

MODULE 6. INMATE MOVEMENT

WHAT'S NEW

- Inmate movement is an important part of the BOP mission. In and of itself it is complex, but is made even more so by the infection prevention procedures needed to limit SARS-CoV-2 transmission during the COVID-19 pandemic. This module has been re-organized for greater clarity on what procedure to use with the various types of inmate movement.
- As COVID-19 vaccination rates increase and SARS-CoV-2 infection rates decrease, the risk of transmission is decreasing commensurately. In response to the improving epidemiology of the pandemic, the BOP is implementing a [BOP Intrasystem Transfer Procedure](#), rather than Transfer Quarantine, for transfer of BOP inmates from one BOP facility to another BOP facility when rates of inmates in medical isolation at the originating facility are low.

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A. DEFINITIONS

- **BOP GROUP:** Includes inmates at BOP facilities who have completed **THE BOP INTRASYSTEM TRANSFER PROCEDURE** (see [Section G](#)) prior to their BOP intrasystem transfer.
- **NON-BOP GROUP:** Includes inmates from other agencies, correctional jurisdictions or contract and private correctional facilities and who have not completed an **INTAKE QUARANTINE** in the BOP. Inmates in detention centers (pre-designated) are considered in a non-BOP group until they have completed an **INTAKE QUARANTINE**.
- **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.
- **POC TEST:** a SARS-CoV-2 rapid point of care viral test (e.g., Abbott ID NOW™ COVID-19 PCR test or Abbott BinaxNOW™ COVID-19 Ag card).
- **QUARANTINE:** In the context of COVID-19, refers to separating (in an individual room or cohorting in a unit) asymptomatic persons who may have been exposed to the virus to **(1)** observe them for symptoms and signs of the illness during the **INCUBATION PERIOD** and **(2)** keep them apart from other incarcerated individuals.
 - The BOP utilizes **THREE CATEGORIES OF QUARANTINE** – exposure, intake, and transfer
- **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 viral infection patients.
 - ➔ Refer to **MODULE 4** for additional guidance on COVID-19 pandemic-related **QUARANTINE** and **MEDICAL ISOLATION**.
- **TRANSFER QUARANTINE:** Inmates in the following situations will complete a 14-day test-in/test-out transfer quarantine: 1) BOP intrasystem transfers from originating facilities with evidence for widespread transmission; 2) inmates transferring out of the BOP (e.g., to another correctional jurisdiction, residential reentry center, home confinement); or 3) full term release.

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 quarantine, testing and/or screening procedures appropriate to the specific type of inmate movement – either a **TRANSFER QUARANTINE** ([Section H](#)) or a **BOP INTRASYSTEM TRANSFER** ([Section G](#)).
 - A **TRANSFER QUARANTINE** may require approximately 21 days of advanced planning 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, multi-institution 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.
- To the extent possible, manifests should be generated that allow for appropriate **SOCIAL DISTANCING** during transport (e.g., loading a bus or plane at 50% capacity).
- **DIRECT TRAVEL OR MINIMAL STOPS/HOLDOVERS** should be arranged whenever possible (e.g., consider institutions meeting at a halfway point to pick-up inmates, rather than having multiple stops and holdovers).
- **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.
- **Avoid mixing inmate groups (BOP and NON-BOP) as much as possible:**
 - Maximize runs with **BOP GROUPS** only.
 - Make every effort to coordinate runs for **NON-BOP GROUPS** separately.
- 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.
- An inmate who is currently in or meets the criteria for exposure or intake quarantine should **NOT** be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, court order, completion of a sentence).

D. DOCUMENTATION

- **It can be useful to maintain a COVID-19-related roster of inmates to facilitate management of release/transfer.** Helpful data points include cell assignment, start date of quarantine or medical isolation, projected end date of quarantine or isolation, date of placement in that cell, cell mate or members of a cohort, testing dates, type of test (POC or commercial), test results and designated facility.
- **The BEMR Exit Summary/transfer paperwork should be provided to the bus LT/USMS** to verify that required screening and testing has been completed.

- **Documentation on the BEMR exit summary/transfer paperwork (e.g., In-Transit Form) needs to include:**
 - For **TRANSFER QUARANTINE** – document the start and end dates of quarantine, SARS-CoV-2 test type, dates and results for both admission and discharge tests, and results of the symptom screen and temperature check 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 and temperature check 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).

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 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 14-day test-in/test-out quarantine or a combination of POC test with symptom screen and temperature check prior to departure, described below in more detail with each movement type.

Movement Type	Movement Procedure
Intake into any BOP facility	Intake Quarantine
Full-term Release	Transfer Quarantine
Transfer to a non-BOP correctional facility	
Transfer to Residential Reentry Center or Home Confinement	
BOP intrasystem transfer where the originating institution's medical isolation rate is $\geq 2\%$	
Immediate Release	Immediate Release
BOP intrasystem transfer where the originating institution's medical isolation rate is $< 2\%$	BOP Intrasystem Transfer

F. NEW INTAKE QUARANTINE

PRIOR TO ENTERING THE INSTITUTION, OR IN R&D: All new intakes to an institution, including voluntary surrenders, BOP intrasystem transfers, or transfers 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) performed on a sample obtained from a nasopharyngeal, mid-turbinate, or anterior nares swab.

- **Inmates who arrive symptomatic AND/OR test positive will be placed in MEDICAL ISOLATION.**

- **Inmates who arrive asymptomatic AND test negative will be placed in INTAKE QUARANTINE.**
 - If inmates become symptomatic during quarantine, they should be re-tested (POC or commercial test) and placed in **MEDICAL ISOLATION** immediately.
 - If inmates remain asymptomatic, they stay in **QUARANTINE** for at least 14 days. They are then tested out of quarantine with a commercial PCR test at 14 days or later. If the test is negative, the inmate can be released to the general population. If the test is positive, they should be placed in **MEDICAL ISOLATION** immediately.
- ➔ Refer to [Section J](#) for OKL movement procedures.
- ➔ Refer to **MODULES 3 AND 4** for additional information regarding screening, testing, and medical isolation and quarantine of inmates.

G. BOP INTRASYSTEM TRANSFERS (INMATE MOVEMENT FROM ONE BOP FACILITY TO ANOTHER BOP FACILITY)

When inmates move from one BOP facility to another BOP facility, and the sending (i.e., originating) institution's inmate medical isolation rate is less than 2%, the following procedure may be used.

- Prior to transfer from the originating BOP institution, the following are performed while the inmate remains in their current housing (e.g., general population):
 - The originating institutions will perform a POC test within 72 hours of inmate movement as close to the time of departure as is feasible.
 - A symptom screen and temperature check will be performed within 24 hours of inmate movement.
- Inmates with a negative POC test, a negative COVID-19 symptom screen, and a normal temperature do not need a **Transfer Quarantine**.
- A SARS-CoV-2 test is not required for inmates with a history of COVID-19 diagnosed within the past 90 days. Perform a symptom screen and temperature check within 24 hours of inmate movement.
- Institutions with current medical isolation rates $\geq 2\%$ need to follow **TRANSFER QUARANTINE** procedures ([Section H](#))
 - ➔ Refer to [Section J](#) for OKL movement procedures.
 - ➔ Institution infection rates may be found on the COVID-19 Dashboard, accessed through the [Sallyport COVID-19 Resources page](#)
- **DO NOT TRANSFER** inmates who are symptomatic and/or test positive and place in **MEDICAL ISOLATION**.
- **DO NOT TRANSFER** inmates who have been exposed to COVID-19 and test negative and place in **EXPOSURE QUARANTINE**.
- An **INTAKE QUARANTINE** is performed on **all** BOP intrasystem transfers when they arrive at their designated facility (refer to [Section H](#)).
- ➔ 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.
- ➔ Refer to **MODULES 3 AND 4** for additional information regarding screening, testing, and medical isolation and quarantine of inmates.

H. TRANSFER QUARANTINE

- Whenever possible, 21-day advance planning is recommended to allow sufficient time to complete the **TRANSFER QUARANTINE**.
 - A **TRANSFER QUARANTINE** will be used for 1) BOP intrasystem transfers from originating facilities with evidence for widespread transmission; 2) inmates transferring out of the BOP (e.g., to another correctional jurisdiction, residential reentry center, or home confinement); or 3) full term release.
 - An inmate who is currently in COVID-19 medical isolation, or meets the criteria for medical isolation, should NOT be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, completion of a sentence).
 - An inmate who is currently in COVID-19 exposure or intake quarantine, or meets the criteria for exposure or intake quarantine, should NOT be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, completion of a sentence).
- ➔ Refer to **MODULES 3 AND 4** for additional information regarding screening, testing, and medical isolation and quarantine of inmates.

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

1. Inmates with no prior history of COVID-19.
 2. Inmates previously diagnosed with COVID-19 who have since recovered, and have met the current criteria for release from medical isolation (see **MODULE 4**).
 3. 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.

1. TRANSFER OR RELEASE OF INMATES WITH NO PRIOR HISTORY OF COVID-19

- Prior to transfer, these inmates should be tested with an approved test (either a POC or commercial lab PCR test) and, if negative, be placed in **TRANSFER QUARANTINE** and housed separately from inmates in **EXPOSURE OR INTAKE QUARANTINE**. See **MODULES 3 AND 4** for testing procedures and more information on quarantine and medical isolation.
- Inmates will remain in quarantine for a minimum of 14 days. They may be tested out of quarantine on day 14 with a commercial PCR lab test (or a POC test in circumstances outlined below).
 - If any inmate in a transfer quarantine cohort tests positive, the quarantine period must be restarted for all 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 five-day window for movement cannot be achieved, the time frame for movement may be expanded to within 14 days of receiving the negative SARS-CoV-2 test result, as long as quarantine conditions are maintained for the entire time.
 - A symptom screen and temperature check need to be performed within 24 hours prior to departure from the facility.
 - Documentation of the symptom screen, temperature, and entry and exit date test results must be included in the exit summary/transfer paperwork. (See [Documentation](#) 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 **TRANSFER QUARANTINE** 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 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 [Documentation](#) 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, temperature check, 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 [Documentation](#) above.)
 - The local health authorities in the receiving locality should be notified, and the travel arrangements coordinated with them, if necessary (e.g., if 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 in 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 release to home confinement.*

I. HOLDOVER SITES, BUS HUBS AND DETENTION CENTERS

- An important aspect of infection control at a holdover site, bus hub or detention center is distinguishing between **BOP GROUPS** and **NON-BOP GROUPS**.
 - **BOP GROUP:** Includes inmates at BOP facilities who have completed the **BOP INTRASYSTEM TRANSFER PROCEDURE** (see [Section G](#)) prior to their BOP intrasystem transfer.
 - **NON-BOP GROUP:** Includes inmates from other agencies, correctional jurisdictions or contract and private correctional facilities and who have not undergone an **INTAKE QUARANTINE** in the BOP. Inmates in detention centers (pre-designated) are in a non-BOP group until they have completed an **INTAKE QUARANTINE**.
 - To the extent possible, **BOP GROUPS** should not be mixed with **NON-BOP GROUPS**.

- If necessary, multiple **BOP GROUPS** originating from different BOP facilities may be housed together.
- **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.

HOLDOVERS FOR BOP GROUPS

- **BOP GROUPS NOT** mixed with **NON-BOP GROUPS** may be placed into a holdover unit setting without a test-in/test-out process. They do **NOT** need to complete a **TRANSFER QUARANTINE** prior to moving on to their next destination.
 - **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 COVID-19 symptom screen and temperature check within 24 hours of transfer.
 - **INMATES IN HOLDOVER STATUS 72 HOURS OR MORE:** perform a POC test and temperature and symptom screen prior to transfer.
 - **PROLONGED HOLDOVERS BEING CONSIDERED FOR GENERAL POPULATION HOUSING:** Inmates who are expected to be housed at a holdover site, bus hub, or detention center for a prolonged period of time (> 14 days) will complete an **INTAKE QUARANTINE** and be moved to the general population, when appropriate and in accordance with established institution procedures upon meeting criteria for release from intake quarantine.
 - After relocation to the general population and, prior to transferring to another BOP facility, inmates should undergo the transfer procedure appropriate for their type of transfer and the epidemiological situation at the institution (e.g., **BOP INTRASYSTEM TRANSFER PROCEDURE** or a **TRANSFER QUARANTINE**).
 - BOP groups can move together, but they should not mix with non-BOP groups in transit to their destination facilities. Different procedures are utilized by OKL for management of BOP intrasystem transfers (refer to [Section J](#)).
- On arrival to their designated facility, all BOP groups must complete the **INTAKE QUARANTINE**.

HOLDOVERS FOR NON-BOP GROUPS

- If a holdover site, bus hub or detention center **OFTEN** receives **NON-BOP GROUPS**, the facility should consider having designated quarantine and isolation units for these non-BOP groups and manage them as new intakes with screening, quarantine, and testing (as recommended in **MODULES 3 AND 4**).
- ➔ *The non-BOP group should **NOT** be mixed with the BOP-only holdover groups.*
 - Once a **NON-BOP GROUP** has completed an **INTAKE QUARANTINE** at the holdover site or detention facility, they can be considered a **BOP-GROUP**.
 - Inmates who complete an **INTAKE QUARANTINE** at the holdover site or detention facility and are expected to transfer within a reasonable period of time (i.e., 30–45 days), should remain in

quarantine until their transfer date and then undergo the transfer procedure appropriate for their type of transfer and the epidemiological situation of the institution (e.g., **BOP INTRASYSTEM TRANSFER PROCEDURE** or a **TRANSFER QUARANTINE**).

- Inmates who complete an **INTAKE QUARANTINE** at the holdover site or detention facility and are expected to remain for a prolonged period of time may be released to a general population unit when appropriate and in accordance with established institution procedures. After release to the general population they are considered a BOP inmate and need to undergo the transfer procedure appropriate for their type of transfer and the epidemiological situation of the institution (e.g., **BOP INTRASYSTEM TRANSFER PROCEDURE** or a **TRANSFER QUARANTINE**).
- ➔ On arrival to their designated facility, all non-BOP groups must complete the **INTAKE QUARANTINE**.

MIXED GROUPS

- If a holdover site, bus hub or detention center receives a **mixed group of BOP and Non-BOP GROUPS**, or a BOP group that has **PREVIOUSLY MIXED** with a non-BOP group, they must **ALL** be managed as a **NON-BOP GROUP** at the holdover site—with screening, 14-day **INTAKE QUARANTINE**, and testing prior to transfer (as outlined in **MODULES 3 AND 4**).

J. FEDERAL TRANSFER CENTER, OKLAHOMA CITY (OKL)

There are two primary groups of holdover inmates arriving at OKL – BOP intrasystem transfers and sentenced inmates still in USMS custody (non-BOP group). Ordinarily, inmates in these two groups are not mixed while housed at OKL, with the exception listed below (non-BOP inmates quarantined at OKL for at least 14 days and a negative commercial test).

- **BOP inmates** are kept in “move-ready” units organized into smaller cohorts within the housing units and do not mix with other cohorts. These inmates arrive from other BOP facilities where they were quarantined and tested consistent with the most recent guidance. Upon arrival at OKL, they are symptom screened, temperature checked, and placed in “move-ready” units once cleared.
- **Non-BOP inmates** are transported from various non-BOP correctional facilities to OKL. They are kept separate from the BOP inmates and organized into smaller cohorts within the housing units. They do not mix with other cohorts.
 - Non-BOP holdovers may be moved to “move-ready” units if they have been quarantined for at least 14 days and completed an **INTAKE QUARANTINE**.
- Some inmates also arrive designated to OKL as part of the work cadre (OKL CAD). The following procedures do not apply to these inmates, all of whom require an **INTAKE QUARANTINE** prior to entering general population.

INTAKE PROCEDURES FOR NON-BOP HOLDOVERS

- All non-BOP holdovers are symptom screened, temperature checked and POC tested upon arrival prior to being housed in a non-BOP housing unit (i.e. they are not mixed with BOP holdovers).
- All non-BOP holdovers will be kept at OKL for a minimum of 7 days.
- Unvaccinated non-BOP holdovers will be offered vaccination with the COVID-19 vaccine, when available.

OUTGOING MOVEMENT PROCEDURES

- BOP inmates will be symptom screened and temperature checked within 24 hours prior to departure.
- Non-BOP inmates will have a POC viral test within 72 hours prior to departure (as close to the time of departure as is feasible) and symptom screening and temperature check within 24 hours prior to departure.

INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF OKL INMATES

This guidance is based on an analysis of exposure risk between BOP and non-BOP inmates. To minimize risk of exposure between inmates who have completed a full quarantine, keeping BOP groups and Non-BOP groups separated during movement is recommended to the extent possible.

- While being processed for outgoing movement at OKL, the two groups will be kept separate to the extent possible. Any instances in which BOP inmates are in close proximity to non-BOP inmates should be minimal based on the limitations of holding cells in the R&D area at OKL and the specialized needs of the inmates (e.g., max custody, designated to FLM ADX, SMU, RU, etc.)
- Inmates 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 cloth face cover.
- Outgoing flights and buses may include BOP and non-BOP 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 (BOP and non-BOP), with the non-BOP 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 BOP and non-BOP groups who have not completed a **TRANSFER QUARANTINE** but have been POC tested, symptom screened and temperature checked (i.e. a **BOP INTRASYSTEM TRANSFER PROCEDURE**).
 - **INMATES:** double masking with a surgical mask underneath and a cloth face covering worn on the outside.
 - **STAFF:** N95, face shield or goggles, and gloves

K. MEDICAL TRANSFERS TO MRCs

The same strategies to limit SARS-CoV-2 transmission for non-medical transfers are applied to medical transfers to MRCs and Care level 3 facilities. The inmate should undergo the transfer procedure appropriate for their type of transfer and the epidemiological situation of the institution (e.g., [BOP INTRASYSTEM TRANSFER PROCEDURE](#) or a [TRANSFER QUARANTINE](#)). When [TRANSFER QUARANTINE](#) is required for a transfer to an MRC, the following procedures are recommended for emergency and routine urgent designations.

EMERGENCY DESIGNATIONS

Upon receipt of an emergency designation approval by the Office of Medical Designations and Transport ([OMDT](#)) at the sending facility, the patient must complete a [TRANSFER QUARANTINE](#) at the sending facility.

- **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 the [TRANSFER QUARANTINE](#) as specified above under [Transfer or Release of Inmates with No Prior History of COVID-19](#). See also [Other Considerations for Medical Transfers](#) 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 and the epidemiological situation at the institution (e.g., [BOP INTRASYSTEM TRANSFER PROCEDURE](#) or a [TRANSFER QUARANTINE](#)).

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), so that quarantine within the BOP institution prior to transfer is not possible. In these circumstances, the patient may be transferred without a [TRANSFER QUARANTINE](#), but should be tested for SARS-CoV-2 preferably with a commercial viral PCR lab test within 72 hours prior to transfer (as close to the time of departure as is feasible) and have a symptom screen and temperature check within 24 hours prior to transfer.
- **SPECIALIZED NEEDS:** In some instances, due to the medical condition and/or needs of the patient, placement in transfer quarantine 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 quarantine with other transfer quarantine group inmate(s) that may assist with minor needs, or a designated inmate companion.

- In the case of a **DESIGNATED INMATE COMPANION**, the companion will need to test negative immediately prior to the **TRANSFER QUARANTINE** period with either a POC or a commercial lab test. The companion will house with the patient for the duration of the transfer quarantine period until the patient transfers. Since the companion is not expected to be transferred, they do not need to undergo the temperature and symptoms screening process or a SARS-CoV-2 test at the end of the transfer quarantine 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 an **EXPOSURE QUARANTINE**.*

L. 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. Refer to **MODULE 6 – INMATE ISOLATION & QUARANTINE** for specific recommendations regarding court appearances during quarantine and isolation.

- Inmates in COVID **MEDICAL ISOLATION** 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 in COVID-19 **EXPOSURE QUARANTINE** should delay in-person court appearances until they are COVID-tested at the end of quarantine. Telephone or VTC appearances are recommended alternatives. In general, testing an inmate immediately before or after a legal visit would have little utility and is not recommended. However, a POC test can be used on a case-by-case basis, especially if the test is required by the court.
- Inmates should wear face coverings and perform hand hygiene just before departure and upon return to the institution.

M. INFECTION CONTROL GUIDANCE FOR VEHICLE 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 BOP groups who have completed a **TRANSFER QUARANTINE**:

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

The following PPE is required for movement of BOP and/or non-BOP groups who have **not** completed a **TRANSFER QUARANTINE** but have been POC tested, symptom screened and temperature checked (i.e. a **BOP INTRASYSTEM TRANSFER PROCEDURE**).

- **INMATES:** Face coverings
- **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.
- Non-BOP or mixed groups, where infection has not been ruled out (i.e. has not completed **INTAKE QUARANTINE** or **TRANSFER QUARANTINE**)
- **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 bio-medical waste bag and perform hand hygiene.
 - 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)