GRANITE COUNTY'S
QUARANTINE AND ISOLATION POLICY

I. PURPOSE

The purpose of this policy to guide the local health officials in establishing and maintaining isolation, quarantine, and community control measures to prevent the spread of communicable disease, pursuant to § 50-2-116 and 117, MCA. It is the intent of this policy to grant the Granite County Board of Health all powers allowed by law to protect the health and safety of the public. This policy applies to all of Granite County.

II. AUTHORITY AND DUTY

A. Local Health Board and Local Health Officer

- Montana Code Annotated Title 50, Chapter 2 (http://leg.mt.gov/bills/mca toc/50 2 1.htm), "Local Boards of Health".
- Administrative Rules of Montana (ARM), 37.114.101 to 1016.
- Control of Communicable Disease Manual adopted by reference in ARM 37.114.201 (2)
- "Guidelines for Isolation Precautions in Hospitals." Adopted by reference in ARM 37.114.101(35) and available through the US National Technical Information Service.
- Montana Code Annotated Title 50-16-601 to 611 (http://leg.mt.gov/vills/mca toc/50 16 6.htm), "Government Health Care Information Act".

B. County Government

- Montana Code Annotated Title 10, Chapter 3, 401-406 (http://leg.mt.gov/bills/mca toc/10 3 4.htm), "Disaster and Emergency Services, Local and Inter-jurisdictional Planning and Execution".

C. State: Montana Department of Public Health and Human Services

- Montana Code Annotated Title 50, Chapter 1 (http://leg.mt.gov/bills/mca toc/50 1.htm), "Administration of Public Health Laws," revised April 2003.
- ARM Title 37.14.101 through 1016.

D. Federal Authority: HHS Secretary (CDC), Customs and Coast Guard

- Executive Order No. 13295, "Revised List of Quarantinable Communicable Diseases," revised July 31, 2014, or as revised in the future.

III. PROCESS

A. Determination of Need for Quarantine of Isolation

1) Upon receipt of a report of a communicable disease, the local health officer shall confirm the diagnosis with laboratory or the physician or healthcare provider. If the case is not confirmed, but is suspect or probable, the local officer may handle the case as communicable until medical or laboratory information rules out the presence of communicable disease.

2) Upon confirmation of the diagnosis or determination that the disease meets a case definition of a communicable disease, the local health officer shall consult the ARM Title 37, Chapter 114, Subchapters 5 and 10, and the most recent CCDM for specific control guidance.

3) If the disease is not specifically listed in the CCDM, the local health officer shall consult other guidance such as MMWR, Health Alerts, the state epidemiologist or CDC recommendations to determine the least restrictive yet effective control measures available including isolation and quarantine.

4) The local health officer and any health department staff shall identify contacts of the case. The local health officer, in this policy, shall be the person that is so expressly designated by the Granite County Board of Health.

B. Requesting or Ordering Isolation

1) Upon determining that isolation is warranted as specified in ARM 37.114.5 and/or the CCDM and/or by guidance referenced in A.3 of this policy, the local health officer shall draft a request or an order for isolation that shall include:
    - The name and title of the person issuing the request or order
    - The case's name
    - The communicable disease of concern
    - The place of isolation
    - The type of isolation to be established and maintained, and

- The date or conditions upon which isolation will be reviewed for lifting, except as provided otherwise in this policy.

2) The type of isolation and the practices for maintaining isolation shall be guided by the "Guidelines for Isolation Precautions for Hospitals."

3) During an outbreak or epidemic, the local health officer may use reasonable clinical screening techniques to determine if an individual has symptoms of a communicable disease that may warrant isolation.

4) If the patient is hospitalized, the local health officer may consult with the hospital's infectious disease coordinator that the proper type of isolation is in place and may order the proper type of isolation if necessary.

C. Requesting or Ordering Quarantine

1) The local health officer shall identify contacts of the case by collecting information from records, conducting interviews or undertaking other means that may help determine who may have been exposed to the case in a manner capable of transmitting the communicable disease.

2) The local health officer shall determine if quarantine is warranted by:

   - Consulting ARM Title 37, Chapter 114, Subchapters 5 and 10, and/or the most recent CCDM for specific control guidance. If these documents provide no specific guidance for the disease, the local health officer shall consult other recognized guidance such as the state epidemiologist, and/or CDC, and/or MMWR, and /or Health Alerts and:

     Assessing whether the situation meets all the following criteria:

     - Quarantine is necessary to control spread of the disease;
     - Less restrictive measures are inadequate, and;
     - Effecting quarantine is feasible under the circumstances, and the quarantine will not produce hardships without equal or greater public benefit.

3) Local health officer shall determine if quarantine is warranted as a request (voluntary) or an order (mandatory). The local health officer may revisit and revise the status of the request or order based on changes in conditions, information, or non-compliance.

4) If the local health officer determines that quarantine is warranted, he or she shall draft a written request or order that shall include:

- The name and title of the person issuing the request or order
- The name of the contact
- Place of quarantine
- Conditions of quarantine
- Dates that quarantine commenced and
- When the order will be reviewed for lifting.

D. Maintaining Isolation or Quarantine

1) Contacts and cases ordered into isolation or quarantine shall be accommodated in conditions that protect against spread of the disease between contacts and cases. The local health officer may allow housemates to continue to live together in their private residence. In such instances, the local health officer shall assure that personal protective information is made available to all housemates and shall advise the housemates that they may be considered as quarantined or isolated individuals.

2) The local health officer or health department staff shall monitor compliance with the order.

3) The local health officer or health department staff shall monitor cases and contacts for symptoms of the communicable disease.

4) The local health officer, health department staff, or incident commander shall use reasonable means to meet the basic needs for food, shelter, communication, and medical care of individuals ordered into isolation and quarantine.

5) If the resources available to the local health officer are not sufficient to maintain isolation or quarantine, he or she may institute incident command system pursuant to the Granite County Disaster Plan.

6) Contacts in quarantine who develop symptoms and/or signs of communicable disease shall immediately be placed in isolation.

7) In accordance with MCA 50-2-120 (http://data.opi.mt.gov/bills/mca/50/2/50-2-120.htm), MCA, community controls that include closure of buildings or facilities where people congregate or that prohibit assembly of people may be institute upon receipt of written approval by DPHHS.

E. Lifting Isolation and Quarantine

1) Quarantine shall be reviewed for lifting when the incubation period is completed and no symptoms of communicable disease are present. Only

the local health officer is authorized to make the determination to lift quarantine.

2) Isolation shall be reviewed for lifting when the period of contagion has passed. This period may be longer than the symptomatic period. Only the local health officer is authorized to make the determination to lift isolation.

F. Protection of Privacy

1) In all instances, except as required by the courts or otherwise by law, the names and personally identifiable information of individuals subject to quarantine shall be kept confidential in accordance with Montana's "Government Health Care Information Act", Title 15, Chapter 16, Part 6, MCA, and the U.S. "Health Insurance Portability and Privacy Act (HIPPA)".

2) Placards signifying isolation or quarantine shall not be used except within institutional settings or in the event that a sanitary perimeter or institutional control is established.

G. Decontamination

1) If warranted, decontamination of the quarantine and isolation environments shall be done in accordance with the Recommendations of the Control of Communicable Disease Manual as presented in ARM Chapter 37. The health board may require and provide means for disinfecting places that are infected with communicable diseases (50-2-116(2e), MCA).

H. Documentation

1) All meetings related to the determination to institute quarantine or isolation shall be documented and all related documents shall be preserved for three years.

2) Records will be kept at the Granite County Courthouse or another public facility designated by the Granite County BOH. Requests for inspection of records can be made to the Granite County Health Department and will be handled according to the department's policy on public access to records.

3) Documents that do not contain names, or personal identifiers, or health information, as protected by federal and state law. Documents will only be provided for public inspection as allowed or as required by law.

Abbreviations as used in this Policy:

- ARM: Administrative Rules of Montana
- CCDM: "Control of Communicable Diseases Manual"
- CDC: The Unites States Centers for Disease Control and Prevention
- DPHHS: The Montana Department of Public Health and Human Services
- GCHD: Granite County Health Department
- HHS The United States Department of Health and Human Services
- MCA: Montana Code Annotated
- MCCHD: The Missoula City-County Health Department
- MMWR: The Morbidity and Mortality Weekly Report

UNANIMOUSLY ADOPTED AND PASSED by the Granite County Board of Health this 26th day of April, 2016 A.D.

Dr. Mark Ransford, Chair
Granite County Board of Health

APPROVED BY:

THE SEAL OF GRANITE COUNTY STATE OF MONTANA PHILIPSBURG

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APPROVED AS TO FORM AND CONTENT:

Blaine C. Bradshaw, Granite County Attorney
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