

## **Monthly report of McPherson Panel (Oct/November)**

**Dated December 2, 2020**

### Members:

Byron Kennedy

Jaimie Meyer

John Morley

William Mulligan

Homer Venters

### Activities:

Site visits completed; Osborn Correctional Institution (October 22, 2020), Robinson Correctional Institution (October 22, 2020), MacDougall-Walker Correctional Institution (November 13, 2020), Hartford Correctional Center (November 13, 2020)

- Met with Wardens and Executive teams at each facility.
- Toured Medium-security and maximum-security blocks as well as medical units. Spoke with incarcerated individuals and staff – custody and medical – in each unit.

Remote meetings; four (August 19, 2020; September 21, 2020; November 5, 2020; November 23, 2020)

### Observations & Recommendations:

#### *Cleaning supplies*

- Agreement requirements: The facility documents distribution of cleaning supplies from the warehouse to each area include quantities distributed. The facility documents dilution of cleaning supplies in accordance with manufacturers recommendation.
- Observations:
  - generally available throughout housing areas inspected
  - staff aware of protocols for obtaining and providing cleaning supplies.
- Recommendations: No specific recommendations at this time.

#### *Cleaning*

- Agreement requirements: The facility documents when cleaning is conducted in individual housing units/ common areas. The facility has documented an increase in the frequency of cleaning of housing units/common areas in response to health emergency. Staff are documenting what cleaning supplies have been issued to inmate workers. Staff are documenting when cell cleanup/dorm kickout is conducted, what supplies are issued to inmates. Hand soap is available for inmates in common areas? Soap is provided to indigent inmates once per week. (Two inmates indicated they would like to receive more soap) Additional cleaning measures enacted due to pandemic have been documented. Facility sanitizes areas where staff or inmates were located upon learning they were symptomatic for Covid-19.
- Observations:
  - Cleaning logs and documentation is present in housing areas that were inspected.

- Staff are able to describe both routine and high intensity cleaning utilized for suspected COVID-19 cases.
- Recommendations
  - Recommendation was made to increase training of residents who are dedicated cleaners, including appropriate use of chemicals.

#### *Mitigation measures/PPE*

- Agreement requirements: Staff have been trained on proper use of protective masks, gloves, gowns. The facility has documented the receipt and distribution of PPE. The facility has documented the distribution of masks to the inmate population? Proper usage of masks has been communicated to the inmate population. Inmates indicated they were receiving masks as needed and when requested.
- Staff have been educated on mitigating the spread of Covid-19. Staff are using appropriate PPE. The inmate population has been educated on reducing the risk of spreading Covid-19? Inmates wearing appropriate PPE. Safety measures are taken to ensure staff, visitors, professional partners etc. are not symptomatic when entering the facility and how is that documented. Facility has identified an area to quarantine new commits to DOC custody for 14 days to monitor for signs and symptoms.
- Facility has a process to medically evaluate and clear inmates from quarantine prior to placement in general population. Facility has identified an area to medically isolate inmates with Covid-19 symptoms Staff assigned to supervise inmates in medical isolation for Covid-19 symptoms wear appropriate PPE. Inmates in medical isolation for Covid-19 symptoms wear appropriate PPE whenever leaving their cell or interacting with staff. Facility has a process to medically evaluate and clear inmates from medical isolation prior to placement in general population. Facility has identified an area to medically isolate Covid-19 positive inmates. Staff assigned to supervise inmates in medical isolation because they are Covid-19 positive wear appropriate PPE. Inmates in medical isolation because they are Covid-19 positive wear appropriate PPE whenever leaving their cell or interacting with staff. Facility has a process to medically evaluate and clear Covid-19 positive inmates from medical isolation prior to placement in general population.
- Observations:
  - In each facility we visited, we had temperatures taken in the front lobby prior to entry. In most facilities, we also completed a brief verbal symptom and exposure screen on entry. In some facilities, we had temperatures taken in the front lobby prior to exit in addition.
  - Most staff and inmates were observed wearing face coverings.
  - Some staff were observed wearing PPE incorrectly and few staff generally report being fit tested for N95 masks.
  - Health staff display a good knowledge of where PPE are located, intended use and also report good general access to PPE, but did express a need for more N95 masks at HCC.
  - One mitigation effort described by the CDC, social distancing, appears sparsely implemented. Several dorm areas in multiple facilities showed ample room for more social distancing of bunks than was being practiced.
  - The new admission quarantine process appears to be fully implemented as described by the department, including separation for newly admitted inmates from others and testing at the start and end of this time period. Quarantine for potential contact with a newly identified case of COVID-19 is also in place in accord with Department policies and CDC guidelines.

- A quarantine unit at Osborn CI had ample space for out of cell time but it was reported that people were generally held locked in their cells except for short period of out of cell time for shower and other brief activities. Officers were also unaware of which patients were high risk.
- All symptomatic COVID+ individuals are housed at Macdougall on a specialized unit. A dedicated nurse practitioner examines the patients at least once per shift with a full set of vitals, including oxygen saturation, and listens to their lungs.
- In each facility, there have been some individuals who have declined COVID-19 testing, and they are quarantined for 14 days in a separate unit.
- The Department has described a new expansion of testing for COVID-19 to include weekly testing of staff and every other week testing of inmates. This expansion represents a substantial undertaking but stands to significantly increase the surveillance of COVID-19 throughout the system.
- Recommendations:
  - Recommendation was made to increase the scope of N95 fit testing among staff and include contingency for staff with facial hair (potential purchase of PAPRs).
  - Recommendation was made to train staff and supervisors to maximize social distancing in housing areas.
  - Residents who serve as dedicated cleaners require further training in use of PPE, including N95s for individuals who clean spaces where patients with COVID spent time.
  - Recommendation was to use markers to designate seating to enable social distancing in waiting areas of medical units.
  - A recommendation was made to consider utilizing the common area to increase out of cell time and also create a system whereby officers may know which patients in a quarantine unit are high-risk, without divulging specifics of medical diagnosis or medications.
  - Recommendation was made to increase screening among medically vulnerable individuals who are housed in a dedicated cell block (for example, age >50 cell block at Osborn).
  - The panel unanimously recommends extending the period of monitoring through March 31, 2021 to support this and several other aspects of the Department's COVID-19 response.

*Other points of discussion and recommendations:*

- Develop town halls with a standing schedule to educate residents and staff on facility COVID protocols and expectations. Include an “inmate liaison” committee.
- Develop video to be viewed while waiting for medical care. Include incarcerated speaker.
- Develop a tracking protocol for staff influenza vaccinations.
- Uptake of influenza vaccination among residents has been low to date. Identify strategies to increase uptake and consider how COVID vaccine will be distributed when available.
- Increase signage in the facilities (in English and Spanish) to encourage mask-wearing and distancing. Use consistent signage on individual cells where needed to designate isolation status.

*Next steps*

Planned visits to additional facilities scheduled for December. Will aim to increase interviews with incarcerated people at each facility, guided by documentation of subjective reports of non-compliance

with protocols. Discussions ongoing about possibly extending duration of panel's work through March 2021 to assist with monitoring implementation of expanded testing and vaccine distribution.