This document is effective immediately 4/17/2020 and supersedes all previous PPE guidance

| previous PPE guidance | | | | | | | | | |
|---|---|------------------|-------------------|-----------|------|--|--|--|--|
| WA State DOC COVID-19 PPE Matrix (Version 2) | N95 Mask | Surgical Mask | Eye Protection | Gloves | Gown | | | | |
| | | | | | | | | | |
| Active Screening | | | | | | | | | |
| For staff and Incarcerated individuals | | X | Х | X | X | | | | |
| Contact with ISOLATED individuals (| sympto | matic) reg | gardless o | f cell ty | ype | | | | |
| ANY CLOSE CONTACT with incarcerated individuals with suspected or lab confirmed COVID-19 while symptomatic (cough or sneezing). While performing diagnostic nasopharyngeal swab sample collection. | X | | X | x | X | | | | |
| When speaking with a symptomatic patient from outside of an isolation cell (open door) Any contact with a patient who has tested negative for COVID-19 but remains on isolation Any contact with incarcerated individuals with suspected or lab confirmed COVID-19 without cough or sneezing. | | X | X | x | X | | | | |
| Passing items through cuff port without face to face contact | | | | X | | | | | |
| When speaking with a symptomatic patient from outside of an isolation cell (closed door) | No additional PPE Required, continue to wear DOC approved face covering | | | | | | | | |
| Handling laundry and Food Service Items (no patient contact) | | | | Х | X | | | | |
| Contact with QUARANTINED individ | uals (as | ymptoma | tic) | | | | | | |
| Open Bay Unit—Close Contact (e.g. temp checks) | | х | | Х | х | | | | |
| Open Bay Unit—without Close Contact (e.g. walking through unit) | | | | X | | | | | |
| Closed door cells with cuff port—Passing items through cuff port and without face to face contact | | | | Х | | | | | |
| Closed door cells with cuff port— without contact at all (e.g. talking through door) | No additional PPE Required, continue to wear DOC approved face covering | | | | | | | | |

*** All staff working in DOC locations MUST wear an approved face covering while on duty***

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| WA State DOC COVID-19 PPE Matrix (Version 2) | N95 Mask | Surgical Mask | Eye Protection | Gloves | Gown | | | | |
| | | | | | | | | | |
| Contact with QUARANTINED individuals (asymptomatic) | | | | | | | | | |
| Closed door cells with cuff port—Close Contact (e.g. temp check) | | х | Х | х | | | | | |
| Bar Cells—without Contact (e.g. talking through door) | No additional PPE Required, continue to wear DOC approved face covering | | | | | | | | |
| Dayroom/other close quarters—Close Contact (within 6 feet of individual) | | Х | | Х | X | | | | |
| Dayroom/other close quarters—without Close Contact (walking through unit) | | | | х | | | | | |
| Pat Searches (New PPE used for each person pat searched) | | X | | х | X | | | | |
| Handling laundry and Food Service Items (no patient contact) | | | | X | X | | | | |
| Dental | | | | | | | | | |
| Evaluations—intakes or sick call | | Х | Х | Х | Х | | | | |
| Procedures —New PPE used for each patient | х | | Х | х | X | | | | |
| Transportation/Community Correction* **If unable to wear a disposable gown because it limits disinfected after contact with individual. | | | | ty belt an | d gear are | | | | |
| Movement of General Population individuals | | | | Х | | | | | |
| Movement of SYMPTOMATIC individuals | Х | | Х | Х | Х | | | | |
| Movement of QUARANTINED individuals | | Х | | Х | Х | | | | |
| Community Hospital Watch | | | | | | | | | |
| If remaining outside the individual's room | No additional PPE Required, continue to wear DOC approved face covering | | | | | | | | |
| If inside of the individual's room Minimize the direct contact with the patient. Remain at least 6 feet away from the patient when possible. | Follow hospital PPE guidance. Hospital should provide the necessary PPE. If PPE is unavailable, it can be provided by DOC. | | | | | | | | |

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