

**CRCC COVID-19 TELECONFERENCE NOTES**  
**WITH LOCAL FAMILY COUNCIL**  
**May 15, 2020 @ 9:00 – 10:00 AM**

**Facilitator:** Ron Thompson, Captain

**Attendance:**

Local Family Council Members:

Elizabeth Deleon, LFC Family Co-Chair

Stephanie Beidman, LFC Family Secretary

**DOC Staff:**

Jeff Uttecht, Superintendent

Ken Jennings, Health Services Manager

Bill Copland, Family Services

**OMBUDS**

Joanna Carnes, Director Ombuds

Caitlin Robertson, Assistant Ombuds

**Purpose:** To ensure that families are provided with information related to the COVID – 19 pandemic and how CRCC is managing this within the facility to ensure for the health and safety of all.

As a reminder, all answers/discussions are based off the information that we know it to be today. The agency continues to work on strategies to manage the COVID19 Pandemic within the prisons and as such things are constantly evolving.

**Ground Rules:**

Meeting time will be one (1) hour.

We will answer all the questions first and open up for questions/comments afterwards.

If any questions are left unanswered at the end of the meeting, we will add them to the next meeting.

Please ensure your phones are on mute.

Please provide your name before asking a question or responding to assist with flow of questions and avoid confusion.

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Testing Results: As of 5/15/20

Total Number of Individuals Tested: 24

Positive: 1

Negative: 18

Waiting Results: 5

Quarantined: 4

Isolation: 13

Staff Positive: (7) CRCC staff have tested positive for COVID-19. One (1) staff member has fully recovered and is back to work. Four (4) of the staff members were at training in Walla Walla, WA and were not onsite.

Pre-exposed questions given to Associate Superintendent Michelle Duncan on Wednesday May 13<sup>th</sup>, 2020 by Stephanie Beidman:

**1. Everyone is going to want to come and visit their loved one as soon as visitation reopens. At this point, it seems to me, the rules for visitation might not even look the same, at least for a period of time.**

**We don't believe that CRCC admin has not made any preliminary plans to phase in reopening visitation. Obviously this is one of the most important issues they must address regarding prisoner and family wellbeing.**

**If social distancing protocols must still be observed when visitation is re-opened, visiting days/times/locations will have to be expanded to accommodate what will be a flood of visitation requests from loved ones that have waited months to see each other.**

- I. Does CRCC have an existing plan for beginning visitation again?**
- II. To keep from being turned away, will it be possible to make a reservation date and time especially for those traveling over an hour? Perhaps make 2 hour time slots that people could reserve?**
- III. In order to have a better chance at resuming visits, could families propose bringing back visitations within a limited room capacity such as 50%?**
- IV. We would comply with no physical contact so that we could see out LO's.**
- V. Maybe include having only one person at each vending machine at a time, no line.**

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There are no plans to bring back visitation at this time. This will be a statewide implementation when planning does occur. We are trying to get to a new normal but don't know when that will happen.

**2. Ombudsman staff implied on a recent call that all symptomatic prisoners in isolation were being tested for COVID statewide now. This does not seem possible at CRCC if you have still only tested 13 prisoners.**

**I. Is there an update to this number?**

We have provided the updated numbers.

**II. Has HQ provided any additional guidance on testing?**

HQ has provided the guidance on testing of systematic patients.

Testing is determined by medical personnel and varies depending on the symptoms of the individual.

**III. Has CRCC requested/been told you will receive additional tests?**

CRCC has access to tests as needed.

**3. Were the 8 guys that came into CRCC from Shelton around May 7<sup>th</sup> quarantined for 14 days there? If not, why were they put into general population at CRCC without being quarantined here?**

All those that are entering the facility are screened prior to their transport, and screened again once they arrive at our facility. They are not placed in quarantine. If any do not pass the screening they will be placed in quarantine as required by protocol.

**4. I (Stephanie) was asked the following : Did you follow up with Joanna Carns after they May 8<sup>th</sup> call to ask why she did not identify herself at the beginning of the call, bit then broke in to “clarify a question later? This does NOT breed trust with the OCO or DOC when oversight staff are hiding their presence from family members. Can you find out why she did that, please?**

Mrs. Carns- “I called in late to the call, I apologize.” There was an Ombuds staff presence on the call.

**5. Please provide follow up to the May 8<sup>th</sup> question about how many prisoners were added to the Early Reentry list after the extension of the qualification an extra month to ERDs in November, if not done so already in the notes.**

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As noted in last week's notes, we received a new list when it was distributed and we were informed they extended the 30 days. CRCC had 17 individuals on this list.

**6. Please also tell us what happens to anyone still on this list on May 15<sup>th</sup> when the governor's release orders expires, and again, when do you expect to get through everyone on the list where some prisoners have been waiting since April 16<sup>th</sup> at risk of contracting COVID while they're supposed to be home.**

There were 55 commutations that were released, 61 were released in our Rapid Reentry program. Our staff continues to work tirelessly to ensure this process happens as swiftly and accurately as possible.

GRE is a different list, specifically for classification.

**Clarification please? Is the list going to be added to, or is it just those on the list right now that will be released?**

We are unsure at the moment. We are working on those individuals that are on the list out by tonight.

**7. Please also include the CRCC classification specialist on the May 15<sup>th</sup> call so families may ask them questions directly.**

The classification specialist was unable to be on this call. We are trying very hard to get families the answers that they need. We will reach out to her and see if she can make time to be on a call in the near future.

**8. Please provide the follow up about the prisoner from Unit C medium who was sent to Walla Walla work camp on May 7<sup>th</sup>, and why if, as you stated before, HQ is completely in control of policy around transfers to camps, this happened, and provide any updated for them.**

This has already been addressed. We have no information concerning a prisoner from C unit that was sent to Walla Walla work camp on May 7<sup>th</sup>. As discussed in last week's notes, transfers have been greatly reduced; however some transfers are necessary for medical and security purposes, and to reduce overcrowding and density. If you would like more on the precautionary measures that are being taken to protect the incarcerated population, please visit the DOC COVID-19 web page at <https://doc.wa.gov/news/covid-19.htm>.

**9. On our April 17<sup>th</sup> call, Captain Thompson told us about Willow Unit and how well that is going. If that is in camp, how are people going to visit our LO's once this thing is over? What will this process look like?**

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Those house in Willow Unit will be returned to their assigned living unit and visitation will resume in the visitation unit. We have also utilized the library and classrooms too, so once this is over, we would move those individuals back to their assigned living units as well.

**LIVE QUESTIONS**

**FM- How many grievances have been filed at MSC/MSU, and what are they in regards to?**

We would not have that information on hand. However, we can look into it for the next call.

**FM- Medium side on lock down or restrictive movement are the doors locked?**

CRCC IS NOT ON LOCKDOWN OR RESTRICTIVE MOVEMENT, doors are locked, only to help control the traffic flow in the dayrooms and to comply with the social distancing guidelines. We are alternating schedules to help honor the dayroom time of others. They do have a call button if they need out for another reason. Both sides, our long term minimum and our medium custody units, are a little different. They are scheduled different times for different things. Yes there are times when the cells are locked, but there are times when they are out.

We have had multiple conversations with out Tier Reps about this. We have not historically locked the unit, but we can only create social distancing by letting out half the unit at a time. Things are constantly changing. We will try and gather more information in regards to this and share it on the next call.

**FM- Social distancing is supposed to be being practiced-then punitive measures keeping them confined is counterproductive.**

You're right. There are some things we cannot get around. Some things just have to happen. They are in close proximity, but we have changed this, such as swapping tiers, only two at a table, etc. There are 128 men per pod, they cannot all be in the dayroom at once and still practice social distancing. We are trying to provide as many ways to do that as we can.

**FM- Why was the hospital at CRCC not available?**

Coyote Ridge Correction Center has never had a hospital. However, we do have medical services on site. We were never intended to have a hospital here.

**FM- List of released individuals is it available?**

A list of released individuals is located on our website at [www.doc.wa.gov](http://www.doc.wa.gov).

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**FM- where is the Incarcerated Individual that tested positive for COVID? Where is he now?**

He is at Airway Heights Corrections Center. It was determined that the individual would be better served at Airway Heights.

**FM- Can we have more details? He was in quarantine, then went to the hospital, then back to general populations, then back to quarantine, then sent to Airway?**

We will not be giving out any information in regards to his personal information.

**FM- You are putting our loved ones in danger.**

**FM- Why would you transfer him to AHCC?**

He was transferred because it was determined that he was better served at Airway Heights.

**FM- What can you tell us about how we are protecting our loved ones?**

I encourage you to look into our protocol. We are committed to the safety of every person inside this facility. We are doing our best to keep people healthy. We have implemented many processes for screening, social distancing, protective equipment, and sanitation.

**FM- Has the mapping been done at least?**

Absolutely. We are required to do the mapping process.

**FM- Has the contact tracing been completed?**

Yes, this process was completed.

**FM- I understand that people want to know things, blah blah blah, but people on the outside want privacy and it should be the same on the inside. I am happy you are not sharing personal information that you should not be.**

Yes, we are all coming together. We are teaming up with other to make the best of this situation and we appreciate the positive comments. Thank you.

**FM- Is it possible to have the HQ medical director be in the next call so families get answers?**

This likely outside the scope. We can request it but cannot commit to that.

**FM- This is Kristin, my husband is there. This is not just for one person, but if anybody tests positive and in contact with others, is proper protocol taken? Like having staff stay out of other unit to keep the spread down?**

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CRCC has 11 housing units, staff members normally are assigned to work with the same population. Staff is screened daily and have to answer a series of questions prior to entering the facility as well as using PPE's. We have asked staff to limit access to the units, but that could change in the next moment. There are a number of reasons why staff would need to enter a unit.

**FM- Mr. Uttecht, the restricted movement is causing mental strain so why is CRCC the only facility in WA that has medium and minimum incarcerated individuals on “lockdown”? Families want this to be lifted!**

I have said before, we are not on lockdown. We are doing the best with what we have. I am sure it feels like restricted movement, but it is not.

**Stephanie- Restricted movement is causing mental strain on incarcerated individuals, why are they on non-lockdown or restricted movements?**

CRCC is not on lockdown and the prison is not closed. Cells are designed for 2. Popcorn and movies and games have been added and other ideas from staff and Incarcerated Individuals to help ease the boredom. It may feel like restricted movement, but it is not.

**FM- Joanna, since you are on the line, where will Caitlin be touring today?**

She will be touring CRCC.

**FM- Was CRCC not built that the medium units were for one man cells and the minimum built for two man cells? That would help with the social distancing if it was used as such. And isn't CRCC being fined every month for being over capacity?**

No, we are not being fined for overpopulation. Medium units were set up for two man cells and we are operating within the designed capacity. Social distancing is a specific standard set by the American Correctional Standards. We use that as it is more restrictive than the CDC. We are actually following protocol better and we are under capacity.

**FM- Was it Paige from Headquarters on the call?**

Yes

**FM- Is Caitlin going to be visiting the facility today?**

Yes, she is on her way here and should be here at 10:00 AM. She can go wherever she wants. She has questions about the positive case, I am sure.

**FM: Paige, is there a way to have the secretary of health on the call next week?**

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I can see if he has the ability to do so, I will check. Is there specific questions I can funnel to him?

**I think they are asking for the Secretary of Health at the State level.**

I don't know if I have the authority to, but I will see.

**Joanna: About the visits from Caitlin, we will provide a report during the Ombuds call on Thursday at 4:30 and a written document will be provided in a couple of weeks.**

**FM: When asked about the logistics of cells because of mental health concerns, it was dismissed. We ARE on restricted movement.**

I think the vocabulary is getting misunderstood. We are on modified movement. We are operating with some less activities. We are not on restricted movement.

We will agree that some people are struggling. We are trying things outside the norm. If someone is struggling, they need to notify staff and they need to ask for help. If staff see someone struggling, they can make recommendations also. We are not trying to downplay the mental health of your loved ones.

**FM: For clarification, who is the Secretary of Health?**

I don't actually know. Maybe Don Wiseman?

**Online that position is vacant.**

Assistant Secretary of Health for DOC is Julie Martin in the interim.

**FM: Are we going to have a regular LFC meeting soon?**

We are currently not allowing any visitors, so I am not sure when that will take place.

**No, I just mean by Zoom.**

We can check into that.

**FM: I am confused about locking doors if we are not on lockdown or restricted movement?**

When the dayroom is open for one section of the pod, we lock the doors on the other side in order to control movement. That is the only way to control movement. They can still use a call button to exit their cell if needed. We are asking folks to honor whose turn it is in the dayroom.

**FM: But they are still restricted from the time they would normally be out.**

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A lockdown refers to locking down a unit or pod due to problems that may have arose. Restricted movement refers to a modified lockdown. We are doing neither of those things.

**Isn't that modified?**

Yes, movement has been modified. We cannot operate as we have in the past for the protection of everyone at the facility.

**FM- Can they get infraacted for being out when they are not supposed to?**

They may possibly receive an infraction on repeated occurrences. For some change is hard, we are making these changes slowly to help ease into the transition. We are not trying to rule with an iron fist. Extended gym and yard time have been added to help ease the idleness.

**Stephanie- Please clarify in the notes who Julie Martin and John Wiseman are.**

Julie Martin is the Secretary of Health for DOC and is filling in as head of medical services until the position can be filled.

John Wiseman is the Secretary of Health at the State level.

**FM: We heard after a positive test in a unit was found that those men were sent to chow first, not last?**

We have no information in regards to this.

**FM: Families are sharing that CRCC is the only facility with restricted movement, please address this.**

We don't believe that we are the only facility that is doing this. We believe that others do this already, even prior to COVID-19.

**FM-Kiosks down for video visits, when will they be serviced?**

Kiosks are continuously getting worked on. We are not sure when they will be out to the facility again. Please let us know which ones are not working, and we will look into those specific issues.

**Thank you all for joining us.**