



# **Trumbull County Public Health Community Containment Plan (Quarantine Plan)**

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## **Executive Summary:**

Disease containment refers to measures that decrease contact among people in order to slow transmission of the spreading contagious infectious disease. These measures will be particularly important in the absence of an effective vaccine and/or medication. Disease containment includes individual level measures (isolation and quarantine) and community level measures (ex. School closures, suspension of public gatherings) to limit or slow the transmission of the contagious infectious disease.

The Ohio Department of Health (ODH) is the lead state agency for infection control recommendations such as isolation, quarantine, and community-wide social distancing. Activation of disease containment measures would primarily come from the Trumbull County Combined Health District (TCCHD) Board of Health (BOH) with ODH serving in a supportive and consultative role. ODH will activate disease containment measures. Throughout the progression of a contagious infectious disease outbreak, ODH will be in communication with its local and federal public health partners, with Centers for Disease Control and Prevention (CDC) being the principal federal agency.

Isolation and quarantine are strategies that may be used as part of the overall effort to prevent and control the transmission of a contagious infectious disease among humans. Isolation of patients with certain communicable diseases occurs routinely in healthcare facilities. Patients who are infectious with a contagious infectious disease will be isolated while hospitalized. In addition, non-hospitalized infectious patients will be requested to isolate themselves at home during the infectious period of their illness.

In contrast, the use of quarantine of individuals to control the spread of a contagious infectious disease will likely depend on the disease itself and the severity of the disease. For example: during a pandemic, quarantine will only be used for severe or moderate level pandemics because influenza has a relatively short incubation period and people are usually infectious before they display symptoms.

Because contact tracing, the notification of individuals who were exposed to the person when this person was infectious, is labor intensive, this method will likely be of the most benefit early on in the outbreak. Contact tracing will allow for the identification of those exposed, including prompting diagnosis of early symptoms, and allow for early voluntary sheltering, and quarantine to reduce disease transmission.

The Trumbull County Combined Health District Board of Health will issue the quarantine and isolation orders, but ODH will have the ability to issue these if needed. Isolation and quarantine may also occur at the request of the federal authorities. It is anticipated that when public health institutes isolation and quarantine most people will comply. However the District Board of Health and ODH may seek a court order of isolation and quarantine if it is determined that legal action is appropriate to protect public health.

## **Purpose:**

The Community Containment Appendix provides guidance for the health departments in Trumbull County regarding initiation, continuance, and termination of the activities. This plan describes the circumstances, authority and events that may necessitate specific leadership decisions and actions as well as:

- Establish the decision making criteria to be used by the Health Commissioner or designed when isolation and/or quarantine are necessary to minimize the health impact of a disease outbreak;
- Identify the authority of the health department and partner agencies in the event of an outbreak requiring isolation and quarantine;
- Describe procedures for supporting those in home isolation and quarantine;
- Define roles and responsibilities for the LHD, health care partners, and local response agencies during an outbreak requiring isolations and quarantine;
- Describe how communication and coordination will occur between LHD, local partners, and ODH; and
- The coordination with other local regional, state, and federal partners.

## **Assumptions:**

1. An epidemic of a highly communicable infectious disease with severe morbidity and/or mortality could cause significant impact on the health of Trumbull County residents.
2. An epidemic of a highly communicable infectious disease could result in a disaster situation for Trumbull County affecting more than just medical and public health.
3. The local health department may utilize voluntary isolation/quarantine as one of several tools to reduce the spread of communicable diseases. The public might be on voluntary compliance from ill or exposed persons thus implementing the least restrictive means possible in order to reduce the spread of infection.
4. Pharmaceutical measures to prevent and control an epidemic of a highly communicable infectious disease may be available (smallpox vaccine, plague post exposures antibiotic prophylaxis) or they may be limited or non-existent (pandemic influenza or SARS)
5. Maintenance of essential community functions such as public safety, public works, public utilities, and food supplies may be impacted by an epidemic of highly communicable infectious disease.
6. Local, state, and federal authorities will coordinate to institute the least restrictive measures of limitations on movement to contain and control the infectious disease.
7. All decisions for isolation and quarantine will be within the established Board of Health policy (**Attachment A**) and all other identified legal authorities (**Attachment B**).
8. Isolation/quarantine may require involuntary detention of individuals who may pose a threat to the public health and do not cooperate with requests from the Health Commissioner or designee.

9. Community containment measures and isolation and quarantine measures will be determined by the disease detected and the severity of the disease in the community and may be determined by CDC, ODH, District Board of Health, or all three entities.
10. All information regarding isolation and quarantine for each individual disease is located in the ODH Infectious Disease Control Manual.
11. Trumbull County agencies will need to work together to implement this procedure in order to protect the health of the public during an outbreak of a highly communicable disease. Large scale isolation/quarantine events will require the participation of many public health resources as well as coordination with the community, health care, and first responders for a successful response.
12. Initially the contact tracing will begin with small clusters of individuals. These cases will need to be a laboratory confirmed case and need to show evidence of community transmission (epidemiologically linked cases from more than one household).
13. Centers for Disease Control and Prevention have outlined multiple non-pharmaceutical community containment strategies for a contagious infectious disease. Decisions about which of these interventions to employ will depend on the detected disease and the severity of the illness (**Attachment C**), as well as the impact on specific subpopulations, the direct and indirect costs, the feasibility of accomplishing the intervention, and the consequences on critical infrastructure, healthcare delivery, and society. These strategies include:
  - A. Isolation and treatment (as available depending on the detected disease) with medications or vaccine of all persons with probable disease. Isolations may occur in the home or healthcare setting, depending on the extent of an individual's illness and/or current capacity of the healthcare infrastructure.
  - B. Home isolation of members of households with confirmed or probable disease. Keep in mind the consideration of combining this intervention with prophylactic use of medications or vaccines if available for the detected disease, only if sufficient quantities of effective medications exist and that a feasible means of distributing them has been identified.
  - C. Dismissal of students from school including public and private schools as well as colleges and universities, school-based activities, and closure of childcare programs, coupled with protecting children through social distancing in the community to achieve reductions of out of school social gatherings.
  - D. Use of social distancing measures to reduce contact among adults in the community and workplace, for example, cancellation of large public gatherings and alteration of workplace environments in order to decrease social density and preserve a healthy workplace to the greatest extent possible with the exclusion of essential services. Enable institution of workplace leave policies that align incentives and allow for the non pharmaceutical inventions outlined above.
14. The health departments in Trumbull County will collaborate in order to accomplish the strategies outlined in this plan.
15. Isolation and quarantine planning must incorporate the unique needs of vulnerable populations including but not limited to the homeless, non-English speaking special needs and the Amish.

16. All policies and procedure to assure the care of protected health information applies but recognizes that the LHD'S may make necessary disclosures to protect the public health when acting as the Public Health Authority.
17. An effective public communication program is essential to achieve voluntary compliance with disease control strategies.

## **Introduction:**

The community containment strategy for a highly infectious disease that affects a large amount of people has four goals:

1. Limit the spread of the illness;
2. Mitigate disease, suffering, and death;
3. Sustain infrastructure; and
4. Lessen the impact to the economy and the functioning of society.

The community containment strategy will be comprised of pharmaceutical and non-pharmaceutical interventions. The interventions need to be implemented simultaneously (if pharmaceutical interventions are available) and in a timely manner in order for them to reduce the spread of the infectious disease.

This community containment procedure can be applied for multiple highly infectious diseases that either do or do not have pharmaceutical interventions. All interventions are based on the individual disease that is detected and its severity and communicability (**Attachment C**). Depending on the disease, this plan could be used for one case of illness or multiple cases. If there are large amounts of illness or a rare disease without cure or vaccine then there could be a declaration of a public health emergency. The declaration is determined by whether a disease or disorder presents a public health emergency (defined as significant outbreak of infectious disease or bioterrorism attacks {42 U.S.C & 247d(a)}).

## **Definition of Disease Containment Measures:**

ODH guidance on infectious disease prevention and control through limitation on movement and other infection control practices can be found in Section 5 of the ODH Infectious Disease Control Manual <http://www.odh.ohio.gov/PDF/IDCM/sect5.pdf> (**Attachment C**). In addition, public health disease containment measures may include voluntary isolation and quarantine; social distancing activities, such as encouraging people to avoid large crowds, closing schools, churches, shopping centers, etc.; and encouraging people to shelter in place.

**Legal definitions of isolation and quarantine from the OAC 3701-3-01 are as follows:**

- **Isolation:** Separation of an infected individual from others during the period of disease communicability in such a way that prevents, as far as possible, the direct or indirect conveyance of an infectious agent to those who are susceptible to infection or who may spread the agent to others.

- **Quarantine:** Restriction of the movements or activities of a well individual that has been exposed to a communicable disease during the period of communicability of that disease and in such a manner that transmission of the disease may not occur.

### Key Definitions:

- **Social Distancing:** is a voluntary protective measure performed by an individual to limit the amount of exposure that he or she may receive, if exposed to persons with a communicable disease.
- **Voluntary Isolations and Quarantine:** are voluntary protective measures that are designed to protect the public from unnecessary exposure to a communicable disease. No public health laws are being enforced; rather, guidelines are issued to the public advising to practice voluntary isolations and quarantine.
- **Shelter in Place:** To seek immediate shelter (usually in your own home) and remain there during an emergency rather than evacuate the area. People may act in their own interest by staying at home so as not to become exposed to an illness or to further spread their illness. (This will be used in chemical and radiological incidents)
- **Mandatory Isolations and Quarantine:** is not voluntary. Under Revised Code (ORC) 3707.04 and 3707.34, the local health jurisdictions reserve the right to exercise the mandatory in order to limit the spread of communicable diseases that may pose as a major or significant public health concern due to the severity of disease or the potential epidemic spread.

### Disease Containment Measures:

The following is a list of disease containment measures that may be used by public health to reduce and limit the spread of an infectious disease.

#### Limitation of Movement:

##### A. Isolation and Treatment of Ill Persons

Follow Ohio Department of Health and Centers for Disease Control and Prevention recommendations for the identified illness for the isolation and treatment of the ill persons. All information can be found in the ODH Infectious Disease Manual and through additional communications such as OPHCS alerts from the Ohio Department of Health State Epidemiologist.

<http://www.odh.ohio.gov/healthresources/infectiousdiseasemanual.aspx>

(Attachment C).

## B. Quarantine of Contacts of Ill Individuals

Public Health is the lead agency in the management of communicable disease control. Contact tracing, monitoring, voluntary and involuntary quarantine of household contact should be done as dependant on the incubation and duration of the identified infectious disease. If the disease becomes widespread in the community, contact tracing will be recommended until the point that public health (local and state) has higher competing priorities to worry about. ODH will use the Ohio Disease Reporting System (ODRS) to keep track of quarantined contacts. The Board of Health and/or Health Commissioner has authority to issue a quarantine order. In the event that the issued isolation/quarantine order is not followed voluntarily, the Board of Health and/or Health Commissioner can authorize initiation of involuntary quarantine if any of the following occurs:

- There is reason to believe that the individual or group is, or is suspected to be, infected with, exposed to, or contaminated with a communicable disease or chemical, biological, or radiological agent that could spread to or contaminate others if remedial action is not taken and:
- There is reason to believe that the individual or group would pose a serious and imminent risk to the health and safety of others if not detained for purposes of isolation or quarantine: and
- The Trumbull County Combined Health District has made reasonable efforts, which have been documented, to obtain cooperation and compliance from the individual or group and they have not complied.

### **Community Containment (Social Distancing):**

The Trumbull County Board of Health (TCBOH) has the authority under the Ohio revised Code to cancel or postpone events, or order closure of schools, businesses if the overall public health of the community would benefit from such. This would be in order contain and prevent further spread of an infectious disease that cannot be treated or prophylaxes against and the only containment measure is to prevent gatherings.

### **Animal Quarantine:**

The TCBOH has the authority to confine a biting animal during an investigation. The Department of Agriculture would be the control agency for animal diseases, farm animal isolation, or quarantines facilities or farms.

### **Food Isolation/Embargo:**

The TCBOH per the Ohio Uniform Food Safety Code has the authority to close a restaurant establishment if they are found to not be abiding by the state law. See Legal authority in **Attachment B**.

### **Non-Pharmaceutical Interventions:**

The timing of initiating the Non-Pharmaceutical intervention will influence their effectiveness. Implementing these measures too early could result in economic and social hardships without public health benefit. Conversely implementing these interventions after extensive spread has occurred in a community may limit the public health benefits of applying the measures.

Initiating these interventions will occur differently for different diseases. For example, Pandemic Influenza and possibly a widespread SARS outbreak would require some community interventions to occur when the first cluster of cases showed up in Ohio, NECO region, and/or an adjacent county in Pennsylvania (**Attachment F**). Recommendations will be based on the severity of the illness and the ability to contain the clusters and will determine when to initiate the Non-Pharmaceutical Community intervention.

**Pharmaceutical Interventions:**

Some of the highly infectious diseases have antibiotics or vaccines that will stop the spread in a community. Smallpox and plague are two examples. If a case of one of these diseases would occur, treatment of the cases and contacts would be recommended for disease containment. If the cases and contacts are extensive, or if travel or large gatherings have been involved then mass prophylaxis may be considered. This will occur at the recommendation of the Centers for Disease Control and Prevention and Ohio Department of Health.

**Mass Clinic/POD:**

If pharmaceuticals in the form of vaccines and/or antibiotics are available for the infectious disease identified they will be obtained and distributed according to the Trumbull County Mass Clinic/SNS Plan. To whom the pharmaceuticals will be distributed will be determined by the local medical director and epidemiologist through consultation with ODH and CDC.

**Risk/Public Communication:**

The TCCHD will serve as the lead agency for risk communication messages and public information. Medical professionals, the public, EMS, hospitals, etc will need to be made aware of the communicable disease issues affecting their county and what they should be doing to protect themselves and others in the county. All information will be distributed according to the Communications Plan. If the incident is large enough a Joint Information Center will be opened in tandem with the county Emergency Operations Center. This will provide consistency and accurate information in a variety of avenues. Messages should also be coordinated with ODH, CDC, health care providers, first responders, general public and other coordinating agencies to provide consistent and accurate information in a variety of ways such as e-mails, web site postings, media, billboards, letters, posters, etc.

**Responsibilities:**

The organizations that have responsibilities for guidance on human infectious disease infection control practices in Ohio are ODH/Local Health Department (lead agency), in coordination with CDC, the Governor's Office, EMA, prosecutors office, EPA, ODNR, and OSHP.

### **Local Health Department Responsibilities:**

The local health department acts as the lead agency and their primary responsibilities are:

- A. Coordination of infection control practices to include specific containment, prevention, and treatment guidance for the infectious disease that causes the emergency;
- B. Provide guidance on any type of disinfection that may be required;
- C. Provide guidance on limitations on movement (ex. quarantine orders) to limit the spread of infectious disease to other areas within the county or state; and
- D. For governing the receipt and conveyance of remains of the deceased, and for other sanitary matters (ORC 3701.13 and 3701.14)

### **Community Agency Responsibilities:**

The following are functions of an isolation/quarantine procedure that will require other county agencies such as Mahoning County Emergency Management Agency, Red Cross, Salvation Army, and Public Works to assist public health in upholding:

#### A. Emergency Management Agency/Service Agencies:

- **Essential Services for Isolated/Quarantined Individuals:**

Provisions need to be put in place to supply essential services and supplies to persons who are placed in isolation and quarantine under the authority of the Board of Health. Safety (PPE) and security (law enforcement) precautions will need to be considered in each instance.

These provisions include:

- a. Food and water
  - b. Shelter (if they cannot remain in their homes, travelers, or are homeless)
  - c. Medicines and medical consultations
  - d. Clothing
  - e. Heat, Water, electricity, telephone, etc)
  - f. Mental health services
  - g. Other supportive services: (daycare, etc)
  - h. Transportation to medical treatment as required.
- Mental health Board can assist with access to support services for those in need
  - Coordinate with TCJFS to provide temporary financial assistance for persons in isolation/quarantine if needed.

#### B. Local Law Enforcement:

- **Enforcement of Quarantine Orders:**

Local law enforcement will be asked to assist public health with upholding the quarantine order issued by the Board of Health by:

- Escorting individuals requiring transportation for purposes of involuntary isolation and quarantine, if needed
- Executing arrest warrants related to Isolation and Quarantine cases.

Public health will provide Personal Protection information (use of masks, gloves, etc) to the law enforcement officers who will be escorting and/or arresting contagious individuals.

C. Prosecuting Attorney's Office:

- Assist public health in receiving authorization for involuntary quarantine, once the need is determined by the Board of Health and/or the Health Commissioner.
- Petition the court *ex-parte* to authorize involuntary detention once need is determined by the health commissioner.
- Represent Public Health in any petition or appeal hearings required to carry out involuntary isolation or quarantine of individuals.
- Coordinate with public health and local law enforcement to serve notice necessary to achieve isolation/quarantine in the community.

## **Concept of Operations**

### **Direction and Control:**

- The TCCHD will be the lead in coordinating the local health and medical response to an outbreak event that may require isolation/quarantine.
- The TCCHD will operate under the Incident Command System throughout the event.
- The TCCHD may activate the Department Operations Center and/or request activations of the EOC to coordinate response during an outbreak situation.
- The TCCHD will respond under the auspices of this annex as well as other pertinent health department response plans and annexes.

### **Determination of Need for Isolation and/or Quarantine:**

- The Health Commissioner or designee in collaboration with the BOH, Medical Director, Epidemiologist, and Nursing Director will authorize the use of isolation/quarantine strategy to control a communicable disease outbreak. This group will also decide if an isolation/quarantine facility should be activated.
- The Department Operations Center will then be activated and an Incident Commander assigned.

### **Initiation of Requests for Voluntary isolation/quarantine (Epidemiology Response Plan) by the Epidemiology Team:**

- Initiate contact with suspected/confirmed case or contacts (**Attachment D**).
- Document detailed information related to the investigation and enter all cases and contacts into a database.
- Verbally (and then written) communicate the following information:
  - a. The circumstances of the exposure, characteristics of the illness, and potential for infection to others;
  - b. Request for individuals to isolate/quarantine themselves;

- c. Explain the isolation/quarantine process. What is expected from the individual, how public health will support their needs, length of time they will require isolation/quarantine and public health contact information; and
- d. Provide an information packet and letter that will need to be signed by the individual confirming they understand the issue and understand and will follow the required isolation/quarantine instructions spelled out to them in the letter (**Attachment E**).

**The Epidemiology Team:**

- Coordinate information for all individuals being followed.
- Develop a schedule for daily check-ins. This may require a visit from the public health staff member, a phone call, or Skype call to confirm that the contact in quarantine is not ill or that the person in isolation is taking their medication properly and to monitor their health status.
- Record information from the calls/visits on a standard form and enter into a database.
- Report any irregularities such as change in health status or failure to respond to daily call to Operations Chief or Incident Commander.
- Document all requests for assistance, include date and time of request, nature of a request, manner with which the request was managed (ex. Referral agency, contact person and number, any follow up, etc.).
- Document instructions that include the location and dates of the isolation/quarantine, the suspected disease, and the medical basis for isolation/quarantine, and relevant client information (special needs, etc.). Provide a copy to the Nursing Director and the health department legal advisor; as well as enter information in the data base.
- Alert the Health Commissioner about non-compliance situations.
- Coordinate with hospital discharge planners to get notice of discharge of patients requiring isolation/quarantine. Initiate steps for home isolation/quarantine as outlined above.

**Involuntary Detention for Isolation/Quarantine:  
(Regulations in Attachment B)**

The Trumbull County Board of Health and Health Commissioner may authorize detention for isolation/quarantine under the following circumstances (consult with prosecutor):

- There is reason to believe that the individual is or suspected to be infected with or exposed with a communicable disease, chemical, biological, or radiological agent that could spread or contaminate others if remedial action is not taken and:
  - a. There is reason to believe that the individual would pose a serious risk to the health and safety of others if not placed in isolation/quarantine.

- b. The TCCHD have made reasonable efforts to obtain cooperation and compliance with requests for medical exams, testing and treatment, decontamination of the persons and animals, and voluntary isolation/quarantine.
- The Health Commissioner may petition the Court of an Order authorizing continued detention for up to 30 days following the initial 10 day detention, pursuant to ORC 339. In order to grant the petition the court must find clear, cogent, and convincing evidence that isolation or quarantine is necessary to prevent serious and imminent risk to the health and safety of others. This decision to petition the court will be based on recommendations of the Medical Director as well as the Trumbull County Prosecutors Office.
- The Trumbull County Prosecutors Office will represent the Health Commissioners proceedings for involuntary detention.
- The Health Commissioner or designee will coordinate and brief law enforcement officials for the jurisdiction(s) in which the orders will be served. If necessary, law enforcement support for enforcement of the isolation/quarantine order will be requested.
- The TCCHD will provide to law enforcement officials technical information about the disease and appropriate PPE that should be used during enforcement.
- Detention will occur in the least restrictive setting that does not endanger the public.
- TCCHD will provide the same monitoring and services outlined in the section for voluntary isolation/quarantine. Some modifications may be required depending on the location of the involuntary isolation/quarantine.

**Release from Isolation/Quarantine:**

- The Health Commissioner in collaboration from the Medical Director and ODH and CDC will determine when to release the person from voluntary isolation/quarantine when:
  - a. The individual is no longer suspected to be infected or contaminated; or
  - b. The individual is no longer considered to pose a serious risk to the health and safety of others if released from isolation/quarantine.
- If release of a person in involuntary isolation/quarantine is authorized before expiration of the detention order, the Trumbull County Prosecutors office will coordinate the activities that will accomplish release.
- The Epidemiology Team will:
  - a. Initiate direct contact with the person to be released from isolation/quarantine and communicate the date and time of release;
  - b. Follow up verbal notification with written verification of date and time of release;
  - c. Provide contact information in case any questions or problems occur after release;
  - d. Document verbal and written notification and enter into a database; and
  - e. Cease daily monitoring and close the case.

## Attachment A

### Trumbull County Board of Health Policy relating to Delegation of Authority to Quarantine

**Preamble:** In a bioterrorism event, the ability of local public health officials to act in a swift and decisive manner, without delay, can quite literally be the difference between life and death. If circumstances have rendered a meeting of the Board of Health impractical and/or impossible, and/or delaying action until a meeting of the Board would compromise the public's health, the Health Commissioner must be authorized to act on the Board's behalf. With this in mind, the Board of Health has determined that this Policy is necessary to protect the public health and ensure a swift and timely response to a bioterrorism or other emergency public health event.

**Whereas,** the Board of Health has primary authority to enforce the provisions of sections 3707.04 to 3707.32 of Revised Code regarding Isolation and Quarantine; and

**Whereas,** section 3707.34 of the Revised Code authorizes the Health Commissioner to act on behalf of the Board of Health in administering the provisions of sections 3707.04 to 3707.32 of the Revised Code regarding quarantine and isolation, if the Health Commissioner acts pursuant to a policy adopted by the Board of Health; and

**Whereas,** this Policy is hereby adopted by the Board of Health pursuant to section 3707.34 of the Ohio revised Code; and

**Whereas,** the Board of Health specifically finds that this Policy is necessary for the protection of the health of the people of the community in the event of a natural outbreak, bioterrorism or other emergency public health event; and

**Whereas,** the Health Commissioner is the executive officer of the Board of Health and is authorized and required to carry out all orders of the Board including the enforcement of all local regulations and policies adopted by the Board.

**Now therefore the following Policy is hereby adopted by the Board of Health:**

**I. Definition of Public Health Emergency.** As used in this policy, the term "Public Health Emergency" shall mean an occurrence or imminent threat of an illness or health condition that (a) is believed to be caused by any of the following: (1) bioterrorism; (2) any of the reportable disease classified as Class A1 disease by Section 3701-3-02 (A)(1) of the Ohio Administrative Code; (3) the appearance of a novel or previously controlled or eradicated infectious agent or biological toxin; or (4) a natural disaster, a chemical attack, or accidental released, or a nuclear attack or accident; and (b) poses a high probability of any of the following harms: (1) a large number of deaths in affected population; (2) a large number of serious or long term disabilities in the affected population; or (3) widespread exposure to an infectious or toxic agent that poses a significant risk of substantial future harm to a large number of people in the affected population.

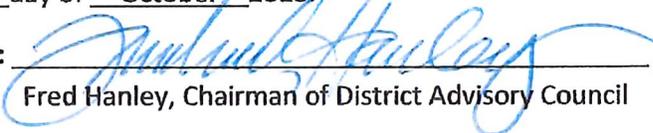
**II. Necessary Findings of Health Commissioner.** In order for the provisions of this Policy to take effect, the Health Commissioner must make a finding that: (a) an immediate threat to the public's health exists; (b) circumstances have rendered a meeting of the Board of Health to be impractical or impossible; and/or (c) delaying action until a meeting of the Board of Health would compromise the public health. The Health Commissioner may, but is not required to, make further finding that a public health emergency exists. The Health Commissioner shall immediately notify the President of the Board of Health and the Director of the Ohio Department of Health that the Health Commissioner has made such findings. The Health Commissioner may also notify other individuals and/or entities that he deems appropriate.

**III. Scope of Delegation.** Upon the Health Commissioner making the necessary findings enumerated in Section II of this Policy, the provisions of this Policy shall become effective immediately. In such a case, the Health Commissioner, is hereby delegated all authority possessed by the Board of Health in enforcing the provisions of sections 3707.04 to 3707.32 of the revised Code regarding quarantine and isolation. The Health Commissioner is hereby authorized to act on behalf of the Board of Health in these matters, and any actions taken by the Health Commissioner in accordance with this Policy shall be considered actions taken by the Board until the Board votes either to ratify or nullify the Health Commissioner's actions.

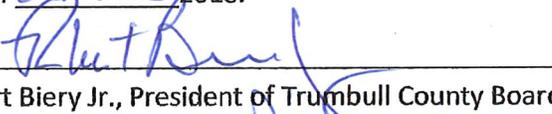
**IV. Expiration/Renewal of Authority Granted by this Policy.** The authority delegated to the Health Commissioner under this Policy shall continue until the earlier of: (a) a finding by the Health Commissioner that such delegation of authority is no longer necessary; or (b) the holding of a regular or special meeting of the Board of Health; or (c) upon the specific determination of the Director of the Ohio Department of Health that such delegation is no longer necessary. The Board of Health may elect to renew or extent the authority delegated to the Health Commissioner pursuant to this Policy, for as long as the Board deems necessary in order to protect the public health.

This policy will be revisited every 3 years or if an event occurs which demonstrates that changes need to be made to this policy.

This policy was approved unanimously by the Trumbull County District Advisory Council on the 11th day of October, 2018.

Signature:   
Fred Hanley, Chairman of District Advisory Council

This policy was approved unanimously by the Trumbull County Board of Health on the 24<sup>th</sup> day of October, 2018.

Signature:   
Robert Biery Jr., President of Trumbull County Board of Health

Signature:   
Frank Migliozi, MPH, Trumbull County Health Commissioner

## Attachment B

Legal authority:

**Federal law** authorizes the Secretary of the US Dept. of Health and Human Services to make and enforce regulation necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the USA or from one state to another. The diseases for which individuals may be quarantined under federal authority are specified in the Executive Order of the President as amended and include: Cholera, Diphtheria, Infectious Tuberculosis, Plague, Smallpox, Yellow fever, and Viral Hemorrhagic Fevers (Lassa, Marburg, Ebola, Crimean-Congo, South American, and others either not yet isolated or named), SARS, and Novel (Pandemic) strain Influenza.

Ohio Revised Code (ORC) Chapters 3701-, 3707 and 3709 and Ohio Administrative Code (OAC) Chapter 3701-3 provide authority to ODH and local health districts with respect to human infectious diseases. O.R.C. 3701 deals with authority of ODH and O.R.C. 3707 and 3709 deal with the authority of local health boards and districts, respectively. These address the following issues

- Reporting of diseases, unusual clusters, and suspicious events
- Identification of exposed persons
- Mandatory medical examination, collecting lab specimens, performing tests and mandatory vaccination and drug treatments.
- Rationing of limited stockpiles
- Quarantine/Isolation of individuals
- Tracking /Follow up of individuals
- Emergency closure of facilities
- Temporary use of hospitals
- Procurement or confiscation of medicines and vaccines
- Decontamination
- Logistical authority for patient management
- Disposal of corpses

**Isolation and Quarantine orders may be issued by ODH or the LHD. These orders may include restrictions on individuals, places, transportation, and gatherings.**

**State constitutional provisions affecting isolation and quarantine include:**

- Ohio Constitution, Article I, Section 1- Inalienable Right recognized
- Ohio Constitution, Article I, Section 2- Equal Protection and Benefit
- Ohio Constitution, Article I, Section 3- Rights of Assembly and Petition
- Ohio Constitution, Article I, Section 8- Rights of Habeas Corpus shall not be suspended
- Ohio Constitution, Article I, Section 14- Right against Unreasonable Searches and Seizures
- Ohio Constitution, Article I, Section 16- All courts shall be open and everyone shall have an opportunity for redress of injuries due in the course of law

- Ohio Constitution, Article I, Section 18- Only the General Assembly may suspend laws
- Ohio Constitution, Article I, Section 19- The State may not exercise Eminent Domain without due process of law or just compensation
- Ohio Constitution, Article II, Section 42- The General Assembly has the power and duty to pass such laws as may be necessary and proper for insuring the continuity of governmental operations in periods of emergency resulting from disasters cause by enemy attack.

These provisions can be found at: <http://www.constitution.org/cons/usohcons.txt>

**Ohio revised Code (ORC) section pertaining to the state’s authority regarding isolation and quarantine are:**

- ORC 3701.13- ODH has ultimate authority in matters of quarantine
- ORC 3701.56- Provides for law enforcement and public health officials to enforce isolation and quarantine orders
- ORC 3701.14- General powers of the Director
- ORC 3701.81- Requiring persons to limit spread and inform the health authorities of known contagions
- ORC 5923.21- Governor may call up Ohio National Guard (ONG) to enforce the laws of Ohio
- ORC 5923.27- ONG called up by the Governor is considered a law enforcement officer
- ORC 5923.2- Arrest and detention by ONG is for purposes of escorting to civil authorities

These provisions can be found at:

<http://codes.ohio.gov/orc/3701>

<http://codes.ohio.gov/orc/5923>

**ORC sections pertaining to local authority regarding isolation and quarantine include:**

- ORC 3707.34-Board may delegate isolation and quarantine authority to Health Commissioner
- ORC 3707.04-Quarantine regulations
- ORC 3707.04- Authority to promulgate quarantine regulations
- ORC 3707.05- Local health department (LHD) may not close highway without ODH permission and in compliance with regulations
- ORC 3707.08- Isolation of persons exposed to communicable disease: placarding of premises.
- ORC 3707.09- Establishment of quarantine guard
- ORC 3707.14-Maintenance of Persons confined in Quarantine house
- ORC 3707.16- Attendance at gatherings by quarantined persons prohibited
- ORC 3707.17- Quarantine in place other that of legal settlement
- ORC 3707.21- Isolation of affected persons in institutions
- ORC 3707.23- examination of common carriers by board of health during quarantine

- ORC 3707.48-Prohibition against Violation of Orders or Regulations of Board
- ORC 3709.20 & 3709.21- LHD and Boards of Health may make such orders as necessary to protect public health
- Ohio Attorney General Opinion 926 (1949)- A LHD may impose a quarantine if reasonable

**ORC sections pertaining to property during an isolation/quarantine for infectious disease:**

- ORC 3707.10- Disinfection of House in Which there has been a contagious disease
- ORC 3707.12- Destruction of infected property
- ORC 3707.13- Compensation of Property Destruction
- ORC 3707.31-Establishment of Quarantine Hospital

**ORC sections pertaining to deceased individual from infectious disease:**

- ORC 3707.19- Disposal of body of person who died from a communicable disease

**OAC section pertaining to animal confinement**

- OAC 3701-3-29-Biting animal to be confined: veterinarian to report

**OAC section pertaining to food safety**

- OAC 3717-1 Ohio Uniform Safety Code

These statutes can be found at:

<http://codes.ohio.gov/orc/3707>

<http://codes.ohio.gov/oac/3701-3-29>

<http://codes.ohio.gov/oac/3717-1-01>

**ADDITIONAL ENABLING POLICIES AND LEGISLATION**

**Ohio Revised Code § Subject Title**

3707.01 Powers of Board; Abatement of Nuisances

3707.02 Proceedings When Order of Board is Neglected or Disregarded

3707.02.1 Noncompliance; Injunctive Relief

3707.03 Correction of Nuisance or Unsanitary Conditions on School Property

3701.04 Quarantine Regulations

3707.06 Notice to be given of Prevalence of Infectious Disease

3707.07 Complaint Concerning Prevalence of Disease; Inspection by Health Commissioner

3707.08 Isolation of Persons Exposed to Communicable Disease; Placarding of Premises

3707.09 Board May Employ Quarantine Guards.

3707.10 Disinfection of House in Which There Has Been a Contagious

Disease

- 3707.12 Destruction of Infected Property
- 3707.13 Compensation of Property Destroyed
- 3707.14 Maintenance of Persons Confined in Quarantine House.
- 3707.16 Attendance at Gatherings by Quarantined Person Prohibited
- 3707.17 Quarantine in Place other than that of Legal Settlement
- 3707.19 Disposal of Body of a Person Who Died of Communicable Disease
- 3707.23 Examination of Common Carriers by Board during Quarantine
- 3707.26 Board Shall Inspect Schools and May Close Them
- 3707.27 Board may Offer Vaccination Free or at Reasonable Charge; Fee Payable to State
- 3707.31 Establishment of Quarantine Hospital
- 3707.32 Erection of Temporary Buildings by Board of Health; Destruction of Property
- 3707.34 Board May Delegate Isolation and Quarantine Authority to Health Commissioner
- 3707.38 Inspectors, Other Employees
- 3707.48 Prohibition against Violation of Orders or Regulations of Board
- 3709.20 Orders and Regulations of Board of City Health District
- 3709.21 Orders and Regulations of Board of General Health District
- 3709.22 Duties of Board of City or General Health District
- 3709.36 Powers and Duties of Board of Health

731.231 Under ORC 3709.21

NECO-5 Created On: 01 June 2009

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**Ohio Administrative Code §**

**Subject Title**

- 3701-3-02 Diseases to be reported
- 3701-3-02.1 Reporting of Occupational Diseases
- 3701-3-03 Reported Diseases Notification
- 3701-3-04 Laboratory Result Reporting
- 3701-3-05 Time of Report
- 3701-3-06 Reporting to the Ohio Department of Health
- 3701-3-08 Release of Patient's Medical Records
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Health and Sanitation, Sections 15, 22, 23, 24, 33, 45, 46, 48, 49, 53.6, 59, 60, 60.1, 62, 63, 65, 66, 67
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Public Welfare Sections 84, 170, Recovery from Public Authority
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Habeas Corpus & Post Convict, Remedies Section 6, Confinement Under Quarantine and Health Regulations
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Foods, Drugs, Poisons, and Hazardous Substances, Sections 8, 78, Regulations and Offenses
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Physicians, Surgeons and Other Healers Section 201, Reporting Requirements
- Ohio Jurisprudence 3<sup>rd</sup> Edition: Cemeteries and Dead Bodies Section 53

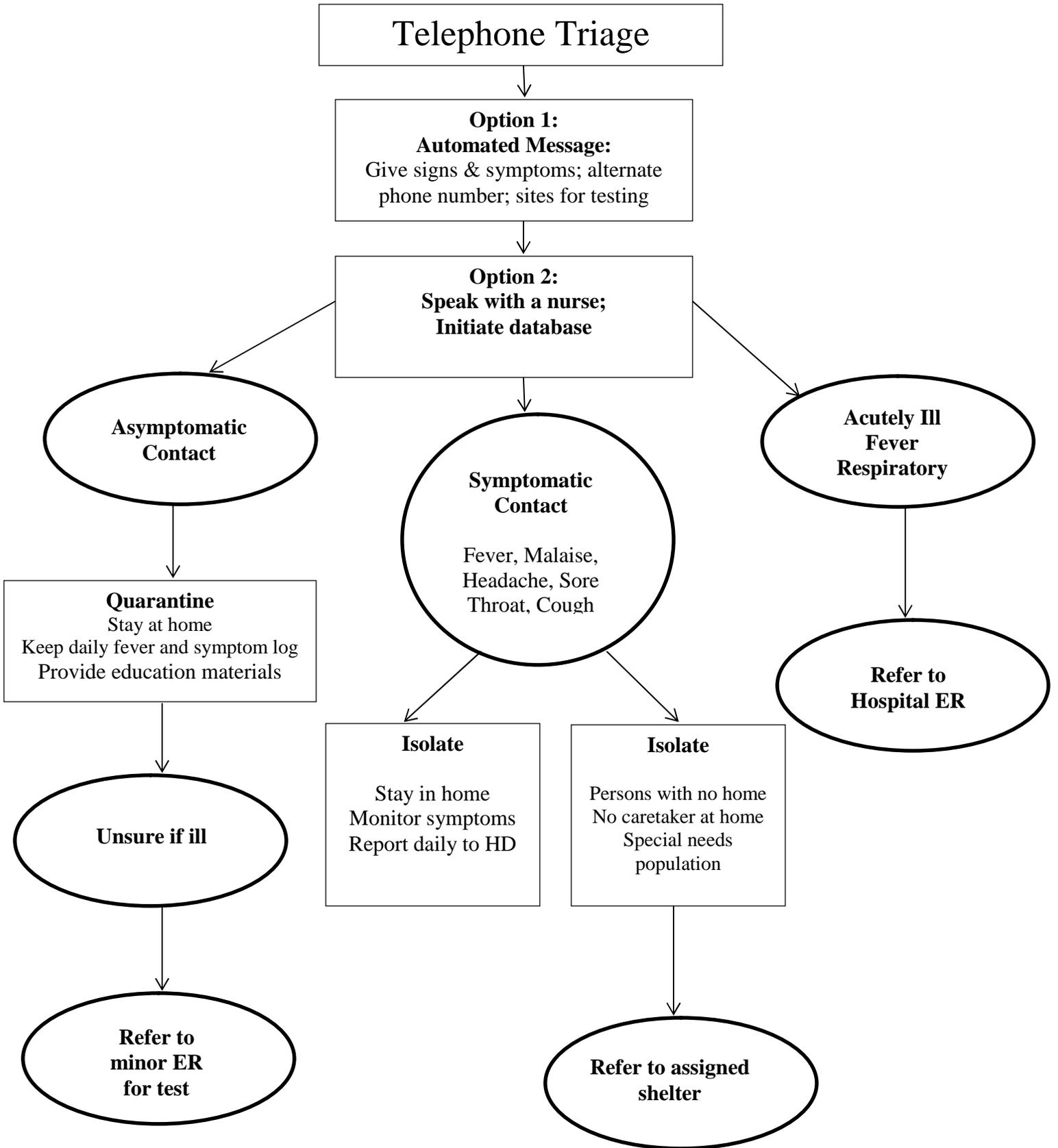
Ohio Jurisprudence 3<sup>rd</sup> Edition: Schools, Universities and Colleges Sections 320, 327, 330  
Ohio Jurisprudence 3<sup>rd</sup> Edition: Hospitals and Related Facilities; Health Care Pro. Section 92  
Ohio Jurisprudence 3<sup>rd</sup> Edition: Administrative Law Section 41  
Ohio Jurisprudence 3<sup>rd</sup> Edition: Environmental Protection Section 125  
Corpus Juris Secundum Dead Bodies Sections 4-11, 13, 22-26  
Corpus Juris Secundum Health and Environment Sections 9, 16-26, 28-45, 51-64, 66, 74, 95-97  
Corpus Juris Secundum Social Security and Public Welfare Sections 268, 269  
Corpus Juris Secundum Municipal Corporations Section 130  
Koch, Administrative Law and Practice Processes for information services—required reports,  
Text 2.42  
1916 Ohio Attorney General Opinion Volume 1, page 953  
1923 Ohio Attorney General Opinion page 355  
1926 Ohio Attorney General Opinion 3758  
1927 Ohio Attorney General Opinion 789  
1929 Ohio Attorney General Opinions 262, 591, and 789  
1932 Ohio Attorney General Opinions 4552 and 4641  
1937 Ohio Attorney General Opinion 1121  
1938 Ohio Attorney General Opinion 3435  
1939 Ohio Attorney General Opinion 61  
1942 Ohio Attorney General Opinions 4774 and 5091  
1946 Ohio Attorney General Opinion 975  
1949 Ohio Attorney General Opinion 926

## Attachment C

### **ODH Limitation on Movement and Infections Control Practices**

See ODH Infectious Disease Control Manual for complete information:  
<http://www.odh.ohio.gov/healthresources/infectiousdiseasemanual.aspx>

# ATTACHEMENT D



## ATTACHMENT E

Patient Name: \_\_\_\_\_  
Hospital Name: \_\_\_\_\_  
Health Care Provider: \_\_\_\_\_  
Provider Phone #: \_\_\_\_\_  
Code: \_\_\_\_\_

Date:

Dear: \_\_\_\_\_,

I have determined that your isolation or quarantine is necessary for the preservation and protection of the public's health. This determination is based on the medical diagnosis that you are suspected to have \_\_\_\_\_, an infection that is communicable to other people. It is **very important** that you take precautions to prevent the spread of your illness to others.

Therefore, your compliance is hereby requested. You are requested to remain in isolation at all healthcare facilities to which you are admitted for care and upon discharge from the healthcare facility, or if not admitted to a healthcare facility, to report to, or remain at:

\_\_\_\_\_ effective \_\_\_\_\_  
(premises subject to isolation) ( date and time)

Please read this information carefully and follow the enclosed recommendations. **Public Health requests that you stay home from work, school, child care, and other public areas until we notify you that isolation is no longer needed and it is safe to resume your normal activities. This time period usually last's for \_\_\_\_\_**

Upon your request, we will provide a letter stating that your isolation period has been completed.

We understand that staying home may cause significant inconvenience to you.. However, it is **very important for the protection of your own health and that of others that you abide by this request** for isolation. If you have any questions **about this request or need assistance in** complying, please call Public Health at **(330) 675-2590. Failure to comply with this request may** result in the issuance of an **emergency detention order, pursuant to Ohio Revised Code Section 3707.01 — 3707.53.**

We are including information on what you can do to help prevent the spread of \_\_\_\_\_ to others, including your household contacts. You can find current information about \_\_\_\_\_ on Trumbull County Combined Health District's web site at [www.tcbh.org](http://www.tcbh.org)

Sincerely,

**Health Care Provider – Please provide your patient with a copy of this form and fax a copy to Public Health – Trumbull County at (FAX) 330-675-7875.**

# ATTACHMENT E

## Procedure for Isolation and Quarantine at Home

The following is given to the patient:

1. A letter detailing the orders for isolation/ quarantine.
2. Instructions for home isolation/ quarantine—Home Isolation Checklist
3. Instructions to
  - Monitor symptoms using the Daily Fever and Symptom Log
  - Call in daily to designated phone number at health department
  - Seek prompt medical attention if symptoms worsen
4. Special needs patients and patients with co-morbid conditions such as asthma or diabetes will be instructed to call the Trumbull County Helpline @ \_\_\_\_\_ 24/7 for assistance and referral to the appropriate help groups.

# ATTACHMENT E

## Daily Fever & Symptom Log

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Since you may have had an exposure to \_\_\_\_\_, you need to monitor your temperature twice a day and symptoms for \_\_\_\_\_ days after your last exposure. The exact dates are \_\_\_\_\_. You have been provided this chart and a mask.

The attached chart is to record your temperature daily and any symptoms, should they occur. If you develop a fever greater than 100.4° F, or any symptoms:

- You will be referred for medical examination
- You may be asked to wear a mask over your face

You will be contacted daily to monitor your temperature and symptoms. If you have any questions, please contact \_\_\_\_\_ at \_\_\_\_\_.

You may wish to enter your health care provider's name and telephone below for easy reference should you become ill.

Health Care Provider: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

## Fever & Symptom Log – Daily

You will be asked daily if you have experienced the following symptoms in the last 24 hours. Indicate “Y” for Yes and “N” for No.

Date	_/_/_	_/_/_	_/_/_	_/_/_	_/_/_	_/_/_	_/_/_	_/_/_	_/_/_
<b>Medications taken today* If yes, list:</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Muscle Aches</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Malaise**</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Headache</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Diarrhea</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Cough</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Shortness of Breath</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Sore Throat</b>	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
<b>Morning Temperature</b>	_____ .F								
<b>Evening Temperature</b>	_____ .F								
<b>Other Symptoms / Comments</b>									

\*List of Medication taken today. Be sure to include aspirin, Tylenol, Advil, etc. or steroids.

\*\* Malaise is described as general feeling of being unwell, tired, fatigued, low appetite, and / or lack of energy