



# Request for Inclusion or Revision to an Administrative Directive Connecticut Department of Correction

CN 1301  
REV 11/15/10

Administrative Directive Number:	10.4	Title: <b>Volunteer and Recreation Services</b>
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I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):

The following language has been modified to state:

Effective 10/20/2014, any vendor, volunteer or contractor requesting access to a DOC site shall be screened for Ebola utilizing Attachment A, CN 100605; Ebola Screening Form for Entry to Correctional Sites, prior to entry to such site. Any person seeking access to a DOC site who refuses to answer screening questions or who answers yes to one or both screening questions shall be denied access to the Correctional Site and a supervisor shall be contacted immediately. Additionally, the employee conducting the screening shall complete an incident report.

### Forms & Attachments

Attachment A-CN 100605; Ebola Screening Form for Entry to Correctional Sites.

Effective Date= 10/27/2014. This form supersedes the previously created form which had an effective date of 10/20/14.

The following language change is noted on the paragraph beginning; \* All visitors, volunteers, vendors and contractors.....

The previous wording on the third line stated " shall be denied access to the facility and a supervisor SHALL be contacted immediately."

The updated wording will now read "shall be denied access to the correctional site and a supervisor SHALL be contacted immediately.

See attached documents

#### ORIGINATOR

Name: [REDACTED]	Title: [REDACTED]	Date: 10/27/14
Signature: [REDACTED]	Facility/Unit: [REDACTED]	

#### UNIT/DISTRICT/DIVISION RECOMMENDATIONS

Approved	Denied	Signature	Date
<input type="checkbox"/>	<input type="checkbox"/>	Unit Administrator's signature:	Date:
<input type="checkbox"/>	<input type="checkbox"/>	District Administrator's signature: <small>(only needed if originating from facility)</small>	Date:
<input type="checkbox"/>	<input type="checkbox"/>	Division Administrator's signature:	Date:

#### COMMISSIONER'S DECISION

This request is:  **APPROVED**     **DENIED**    Effective date of request: 10/20/14

The language/provisions of this inclusion/revision shall be effective as of: \_\_\_\_\_ and subsequently added to the Administrative Directive at the next update.

This inclusion/revision shall be added to the Administrative Directive prior to: \_\_\_\_\_

This inclusion/revision shall be added immediately to the Administrative Directive.

Commissioner's signature:	Date: <u>10/20/14</u>
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