MODULE 6. INMATE MOVEMENT

NOTE: This Module reviews considerations for inmate movement only. For guidance on inmates exposed to COVID-19, refer to the <u>BOP Pandemic Plan</u>, Module 4. Inmate Isolation & Quarantine

WHAT'S NEW

 Temperature checks are no longer part of routine COVID-19 symptom screening. Temperature checks will continue to be part of the "Intake" evaluation at entry to every institution, as an essential vital sign.

MODULE 6 TABLE OF CONTENTS

A. DEFINITIONS
B. PLANNING FOR INMATE MOVEMENT
C. GENERAL TRANSPORTATION CONSIDERATIONS
D. MONITORING AND DOCUMENTATION DURING MOVEMENT OBSERVATION
E. STRATEGIES TO LIMIT SARS-COV-2 TRANSMISSION DURING INMATE MOVEMENT
F. INTAKE PROCEDURES
G. BOP INTRASYSTEM TRANSFERS (INMATE MOVEMENT FROM ONE BOP FACILITY TO ANOTHER BOP FACILITY) OR TRANSFER TO ANOTHER CORRECTIONAL JURISDICTION
H. TRANSFER OBSERVATION PERIOD
I. HOLDOVER SITES, BUS HUBS AND DETENTION CENTERS
J. FEDERAL TRANSFER CENTER, OKLAHOMA CITY (FTC)
K. MEDICAL TRANSFERS TO MRCs
L. MEDICAL APPOINTMENTS & HOSPITAL TRIPS
M. IN-PERSON COURT APPEARANCES
N. INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF INMATES
APPENDIX A. INMATE MOVEMENT TABLE
APPENDIX B. ROUTINE OBSERVATION PERIODS DURING MOVEMENT FOR FULLY VACCINATED ¹ INMATES24
APPENDIX C. ROUTINE OBSERVATION PERIODS DURING MOVEMENT FOR NOT FULLY VACCINATED ¹ INMATES 25
APPENDIX D. HOLDOVER AND DETENTION CENTER PROCEDURES
APPENDIX E. OKL - FEDERAL TRANSFER CENTER MOVEMENT PROCEDURES

A. DEFINITIONS

FULLY VACCINATED: Having completed a vaccination series: 2 weeks after their second dose in a 2-dose series (Pfizer or Moderna), or 2 weeks after a single-dose vaccine (Janssen) as authorized by the U.S. Food and Drug Administration.

HIGH-RISK UNIT: any unit with an inmate population that is deemed <u>high risk for severe COVID related</u> <u>illness</u> due to their age, medical diagnosis, physical layout of the dormitory, or other contributing factor.

MOVEMENT OBSERVATION: periods (formerly known as movement quarantine) implemented during movement as part of intake, transfer and/or release processes. Movement observation is not indicated after potential exposure to someone with COVID-19 and inmates in movement observation should **not** be housed with post-exposure quarantine or medical isolation cohorts. Inmates are housed separately from the rest of the facility's population to minimize transmission to or from other facilities and the community during movement.

- There are three types of routine movement observation periods at transfer, intake, and release. These are formerly known as transfer quarantine, intake quarantine and release quarantine respectively.
- These observation periods are not to be confused with "medical observation", which can only be authorized by a physician in rare circumstances in accordance with Patient Care Policy PS6031.04.
- Routine observation periods during inmate movement is affected by vaccination status, type of
 inmate movement, the inmate's destination and point of origin, and the operational level of the
 sending institution.

MEDICAL ISOLATION: Confining individuals with suspected (displaying symptoms) or confirmed (based on a positive POC or commercial laboratory test) COVID-19 infection, either to single rooms or by **COHORTING** them with other similarly infected patients.

Refer to the BOP Pandemic Plan Module 4. Inmate Isolation & Quarantine for additional guidance on COVID-19

MINIMAL TOLERABLE RISK: The principle of choosing the option that presents the lowest possible risk when ideal conditions cannot be upheld.

NEW INTAKES: Includes new commitments, voluntary surrenders, writ returns, and any inmate brought to a BOP facility by the U.S. Marshals Service including the Justice Prisoner and Alien Transportation System, U.S. Customs and Border Protection, or Immigration and Customs Enforcement. Inmates returning from day trips (e.g., hospital or court returns) *are not* new intakes.

NON-BOP LOCATION (OR NON-BOP INSTITUTION): Any institution outside of the 121 recognized BOP facilities; this includes all contract facilities.

NOT FULLY VACCINATED: No documentation of vaccination, partial vaccination (one out of two doses), or less than 14 days have passed following completion of the vaccine series as authorized by the U.S. Food and Drug Administration.

POC TEST: A SARS-CoV-2 rapid point of care viral test (e.g., Abbott ID NOW[™] COVID-19 PCR test, Abbott BinaxNOW[™] COVID-19 Ag card, or Quidel Quickvue COVID-19 Ag test).

QUARANTINE: The separation (in an individual room or cohorting in a unit) and monitoring of asymptomatic individuals following exposure or close contact with someone with suspected or confirmed COVID-19. UP-TO-DATE VACCINATION STATUS: Proper documentation of having completed a vaccination series and having received a booster according to current recommendations.

SS: COVID-19 symptom screen.

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B. PLANNING FOR INMATE MOVEMENT

Advanced and coordinated planning is required when transferring inmates to other BOP locations or other correctional jurisdictions, or when releasing inmates from BOP custody. Collaboration and coordination among departments, institutions, and regions is necessary to reduce the risk of SARS-CoV-2 exposure and transmission during inmate movement. Planning for inmate movement should be coordinated from the beginning with local Executive Staff, Case Management Coordinators (CMC), Unit Team, and Health Services staff—from all the institutions involved—in setting transfer dates and ensuring that all aspects of the transfer process are carried out efficiently. Coordination with other agencies (e.g., U.S. Marshals Service, Immigration and Customs Enforcement), as well as local or state health authorities, may also be necessary.

- Whenever possible, inmate move planning should occur enough in advance to accomplish the movement observation period, testing and/or screening procedures appropriate to the specific type of inmate movement.
- A ROUTINE TRANSFER OBSERVATION PERIOD may require approximately 5-10 days of advanced planning (sometimes more depending on lab results turn-around) and a BOP INTRASYSTEM TRANSFER requires up to 72 hours.
- PPE appropriate for each setting (testing, transportation, etc.) should be worn by staff in accordance with established procedures. (See MODULE 2.)

C. GENERAL TRANSPORTATION CONSIDERATIONS

Movement of inmates can be a simple, short-distance transfer—or a complex, multi-day, multiinstitution process. The risk of SARS-CoV-2 exposure and transmission increases as the complexity of the move increases.

Normal transport routes and schedules need to be reviewed and reconsidered during a pandemic, taking into consideration the current epidemiological context (e.g., infection and transmission rates). Inmate movement should be coordinated in a manner that considers the following:

- Even a BOP intrasystem transfer direct from one BOP facility to another is not without some degree
 of risk due to the characteristics and communicability of SARS-CoV-2.
- MOVEMENT VARIABLES that increase the risk of SARS-CoV-2 exposure and transmission should be avoided whenever possible, including: multiple stops, introduction of multiple staff, and mixing together of inmates from other BOP facilities or other correctional jurisdictions.

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 Minimize the amount of time inmates are held in HOLDOVER; the longer an inmate spends in transit, the greater the risk for exposure to the virus. The frequency of certain drop offs or pick-ups may need to be increased to minimize holdovers.

- To minimize risk of exposure and transmission, avoid mixing the following inmate groups at the institution and during movement as much as possible:
 - Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status and have completed the recommended transfer procedures or 2) up-to-date on their vaccines regardless of point of origin, or 3) not upto-date on their vaccines but completed the recommended intake procedures.
 - Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location, with unknown movement procedures. Inmates from non-BOP locations may not have completed a transfer observation, undergone testing, or symptom screening.
- An inmate who is currently in or meets the criteria for COVID-19 medical isolation (a current positive SARS-CoV-2 test or who has fever or symptoms of COVID-19) should NOT be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, completion of a sentence) and with coordination of appropriate medical precautions and care. During critical housing limitations, transfer of infected inmates may be necessary to assure the safety and wellness of staff and inmates; this should only be done in consultation with the Regional Medical Director and approval of the Medical Director.
- An inmate who is currently in or meets the criteria for placement in quarantine after an exposure, should NOT be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, court order, completion of a sentence).

D. MONITORING AND DOCUMENTATION DURING MOVEMENT OBSERVATION

- COVID-19 symptom screening is required at entry/exit to intake, transfer, release observation periods. Temperature checks are no longer routinely required.
- Daily COVID-19 symptom screens and temperature checks are NOT required routinely for inmates completing intake/release/transfer observation.
- Inmates completing movement observation periods will use a test-in/test-out strategy
 - Either POC testing (Abbott ID Now, BinaxNOW) or a commercial PCR lab may be used for testing into or out of quarantine.
 - On admission to and discharge from an observation period, inmates should have their symptoms and testing results documented in the medical record.
- It may be helpful to maintain a ROSTER of inmates who are completing movement observation
 periods, including cell assignment, date of placement in observation, projected end date of
 observation, date of placement in that specific cell, cell mate or members of the cohort, and
 designated facility.
- The BEMR Exit Summary/transfer paperwork should be provided to the bus LT/USMS to verify that
 required screening and testing have been completed.
- Documentation on the BEMR exit summary/transfer paperwork (e.g., In-Transit Form) needs to include:
 - For TRANSFERS OR RELEASES document the start and end dates of routine observation periods, SARS-CoV-2 test type, dates and results for both admission and discharge tests, and results of the symptom screen within 24 hours of transfer.

- For BOP INTRASYSTEM TRANSFERS document the SARS-CoV-2 test type, date and result within 72 hours of a BOP intrasystem transfer and results of the symptom screen within 24 hours of transfer.
- For inmates who have a history of COVID-19 illness and are recovered and ready to transfer: Exit summary and clinical notes should include the inmate's most recent COVID-19 history (e.g., date of symptom onset, date of initial positive SARS-CoV-2 test, date and criteria used for release from isolation, and any complications or sequelae from the illness).
- VACCINATION STATUS to include the manufacturer and date(s) of COVID-19 vaccine (if vaccinated) should be noted on all exit summaries.

E. STRATEGIES TO LIMIT SARS-COV-2 TRANSMISSION DURING INMATE MOVEMENT

The BOP uses multiple strategies for limiting transmission of SARS-CoV-2 during inmate movement, depending on the type of movement and the epidemiology of SARS-CoV-2 at the institution. Procedures for movement are designed to address the risk for transmission to the most vulnerable and in a variety of situations including new inmates arriving at a facility, outgoing inmates from a facility to different destinations, detainees and holdovers, as well as different origination sources of inmates (within the BOP and external to the BOP). The two **primary** movement procedures utilize either a 5-7-day test-in/test-out routine observation period or a combination of a POC test with symptom screen prior to departure as described below in more detail with each movement type.

- Refer to the <u>Appendices</u> at the end of this Module for a table and algorithms describing movement of fully vaccinated and not fully vaccinated inmates and movement procedures at detention centers, holdover sites, and the Federal Transfer Center.
- NOT FULLY VACCINATED INMATES undergo a routine observation period as a new intake to the BOP, when
 arriving at their designated facility, and when transferring or releasing to a community location (e.g.,
 home confinement, residential reentry center, or community release). A COVID-19 BOP intrasystem
 transfer procedure may be performed instead of a routine observation period when transferring
 from an institution at operational level 1 to another BOP facility or correctional jurisdiction or when
 they are in holdover status en route to another BOP facility.
- FULLY-VACCINATED INMATES ordinarily do not need a routine observation period as new intakes, prior to transfer to another BOP facility or correctional jurisdiction, or when transferring or releasing to a community location (e.g., home confinement, residential reentry center, or community release). There may be other situations in which it is appropriate for fully vaccinated inmates to undergo a routine observation period, especially in the context of active transmission and exposures during movement. The decision for a fully-vaccinated inmate to undergo a routine observation period is recommended in consultation with Regional Health Services staff.

F. INTAKE PROCEDURES

PRIOR TO ENTERING THE INSTITUTION, OR IN R&D: All new intakes to an institution, including voluntary surrenders, BOP intrasystem transfers, or arrivals from outside the BOP system, will be screened by medical staff for SARS-CoV-2—including a COVID-19 symptom screen, a temperature check, and an approved viral test (either a POC or a commercial lab PCR test).

Inmates who arrive symptomatic AND/OR test positive will be placed in MEDICAL ISOLATION regardless
of COVID-19 vaccination status.

- Not fully vaccinated inmates who arrive asymptomatic AND test negative will undergo a routine intake observation period.
 - If inmates become symptomatic during this period, they should be re-tested (POC or commercial test) and placed in MEDICAL ISOLATION immediately.
 - If inmates remain asymptomatic, they will complete the INTAKE OBSERVATION PERIOD for at least 5 days. They are then tested out of the routine observation period with a POC test or commercial PCR test at 5 days or later. If the test is negative, the inmate can be released to the general population. If the test is positive, they will be placed in MEDICAL ISOLATION immediately.
- An exception to a routine 5-day observation period is recommended for inmates who are not fully vaccinated and are entering a high-risk unit (dorm style, dialysis, dementia units, etc); these inmates should continue to complete a 10-day routine observation period if feasible.
- Fully vaccinated inmates will be screened by medical staff for SARS-CoV-2—including a COVID-19 SSTC and an approved viral test for SARS-CoV-2 as new intakes, but do not require a routine intake observation period.
- → Refer to Section I for Holdover Sites, Bus hubs and Detention Centers movement procedures
- → Refer to <u>Section J</u> for OKL movement procedures.

G. BOP INTRASYSTEM TRANSFERS (INMATE MOVEMENT FROM ONE BOP FACILITY TO ANOTHER BOP FACILITY) OR TRANSFER TO ANOTHER CORRECTIONAL JURISDICTION

When inmates move from one BOP facility to another BOP facility, procedures are dependent on inmate vaccination status and institution operational level. Institutions should refer to the <u>COVID-19 Modified</u> <u>Operations Matrix</u> and the <u>appendices</u> at the end of this document for transfer procedures of fully vaccinated and not fully vaccinated inmates.

Fully vaccinated inmates

Fully vaccinated inmates ordinarily do not need to undergo a routine transfer observation prior to BOP intrasystem transfer or transfer to another correctional jurisdiction.

- > Operational Level 1 at sending institution: SS within 24 hours prior to transfer
- Operational Level 2 or 3 at sending institution: POC test within 72 hours and a SS within 24 hours prior to transfer.
- Refer to <u>Section I</u> for Holdover Sites, Bus hubs and Detention Centers movement procedures
- Refer to <u>Section J</u> for OKL movement procedures.
- Not fully vaccinated inmates:
 - Operational Level 1 at sending institution: POC test within 72 hours and a SS within 24 hours prior to transfer.
 - Operational Level 2 or 3 at sending institution: Require transfer observation period.
 - DO NOT TRANSFER ANY inmate who has been exposed to COVID-19; instead, place in QUARANTINE.
- Inmates with a history of COVID-19 diagnosed within the past 90 days do not routinely need a SARS-CoV-2 test or routine transfer observation period prior to transfer.

- DO NOT TRANSFER inmates who are symptomatic and/or test positive; instead, place in MEDICAL ISOLATION.
- All not fully vaccinated BOP intrasystem transfers should undergo a routine intake observation period when they arrive at their designated facility (refer to <u>Section H</u>).
- A symptom screen, temperature check, and a viral test is performed on all inmates when they arrive at their designated facility regardless of vaccination status.
- For this procedure to be effective, institutions will ensure that other aspects of the BOP COVID-19 Pandemic Plan are implemented, including but not limited to broad-based inmate testing strategies, exposure quarantine, and medical isolation.

H. TRANSFER OBSERVATION PERIOD

- Whenever possible, several days of advance planning is recommended to allow sufficient time to complete the ROUTINE TRANSFER OBSERVATION PERIOD.
- TRANSFER OBSERVATION will be used for 1) not fully vaccinated inmates transferring out of the BOP to community locations (e.g., full term release, residential reentry center, or home confinement); or 2) not fully vaccinated inmates transferring to another BOP facility or to other correctional jurisdictions, dependent on COVID-19 operational level of the sending institution.
- TRANSFER OBSERVATION is not routinely required for fully vaccinated inmates moving to other BOP facilities, correctional jurisdictions, or community locations (e.g., full term release, residential reentry center, or home confinement).
- Routine observation periods, quarantine or medical isolation, should NOT be interrupted for transfers unless absolutely necessary (e.g. court order, immediate release).
- Situations in which an inmate becomes symptomatic or tests positive for COVID-19 just prior to immediate release or completion of their sentence will be referred to the Regional Medical Director for guidance on plans for release.
- Refer to MODULES 3 AND 4 for additional information regarding medical isolation and quarantine procedures.

All inmates meeting criteria for ROUTINE TRANSFER OBSERVATION PERIODS will be managed in one of the following three categories, which are discussed below:

- 1. Inmates with no prior history of COVID-19 who are not fully vaccinated.
- Inmates previously diagnosed with COVID-19 who have since recovered and have met the current criteria for release from medical isolation (see MODULE 4).
- Immediate releases.
- Consultation with the Regional Medical Director, Regional Health Services Administrator, and Regional Infection Prevention Consultant is recommended for management of inmates who are not in one of these three categories.

TRANSFER OR RELEASE OF INMATES WITH NO PRIOR HISTORY OF COVID-19 WHO ARE NOT FULLY VACCINATED

Prior to transfer, these inmates will undergo a POC or commercial lab PCR test and enter TRANSFER OBSERVATION. These inmates should be housed separately from inmates in QUARANTINE OR IN INTAKE OBSERVATION. See MODULES 3 AND 4 for additional information regarding medical isolation and quarantine procedures

- Inmates will remain in transfer observation for a minimum of 5 days. They may be tested out of
 observation on day 5 with a POC test or commercial PCR lab test
 - If any inmate completing a transfer observation tests positive, the routine transfer observation period must be restarted for all other inmates in that cohort.
- Movement is preferred within five days of receiving the negative SARS-CoV-2 test result, regardless
 of the mode of travel (by ground or air). When this 5-day window for movement cannot be achieved,
 the time frame for movement may be expanded to within 14 days of receiving the negative SARSCoV-2 test result, as long as the observation conditions are maintained for the entire time.
 - A symptom screen needs to be performed within 24 hours prior to departure from the facility, including transferring to an RRC, home confinement, a full term or immediate release, other BOP to BOP transfers, and BOP to other correction jurisdiction transfers.
 - Documentation of the symptom screen, temperature, and entry and exit date test results must be included in the exit summary/transfer paperwork. (See <u>Documentation</u> above.)
 - Inmate movement that needs to occur more than 14 days after receipt of a negative test result should be discussed with regional health services staff.

2. TRANSFER OR RELEASE OF INMATES WITH A HISTORY OF COVID-19 INFECTION

- WITHIN 90 DAYS OF INITIAL SYMPTOM-ONSET OR POSITIVE TEST: Inmates with a history of SARS-CoV-2 infection within the last 90 days who have met criteria for release from medical isolation do not need to be placed in a TRANSFER OBSERVATION and should not be tested.
- MORE THAN 90 DAYS SINCE INITIAL SYMPTOM-ONSET OR POSITIVE TEST: Inmates who have met criteria for release from medical isolation and are more than 90 days from their initial symptom onset or initial positive SARS-CoV-2 test are managed as inmates who have not had COVID-19 (see #1 above).
- INMATES NOT CLEARED FROM MEDICAL ISOLATION: Inmates with COVID-19 currently in medical isolation should not be released or transferred unless absolutely necessary (e.g., immediate release, completion of sentence). Special precautions and coordination with the Regional Medical Director are necessary for such cases, including use of appropriate PPE, source control, and notification of appropriate civilian health authorities or the receiving correctional jurisdictions.
- For the above scenarios, institutions will complete the <u>Documentation</u> requirements outlined above. Notification should be made to the receiving facility, jurisdiction, or local health authorities of the transfer.

3. IMMEDIATE RELEASES

The following actions should be taken when an inmate being released cannot be managed as described above under #1 or #2 because of statutory or judicial requirements.

- A symptom screen and rapid POC test should be performed on the day of departure and documented in the electronic health record, exit summary, and/or transfer paperwork. (See <u>Documentation</u> above.)
- The local health authorities in the receiving locality should be notified, and the travel arrangements coordinated with them, if necessary (e.g., if exposure quarantine or isolation conditions are required during transportation or upon their arrival).
- The inmate should wear a face covering when departing the facility and while en route to their destination.
- Due to the ongoing changes to guidelines for home confinement, readers are referred to the most recent guidance from Reentry Services Division regarding transfer to home confinement.

I. HOLDOVER SITES, BUS HUBS AND DETENTION CENTERS

Holdover sites, bus hubs, and detention centers are critical to continuing expeditious movement throughout the BOP system; however, due to their nature of frequent intakes and transfers, they require special consideration to prevent the spread of COVID-19. This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs. not fully vaccinated).

- Characteristics of each institution (e.g. types and amount of available housing) and the amount of
 infection occurring at the facility or during the movement require some flexibility in how new
 detainees, pre-trial, pre-sentence, and holdover inmates are managed. Critical staffing shortages and
 housing limitations might affect how cohorts are separated. Institutions, in consultation with
 Regional Health Services, should be making decisions to uphold the MINIMAL TOLERABLE RISK standard.
 Refer to Section M for infection control guidance for transportation of Holdover site, Bus Hub or
 Detention Center inmates.
 - Refer to the <u>Appendices</u> at the end of this Module for the Holdover and Detention Center Movement Procedures Algorithm
 - Inmates designated to holdover sites, bus hubs and detention centers are managed using the procedures described in <u>Section F. Intake Procedures</u>.
- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status and have completed the recommended transfer procedure, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a non-BOP location after completing intake observation.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully
 vaccinated and coming from a non-BOP location who have not completed transfer observation,
 testing, or symptom screening.
- To minimize risk of exposure and transmission, keeping the above two groups separated at the institution and during movement is recommended to the extent possible.

- HOLDOVER AREAS: Holdover sites and bus hubs should designate specific holdover areas for cohorting
 of inmates in advance, in numbers commensurate with anticipated levels and frequency of
 incoming inmates. Smaller cohorts may be housed together within these holdover areas (e.g., 10
 inmates in five 2-person cells) and moved to recreation, food services, showers, etc. without
 mixing with other cohorts.
- ON ARRIVAL TO THE HOLDOVER SITE, all inmates being placed in holdover status will have a symptom screen and temperature check.
 - Not fully vaccinated inmates coming from a non-BOP location will undergo INTAKE OBSERVATION prior to transfer or release into the general population.

HOLDOVERS FROM BOP INSTITUTIONS, FULLY-VACCINATED INMATES FROM NON-BOP LOCATIONS, INMATES WHO HAVE COMPLETED INTAKE OBSERVATION

Inmates from BOP facilities who are fully vaccinated, have completed intake observation at the holdover site, or are fully vaccinated inmates from non-BOP facilities ordinarily do NOT need to complete TRANSFER OBSERVATION) prior to moving on to their next destination. Routine observation periods may be appropriate for fully vaccinated inmates in the context of active viral transmission during inmate movement. Such decisions should be made in consultation with Regional Health Services staff.

- OVERNIGHT REBOARDS (< 24 HOURS): POC tests, symptom screen and temperature check are NOT required for movement.
- INMATES IN HOLDOVER STATUS 24 TO < 72 HOURS: perform a symptom screen within 24 hours of transfer. POC testing is not required.
- INMATES IN HOLDOVER STATUS 72 HOURS OR MORE: perform a POC test within 72 hours and a SS within 24 hours of transfer.
- PROLONGED HOLDOVERS BEING CONSIDERED FOR GENERAL POPULATION HOUSING: Not fully vaccinated inmates
 who are expected to be housed at a holdover site, bus hub, or detention center for a prolonged
 period of time (> 5 days) may complete INTAKE OBSERVATION and be moved to the general population,
 when appropriate and in accordance with established institution procedures upon meeting criteria
 for release from routine observation.
 - After relocation to the general population and, prior to transferring to another BOP facility, inmates should undergo the transfer procedure appropriate for their vaccination status, type of transfer and operational level.
- Different procedures are utilized by OKL for management of BOP intrasystem transfers (refer to Section J).
- On arrival to their designated facility, all not fully vaccinated inmates must complete INTAKE OBSERVATION.

HOLDOVERS FOR NOT FULLY-VACCINATED INMATES FROM NON-BOP INSTITUTIONS

Holdover inmates from non-BOP facilities, and who are not fully vaccinated will undergo the following procedures:

- Undergo symptom screening, temperature check, and POC test on arrival to the institution
- Complete a 7-day stay minimum at the institution
- Undergo POC/PCR testing within 48 hours of expected departure, and symptom screen within 24 hours of departure.
- Holdover inmates who stay at the institution beyond the 7-day minimum, may transfer anytime by undergoing a POC/PCR test within 72 hours of departure and a symptom screen within 24 hours of departure.
- Not fully vaccinated inmates from a non-BOP institution should NOT be mixed with other holdover groups until after completing intake observation.
- If a NOT FULLY VACCINATED INMATE FROM A NON-BOP INSTITUTION completes a 7-day test-in/test-out INTAKE OBSERVATION at the holdover site or detention facility, they are eligible to release to general population or transfer using the BOP holdover or intrasystem transfer procedure, as applicable.
 - If the holdover site or detention facility is at Operational Level 1 (Green), observation periods can be decreased to 5 days.
- On arrival to their designated facility, all not fully vaccinated inmates must complete INTAKE OBSERVATION.

MIXED GROUPS

If a holdover site, bus hub, or detention center receives a **mixed group of not fully vaccinated** inmates from both BOP and non-BOP institutions, they must ALL be managed as a **NOT FULLY VACCINATED INMATES FROM A NON-BOP LOCATION** at the holdover site—with SS and POC testing on arrival, 7-day stay minimum at the institution, and POC/PCR test out within 48 hours of transfer and SS within 24 hours of departure as described above.

J. FEDERAL TRANSFER CENTER, OKLAHOMA CITY (FTC)

The Federal Transfer Center is the nexus of BOP movement operations, and thus requires special consideration of transfer procedures to ensure that vital movement occurs as safely as possible. This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs not fully vaccinated).

- Refer to the <u>Appendices</u> at the end of this document for the OKL Federal Transfer Center Movement Procedures Algorithm
- ➔ Refer to Section M for infection control guidance for transportation of FTC inmates.
- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status and have completed the recommended transfer procedure, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a non-BOP location after completing intake observation.

- Inmates considered to be at higher risk for exposure and transmission are those who are not fully
 vaccinated and coming from a non-BOP location who have not completed transfer observation,
 testing, or symptom screening.
- To minimize risk of exposure and transmission, keeping the above groups separated at the institution and during movement is recommended to the extent possible.
- BOP inmates are symptom screened, temperature checked, and POC tested on arrival. Once cleared (i.e., all findings are negative), they are placed in "move-ready" units organized into smaller cohorts within the housing units and do not mix with other cohorts.
- Inmates arriving from non-BOP locations who are fully vaccinated are symptom screened, temperature checked, and POC tested. If all findings are negative, they may be housed in "moveready" units. When deemed necessary and appropriate, the FTC may also house these holdovers with the not fully vaccinated inmates from non-BOP locations described below if there are housing limitations.
- Inmates arriving from non-BOP locations who are not fully vaccinated are transported from various non-BOP correctional facilities to the FTC. They are housed separately from the "move-ready" groups and organized into smaller cohorts within the housing units. Ideally, they do not mix with other cohorts in the same housing unit.
 - Holdover inmates who have completed a 7-day intake observation at the FTC or have become fully vaccinated while at the FTC may be moved to "move-ready" units.
 - > If the FTC is at Operational Level 1 (Green), observation periods can be decreased to 5 days.
- On a case-by-case basis in consultation with Regional Health Services staff, alternative housing strategies may be utilized to adapt to the changing demands of inmate movement.
- Inmates who arrive designated to the FTC will follow procedures in <u>Section F.</u>

INTAKE PROCEDURES FOR HOLDOVERS ARRIVING FROM NON-BOP LOCATIONS

- All inmate holdovers arriving from non-BOP locations are symptom screened, temperature checked and POC tested upon arrival.
- Fully vaccinated inmates who screen and test negative may be housed in a "move-ready" unit or in a "non-BOP" unit depending on housing capacity and the level of COVID-19 transmission.
- Not fully vaccinated inmates who screen and test negative are housed in a "non-BOP" unit. These
 holdovers may be moved to "move-ready" units if they become fully vaccinated while at OKL or have
 completed INTAKE OBSERVATION.
- All inmate holdovers arriving from non-BOP locations who are not fully vaccinated will be kept at OKL for a minimum of 7 days.
 - > If OKL is at Operational Level 1 (Green), observation periods can be decreased to 5 days.
- Unvaccinated inmates will be offered vaccination with the COVID-19 vaccine.

OUTGOING MOVEMENT PROCEDURES

- BOP inmates or inmates who are fully vaccinated will be symptom screened within 24 hours prior to departure.
- Inmates who arrived from non-BOP locations, are not fully vaccinated, and have not completed a INTAKE OBSERVATION will have a POC viral test within 48 hours prior to departure (as close to the time of departure as is feasible) and symptom screening within 24 hours prior to departure.

K. MEDICAL TRANSFERS TO MRCs

A longer Intake Observation is recommended for inmates entering high-risk units to limit SARS-CoV-2 transmission to vulnerable populations.

- Fully vaccinated inmates should follow the intrasystem transfer procedures at the sending
 institution as appropriate for their vaccination status and the institution operational level.
- Not fully vaccinated inmates should undergo the transfer procedure appropriate for their type of transfer, vaccination status, and the operational level of the institution. Note that an exception to a routine 5-day observation period is recommended for inmates who are not fully vaccinated and are entering a high-risk unit (dorm style, dialysis, dementia units, etc); these inmates should continue to complete a test-in/test-out 10-day intake observation period if feasible.

Emergency Designations

Upon receipt of an emergency designation approval by the Office of Medical Designations and Transport (OMDT) at the sending facility, the inmate must complete the transfer procedure appropriate for their vaccination status and the operational level of the institution.

- IF TEST-IN IS POSITIVE: The patient should be placed in MEDICAL ISOLATION. The sending institution and the receiving MRC should discuss the specifics of the case and determine the most appropriate course of action regarding transfer, including acuity of the patient's medical condition and appropriateness of transfer in light of the patient's COVID-19 status. However, there may be rare instances where the nature and acuity of the patient's medical condition necessitates a more expeditious transfer. These cases should be discussed among the sending institution, the receiving MRC, and the Chief of Health Programs.
- IF TEST-IN IS NEGATIVE: The patient will complete TRANSFER OBSERVATION as specified above under <u>Transfer or Release of Inmates with No Prior History of COVID-19</u>. See also <u>Other Considerations for</u> <u>Medical Transfers</u> below.

Routine Urgent Designations

Since **ROUTINE URGENT** designations may take a longer period from the date of designation approval to the actual transfer date, designated patients may generally await transfer in their current housing unit.

When the date of transfer has been provided by the MRC, the patient should undergo the transfer
procedure appropriate for their type of transfer, vaccination status and the operational level at the
institution.

Other Considerations for Medical Transfers

HOSPITALIZED PATIENTS AND THOSE IN LTC: There are times when the patient awaiting transfer is being
managed at an outside hospital or long-term care facility (LTC) and transfer observation within the
BOP institution prior to transfer is not possible. In these circumstances, the patient may be
transferred without TRANSFER OBSERVATION. If the patient is actively infected with COVID-19, proper
PPE will be needed during transfer.

- SPECIALIZED NEEDS: In some instances, due to the medical condition and/or needs of the patient, placement completing transfer observation may pose a challenge (e.g., need for assistance with ADLs, wound care). Unique solutions may need to be developed to appropriately accommodate the patient's needs. Considerations may include: temporary placement at an LTC facility, housing patient in transfer observation with other transfer observation group inmate(s) that may assist with minor needs, or a designated inmate companion who is healthy and whose vaccines are up-to-date.
- In the case of a DESIGNATED INMATE COMPANION, the companion will need to test negative immediately
 prior to the start of TRANSFER OBSERVATION with either a POC or a commercial lab test. The companion
 will house with the patient for the duration of the observation period until the patient leaves the
 institution. Since the companion is not expected to be transferred, they will not need to undergo the
 symptom screening process or a SARS-CoV-2 test at the end of the observation period to return to
 general population.
 - However, if the patient whom the companion is assisting or housing with becomes symptomatic or tests positive, the companion is considered a CLOSE CONTACT and must test-in/test-out of QUARANTINE.

L. MEDICAL APPOINTMENTS & HOSPITAL TRIPS

An important area of consideration is the risk of exposure to COVID-19, as well as other concerns, posed by medical trips to the community. Institutions with high facility or community transmission rates, and/or low vaccination acceptance levels (Operational Level 2 and 3 operations), should consider postponing or rescheduling non-urgent consultations or procedures according to guidance in MODULE 7. NON-COVID-19 ROUTINE & DENTAL SERVICES.

- Regardless of vaccination status, all patients should undergo SS and POC testing prior to scheduled appointments
- If time allows, a SS and POC testing should be completed immediately prior to emergency trips while awaiting the arrival of EMS staff.
- When medical appointments and/or hospitalizations are medically necessary despite the risk of exposure to COVID-19, SS and POC testing should fall into the following categories (Refer to <u>Appendix</u> <u>A. Inmate Movement Table</u>)
 - Patient is FULLY VACCINATED and has a medical appointment or trip to the emergency room but returns to the institution in less than 24-hours: the patient will undergo standard intake procedures upon return to the institution.
 - Patient is FULLY VACCINATED and returns to the institution after 24 hours: the patient should undergo SS and POC testing upon arrival in addition to following usual standard intake procedures.
 - Patient is NOT FULLY VACCINATED and has an appointment or trip to the emergency room but returns to the institution in less than 24-hours: the patient will undergo SS in addition to following usual standard procedures upon return to the institution. Patient should be offered the COVID-19 vaccine.
 - Patient is NOT FULLY VACCINATED and returns to the institution after 24 hours: the patient should undergo SSTC and a full test-in/test-out 5-day intake observation period. Patient should be offered the COVID-19 vaccine.

M. IN-PERSON COURT APPEARANCES

Court appearances are important aspects of the U.S. criminal justice system but create potential risks for SARS-CoV-2 transmission from close interactions that may occur. A number of variables affect the risk of COVID-19 transmission during in-person court appearances and will determine some of the specific management strategies that are needed at each location.

- The U.S. Marshals Service (USMS) takes responsibility for the inmate from the time they leave the BOP institution until their return. Each USMS district may have their own procedures. Individual courts may also have different COVID-19 prevention/mitigation procedures and requirements. Knowing the risk or likelihood of mixing with non-BOP inmates and other court personnel with unknown exposure and vaccination status while BOP inmates are with the USMS and the courts is essential to determining their risk of COVID-19 exposure.
- The frequency of an inmate's court appearances and the number of inmates going to a court at any
 one time are also important factors to consider.
- It is recommended that each BOP facility contact the USMS and the court to ascertain their COVID-19 mitigation procedures and consult with Regional Health Services staff on developing an individualized strategy. The following are general principles to follow:
 - BOP officials will request that BOP inmates be cohorted only with their own housing or routine observation period cohort and not be mixed or transported with inmates from other housing units or institutions. Regardless of vaccination status, SS is required within 24 hours prior to each court appearance.
- Prior to each court appearance, a POC test is also required within 72 hours for fully vaccinated inmates at operational level 2 or 3 institutions and for all not fully vaccinated inmates.
- Upon return to the institution or detention center, inmates without known exposure to SARS-CoV-2 do not require immediate testing or routine observation periods. The following procedures are recommended:
 - All inmates who return the same day (less than 24-hour) from a court appearance will undergo SS in addition to the usual return procedures.
 - Inmates who return from a court appearance after more than 24 hours have elapsed will undergo a routine observation period prior to release into general population if not fully vaccinated.
- All inmates who have daily trips to court, should be housed separately from general population inmates and/or in a cohort, and in addition to daily SS, undergo weekly POC/PCR testing. If the inmate is not fully vaccinated, a routine observation period is needed prior to release into general population.
- Inmates in "holdover" status may be going to court on a weekly, monthly basis or unpredictable frequency; they should be housed separately from inmates who have completed an intake observation period.
- Inmates in "holdover" status, who are expected to remain at the institution for a prolonged period and are done with their court case will need to complete an intake observation prior to being released to general population.
- Do not mix not fully vaccinated inmates with General Population inmates, unless they have undergone intake observation.

- Testing an inmate immediately after a one-day court appearance would have little utility and is not recommended. However, a POC test can be used before a court appearance on a case-by-case basis, especially if the test is required by the court.
- Inmates in COVID MEDICAL ISOLATION OR QUARANTINE should not have in-person court appearances unless absolutely necessary. Having the inmate appear via telephone hearing should be strongly considered. A video teleconference (VTC), if accessible, can also be used as an alternative.
- Inmates should wear face coverings (surgical mask preferred) and perform hand hygiene just before
 departure and upon return to the institution.

N. INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF INMATES

See MODULE 2 for more details on the use of PPE. See MODULE 1 for more information about hand hygiene, social distancing, and cleaning and disinfection.

The following PPE is required for inmates who are fully vaccinated or have completed TRANSFER OBSERVATION:

- INMATES: Face coverings
- STAFF: Face coverings and gloves

The following PPE is required for movement of not fully vaccinated BOP or non-BOP groups who have not completed TRANSFER OBSERVATION but have been POC tested and symptom screened (i.e. a BOP INTRASYSTEM TRANSFER PROCEDURE).

- INMATES: Surgical mask
- STAFF: Surgical mask, face shield or goggles, and gloves

The below guidance should be implemented for the safe transportation of the following groups:

- Inmates with signs and symptoms of respiratory illness or a positive SARS-CoV-2 test where movement is necessary prior to clearance from medical isolation.
- Not fully vaccinated groups of inmates, where infection has not been ruled out (i.e. has not completed TRANSFER OBSERVATION OR BOP INTRASYSTEM TRANSFER PROCEDURE)
- VEHICLE SET-UP PRIOR TO TRANSPORT
 - Place vehicle indoor fan on FRESH AIR ONLY, and NOT re-circulation mode.
 - > Set fan to HIGH.
 - > Driver side-window should be rolled down to the lowest position possible
 - Rear and side windows on both sides of the vehicle should be propped opened (weather permitting).
 - When the vehicle being used is a bus: Open the hatch on the ceiling of the vehicle.
- INMATE ACTIVITY PRIOR TO BOARDING THE VEHICLE:
 - > The inmate is given a direct order to:
 - Place surgical mask on their face and then,
 - Perform hand hygiene by washing hands or sanitizing with an institution-approved hand sanitize solution

PPE FOR DRIVER AND OFFICER

- All staff must wear an N95 or equivalent
- When performing any action within close proximity to the inmate (e.g., putting on or removing restraints), eye protection, gloves, and gown, along with N95 or its equivalent, must be worn.
 - Once the inmate is placed into the vehicle, gloves and gown should be removed outside of the vehicle and discarded into a trash bag and hand hygiene performed.
 - Officer in contact with inmate(s) puts on new gown and gloves before helping inmates disembark from vehicle.
- INMATES BOARDING THE VEHICLE
 - > Fill bus starting from the back to maximize distance of the nearest inmate from the driver.
- AFTER THE END OF TRANSPORT
 - > Introduce fresh air into the vehicle for one hour by opening all doors and windows on the vehicle
 - While wearing all required PPE mentioned above, the vehicle should be cleaned and sanitized using the institution's approved hospital grade disinfectant (EPA Schedule N)

INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF FTC, HOLDOVER AND DETENTION CENTER INMATES

This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs not fully vaccinated).

- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status and have completed the recommended transfer procedure, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a non-BOP location after completing intake observation.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location who have not completed transfer observation, testing, or symptom screening.
- To minimize risk of exposure and transmission, keeping the above two groups separated at the institution and during movement is recommended to the extent possible.
- While being processed for outgoing movement, the two groups will be kept separate to the extent
 possible. Any instances in which BOP and fully vaccinated inmates are in close proximity to non-BOP
 not fully vaccinated inmates should be minimal based on the limitations of holding cells in the R&D
 area and the specialized needs of the inmates (e.g., max custody, designated to FLM ADX, SMU,
 residential units).
- Inmates moving from the FTC will be issued surgical masks without metal nose pieces (donned in R&D) to wear underneath a cloth face cover (double masking) and worn until their intake at the gaining facility, at which time they would resume wearing their preferred approved face cover.

- Outgoing flights and buses may include BOP and fully vaccinated inmates and non-BOP not fully
 vaccinated inmates as required by the movement. To the extent possible, these groups will be kept
 separate or physically distanced from each other. Inmates will board the JPATS flight or bus by group,
 with the non-BOP not fully vaccinated inmate section of the bus toward the rear part of the bus. Each
 group will be seated in separate sections of the plane or bus and each section will be separated by
 enough empty rows to account for 6 feet.
- The following PPE is required for movement of inmates who are not fully vaccinated and have not completed TRANSFER OBSERVATION but have been POC tested and symptom screened.
 - INMATES: Surgical masks
 - STAFF: Surgical mask, face shield or goggles, and gloves

APPENDIX A. INMATE MOVEMENT TABLE

Fully Vaccinated	Not Fully Vaccinated
 SSTC and POC testing at intake No intake observation period required If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. 	 SSTC at intake Complete intake observation (5-day test- in/test-out) Offer COVID-19 vaccine
 Standard R&D procedures Transferring from Level 1 Institution: SS within 24 hours of transfer Transferring from Level 2 or 3 Institution: POC test within 72 hours and SS within 24 hours of transfer No transfer observation period required Send vaccination documentation as appropriate 	 Transferring from Level 1 Institution: POC test within 72 hours of transfer, and SS within 24 hours of transfer Transferring from Level 2 or 3 Institution: Complete SS and transfer observation (5-day test-in/test-out) Offer COVID-19 vaccine
 SSTC and POC test at intake No intake observation required If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. 	 SSTC at intake Complete intake observation (5-day test-in/test-out) Offer COVID-19 vaccine
 Standard R&D procedures No transfer observation required SS within 24 hours of transfer POC test within 72 hours of transfer Send vaccination documentation as appropriate 	 Complete transfer observation (5-day test in/test-out) Offer COVID-19 vaccine
 Standard R&D procedures No release observation required SS within 24 hours of release POC test within 72 hours of release Send vaccination documentation as appropriate 	 Complete release observation (5-day test- in/test-out) SS within 24 hours of release Offer COVID-19 vaccine
1	appropriate
	 SSTC and POC testing at intake No intake observation period required If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. Standard R&D procedures Transferring from Level 1 Institution: SS within 24 hours of transfer Transferring from Level 2 or 3 Institution: POC test within 72 hours and SS within 24 hours of transfer No transfer observation period required Send vaccination documentation as appropriate SSTC and POC test at intake No intake observation required If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. Standard R&D procedures No transfer observation required SS within 24 hours of transfer POC test within 72 hours of transfer So transfer observation required Standard R&D procedures No transfer observation required SS within 24 hours of transfer POC test within 72 hours of transfer Send vaccination documentation as appropriate Standard R&D procedures No release observation required SS within 24 hours of release POC test within 72 hours of release POC test within 72 hours of release

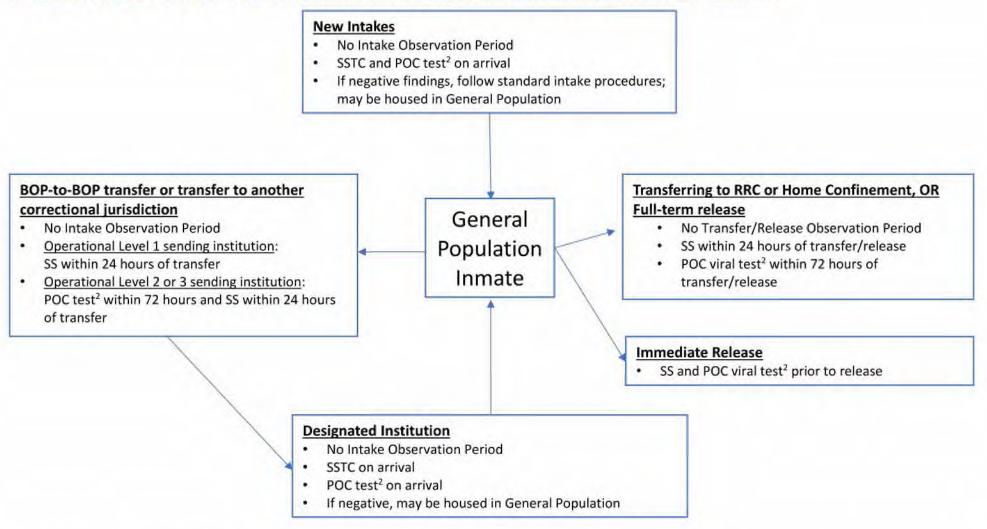
Movement Type	Fully Vaccinated	Not Fully Vaccinated
 Detention Centers and Holdover Facilities is important to distinguish between the following: Inmates from BOP facilities or fully vaccinated inmates from non-BOP facilities Inmates in this category should follow the guidance in the fully vaccinated column. Inmates from other agencies, correctional jurisdictions, contract and private correctional facilities, or voluntary surrenders and who are not fully vaccinated. Inmates in this category should follow the guidance in the not fully vaccinated column. Ordinarily, these two groups are not mixed at the institution; follow the Infection Control Guidance for Transportation in Section M for outgoing bus/JPATS flights. Institutions with limited housing availability may opt to manage their cohorts based on the minimal tolerable risk.¹ Inmates arriving as designated to these facilities are managed as new intakes not holdovers. 	 <u>Arriving from a BOP institution</u> SSTC and POC test on arrival House in holdover unit 	 Arriving from a BOP institution SSTC and POC test on arrival House in holdover unit Arriving from a non-BOP facility SSTC and POC testing on arrival. 7-day intake observation at the institution Offer COVID-19 vaccine POC/PCR test out w/in 48 hrs of departure If all negative, may transfer out of institution after SS w/in 24 hrs of departure. Holdover inmates who end-up staying beyond the 7-day observation period, may transfer with a POC test within 72 hours and a SS within 24 hours prior to departure. ** If the Holdover/Detention Center is at Operational Level 1 (Green), routine observation periods can be decreased to 5 days. Refer to Section 1 and Appendix D for Holdover Sites, Bus hubs and Detention Centers movemen procedures

Movement Type	Fully Vaccinated	Not Fully Vaccinated
 Federal Transfer Center (FTC / OKL) The FTC houses inmates based on their point of origin (BOP vs. non-BOP institution) and on their vaccination status. When transferring out: Only a SS is required for inmates in a "moveready" unit. For those in a "non-BOP" unit, a POC test is required within 48 hours and a SS within 24 hours prior to departure. Inmates from "move-ready" and "non-BOP" housing units may travel "together but separated" (i.e., they may travel on the same bus or plane but are seated in different areas with each group separated from the other by six feet)		 From a BOP institution SSTC and POC test on arrival House in "move-ready" unit From a non-BOP institution SSTC and POC test on arrival House in "non-BOP" unit a minimum of 7 days ** (If the Federal Transfer Center is at Operationa Level 1 (Green), routine observation periods can be decreased to 5 days).
Medical Appointments & Hospital Trips	 Prior to appointment: SS and POC test <u>Returns after same day/ less than 24-hour trips</u> Follow usual return procedures <u>Returns after trips > 24 hours</u> SS and POC test in addition to following usual return procedures 	 <u>Prior to appointment:</u> SS and POC test <u>Returns after same day/ less than 24-hours</u> SS in addition to following usual return procedures <u>Returns after trips > 24 hours</u> Routine observation period (5-day test in/test out) Offer COVID-19 vaccine
 Court Appearances (continued on next page) CDC Guidance states the following in relation to court appearances: Test incarcerated/detained persons leaving the facility as close to the day of visit as possible (no more than 3 days prior). Each court may have additional or different procedural requirements. 	 Level 1 Institution: SS within 24 hours prior to each court appearance Level 2 or 3 Institution: POC test w/in 72 hours and SS w/in 24 hours prior to each court appearance Follow usual return / R&D procedures 	 <u>Prior to court appearance:</u> SS and POC test <u>Returns after same day/ less than 24-hours</u> SS in addition to following usual return procedures

COVID-19 Pandemic Response Plan May 18, 2022, version 10.0

Movement Type	Fully Vaccinated	Not Fully Vaccinated
Court Appearances (continued)	Follow-up SS and POC testing once a week for two weeks after the most recent court appearance	 <u>Returns after trips > 24 hours</u> Routine observation period (5-day test in/test out) Inmates who have daily trips to court, should be housed separately from general population inmates, and undergo weekly POC/PCR testing Routine observation period (5-day test in/test out) is needed prior to release into general population
	Inmate Movement Table Page 4 of 4	Offer COVID-19 vaccine

APPENDIX B. ROUTINE OBSERVATION PERIODS DURING MOVEMENT FOR FULLY VACCINATED¹ INMATES

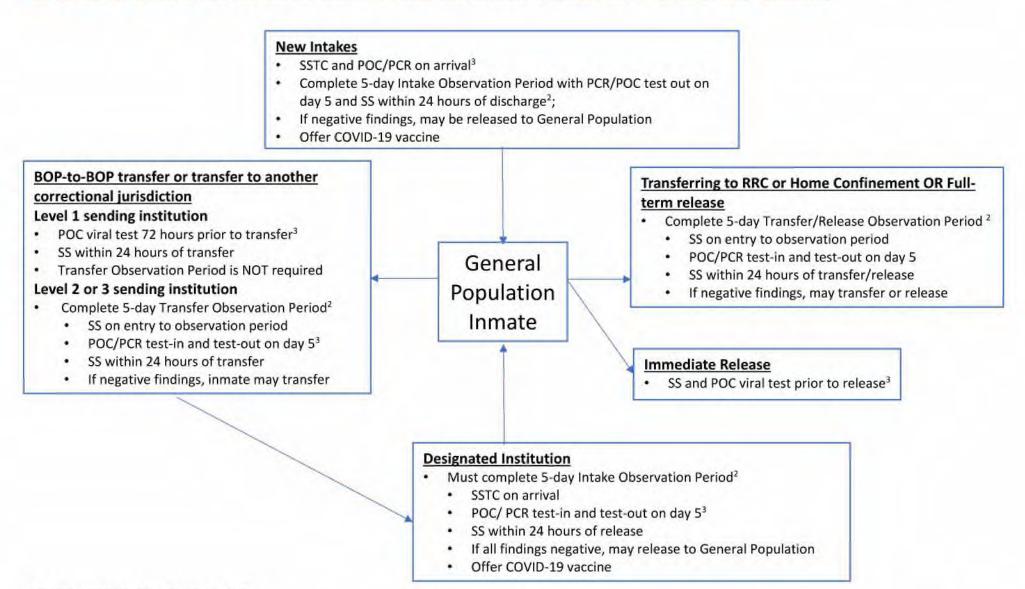


SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, there must be BEMR documentation of vaccine series completion.

² Inmates with a positive COVID-19 test in the last 90 days (who completed their medical isolation) do not typically need a viral test.

APPENDIX C. ROUTINE OBSERVATION PERIODS DURING MOVEMENT FOR NOT FULLY VACCINATED¹ INMATES



SS: Symptom screen; TC: Temperature check

- ¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, there must be BEMR documentation of vaccine series completion. 25
- Inmate, there must be BENK documentation of vaccine series completion.
 2 Inmates who are not fully vaccinated entering a high-risk unit are recommended to continue to complete a 10-day intake observation period.
- ³ Inmates with a positive COVID-19 test in the last 90 days (who completed their medical isolation) do not typically need a viral test.

COVID-19 Pandemic Response Plan May 18, 2022, version 10.0

APPENDIX D. HOLDOVER AND DETENTION CENTER PROCEDURES

Inmates arriving from **BOP Institutions** (regardless of vaccination status) and inmates arriving from **non-BOP² locations who are fully vaccinated**

SSTC and POC testing on arrival (all inmates)

(these two groups do not mix at the institution) Not fully vaccinated holdover inmates from non-BOP² facilities

- SSTC and POC testing on arrival
- Complete 7-day Intake Observation Period
- POC/PCR test-out w/in 48 hours of departure
- SS w/in 24 hours of departure
- If all negative, may transfer out of institution
- Offer COVID-19 Vaccine
- Holdover inmates who stay beyond the 7-day Intake Observation Period, may transfer after:
 - SS within 24 hours of departure
 - POC test within 72 hours of departure

**If the Holdover/Detention Center is at Operational Level 1 (Green), Observation Period can be decreased to 5 days

If leaving in less than 24 hrs

- No SS
- No POC testing

If leaving 24-72 hrs

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- SS within 24 hrs of transfer
- No POC testing

If leaving ≥ 72 hrs

- SS within 24 hrs of transfer
- POC viral test within 72 hours prior to transfer

If expected to change from "holdover status" (designated to institution or released to General Population):

- Complete 7-day Intake Observation Period if not fully vaccinated¹
 - · SS on entry to observation period/arrival
 - POC/PCR test-in and test-out on day 7
 - SS within 24 hours of release from Intake Observation Period
 - If negative findings, may release to General Population.

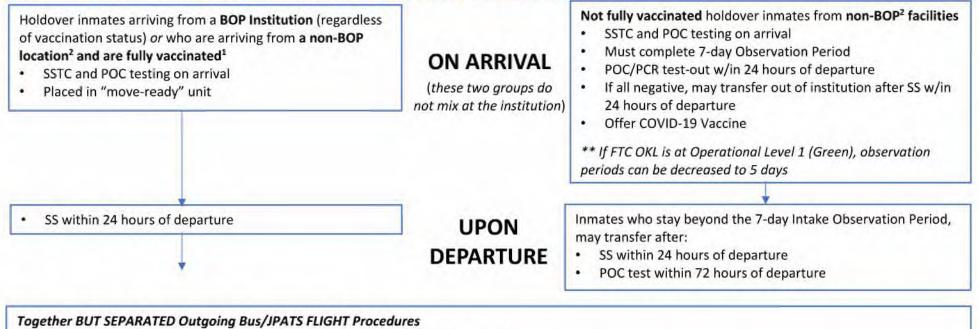
**If the Holdover/Detention Center is at Operational Level 1 (Green), Observation Period can be decreased to 5 days

SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizeggor Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, there must be BEMR documentation of vaccine series completion.

² Non-BOP location or institution applies to any institution outside of the 122 recognized BOP facilities; this includes all contract facilities.

APPENDIX E. OKL – FEDERAL TRANSFER CENTER MOVEMENT PROCEDURES



- To the extent possible, these two groups will not mix in R&D or "waiting areas"
- All inmates will be provided surgical masks without metal nose piece to be donned in R&D and worn under a cloth mask
- Not fully vaccinated holdover inmates from non-BOP facilities will board the bus/airplane first towards the rear (preferred)
- The BOP and fully-vaccinated inmate group will board the bus/airplane last, and towards the front allowing empty seat rows to achieve >6 ft of distance between the groups.

Upon Arrival to designated BOP institution:

- SSTC and POC testing on arrival
- Complete 5-day Intake Observation Period if not fully vaccinated
 - POC/PCR test-out on day 5
 - SS within 24 hours of release from Intake Observation Period
 - If negative findings, may release to General Population
 - Offer COVID-19 Vaccine

SS: Symptom screen; TC: Temperature check

Inmates who arrive as designated to OKL:

- SSTC and POC viral test on arrival
- Complete 7-day Intake Observation Period if not fully vaccinated
 - POC/PCR test-out on day 7
 - SS within 24 hours of release from Intake Observation Period
 - If negative findings, may release to General Population
 - Offer COVID-19 Vaccine
- ** If FTC OKL is at Operational Level 1 (Green), observation periods can be decreased to 5 days

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, there must be BEMR documentation of vaccine series completion.

² Non-BOP location or institution applies to any institution outside of the 122 recognized BOP facilities; this includes all contract facilities.