Phone Call notes – April 16, 2020

* Governor released his proclamation regarding releases – the lists of all people eligible are on the DOC website. Note that the list is only for people eligible and while most people are likely to be released, being on the list is not a guarantee.
* 10 incarcerated individuals diagnosed with COVID-19; reportedly all from MCC MSU.
* Monitoring visit to Monroe
	+ Went with State Rep Roger Goodman, who is the chair of the Public Safety Committee, and Sonja Hallum, Governor Inslee’s Criminal Justice Policy Advisor, as well as Q Turner from OCO, an Early Resolution Ombuds & Racial Equity specialist. We did see a number of concerns and I sent an immediate email to DOC administration Friday evening and provided a full draft report on Monday for their review and response. Report will be coming out tomorrow by 1 pm with DOC’s response.
	+ I will give you the basic gist, which is that it was everything that you would expect and had already reported to me – there was inadequate social distancing, people were not cleaning appropriately, the environment was tense. Conditions in isolation were quite grim, which you already know.
	+ Positively, the people who were involved in the disturbance looked fine and had no complaints other than the fact that they were in isolation. DOC said that they are likely only going to be infracting about 10 people all of whom have essentially self-admitted involvement. The MSU unit did appear clean, as did the isolation unit. And the guys who were in isolation were not in medical distress and their complaints were not about medical care. Further, since my visit, Monroe has reportedly made a number of improvements, including hooking up a generator so that guys can have their Jplayers for music and games (no wifi) and making sure that guys have their address books to write letters home. They are still working on access to telephones. We also are following up about the access to showers and recreation.
* Conversation with Steve
	+ I reviewed some of the past emails that I had sent and I am cautiously optimistic as I see that most of the items that we previously raised on these calls either have been addressed or are in the process. As you may have heard on the LFC phone calls and seen on the DOC response to the CLS lawsuit, DOC IS after all moving forward on providing alcohol based hand sanitizer to the incarcerated – they are limited by supply.
	+ Both WCC and CCCC said on their LFC calls that they are deploying secure dispensers to their housing units.
	+ DOC currently manufacturing 200 gallon jugs – may meet the needs of one or two facilities, but not all.
	+ They asked me about my opinion on what to do about the fact that they want every incarcerated person to wear a face covering and do social distancing, but just like out in society, not everyone will. Since they know there will be an uproar if they infract people, what is the enforcement mechanism? I said just greater education about the importance of it, but also that I would bring it up on my phone call tonight.
	+ Flu vaccine – supposedly CMO has offered flu vaccines to everyone incarcerated – that’s what was said in the DOC response to the CLS lawsuit, but that’s not what they told me before.
	+ They confirmed what I had heard on the AHCC call that they are putting in place guidance around restricting transfers between facilities and quarantining any new intakes in one area, which is in line with CDC guidelines.

Q&A

* Can they give a breakdown of the lists by gender, vulnerable populations, facility? I will ask, but DOC has declined other requests for more specific breakdowns of data.
* If you’re focused on COVID-19, what is your doctor doing? OCO is still accepting all complaints related to medical care, so we are working on the caseload, as well as all prior cases. In addition, Trish has been working on a number of reports related to deaths in custody. We requested a list of all deaths since the start of the year and our hope is put out a report on every death, with any concerns if we have any.
* Does the release list include Community Partnership people? Don’t know.
* Senator Jeannie Darneille – I have asked for breakdowns of the release lists to determine gender and racial parity and the Governor/DOC has declined. They are not looking at the issues of gender and racial parity in the releases. Two of the people on the clemency list will be released, but can’t tell you who. The reason why you’re hearing that these are lists of possibles – the Governor wants this to happen quickly, but the advice has been to be thoughtful. It is going to involve a notification to local prosecutors and law and justice committees. First will see if there’s a victim and they will be taking some time – could be just a day – to put in place necessary protection order. There is a concern from the communities. The prime goal here is to allow for the physical distance. The most vocal concerns have come from the victim advocacy concerns so there is an attempt to mitigate their concerns with the help of the prosecutors. While the Governor wanted all of this to happen very quickly, that slows this down in a way that staff felt was appropriate. Sen. Darneille also asked for increased programming to get people to have CPA release, but that was not what the Governor wanted to do, so that will stay on the same calendar. It may not be the kind of process people wanted and it’s a first dive into the release proposals and there may be more depending on what happens with infectious control in the prisons.
* If they’re not releasing any violent or sex offenders, is there room for that? My husband is 66 days from release and he’s at very high medical risk and he’s at CBCC, which is still over-populated with lots of people on quarantine. What are we doing about higher security prisons? Sen. Darneille – I assume moving the low risk individuals out will provide more space and other facilities won’t be transferring and they can put more physical distance. Nothing in this plan other than the nonviolent individuals. There is not considerable capacity of nursing homes in the state and obviously the situation with COVID is not ideal to put anyone in the nursing homes. It’s going to be hard to move someone out of the prison facility to potentially move them out where they may have more exposure. For the medically fragile population there aren’t any easy answers.
* If most of the folks are already at minimum security, doesn’t make much of a dent in the higher security prisons. Answer – Melody had suggested and I did send over to DOC a request for the average daily population of each facility so that we can evaluate the impact of the releases at each facility.