257), the [Manitoba COVID-19](#) website, or a health professional.
- Ensure that hygiene and cough/sneezing etiquette information is posted in all areas. Hygiene supplies should be available to the inmate/YP population, based on current supply levels.
- Practice good prevention:
  - Wash your hands often with soap and water or alcohol-based hand sanitizer, wear your provided Medical grade procedural mask,
  - mask at all times,
  - sneeze and cough into your sleeve,
  - avoid touching your eyes, nose or mouth,
  - avoid contact with people who are sick,
  - keep your own workstation clean,
  - practice social distancing,
  - stay at home if you are sick.

### **Centre Declared an Outbreak;**

- When a Centre has been declared an outbreak by Public Health and status changes to Critical/Red additional local restriction can be implemented. Public Health and Management will determine changes to operations and restrictions.
- Headingley Correctional Centre, Women’s Correctional Centre and Agassiz Youth Centre are currently in Critical/Red status on the Manitoba Pandemic Response System and as such may have additional restrictions in place in order to control the spread of COVID-19 at those facilities

### **II. Social Distancing**

- Centres will reduce movement and direct contact as much as possible while maintaining essential services. This applies to inmates/residents and staff.
- Stage or reduce movement through dining halls, corridors, and other common spaces.
- Implement rotating break schedules in larger units to limit the number of inmates/residents sharing common space.

- Maintain distancing during direct supervision and searching (see below). Reduce dormitory counts as much as possible.

### III. Cleaning and Supplies

- Supply chains are being reestablished but there remains the possibility of further disruption therefore it is important that all custody centres use cleaning supplies judiciously.
- Regular cleaning with detergents is an effective tool for preventing the spread of the virus and all centres have implemented aggressive cleaning schedules. Disinfecting fogging equipment was supplied to all centres and is effective in treating large and high traffic areas, but they can also be integrated into regular cleaning schedules.
- Air Scrubber machines will be in use during all dental procedures.
- Regular bleach can be diluted in water (1:10) and used as a disinfectant.
- Centres can hire additional cleaning trustees as needed. Pay for cleaners may be increased or can begin at the middle increment.
- Clean escort vehicle PTCUs after each escort and the officer cab (seating area) at the end of every shift:
  - **Sweep out the interior and remove garbage.**
  - **Spray all surfaces within the PTCU with a disinfectant spray (one part bleach to 10 parts water is recommended).**
  - **Target the steering wheel, handles, seat belt clasp, and any surface that is often touched.**
  - **Let the spray sit for ten minutes then wipe down.**

### IV. Programs, Services, Training, Spiritual Care

#### A. Staff Training

- As of September 28, 2020 in the Winnipeg Metropolitan Area, staff training sizes are restricted to groups of 10 or less including the facilitator.

#### B. Inmate/YP Programs

- Volunteer access to custody centres is suspended.
- Individual (one on one) case management, teacher, counseling, Elder, and chaplain meetings can continue if social distancing can be maintained (6ft apart).
- Effective Nov.12/20, staff led spiritual care services (e.g. worship services, Ceremonies etc.) and inmate programs will be suspended due to the provinces move to Critical Level RED on the pandemic Response System.

- As of November. 23, 2020 in our Youth Centre’s teachers will be approved to teach in a group setting of 5 including the teacher. Teachers will work in their assigned building with the same cohorts from that unit. (Note; AYC suspended until cleared from level RED.

### **C. Recreation**

- Recreation will be suspended until further notice. Outdoor fresh air areas can continue to operate.

### **D. Personal Visiting**

- All personal visits for inmates/YPs are suspended until further notice. However, personal visits may be approved by the Superintendent or Deputy Superintendent in exceptional circumstances, e.g. death in the family or other crisis. If granted, visits will comply with screening, separation, and PPE guidelines.

### **E. Professional Access/Services**

- Contract Services; Doctors, Dental Services (emergency situations) and Psychiatrist can continue to attend the Centre and provide care to inmates.
- In Person visits by lawyers are suspended while Manitoba is in status Red/Critical on the Manitoba Pandemic Response System.
- Contractors and maintenance personnel can access custody centres to deliver essential services or to finish capital projects.
- The use of video and phone technology should be encouraged in place of in-person visits with inmates/YPs.

### **F. Community Escorts**

- Funeral escorts are suspended.
- Before completing medical escorts, a SOM/Manager will conduct a site assessment of the destination in consultation with medical personnel (if possible) to direct necessary precautions. Some health care facilities may have designated entry points and screening for patients.

### **G. Leisure/Food Services**

- Centres will purchase leisure products for isolated and other units due to restrictive conditions. This includes games, magazines, movies, art supplies, etc. Several handheld electronic gaming devices were purchased and distributed. Continue providing this service.
- When possible, food services will be enhanced with larger portions. Canteen limits may also be expanded at the Superintendent’s discretion.

## **H. Phone Services**

- Bulk call purchases are available, allowing users to purchase large volumes of personal calling at reduced rates. Public access to kiosks will be maintained.

## **I. Haircuts**

- Haircuts will be suspended in all Centres until further notice.

## **V. Leave Management**

- Effective September 1/20, time limits for the use of leave banks are reinstated and requirements for sick notes will return to normal.
- For PT staff who are required to self-isolate, timekeepers/schedulers should remove all shifts in the affected pay period and mark the staff off 'sick' for the full pay period. This allows the staff to receive pro-rated sick leave based on the average hours worked during the previous 8 week period.
- Corrections staff are declared essential workers. Those who need childcare can contact 204-945-0776, 1-888-213-4754, or email [cdcinfo@gov.mb.ca](mailto:cdcinfo@gov.mb.ca).
- Sick leave used in association with the Coronavirus outbreak will not be considered in relation to the attendance management process. It is the employee's responsibility to ensure that this Coronavirus information is relayed to the employer so that the time can be administered appropriately. Please see attached October 6 email on administration of sick leave during COVID.
- If you are in a position where you need to be off work sick but don't have sufficient sick leave to cover the absence, please advise your Manager and/or the Deputy Superintendent. We will work with staff to use other leave banks.

## **VI. Testing**

- Testing will be offered to all new admissions to the WRC starting the week of June 1/20. Participation in the testing process or pending results will not impede the transfer process.
- Public health officials have expanded testing criteria to include all symptomatic Manitobans. Symptoms include fever, cough, runny nose and sore throat. Testing capacity has increased and the province is prepared to test anyone who has symptoms of COVID-19. For health advice or guidance about whether you should be tested or self-isolate, staff should consult Health Links (204-788-8200, or 1-888-315-9257), the Manitoba COVID-19 website, or a health professional. If calling Health Links, please mention that you work in a Correctional Centre.

- Online and phone scheduling for COVID testing is available for staff.
- An appointment-based scheduling system for COVID-19 tests has been implemented. People can call 1-855-268-4318 (toll-free) or go online to make appointments to get a COVID-19 test.
- For more information on testing locations, visit [www.manitoba.ca/covid19/updates/testing.html](http://www.manitoba.ca/covid19/updates/testing.html).
- It is important for any staff who tests positive to let their Superintendent or designate know as soon as they get results so the investigation and contact tracing may begin.
- Please ensure that you are practising good hand hygiene, following proper and constant masking protocols, social distancing as much as possible and staying home when sick.
- Public health officials will continue to contact individuals who test positive to begin contact tracing. However, information in the portal will provide immediate guidance to positive cases about their requirement to isolate while they wait to be contacted.
- Access to both positive and negative test results on the Shared Health website. It is important that staff who go for tests also sign up at the link attached, it will provide a quick response as soon as a test result is determined. This will improve the wait time that is associated with getting test result over the phone, this eliminates that problem and frustration. <https://sharedhealthmb.ca/covid19/test-results/>.
- Through a review of shift rosters and interview with positive staff, management will determine if there are other close contacts identified
- Any contact outside of work with other Correctional Staff on the day the staff member became symptomatic or in the 48 hours prior to becoming symptomatic.
- Management may review any available CCTV to confirm any contacts staff may have had.
- All staff identified as contacts with the positive staff will be called by management, told to self isolate and advised to get COVID testing while awaiting contact from Public Health
- Through interview with positive staff and review of rosters, as assessment will occur to determine if the positive staff may have infected an inmate or inmate unit. If it is confirmed that the staff member may have had close contact then the inmate unit will be treated as contact isolation and subject to the same PPE requirements as symptomatic isolation.
- Public Health and local nursing staff will determine the length of isolation and if testing is necessary.
- While Management will ensure the least amount of information is released to ensure the confidentiality of the staff member. Staff will be asked for permission to share their name for contact tracing purposes. It should be noted that Public Health may share their names if they believe it is pertinent to their investigation.
- When a centre has been advised that an **inmate** has tested positive, the following steps will take place:

- The inmate will be placed in symptomatic isolation (PPE protocols are identical for COVID positive and symptomatic)
- Staff who were not wearing a medical grade procedural mask, who have had close (less than 6 feet) contact with a confirmed or suspected COVID positive inmate, for a cumulative duration of 15 minutes or more (all periods of contact added together) will be directed to self-isolate and go for testing pending contact from Public Health.

## **VII. Staff Self Isolation**

- Persons (including staff) who travel internationally are required to self-isolate for 14 days upon return to Canada. Staff who are planning to travel internationally are required to advise the employer immediately. Upon return, staff will be required to use banked leave for the quarantine period unless symptoms develop. Those without available leave will be unpaid.
- Public health officials are advising that anyone who is symptomatic, or has a household member who is symptomatic, the entire household needs to self-isolate.
- Correctional staff / Nurses are considered first responders for this purpose and therefore are not required to self-isolate if they have no symptoms in this situation.

## **VIII. Screening**

- Senior managers will send employees home if they report to work with flu symptoms.
- To be clear, staff must stay home when you have cold or flu symptoms. If you attend work and start experiencing symptoms, then you must notify your supervisor and make arrangements to go home. In these cases we would expect staff to self-isolate and get a COVID test. If you see a fellow staff member who appears ill, please gently approach and ask if they are feeling unwell and to suggest they leave the workplace. Managers and Supervisors are responsible for looking for this as well.
- Starting Thursday November 5, we will stop the temperature screening and most centres will withdraw staff who are conducting the screening. Staff will be expected to self-assess before each shift and at some points it is expected that the Duty Officer or another staff will randomly or regularly check with staff coming to work to ensure they are not experiencing cold or flu like symptoms. It is imperative that all centres have signage with the COVID self-assessment questions clearly visible.
- Contractors and other non-Corrections staff who attend the centres will need to directly answer the self-assessment questions with the Duty Office or similar area.

### **Screening Procedure:**

Before leaving home, staff should self-assess based on the following:

Do you have?

- Fever/Chills (higher than 38 degrees Celsius)
- New or increasing cough
- Shortness of breath or trouble breathing
- Sore throat or muscles
- Headache

In the last 14 days, have you:

- Returned from travel outside of MB, except western provinces, the territories, and northwestern Ontario (West of Terrace Bay)? Note CO/JC exemption above.
- Travelled internationally in the past 14 days? If so, 14 days of self-isolation is required before returning to the centre.
- Had close contact with a confirmed case of COVID-19 while not wearing PPE or practicing social distancing?
- Had a laboratory exposure to COVID-19?

**If you have any of the above symptoms or answered ‘yes’ to any question, stay home and contact Health Links.**

## **IX. Health Information**

- If there is a COVID-19 laboratory diagnosis in your workplace, a public health investigation is automatically triggered. Public Health notifies close contacts of laboratory-confirmed positive COVID-19 cases and anyone at risk of contracting the virus will be notified by Public Health.
- PHIA continues to apply even if an inmate tests positive. Any inmate who is symptomatic should be considered and treated as suspected positive. There would be no change to approach or PPE on the officer’s behalf whether someone was suspected or confirmed positive. The contact protocols noted above still apply.
- Each employees' personal health information is theirs to manage however if an employee is tested for COVID 19, they are obligated to provide the test result to the employer. Personal health information will not be shared with other employees.

### **COVID POSITIVE INMATES**

- An inmate that has tested positive and is in isolation can be cleared by medical using the following criteria:
  - For symptomatic cases:
    - at least 10 days have passed since onset of first symptom,
    - the case did not require hospitalization,

- No fever and the inmate has improved clinically,
- absence of cough is not required for those known to have chronic cough or for those who are experiencing reactive airways post infection.
- For asymptomatic cases:
  - at least 10 days have passed since the specimen collection date of the confirmatory laboratory sample.
  - Anyone with persistent symptoms at day 10 (e.g. fever, increasing shortness of breath, fatigue), aside from a reactive airway cough, should have a prompt clinical assessment. Individuals who remain symptomatic at day 10 should also continue on active daily monitoring until symptoms have resolved for 24 hours.

## X. **Searches**

- If possible, fog areas to be searched before searching begins. Officers should remain 1-2 meters apart while searching open areas and only one officer at a time should be searching in cells.
- If you are removing property from a cell that has symptomatic or COVID positive inmate the follow process should take place. Items that will not be following the inmate to an isolation area should be bagged and stored until the quarantine period has ended (10 -14) days. Property can be returned after that time line. Additional fogging or cleaning of those materials for COVID 19 are not necessary in this circumstance.
- Effective June 11/20, K9 services may resume.

## XI. **Court Appearances, Police Removals, and Medical Escorts**

- Inmates/YPs returning from medical escorts with corrections staff do not generally require isolated, but should be assessed based on the following:
  - Length of the escort or time in a public setting, e.g. 12 hours or more would support isolation.
  - Exposure to multiple spaces or persons in the community.
  - PPE compliance during the escort.
  - Supervision during the escort.
- Inmates/YPs removed from custody by police agencies will be returned to their home centres and isolated for 14 days.
- Inmates/YPs returning to the custody centre from any external escort should wash/sanitize their hands before returning to their home unit.
- COVID positive inmates will not appear in video Court or personal appearances until declared as recovered by our medical staff in consultation with Public Health.
- Those centres in Red/Critical Status on the Manitoba Pandemic Response Plan will not allow any inmates to be transported for personal court appearances.



## **XII. Release Planning**

- Inmates/YPs attending court outside the custody centre will be returned to their home centre and isolated for 14 days, with the following exceptions:
- Inmates/YPs attending court in Winnipeg, The Pas, Thompson, Brandon, or Portage. Inmates/YPs who share a vehicle/flight with a new admission must be isolated upon return to their home centre.
- TPCC inmates staying overnight in Thompson are not required to isolate upon return to TPCC under the following conditions;
- The RCMP cell will be fogged prior to the inmate arriving, they will not be housed with new arrests, they are not meeting counsel at the detachment, and their only contact with anyone other than Sheriffs is when the RCMP pass them their breakfast through a slot.
- Interviews are by phone at the courthouse due to COVID-19, if this need to change, Sheriffs will put portable barriers up in the interview room.
- There will be no new arrivals or other prisoners from The Pas on the flight on the return trip (unless the prisoner from TPCC came out on the same flight).

## **XIII. Release Planning**

- Several northern communities are now self-isolating and restricting access. Release planning at each custody centre must ensure that released persons are able to return to their home communities or find alternatives. Corrections will continue to arrange transport in these cases.
- Probation Officers and Cam Zacharias (RRI) are available for consultation and referrals to assist with the release process.
- The release of Open Custody (OC) youth is permitted, subject to stable residence.
- The release of Secure Custody (SC) youth is permitted, subject to no OC to follow, stable residence and in consult with Community Corrections and local SMT.
- If these measures fail, the department will consider long term community placements, e.g. hotels.

### **Release planning for COVID+ Inmate**

- If you get an unexpected release of a symptomatic or COVID+ inmate/YP where release planning has not taken place in relation to the COVID-19 risk, there is a Medical Officer of Health on call, who can be reached at (204) 788-8666. This individual should only be called after consultation with and direction by the facility SMT or designate.

## **XIV. Population Management and Isolation**

### **A. Unescorted Temporary Absences**

- All intermittent sentences are suspended and UTAs are authorized in all cases.
- UTAs are authorized for sentenced adult male offenders with 14 days or less remaining before their scheduled ERD and adult females with 20 days remaining. Those with current convictions for domestic violence or sex offences are not eligible and an ED consult is needed if the offender presents unique security concerns.

### **B. Admission Restrictions**

- All new admissions (adult/youth, male/female) in the province are being processed through the Winnipeg Remand Centre (WRC), followed by isolation.
- Admission to the WRC will require a remand warrant, disposition, committal, or other court ordered detention document(s).
- Male federal parole violators will not be admitted to the WRC. Female PVs will continue to be admitted to the WRC.
- CBSA is reviewing all detainee admission and will ensure that only essential cases will be admitted to the WRC.

### **C. Isolation & Transfers**

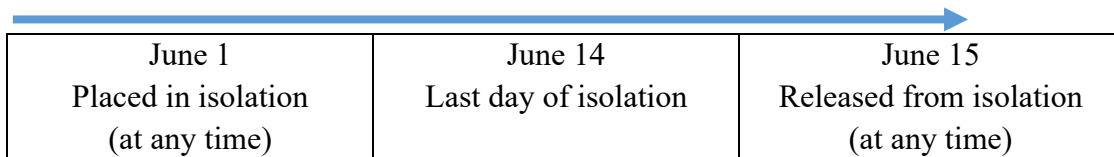
- All adult admissions will be initially isolated at the WRC. Transfers from the WRC will be administered as follows:
  - Youth admissions will be immediately transferred to the MYC for 14 days of isolation, after the WRC admitting process is complete.
  - NOTE; HCC has been moved to a Critical (RED) on the #RestartMB Pandemic Response System as of October 13<sup>th</sup>. No transfers in or out will occur during this period of Critical (RED).
  - WRC will defer back to holding male inmates for the 14 day period until cleared for transfer to another Centre.
  - Asymptomatic female population will be transferred to designated isolation overflow to WCC after 10 days of isolation (or as required) to complete their time in isolation.
  - Symptomatic adult inmates will remain in isolation at the WRC until cleared, followed by transfer to other custody centres.
- Inmates/YPs must be symptom free for a minimum of 48 hours before their scheduled release from isolation.
- Adult male centres (MRCC, BCC, and TPCC) will select transfers from the WRC as inmates clear isolation. Transfers will consider place of residence, court appearance location, and security needs.

- Inmates/YPs who become symptomatic in any custody centre will remain in that centre and be isolated for 14 days from the onset of symptoms, as assessed by medical personnel.
- Medical personnel will assess all inmates/YPs prior to transfer. However, an inmate/YP who is placed in asymptomatic isolation, and remains asymptomatic, does not require a medical assessment before release from isolation.

**D. Isolation Conditions**

- Isolated inmates/YPs will receive a minimum of 30 minutes out of their cell per day.
- Whenever possible, one inmate/YP per cell will apply in all isolation areas.
- However, if counts increase, two inmates/YPs who are admitted to isolation units on the same day can be housed in the same cell, assuming compatibility. As much as possible, isolation will also separate males/females and adults/youth by unit.
- If two inmates/YPs occupy an isolation cell and one becomes symptomatic, they will be separated and the asymptomatic inmate/YP would be isolated for another 14 days.
- Isolation may be extended if the inmate/YP becomes symptomatic while in isolation, as directed by medical personnel.

Calculating time in isolation (sample):



**E. Police/Sheriff Transports for Admission**

- Rural custody centres who normally provide intake services (BCC, TPCC) will assist arresting agencies and Sheriffs as much as possible by deploying escort officers and vehicles to transport prisoners to the WRC. Staff have been designated at each of these centres to coordinate these transports.

**XV. Prevention and PPE Use**

\* Developed in consultation with Dr. Jasdeep Atwal and Director of Health Services, Bev Reeves

**A. How the Virus Spreads**

- Based on the information we have to date, the spread of the COVID-19 is by droplet spread only and is not airborne (does not stay in the air, ducts, vents, etc.).
- With droplet spread the virus cannot penetrate skin but can only infect someone if

the virus enters through a mucous membrane (eyes, nose, and mouth). This can occur directly if the droplet enters one of these locations or indirectly (if your hand touches droplets then that same hand is used to touch your mouth, nose or eyes).

- Spread is reduced or eliminated by regular hygiene, cleaning, and proper application of PPE as required.

## **B. Principles**

- Practice regular hand hygiene and coughing etiquette, cleaning, and social distancing.
- Practice hand hygiene before/after donning/doffing PPE.
- Minimize movement of staff and inmates between symptomatic, asymptomatic and non-isolation spaces.
- Once PPE is donned, avoid doffing. PPE may be doffed and changed when taking a meal/coffee break, or if wet, damaged, or soiled, but staff are advised to avoid changing PPE unnecessarily.
- Once PPE is doffed, this should be replaced by clean or new PPE, whenever possible.
- A Medical grade procedural mask can reduce the chance that others are coming into contact with your respiratory droplets”.
- Medical personnel may vary the use of PPE for specific procedures and based on a risk assessment.
- Inmates that are identified as; COVID positive, symptomatic and a confirmed contact will be managed with the same PPE.

Note; Staff that are working in units confirmed contacts will be issued; Face shields, Medical grade procedural mask and gown.

### C. PPE Requirements

<b>INMATES/YPs</b>			
<b>Location</b>	<b>Reusable Masks</b>	<b>Medical grade procedural mask</b>	<b>Medical Mask Vinyl/nitrile/latex Gloves Coverall</b>
Outside Cell, Asymptomatic	√		
Outside Cell, Symptomatic		√	
Community Escort* (from isolation)			√
Community Escort (from non-isolation)		√	
Contact Isolation (symptomatic Isolation)		√	

\* Does not apply to transfers between centres by Corrections escorts. For transfers, use 'outside cell' precautions as noted above.

<b>STAFF</b>					
<b>Location/Area</b>	<b>Medical grade procedural mask</b>	<b>Eye Protection</b> Protective eye wear (Prescription glasses not applicable)	<b>Vinyl, Search, or Plastic Gloves*</b>	<b>Full PPE</b> vinyl/nitrile/latex gloves face shield medical grade Procedural mask gown	<b>Dental PPE</b> Vinyl/nitrile/latex Gloves Face shield KN95 mask Gown Bouffant/cap
Custody Centres (all staff)	√				
Asymptomatic Isolation Units/Centres	√	√	<b>Optional</b>		
Symptomatic Isolation				√	
Intake Area (isolation centre only)				√	
Escorts (transporting symptomatic or new admissions)				√	

Staff supervising dental procedures (Dental contractors are responsible for their own PPE)					√
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\* To be made available based on supply, as determined by the custody centre.

#### D. Managing PPE

- Search gloves must be cleaned/disinfected after each encounter (within 6ft) with an inmate/YP.
- Reusable gowns/coveralls should not leave the custody centre and must be laundered on site. (Currently we receive level 1 examination cover gowns, there is no limit to the amount of washes. For our purpose in a correctional setting that is appropriate).
- Two Medical grade procedural masks will be issued to all staff on a shift and should be worn for the duration of the shift, covering nose and mouth and chin. Note; medical grade procedural masks will be a Level 1, 2, 3 depending on our supply chain. (Note; exception for breaks above).
- Eye protection and/or face shield will be issued to staff as needed. These should be retained and cleaned/disinfected with a mild detergent before and after shift, or if doffed for any reason.
- Inmate/YP reusable masks should be retained by the inmate/YP for further use but will be laundered/replaced daily, or when damaged, wet, or visibly soiled. Up to three masks may be issued per inmate/YP.
- Enhanced PPE (face shields and Medical grade procedural mask) will be worn in the following areas for staff and inmates; Kitchen, Central laundry, Canteen.
- Escort Officers that are taking inmates into the community for medical appointments or hospital supervision will wear full PPE, including a Medical grade procedural mask.

#### E. Managing Isolation

- Inmates/YPs are not required to wear PPE if they are contained in a cell or they are in a cell with an open door/meal slot and are not within 6 ft. of others.
- If an inmate/YP refuses to comply with PPE requirements, they are not to be moved and the SOM/Manager is to be advised of non-compliance.
- Breaks in all isolated areas. Staff will attend the cell with sanitizer, conduct a wellness check (e.g. how are you feeling, are you having any symptoms, feeling better/worse etc.), ensure the inmate/YP dons a mask, and sanitize the

inmates/YPs hands. Upon conclusion of the break or unit access, hands will be sanitized again before returning to the cell.

- Cleaning of contact surfaces in symptomatic areas is required between breaks.

#### **F. Uniform Management**

- Keep uniform items separate from regular clothing at home, including footwear.
- Staff should be changing in and out of their uniform at work.
- Clean uniforms should come to work and should be washed after each shift, using regular detergent and warmest machine temperatures recommended on the uniform label.

#### **G. Code Response**

- Code responders will don full PPE.
- An SOM/Manager will assess risk level before initiating physical contact with an isolated inmate/YP during a code response.
- After the code clears, the area should be disinfected using one of the methods described above. Disposable gear should be placed into the garbage and placed into an exterior garbage bin.
- If administering CPR (all inmates/YPs):
  - Only essential staff should be attending to the patient and don a N95 mask. This includes those directly involved in resuscitation efforts or to maintain security.
  - A Medical grade procedural mask should be placed on the patient unless medical is supplying oxygen.
  - ‘Hands-only’ procedures apply. AED and compressions will be used, but no breaths administered.
  - Follow AED voice prompts continue CPR until EMS arrives.
- For medical personnel:
  - Oropharyngeal airway can be established if airway cannot be established/maintained via head tilt/chin lift.
  - NO bag mask ventilation (BVM) or high flow O2 (greater than 6L/min) is recommended due to the production of aerosols.
  - Passive oxygenation can occur through Nasal Cannula or non-rebreather mask at a rate of no greater than 6L/min.
  - Advanced airway may be established once EMS arrives (ensure only essential staff in room when this occurs as it is an Aerosol Generating Medical Procedure (AGMP)).

## **H. Supervising Medical Procedures**

- N95 masks should be worn only when performing specific medical (aerosol generating) procedures, Officers who are supervising inmates during these procedures, should wear an N95 (if available) or KN95 mask. The N95 mask can be donned regardless of fit testing. Supervising of dental services will require the use of a KN95 mask (see PPE guidelines above)

## **I. CPAP (Sleep Apnea) Machine Management**

- Inmates/YPs in isolation will not be allowed to use their CPAP machines unless deemed essential by their primary physician.
- If deemed essential by their primary physician, additional (aerosol/airborne) precautions are needed if the inmate/YP is symptomatic or COVID positive:
  - CPAP to be given only at night with supplies for entire night (door cannot be opened to give additional supplies).
  - Towel to be placed at bottom exterior of the cell door to prevent escape of aerosols.
  - In the morning, once CPAP turned off, aerosols should be allowed to settle for 60 minutes before opening the cell door.
  - Nursing staff entering cell to retrieve the CPAP should wear full PPE and N95 mask.
  - Once the equipment is removed, the cell should be fogged.
  - If code response is required in the cell while the CPAP is running or within the 60 minute settling time post use, all responding CO's and Nurses will need to wear full PPE and N95 mask.





## NATIONAL UNION OF PUBLIC AND GENERAL EMPLOYEES

- B. C. Government and Service Employees' Union (BCGEU)
- Health Sciences Association of British Columbia (HSABC)
- Health Sciences Association of Alberta (HSAA)
- Saskatchewan Government and General Employees' Union (SGEU)
- Manitoba Government and General Employees' Union (MGEU)
- Ontario Public Service Employees Union (OPSEU)
- Canadian Union of Brewery and General Workers (CUBGW)
- New Brunswick Union of Public and Private Employees (NBU)
- Nova Scotia Government and General Employees Union (NSGEU)
- PEI Union of Public Sector Employees (PEI UPSE)
- Newfoundland & Labrador Association of Public and Private Employees (NAPE)

The National Union of Public and General Employees is an affiliate of the Canadian Labour Congress and a member of Public Services International.

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