



U. S. Department of Justice

Federal Bureau of Prisons

Reentry Services Division

Washington, D.C 20534

13 MARCH 2020

TO: ALL RRC CONTRACT PROVIDERS
ALL COMMUNITY TREATMENT CONTRACT PROVIDERS

(b)(6); (b)(7)(C)

FROM: (b)(6); (b)(7)(C) ADMINISTRATOR,
RESIDENTIAL REENTRY MANAGEMENT BRANCH

(b)(6); (b)(7)(C)

(b)(6); (b)(7)(C) ADMINISTRATOR
NATIONAL REENTRY AFFAIRS BRANCH

SUBJECT: Coronavirus (COVID-19) Precautions

In response to recent health concerns related to the Coronavirus (COVID-19) the Bureau of Prisons (Bureau) in consultation with the Center for Disease Control (CDC), the Department of Justice (DOJ) and the White House COVID-19 task force has implemented precautions and protocols to reduce the risk of further spread of the virus. We take our responsibility to protect staff, inmates, and the public very seriously, and are taking actions based on our desire to prevent them from being in harms' way as a result of COVID-19. Anytime we make these types of changes to operations, we are acutely aware of the impact it has on those who work and live in our facilities as well as their loved ones, and we do our best to lessen the impact as much as possible. Accordingly, to ensure consistency in our response nationwide we are providing the following general guidance and recommendations to Residential Reentry Center (RRC) and Community Treatment contract providers which is intended to clarify the contractor effort, and fill in details otherwise serves to accomplish the contractual statement of work, in accordance with contractual clause # 52.2 *Continuing contract performance during a Pandemic Influenza or other National Emergency* (Attached):

Residential Reentry Centers:

- Restrict visitation within the facility.
- Inmates who have approved existing employment may continue to work their regular hours outside of the RRC Facility, unless they have a temperature of 100.4 degrees, have a cough,

and/or difficulty breathing.

- All social movements to include home passes may be discontinued, this includes restricting of home confinement clients to their approved residence.
- Groups facilitated by volunteers, interns, or external providers may be discontinued with the exception of residents enrolled in Community Treatment Services through a Bureau contract provider. Groups that are conducted in-house by Contract staff should continue as practical.
- Outside church services may be discontinued. Residents are encouraged to continue to practice their faith traditions within the facility.
- Non-essential facility services from outside vendors may be discontinued.
- Facilities should implement regular daily temperature testing and screening for symptoms of COVID-19 for all residents and staff. If any resident or staff exhibits symptoms associated with COVID-19 initial precautions should be taken to isolate the subject and notification must be made to the appropriate Public Health Services and the Bureau.
- Residents on home confinement who are sick, immunocompromised, over 60, and/or considered to be at higher risk of infection (people who have traveled to areas where community transmission is occurring or have had direct close contact with a presumptive positive case of COVID-19) will not be required to come into the RRC and staff will not be required to conduct physical home visits, but residents will still be required to maintain contact with the RRC telephonically. If a resident is ill, they should immediately notify the RRC via phone and stay home until they contact their healthcare provider.
- Any resident who is a new arrival from the community (Public Law commitment/direct court commitment) should be screened upon arrival for symptoms associated with COVID-19 to include raised temperatures (above 100.4). Any proposed admittance showing symptoms associated with COVID-19 should not be admitted and the Bureau and appropriate Public Health Services notified immediately.

Community Treatment Providers:

- All providers will continue services, as contracted by Community Treatment Services, unless under a state mandate or directive. All directives or mandates, must be submitted to the Supervisory Community Treatment Oversight for review.
- If an inmate is presenting as ill, it is recommended that the local RRC is notified (via telephone) and release the inmate to return to the RRC or to their home. Furthermore, notify the CTS office on a Behavioral Notification that the inmate was returned due to illness.

- Telehealth sessions may be conducted if the state has an effective, enforced mandate regarding no contact. This cannot exceed two (2) units for an individual session. Group sessions will be cancelled for those located in areas with active states no contact orders.

Individual circumstances may arise outside of this general guidance and recommendations. If circumstances arise outside of this guidance you are encouraged to contact your assigned Contracting Officer, Residential Reentry Manager, Sector Management Team, or Bureau duty officer. I may also be contacted directly at [REDACTED] (b)(6); (b)(7)(C)

Community Treatment providers encounter circumstances outside of this general guidance and recommendations, please contact your assigned Contracting Officer, Community Treatment Oversight Specialist or the Supervisory Community Treatment Oversight Specialist assigned to the local area. If further issues need to be discussed, please contact [REDACTED] (b)(6); (b)(7)(C) Deputy Administrator at [REDACTED] (b)(6); (b)(7)(C) or via email at [REDACTED] (b)(6); (b)(7)(C)

The Bureau remains committed to working with all of our partners on the COVID-19 response and are striving to ensure a nationwide consistency in the response while allowing for individual variations based upon specific circumstances or geographic area of the RRC. The Bureau thank you for your continued support and patience and will continue to update this guidance as the situation continues to develop. We encourage all providers to enhance and increase communication with your Bureau representatives during this time as we am confident that through good/effective communication we can resolve any situation that may arise.

This guidance is in effect for the next 30 days at which time facilities will return to normal operations or updated guidance will be provided.