

**Lincoln County  
Non-Pharmaceutical Intervention Plan**

**September 2019**

This document contains the plans and protocols regarding the non-pharmaceutical interventions for communicable disease situations. This is a hazard-specific annex to the Lincoln County All-Hazards Emergency Operations Plan. Should an actual event occur, the response may vary depending on the type of emergency situation. This plan will be reviewed and updated annually or as necessary by the Health Director, Public Health Emergency Preparedness Coordinator, or designee. This version supersedes all previous versions of this document.



**APPROVAL AND IMPLEMENTATION**  
**LCHD Non-Pharmaceutical Intervention Plan**


This document is hereby approved for implementation and supersedes all previous editions.

\_\_\_\_\_  
Signature  
Dr. Brad Black, MD, Health Officer

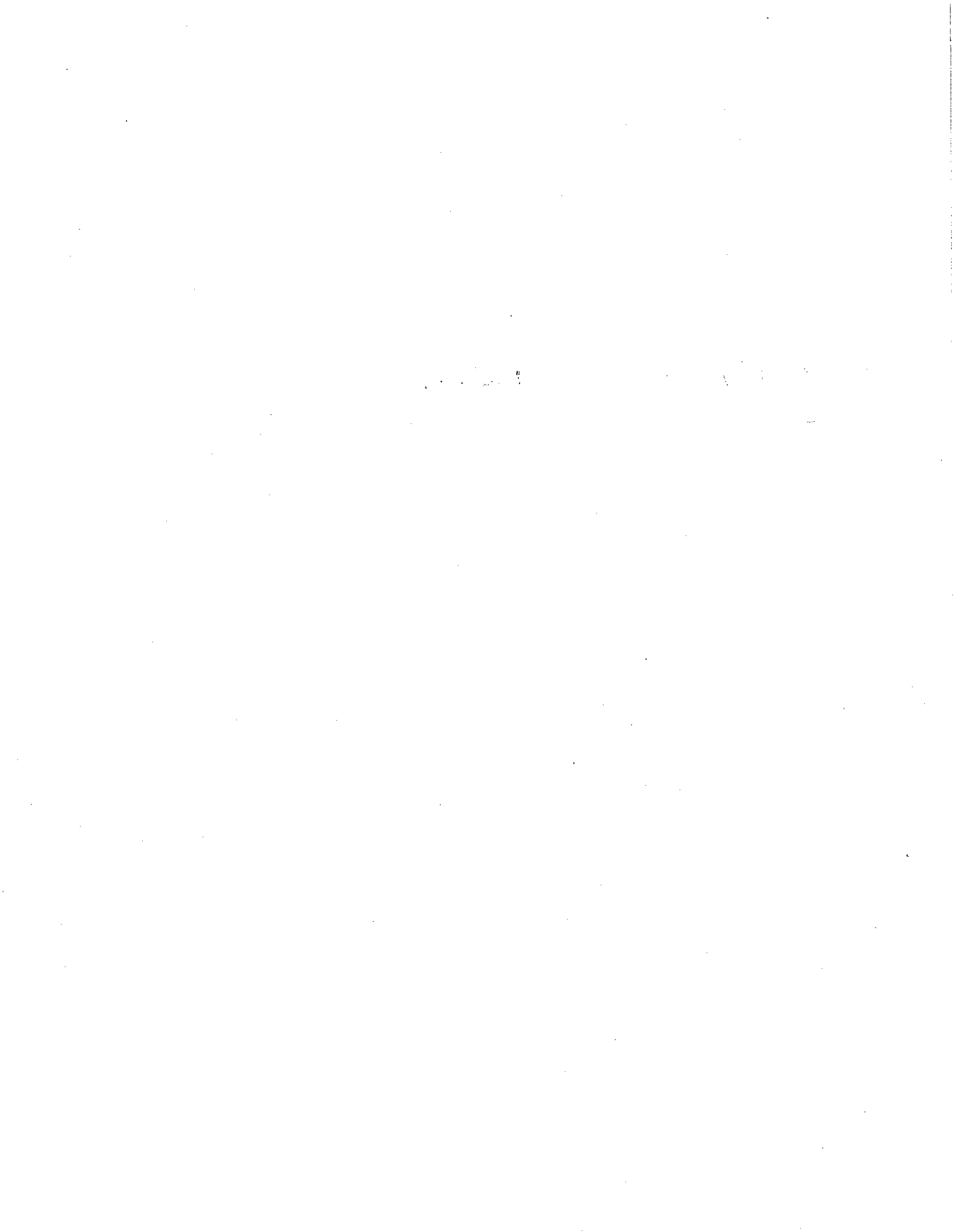
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature  
Jan Ivers, Board of Health Chair

9-25-2019  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature  
Kathi Hooper, Health Department Director

9-13-19  
\_\_\_\_\_  
Date



## Record of Distribution for 2019

Plan Holder Name	Agency/Department	Form of EOP Copy	Date of Distribution
Kathi Hooper	Lincoln County Health Department Director	Electronic	
Toya Laveway	Lincoln County Public Health Department PHEP Coordinator	Electronic & Hard Copy	
Dr. Brad Black	Health Officer	Electronic	
Brent Teske	Lincoln County EMA	Electronic	
SharePoint Copy	MT DPHHS	Electronic	

## Record of Changes

Date	Revisions Made	Approved by:	Distribution Date
6/2016	Total re-write		
9/2019	Review and update of Distribution and Signature Lists	Board of Health	9/11/19

## Table of contents

Section	Page
Introduction - NPI	5
Social Distancing	8
Isolation and Quarantine Response Plan	9
Planning Assumptions	10
Process	13
Appendix A – Sample Isolation and Quarantine Orders	16

---

---

## **Introduction**

The need to utilize non-pharmaceutical interventions (NPI) to control the spread of communicable diseases will vary considerably in relation to the disease for which the approaches are being considered.

As defined by the US Centers for Disease Control and Prevention's Public Health Capabilities, non-pharmaceutical interventions are steps taken to implement strategies for disease, injury, and exposure control. Strategies may include the following:

- Isolation and quarantine
- Restrictions on movement and travel advisory/warnings
- Social distancing
- External decontamination
- Hygiene
- Precautionary protective behaviors

Montana statutes related to the prevention and control of communicable disease outline state and local responses that may be implemented by DPHHS and/or local public health officials are outlined in 50-1-204, 50-2-116 and 50-2-118 of the Montana Code Annotated (MCA). They allow potential use of NPIs in response to naturally occurring or artificially introduced biological agents in connection with terror related events. In addition, the Administrative Rules of Montana (ARM) 37.114.307, 37.114.308 and 37.115.314 allows for the implementation of NPIs, including isolation and quarantine. These statutes and rules encompass all levels of potential use ranging from individual cases to larger scale events such as outbreaks, epidemics or pandemics.

The Lincoln County Emergency Operations Plan (LC EOP) indicates that the Lincoln County Health Department (LCHD) will respond to emergencies and events that involve public health. As a focused approach to operations intended to support the EOP, this plan defines the functions of LCHD.

## **Purpose**

This plan will be referenced during routine situations where exclusion, compliance orders or other NPI's might be considered ranging up to large-scale infectious/contagious disease outbreaks. It is designed to assist decision makers in implementing containment measures, which may include the implementation of NPIs at different levels. This document will include decision matrices, reference legal authority that enables or limits the ability to implement actions, template legal orders and guidelines for implementing NPI's.

This plan is based on the Centers for Disease Control and Prevention's Public Health Preparedness capability 11 outlining guidance related to non-pharmaceutical interventions. This capability consists of the ability to perform the following functions:

- Engage partners and identify factors that impact NPIs
- Determine non-pharmaceutical interventions
- Implement non-pharmaceutical interventions
- Monitor non-pharmaceutical interventions

## **Scope & Authority**

This plan encompasses specific operations of LCHC. Implementation is not contingent on activating the Lincoln County EOP but also may function as a core part of activation of the EOP.

This plan does not replace the day to day duties of LCHD. It supports those activities and supplements them by defining procedures necessary when situations expand beyond the scope of day to day operations.

## **Assumptions**

1. Day to day operations often involve the use of NPIs, including quarantine and isolation per the guidance provided in ARM's and the American Public Health Association Control of Communicable Diseases Manual (CCDM) adopted by the ARM. Various diseases can escalate to cluster/outbreak levels or beyond, including progressing to a significant public health event. Significant public health events outside of this jurisdiction can expand to include populations in Montana and neighboring counties.
2. In the event of a public health event, emergency response operations will be activated at levels commensurate with the event.
3. Operations involving these standard methods of action are inclusive, based on established relationships and partnerships with the public, stakeholders and partners, and contributing agencies.

There are many NPI alternatives that might be utilized short of or beyond community level isolation and quarantine and the effectiveness of these measures must rely upon the understanding, comprehension and active cooperation of the public, business and clinical care infrastructures within communities.

## **Maintenance**

The LCHD will review these procedures annually to ensure currency and accuracy. The goals of this review are to:

- Ensure overall plan accuracy and readiness
- Address and resolve policy, methodology, and technological issues
- Ensure this guide coordinates with related plans, procedures, and protocols
- Make necessary corrections, edits, updates, or procedural adjustments

Changes are tracked in a versioning method and in the Record of Change log.



## **Social Distancing**

Social distancing strategies are non-medical measures intended to reduce the spread of disease from person-to-person by discouraging or preventing people from coming in close contact with each other.

- These strategies could include:
  - closing public and private schools,
  - minimizing social interactions at colleges and libraries,
  - closing non-essential government functions,
  - implementing emergency staffing plans for the public and private sector including increasing telecommuting, flex scheduling and other options and
  - closing public gathering places including stadiums, theaters, churches, community centers and other facilities.

## **Assumptions**

- Implementation of social distancing strategies in Lincoln County may create social disruption and significant long-term economic impacts. It is unknown how the public will respond to these measures. Decisions will be made jointly and concurrently by the health officer and the BOH regarding social distancing.

## **Process**

- The health officer will review social distancing strategies and current epidemiology and coordinate with leadership of towns in Lincoln County regarding social distancing actions that should be implemented to limit the spread of the disease.
- The health officer will also consult with local school superintendents and school presidents regarding the closing of all public and private schools and minimizing social interactions at colleges, universities and libraries in Lincoln County.
- If social distancing strategies are initiated, the health officer will monitor the effectiveness of social distancing in controlling the spread of disease and will advise appropriate decision makers when social distancing strategies should be relaxed or ended.

# Isolation and Quarantine Response Plan

## Introduction

Isolation refers to the separation of infected individuals to prevent the transmission to others during the period of communicability. Quarantine means the separation or limitation of freedom of movement of well persons who are suspected to have, or known to have, been exposed to an infectious agent. Both of these actions are intended to minimize the risk of community transmission of an infectious agent or community exposure to a toxin or radiological hazard. The duration for isolation or quarantine is based on recommendations from the most recent edition of the Control of Communicable Diseases Manual (CCDM) or from expert consultation from MT DPHHS CD/Epi Section and/or the CDC.

Purpose: This plan provides general guidance in an event necessitating isolation or quarantine of infected individuals, their contacts or other infectious agents. The goal of such actions would be to prevent the spread of disease and protect the health and safety of Lincoln County residents.

## Scope & Authority

This plan defines roles and responsibilities for instituting isolation and quarantine in an event deemed to be a threat to public health. This primarily focuses on the roles, responsibilities and activities of LCHD and key response partners during situations involving isolation and quarantine.

## **Organizational Roles**

### Lead Organizations:

- Lincoln County Health Department
  - Health Officer
  - Health Department Director
  - PHEP Coordinator
- Lincoln County Board of Health

### Support Agencies:

- Lincoln County Attorney
- Lincoln County Commissioners
- City of Libby
- City of Troy
- City of Eureka
- Emergency Medical Services
- Lincoln County Sheriff's Department
- Cabinet Peaks Medical Center

This plan applies to:

- All disease outbreak emergencies requiring isolation and quarantine implementation, coordination, and/or management beyond the capacities of routine LCHD operations
- Persons in Lincoln County either infected with or exposed or potentially exposed to an infectious agent

### **Legal Authority**

Local Health Board and Local Health Officer:

- Montana Code Annotated Title 50, Chapter 2, "Local Boards of Health"
- Administrative Rules of Montana, 37.114.101 to 1016
- Control of Communicable Disease Manual (CCDM) adopted by reference in ARM 37.114.201 (2)
- "Guidelines for Isolation Precautions in Hospitals." Adopted by reference in ARM 37.114.101(9)
- Montana Code Annotated Title 50-16-601 to 611 "Government Health Care Information Act"
- Montana Code Annotated Title 10, Chapter 3, 401-406, "Disaster and Emergency Services, Local and Interjurisdictional Planning and Execution"
- 50-2-116 (2a) MCA
- 50-2-118 MCA

Montana Department of Public Health and Human Services:

- Montana Code Annotated Title 50-1-102 General Powers and Duties ARM Title 37.114.101 through 1016
- 50-1-204 MCA

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

- Executive Order No. 13295, "Revised List of Quarantinable Communicable Diseases", revised July 2014

### **Planning Assumptions**

Development of the isolation and quarantine response plan for LCHD assumes the following:

- Isolation and quarantine may be one of several tools to reduce the spread of communicable illness
- Planning efforts must incorporate and address unique needs and circumstances of functional needs populations
- The ability of LCHD to implement this plan is based not only on the number of people affected and the epidemiological aspects of the suspected or confirmed agent, but on the distribution of populations within the county (town residents versus rural home residents)

- LCHD will follow HIPAA laws in disclosure of information to protect the identity and location of affected individuals to the greatest extent possible
- Adjacent counties and other jurisdictions shall be included in response efforts, if necessary
- Large-scale isolation and quarantine events will require the participation of many public health resources, including workforce, as well as coordination with state authorities, multiple community entities, health care entities, and first responder agencies
- An effective public communication program is essential to achieving voluntary compliance with all disease control strategies in large-scale events
- Isolation and quarantine may require the involuntary detention of individuals who may pose a threat to the public's health and do not cooperate with orders from the Health Officer
- An individual's cooperation with voluntary isolation or quarantine will be assumed in good faith unless there is evidence to the contrary. However, LCHD will still check in with the individuals to conduct symptom checks. Depending on the event, information collected during monitoring may be used as evidence of non-cooperation
- Individuals confined under these measures will be supported by partners to the extent possible through means such as provision of food, shelter and other necessities
- LCHD will, to the extent possible, protect against stigmatization or unwarranted disclosure of private information, and will support placement in an appropriate facility if the home environment is unsuitable
- LCHD has a 24/7 notification system to quickly respond to potential health threats
- An event triggering activation of this plan is also likely to involve other emergency response capabilities
- Depending on the size of the geographic area affected and number of individuals that will be subject to isolation and quarantine measures, the Lincoln County Emergency Operations Center may or may not be active
- LCHD commits to carry out a transparent process for the development and implementation of isolation and quarantine

**Isolation versus Quarantine:** Isolation or quarantine is determined by several factors such as type of disease, number and severity of the morbidity, etc. For this plan Isolation refers to a case and Quarantine refers to a contact

**Isolation:** It may be preferable for affected individuals to be monitored in their own homes if acceptable requirements are met. Before a case is confined to the home, the residence should be assessed to be certain that it has the necessary features for proper infection control measures.

- Functioning telephone, electricity, and drinking water.
- Water for bathing and cleaning.
- An operating sewage system attached to a municipal or other approved sewage system for disposal of feces and urine of an infected person.

- An infected person must be isolated behind a closed door in a separate bed in a room protected from potential vectors.

During the period of isolation, the household contacts of cases that are not providing care to the case should be relocated if possible. If relocation is not possible, then interactions with the case should be minimized.

All persons in contact with the case should be educated regarding appropriate infection control precautions, including hand hygiene, PPE, concurrent disinfection, and environmental decontamination. The LCHD will ensure education and shall use reasonable means to meet the basic needs of the isolation case and provide equipment and supplies necessary for the caregiver to practice infection control measures.

- A person caring for an infected person must avoid coming into contact with any other person until every precaution required has been taken to prevent the spread of infectious material.
- Each person caring for an infected person must wear a washable or disposable outer garment (such as paper gown or suit), mask, and gloves, and must thoroughly wash their own hands with soap and hot water after handling an infected person or an object an infected person may have contaminated. Before leaving the room of an infected person, a person caring for an infected person must remove the washable outer garment and hang it in the infected person's room until the garment and room are disinfected. If disposable garments, gloves or mask are used, dispose of in a red biohazard bag. *(Disposable garments, gloves, mask, and red bags are stored at the office of LCHD)*
- An object, which may have been contaminated by an infected person, must be thoroughly disinfected before it is removed from the infected person's room or bagged in a red biohazard bag, labeled, and burned or decontaminated.

**Hospital Isolation:** CPMC has rooms that have the capacity of creating a negative pressure environment as well as isolation.

**Quarantine:** Quarantine represents a range of possible interventions that could be applied at the level of the individual, group, or community. Quarantine could be used for:

- Individuals with close contact (e.g. household contact) to a case.
- Small groups with close contact (e.g. co-workers, healthcare workers, with unprotected exposure) to a case.
- Larger groups with an unspecified extent of exposures (e.g. social groups, persons in congregate settings, passengers on airplanes) to a case.
- Communities in which the extent of exposure for individuals is unknown but interventions are needed to control potential exposure to others. This can be accomplished by social distance and limiting interactions and movement within a community.

Home Quarantine is most suitable for contacts that have a home environment in which their basic needs can be met and the protection of unexposed household members is feasible. The optimal implementation of home quarantine includes:

- Ability to monitor one own symptoms (or have them monitored regularly by a parent, guardian, or caregiver.)
- Functioning telephone, electricity, and drinking water.
- Water for bathing and cleaning.
- An operating sewage system attached to a municipal or other approved sewage system for disposal of feces and urine.
- Access to food and food preparation.
- Access to healthcare providers.

Contact and household members should be educated in symptoms of the disease, use of PPE, hygiene, etc. The LCHD will ensure education. No specific precautions are needed for household members of contacts who are in home quarantine, as long as the contact remains asymptomatic. The household members can go to school, work, etc. without restrictions. However, household members should be advised that they may be considered as quarantined or isolated.

If the contact develops symptoms, then he/she should immediately notify the PHO to obtain medical evaluation and at that point household members should remain at home.

**Quarantine in Community Facilities:** Contacts who do not have appropriate home environment for quarantine or contacts who do not wish to be quarantined at home may be quarantined in specific facilities designated for this purpose.

**Quarantine for Work:** This applies to healthcare workers or other essential personnel who may have been exposed to cases and need to continue working (with appropriate infection control precautions) but are quarantined either at home or in a designated facility during off-duty hours.

## **Process**

**Assessment:** Determination of need for quarantine or isolation.

Upon receipt of a report of a communicable disease, the Communicable Disease Coordinator shall confirm the diagnosis with the laboratory or the healthcare provider. If the case is not confirmed, but is suspect or probable, the Health Officer may handle the case as communicable until medical or laboratory information rules out the presence of the suspected disease. Upon confirmation of the diagnosis the Health Officer will determine if isolation or quarantine is warranted.

The Communicable Disease Coordinator will identify contacts of the case. An EPI team will be assembled depending upon the type of disease. Active surveillance shall be increased

MT DPHHS epidemiologist, the county attorney and the BOH will be notified. Local healthcare providers and pertinent partners will be notified of relevant information via a Health Alert Network Message. The Lincoln County PIO will make a public announcement that is approved by the Health Officer.

**Requesting or Ordering ISOLATION:** The Communicable Disease Coordinator will draft a request or an order for isolation that shall include:

- Name and title of the Health Officer
- Name of the case
- The communicable disease of concern
- The place of isolation
- Type of isolation to be established and maintained
- Date or conditions upon which isolation will be reviewed for lifting except for the hospitalized person.

If the case is hospitalized, the Health Officer may consult with the CPMC Infectious Control staff.

During an outbreak or epidemic, the Health Officer may use clinical screening techniques to determine if an individual has symptoms of a communicable disease that warrants isolation.

**Requesting or Ordering QUARANTINE:** The Communicable Disease Coordinator will identify contacts of the case by information from records, conducting interviews, and any other means that may help determine and locate contacts.

The Health Officer shall determine if quarantine is warranted by:

- Consulting ARM 37.114.5 and 37.114.10. The Health Officer may also consult with the MT epidemiologist, CDC, etc.
- 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 will not produce hardships without equal or greater public benefit.

The Health Officer shall determine if quarantine is a request (voluntary) or order (mandatory). The Health Officer may revise the status or the order or request based on changes in conditions, information, non-compliance, etc.

The Communicable Disease Coordinator shall draft a quarantine order or request that shall include:

- Name and title of the Health Officer
- Name of the contact
- Place of quarantine
- Date that quarantine will commence
- Date that quarantine will be reviewed for lifting.

**Maintaining Isolation or Quarantine:** LCHD staff shall monitor compliance with the order. They will also monitor cases and contacts for symptoms of the communicable disease. If the resources available to the Health Officer are not sufficient to maintain isolation or quarantine, the Lincoln County Emergency Response Plan will be activated. Contacts in quarantine that develop symptoms/signs of communicable disease shall be immediately placed in isolation.

The Health Officer is to be notified of a death if the person has or is suspected of having a communicable disease and must inform the mortician of that fact.

Quarantine shall be reviewed for lifting when the incubation period of the infectious agent is completed. If no symptoms/signs of infection are present the Health Officer may make the decision to lift the order. Isolation shall be reviewed for lifting when the period of contagion has passed. This period may be longer than the symptomatic period. The Health Officer may make the decision to lift the order.

Persons subject to *mandatory* isolation or quarantine may request judicial review. The Health Officer may sustain the mandatory order while the appeal is pending. Assistance for enforcement in carrying out the Health Officer's order may be requested from the Sheriff or other peace officer.

Quarantined or isolated individuals are not allowed to travel or be transported from one location to another without the permission of the local health officers with jurisdiction over the places of departure and arrival.

In all instances, except as required by law, the confidentiality of cases and contacts will be maintained. Signs 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.

**Decontamination:** If warranted, decontamination and disinfection of the quarantine and isolation environments shall be done in accordance with the "Control of Communicable Disease Manual, an Official Report of the American Public Health Association"

**Documentation:** All meetings and information related to the isolation and quarantine shall be documented and preserved. Records will be kept the Communicable Disease Coordinator.



## Appendix A: Sample Isolation and Quarantine Orders

*This order is a sample; pertinent information and other items as appropriate will be added.*

### QUARANTINE/ISOLATION ORDER

**In Re:** *(Name of Individual, Group, Area) of (Town)*

I, Brad Black, MD, Public Health Officer for Lincoln County Montana, authorized by the Lincoln City-County Board of Health, pursuant to MCA 50-2-116 and MCA 50-2-118, having reasonable grounds to believe that the above-named is (are) infected or have been exposed or at reasonable risk of having *(Name of communicable disease)* or being contaminated or passing such communicable disease or contamination to other persons and thereby posed a significant threat to public health and that *(quarantine or isolation)* is necessary and is the least restrictive alternative to protect or preserve the public health.

#### **ORDERED:**

1. *(Name of individual or individuals  
Description of geographic area)*

Is hereby *(Select either quarantined or isolated)* within

2. *(Describe the specific location, e.g. home giving addresses)* for
3. The time period not to exceed *(number)* days- *(Provide specific dates)*

The basis for my belief and determination for the above Order is as follows:  
*(Provide short and concise statement)*

It is further **ORDERED:**

*(Insert type of isolation or quarantine and other terms or conditions as may be necessary to protect and preserve the public health)*

#### **NOTICE:**

Any individual *(Select quarantined or isolated)* has the right to an attorney and the right to a hearing at which you may be represented by counsel.

An appeal to the Order may be initiated by you or your representative by requesting, in writing, a hearing in District Court. This request may be submitted by first-class mail or facsimile machine.

Any appeal of this Order does not stay its requirements. This Order is effective upon receipt.

**COMPLIANCE**

Failure to comply with any provisions of this Order may result in a fine or imprisonment for your offense.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Brad Black, MD  
Lincoln County Health Officer

STATE OF MONTANA, COUNTY OF LINCOLN, ss.:

On this day, personally appeared before me

\_\_\_\_\_  
to me known to be the person described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned.

Witness my hand and official seal hereto affixed

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Montana

My commission expires \_\_\_\_\_.