

Policy & Public Health Recommendations for Preventing & Containing a COVID-19 Pandemic in Jails and Prisons

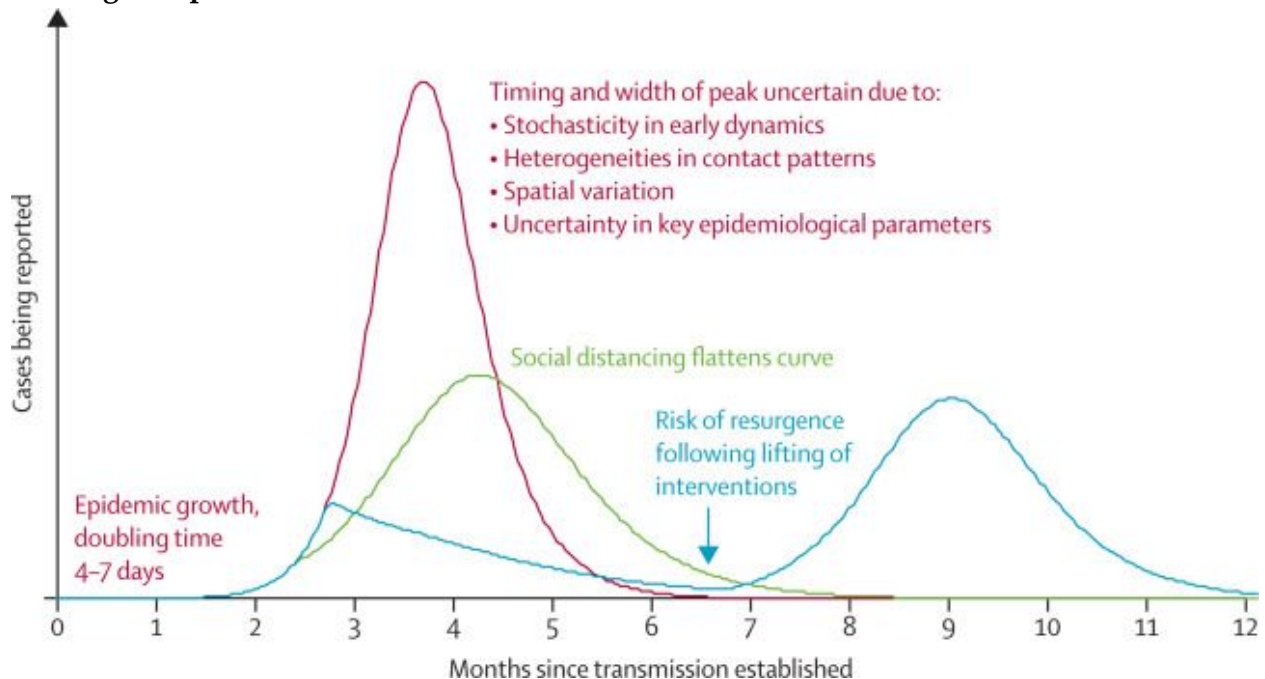
Jails and prisons in our country are full and many are severely overcrowded. People in custody are in close contact with each other, without frequent and adequate access to water and soap. This is a recipe for rapid spread of infection in a context where many are medically vulnerable, medical care is deficient, housing conditions are squalid and the well-being of those in prison is often neglected.

Given this, it is only a matter of time before the novel coronavirus enters a US jail or prisons. All prisons and jails should anticipate that the coronavirus will enter their facility, and they need to have plans for monitoring and treating anyone who has symptoms.

[Epidemiologists recommend](#) that jails and prisons take basic steps to reduce the potential harm, including:

- delaying the rate of spread (also known as flattening the epidemic curve) to wait for vaccine development and manufacture on scale and antiviral drug therapies.
- diagnosing and treating patients promptly to avoid associated deaths
- avoiding an epidemic peak (see below chart) that overwhelms health-care services and,
- [older adults and those with underlying health conditions who are most at risk should avoid large gatherings of people.](#)

Slowing the spread of COVID-19 is critical



These steps seem commonplace for medical care facilities under normal circumstances. However, the overcrowding and lack of adequate staffing and supplies in most correctional

facilities, means that even jail and prison administrators who act right now face an extremely difficult challenge.

This is a problem for jails and prisons. Yet, the risk is even more pronounced for jails. Jails, unlike prisons, see a large number of people arrested and booked-in daily and others are released (on bond, after a case is dismissed or at the end of their sentence) back to their community. With this and the daily influx and return home of jail staff, vendors and medical professionals, a virus like COVID-19 has multiple entry points into a jail. Below are measures that should be implemented in jails and prisons immediately to mitigate the risk of coronavirus spread.

Policy Changes To Slow the Spread of COVID-19 in Jails & Prisons¹

- **[Release medically fragile and older adults](#)**. Jails and prisons house large numbers of people with chronic illnesses and complex medical needs, [who are more vulnerable](#) to becoming seriously ill and requiring more medical care with COVID-19. The [growing number of older adults](#) in prisons are at [higher risk](#) for serious complications from a viral infection like COVID-19. Releasing these vulnerable groups from prison and jail will reduce the need to provide complex medical care or transfers to hospitals when staff will be stretched thin. (In Iran, where the virus has been spreading for several weeks longer than in the U.S., the government just gave temporary release to almost a quarter of their total prison population².)
- **[Stop charging medical co-pays in prison](#)**. Most prison systems have a short-sighted policy that discourages sick people from seeking care: [charging the free-world equivalent of hundreds of dollars](#) in copays to see a doctor. In the context of COVID-19, not receiving immediate, appropriate medical care means allowing the virus to spread across a large number of people in a very confined space. These policies should all be [repealed](#), but at a minimum should be **immediately suspended** until the threat of pandemic is over.
- **[Lower jail admissions to reduce “jail churn.”](#)** About one-third of the people behind bars are in local jails, but because of the shorter length of stay in jails, more people churn through jails in a day than are admitted or released from state and federal prisons in 2 weeks. In Florida alone, more than 2,000 people are admitted and nearly as many are released from county jails each day. There are many ways for state leaders to reduce jail churn, for example, by:
 - reclassifying misdemeanor offenses that do not threaten public safety into non-jailable offenses;
 - using citations instead of arrests for all low-level crimes; diverting as many people as possible to community-based mental health and substance abuse treatment.
 - State leaders should never forget that local jails are even less equipped to handle pandemics than state prisons, so it is even more important to reduce the burden of a potential pandemic on jails.

¹ These recommendations are from Prison Policy Institute prisonpolicy.org

² Earlier this week, Iran reportedly [released about 54,000 incarcerated people with sentences under five years](#), which is almost a quarter of their total prison population of 240,000 people, based on 2018 data from [World Prison Brief](#).

- [Reduce unnecessary parole and probation meetings](#). People deemed “low risk” should not be required to spend hours traveling to, traveling from, and waiting in crowded lobbies of administrative buildings for brief meetings with their parole or probation officers. Discharge people who no longer need supervision from the supervision rolls and allow as many people as possible to check in by telephone.
- [Eliminate parole and probation revocations for technical violations](#). In 2016, approximately [60,000](#) people were returned to state prison (and a larger number were arrested), not because they were convicted of a new criminal offense, but because of a technical violation of probation and parole rules, such as breaking curfew or failing a drug test. States should cease locking people up for behaviors that, for people not on parole or probation, would not warrant incarceration. Reducing these unnecessary incarcerations would reduce the risk of transmitting a virus between the facilities and the community, and vice versa.

How To Keep Jail Staff Safe

- [Paid sick leave for staff](#).
- Daily [temperature checks](#) for staff upon arrival.
- Additional staff for daily [cleaning and sanitizing all common areas](#) at the end of staff shift. All common areas including the lobby, reception, hallways and elevators should be cleaned and sanitized every evening after visitors, lawyers and healthcare workers have left for the day.
- Additional [daily cleanings of the kitchen](#) and all cooking equipment in at the end of every staff shift.
- The large scale purchase and [installation](#) of [alcohol based hand sanitizer dispensers](#) outside each jail and prison cell.
- To be safe, all visitors should receive [a temperature check](#) upon arrival at the jail and also before leaving the jail.

More Solutions for Prevention of a Covid-19 Pandemic in Jails & Prisons

- [Better ventilation in all areas of the jail \(includes opening windows, allowing fresh air\)](#)
- Everyone arrested should be screened before booking for symptoms. They should also be asked about their travel history and contact with people who may be sick.
- [All prisoners and staff must have unlimited and unsupervised access to soap and clean running water](#).
- All prisoners and staff should have access to [clean tissues for wiping their nose](#) and for when they [cough](#). These tissues should be discarded immediately. All cells and common areas should have trash cans placed throughout. These trash cans must be emptied regularly by staff wearing gloves.
- Regular wellness and temperature checks for those in custody especially on the medical sections of the jail. No one in custody should be ignored or left unsupervised as punishment - it is critical that everyone in custody be able to get staff attention as soon as symptoms arise.
- [All visitation booths must be sanitized in between visits](#).
- Jails and prisons should purchase and stock needed medications for everyone in custody and non-perishable [food](#) items in the event of a medically warranted lockdown.
- Jail healthcare staff must communicate regularly with the CDC for best practices and guidelines on how to best prevent an outbreak at the jail.

After a case of positive COVID-19 Infection

- If someone is diagnosed with Covid-19, the patient should be cared for in a [single-person room with the door closed](#). Given the historically [negligent healthcare](#) in jails and prisons, patients should be transferred to a hospital. Housing patients in a jail poses a severe risk to jail staff and healthcare workers who will care for the patient - hospitals are best equipped to care for patients with Covid-19. Jail staff getting sick also risks the infection spreading to everyone else in the jail.
- [Separate bathrooms for use by people who are symptomatic](#).
- Healthcare providers should consult with local or state health departments to determine whether patients meet [criteria for a Persons Under Investigation \(PUI\)](#). Providers should immediately notify infection control personnel at their facility and the nearest hospital if they suspect COVID-19 in a patient.
- Regular daily public updates on the number of cases, any fatalities and names of those who are ill so that family and friends of those in custody will have accurate, up to date information about the health of their loved ones behind bars.

The above recommendations should be supplemented by regular training and weekly information sessions on best practices for people in custody and staff.

A Lock-Down Is Not The Solution

Although corrections staff may be tempted to cut off visitation and increase the use of solitary confinement before an outbreak, a jail-wide lock-down is not the solution for several reasons:

- 1) Solitary confinement [is torture](#) and should be banned. Prolonged solitary confinement causes significant [mental harm](#) and places people at grave risk of even more devastating future harm. These harms may be permanent and persist even after one is released from solitary.
- 2) Solitary confinement does not solve the problem of daily influx of jail staff, vendors and medical professionals
- 3) Jails are not designed for solitary confinement - most cells have no fresh air.
- 4) Those in solitary are not able to easily alert jail staff if they develop symptoms.
- 5) Isolation of those in custody has the danger of exacerbating feelings of stress and anxiety amongst those in custody who are deprived of regular contact with their friends and family. In Italy, severe restrictions on visitation, furlough, and parole were met with riots that led to [at least 6 deaths and 50 escapes](#).
- 6) Most jails do not have the capacity to isolate every person in an isolated cell. Most facilities house two people in a cell. A medical quarantine would likely require most jail populations to be reduced in half.
- 7) There is no medical reason to stop visitation because it has the same effect as the daily influx of staff, vendors and healthcare professionals.