Call Details
Facility: Coyote Ridge Corrections Center
Date and Time: 6/5/2020, 9:00 am

Attendees

- Local Family Council Members
- DOC Staff:
  Jeff Uttecht, Superintendent
  Tim Taylor, Health Services Manager
  Bill Copland, Family Services
- OMBUDS
  Joanna Carnes, Director Ombuds
  Caitlin Robertson, Assistant Ombuds

Weekly Update

- CRCC continues to see an increase in COVID-19 cases.

  COVID – 19 cases:

  Current population at MSC: 1922
  Total Number of Individuals Tested
  Positive: 43
  Sent to AHCC: 25
  Sent to MCC: 8
  Negative: 34
  Waiting Results: 3
  Quarantined: 1902
  Isolation: 20
  Staff Positive: 15 CRCC staff have tested positive for COVID-19. An additional four (4) of the staff members were at training in Walla Walla, WA and were not onsite.

- On June 3rd, we were in communication with the Emergency Operations Center for the Department of Corrections. Due to the increase cases, CRCC will remain on full quarantine. This will be re-evaluated again June 10th. Video visits will remain suspended during this time. Communication has been sent out to the population concerning this.

- CRCC has seen an increase in incarcerated individuals that do not want to report their symptoms. We have sent communication out to the population to help them understand the importance of ensuring that they report symptoms so that we can manage the spread of this at CRCC. Additional communication was sent out regarding the process of what will take place if they do become ill.

- CRCC is conducting quality assurance checklists that monitors social distancing and proper use of PPE. Staff/managers/executives go to all areas of the institution to ensure process protocols are being followed.
bullet Please note:
  - Questions for upcoming meetings are to be emailed to Kate Jansen at catherine.jansen@doc1.wa.gov no later than 8:00am Thursday. Any questions received afterwards will be held over to the next week or if time allows asked during the end of the conference call.
  - Thursday mornings, questions will be categorized and reviewed by Associate Superintendent and Superintendent to have responses ready for the teleconference Friday at 9:00am.

bullet Additional guidelines:
  - 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.

bullet LFC representatives are free to gather questions to ask, and to share responses; however, these calls truly need to be limited to LFC members in order to be productive, and to ensure that participation in these interactions can continue.

bullet If you, or you know someone that has a loved one at CRCC and would like to be added to the LFC list to receive call in information, meeting minutes and other correspondence the facility may send out please send an email to Catherine.jansen@doc.wa.gov or miduncan@doc1.wa.gov.

Pre-Submitted Questions

Question 1  
Can we use rapid, on site tests?
Answer
We do not have the rapid tests.

Question 2  
Are you able to identify which pods the positive tests are coming out of?
Answer
No we are not able to provide that information.

Question 3  
May 15th is when you ending releasing the men off the list-why did the rest on that list not get to go home?
Answer
Everyone that was on the list was evaluated for eligibility for participation in the Rapid Re-entry. Everyone that CRCC had that was eligible was released.

Question 4  
Can inmates in medical isolation receive and send snail mail?
Answer
Yes
Question 5
If so, but they get transferred, where does the letter go? Does it wait there at CRCC for them to get back or does it get forwarded to AHCC (and visa versa)?
Answer
It will likely be forwarded to the next institution.

Question 6
If yes, is it daily?
Answer
Yes

Question 7
How many symptoms need to be present for an inmate to be taken to isolation?
Answer
The medical practitioner will review the current symptoms and medical history to make the determination if an individual will need to be placed in isolation. There is no specific number of symptoms that need to be present.

Question 8
The COs are not passing out meals, they are all having to go get it off the tables and the men had to pick up the apples on their own out of the bin where everyone is touching everyone else’s food.
Answer
The men can pick up the meals from the tables as they are in individual Styrofoam containers; however a staff member should be passing out the fruit with gloves. We have sent out communication to our staff regarding this expectation.

Question 9
If an inmate goes to AHCC, how long does it take for them to get there once they are taken to isolation?
Answer
That is dependent on when we receive the order to transfer them and when we can assemble a transport team. This typically happens within a couple of hours from the request. It is 1.5 hours from CRCC to AHCC.

Question 10
Do they go to AHCC once they test positive, or just as soon as they are symptomatic/or report symptoms?
Answer
This is dependent upon the Medical Practitioner assessment. Some may remain at CRCC while some may go to AHCC or MCC RCF.

Question 11
How does a loved one find out if their person was sent to isolation?
Answer
Currently staff are calling the person that the individual has identified to relay a message. Update: Unit staff will pass out a form to those in isolation the day they arrive and call the family with the message that same day.
Question 12
How does a loved one find out their person was sent to AHCC?
Answer
You can call the institution and they can provide the current location.

Question 13
How many beds are there at AH for the Covid cases?
Answer
I do not know how many beds are at Airway Heights for COVID cases. Update: AHCC has reported that they have 33 beds available in the RCF.

Question 14
Can they use the phone whenever they want to once they get to AH?
Answer
I do not have any information concerning the isolation area at Airway Heights; however, it is protocol that patients in isolation may only use the phone once every 7 days. These protocols are for all facilities. Update: AHCC reported that they can use the phone whenever they want once they arrive.

Question 15
Are they allowed legal calls once at AH?
Answer
I cannot respond to a question pertaining to Airway Heights procedures regarding the regional care facilities.

Question 16
Are they allowed legal calls while at CRCC in isolation?
Answer
This would have to be evaluated on a case by case basis.

Question 17
Are they allowed legal mail at AH?
Answer
Yes

Question 18
Incoming legal mail at AH?
Answer
Yes
Question 19
Outgoing legal mail without being censored at AH?
Answer
Yes

Question 20
Are they allowed legal mail if they are still at CRCC and in isolation?
Answer
Yes it will be delivered to them.

Question 21
Incoming legal mail at CRCC?
Answer
Yes

Question 22
Outgoing legal mail without being censored at CRCC?
Answer
Yes

Question 23
Are they allowed their JPay players once at AH?
Answer
I do not have that information pertaining to AHCC procedures. Update: AHCC stated yes, but they are not able to
currently connect to the JPay kiosk because there is no kiosk available to them.

Question 24
Are they allowed their JPay players once in isolation at CRCC?
Answer
Yes

Question 25
How will they charge their player at CRCC while in isolation?
Answer
They have the ability to plug them in.

Question 26
How will they get internet access while at CRCC to be able to send and receive messages with loved ones like
was stated on a previous call you would be working on?
Answer
We do not have the ability to provide internet service in our Restricted Housing area.
Question 27
If they are in isolation in E unit (I think it was), will there be the same challenges with charging and having internet access to emails?
Answer
We are no longer using E unit for isolation patients.

Question 28
Do they get their property once in isolation at CRCC?
Answer
They may have some of their property.

Question 29
If yes, what things?
Answer
They can have their Jpay player, Ear Buds, and charger. Shampoo, deodorant, bar of soap, tooth brush, and comb. They will also be allowed any keep on person medication that has been issued by medical.

Question 30
What happens to their property that is left behind at CRCC if they go to AH?
Answer
Their property is rolled up and secured in the unit until they return.

Question 31
Can they receive store while at CRCC in isolation?
Answer
They can receive hygiene items from the store.

Question 32
Can they receive store while at AH in isolation?
Answer
I do not know what their process is at Airway Heights. Updated: AHCC reported Yes, but it is very limited due to the space issue.

Question 33
Can they receive the quarterly package they ordered while at CRCC in isolation?
Answer
No

Question 34
Can they receive the quarterly package they ordered while at AH in isolation?
Answer
We do not have any information regarding the procedures at Airway Heights. Update: AHCC reported that since their stay is so very short they should wait due to the movement in and out of the RCF. If it came while they are in transport they would have to wait until it gets caught up to them.

**Question 35**
If not, what will happen to it?

**Answer**
It will be stored in property until they are back in general population. CI packages are returned to CI and a refund is issued.

**Question 36**
I understand the testing process I think:

- Have symptoms, go right to isolation.
- Get tested (takes several days for it to be sent out, be tested, sent back, results given)
- Once the results come back, the 14 days begin
- After 14 days, they are tested again (takes several days as stated above)
- If negative, they take a second test 72 hours later, which is basically right when the negative result comes back based on the time it takes to get it back
- If the second test comes back negative and there are no more symptoms, they go back to their cell- or CRCC respectively if they are at AH

**Answer**
Once placed into isolation they will receive a COVID test.

If positive the individual will remain in isolation for 14 days from the last day of reported symptoms. The medical practitioners will review the medical record and depending upon any underlying health conditions such as age, health and other mitigating factors, they will recommend them to either remain in isolation at CRCC or transfer to one of the two Regional Care Facility (RCF) at AHCC or MCC. If your loved one remains at CRCC and upon completion of the isolation time, there will be a 7 day convalescing period. A convalescent period is an opportunity to make sure they are symptom free and not reintroducing the virus back into the facility. After completion of your convalescing time, you will be returned back into population.

If the first test is negative, your loved one will remain in isolation, and a second COVID-19 test will be repeated. After the second test is negative, and once they are symptom free for 72 hours, they will be returned to your living unit.

**Cohorts**

When CRCC established the facility wide quarantine, all units were broke up into smaller groups or cohorts. Their cohort is the group of cells they use the dayroom with as outlined in the dayroom rotation schedule. If someone from their cohort goes to isolation the cohort begins a quarantine period of time. This is to monitor the cohort for symptoms and assist in controlling the spread to others.

If an individual associated with a cohort in isolation test positive for COVID-19 the quarantine period for that cohort will start for 14 days.

If the individual associated with that cohort in isolation test negative twice, the quarantine period for that cohort will be lifted.
These precautions are a measure to assist in controlling the spread of this virus while continuing to allow an opportunity for your loved ones to have access to the dayroom, showers, and telephones.

Please see that attached communication that was sent out to your loved ones regarding this process.

**Question 37**
What happens when all the beds are full at AH?

**Answer**
We will manage the capacity of these beds as needed. We have already had some individuals be sent back to CRCC. We are also sending some to the Monroe Regional Care Facility.

**Question 38**
Are they allowed back into their own cell once off isolation?

**Answer**
Answered in review of memo.

**Question 39**
What does treatment look like at AH or CRCC? Do the men just wait it out as with any other virus?

**Answer**
It depends on the needs but for the majority of the patients – yes they wait it out. The goal is to keep them hydrated by getting them to keep up on fluids or giving them an IV. The other piece is to keep their fever in check with medications such as Tylenol. The main goal for medical with these patients is monitoring of signs & symptoms, watching for an increase in symptoms to attempt to intervene early before they become emergent. All isolated patients at CRCC are given 6 bottled water a day to encourage hydration.

**Question 40**
What is the criteria for staying at CRCC vs AHCC?

**Answer**
That is dependent on a medical practitioner’s assessment. They are taking into consideration their current symptoms and medical history.

**Question 41**
Are they allowed to have their TV when sent to isolation? How soon?

**Answer**
All isolation cells have TV’s.

**Question 42**
How can individuals send out snail mail if they do not have paper and envelopes in isolation? Will DOC provide this to them? This was asked last week in regard to contacting the OCO; now we would like to have an answer for them being able to contact loved ones while in isolation. Maybe you will get them their own paper and envelopes from their cell if you will not provide those items?

**Answer**
Individuals do receive paper and pens when in isolation.
Question 43
How fast can you do either one of those things?
Answer
They are already being provided paper and pens. We will discuss further providing an envelope.

Question 44
Why is Jpay being taken away in full? In a previous call you stated that they will have access to their players and you will try and find a way for them to sync the emails while in isolation. I cannot even send messages to him for him to get when he comes out of isolation. I would like to have him receive many messages once he is out so he knows I was thinking of him the whole time, even if he cannot write back. Right now, I am unable to even send anything. It seems every LO who has a LO in isolation is experiencing this. Please help us understand this. Why can we not still send messages, what would that hurt?
Answer
They do have access to their Jpay however, as stated before we do not have the ability to get internet access to the restricted housing area.

Question 45
What is the reason for only allowing one message to be delivered by an officer to one person every seven days? Why can it not be the first day at least then more often than once per week so LOs are not going out of their mind with worry? This is heartbreaking for all.
Answer
The guidelines indicated they are to only receive one phone call every 7 days. We continue to work on the ability to provide a phone that can be taken to the cells so that individual may call their loved ones directly.

Question 46
Why are they not getting N95 masks if they can’t SD? If no, are they getting better masks?
Answer
All incarcerated individual are required to wear surgical masks whenever outside of their cell. N95 masks are for health care workers and those that are working with COVID positive patients.

Additional Questions

Question 1
Do you know when the Kiosks are going to be up and running?
Answer
No we do not have information pertaining to when they will be available again. We will look into it.

Question 2
On the protocols regarding how meals are delivered, you stated that you have seen how our loved ones have grabbed apples and lunches both ways, can you explain what you mean by this because my perception is that as leadership staff if you observed our loved ones grabbing apples out of a bag at the same time would you not be alarmed to you as a leadership on how the virus can be spread?
Don’t assume that because I said I have seen it one way or the other that I did not address it. I did address it and I will continue to address it. I have seen our staff do that and they have been instructed to either hand it to the individual or place them all on top of the Styrofoam or hand to the individual. A direction has been sent out to all staff regarding this expectation and will continue to be monitored.

**Question 3**
Has CRCC transferred any incarcerated individual in the last 4 weeks?

**Answer**
I now that we have stopped our transfers in and out, we still release to the community but no transfers in. Other than transfers to AHCC or MCC or the community hospitals.

**Question 4**
So you have not transferred anyone to work release.

**Answer**
We are not sure. They may be sending the camp guys but honestly I do not know. We will have to look into. Follow up on this they are transferring individuals from the camps to Work Release as it is medically safe.

**Question 5**
Are you guys going to do the fundraiser? It was supposed to be on the 27th and it got pushed out till the 11th and now it’s maybe at the end of June.

Yes the fundraiser was suspended due to attempt to control the spread of this virus and limited staffing. We will work on getting the fundraisers back as soon as we can. Update: CRCC will be refunding individuals and fundraiser will be rescheduled for another time.

**Question 6**
Can they provide refunds for the fundraisers?

**Answer**
We will follow up with those that run the fundraisers to ensure that refunds are offered.

**Question 7**
Who directed the tier rotation/modification two months ago? Was it Mr. Uttecht or Headquarters, and if it was headquarters where did the directive come from?

**Answer**
That was an in house decision to decrease the amount of individuals in the dayrooms and provide for appropriate social distancing.

**Question 8**
We have been on quarantine since the 16thish, if there was one unit that has not had any positives or anyone sick or any false positives, are they off quarantine already because we are rolling on 20 days already.

**Answer**
Currently all of CRCC is on quarantine status and it will remain on quarantine status until we get further direction from our medical providers and the Department Emergency Operations Center.
It was joint decision with HQ to put the whole facility on quarantine last week, so the whole facility has not been on quarantine since the 16th. With that said there may be certain individuals that were on quarantine for 20 days because they may have had a celly that was symptomatic or came in close contact with a symptomatic person.

**Question 9**
I was speaking of one unit that has been on since the 16th and that is why I was curious as to if we are going to wait until the whole prison is not sick anymore.

**Answer**
That will be dependent on many different factors, at this time we do not know.

**Question 10**
So you are not counting the six days that all of medium has been in lockdown under even more restricted movements than quarantine.

**Answer**
The mediums were on restricted movement for a different issue.

**Question 11**
So they have been in there cells for 2 weeks already, either for the 20 minutes or the 1 hours on quarantine but yet they are going to get another 2 weeks out of this?

**Answer**
So our main concern is to control the spread of this virus in this prison and keep folks safe. So we are going do what we have to do to manage that the best way we know how.

**Question 12**
If that is your goal then why are you sending people to work?

**Answer**
Because we are required to have essential workers, the work still needs to get done here.

**Question 13**
Aren’t you making PPE’s for hospitals and other places? If you are sending people from units that have lots of sick people in them they should be all quarantined and not leave.

**Answer**
We make sure we can do that safely and if we can do that safely we do. We do not want more people restricted then we have to. We know it is difficult for individuals to be on assignment to their room for as long as we have. We are doing it because we really have no choice. We are trying to get folks out as best we can.

**Question 14**
Why are the men making the PPE’s, yet staff are not wearing the appropriate PPE’s that they need to protect when our men can’t go anywhere and the staff can leave and come back, this is actually how our men are getting this sickness. Plus the fact that they get locked down in their cells and they can’t get out to get water.

**Answer**
They can get out to get water, not at their want, depends on where they live in the insinuation. We are restricting movement sepearting these folks by these groups we call cohorts. We are trying to get a handle on the infection so it does not spread more widely. We are trying to get as many folks who are able bodied and not
symptomatic out to work if they can be cleared by our medical personal. We are doing virtually the same thing that you see in the community. What we are trying to do and the caring attitude of our staff is to work with these folks to not keep them locked down any more than we have to. We are doing our best to help not only CRCC, the Department of Corrections, but we are working for external people to do these gowns and we are proud to tell you that we are not only doing this, but we are doing this very well. We are not putting sick guys on the line to make these. It is our social responsibility to do this kind of stuff. We are proud of them for stepping up and doing this type of work and you can see the pride on their face every day.

Question 15
What guidelines is medical giving you guys to help prevent this spread of the desires that is in there? Are you listening to anything medical professional are saying to do?
Answer
Yes, it is a unified command in the ICP with custody and medical and we work hand in hand with daily decisions and daily directions. The EOC is also working directly with medical doctors and the CDC on these guidelines and is a collaboration with those folks.

Question 16
Mr. Uttecht, being that you are a top leader at CRCC, why would you not sit with the leadership of DOH. Can you say that without having a degree in medical that our loved ones mental health is not being considered. Can we please ask that you take directive from leadership at DOC.
Answer
I have had the Department of Health in my office this week, I also had the Benton County Health District in my office this week. All that stuff is going on. The fact that you are not seeing it does not mean it is not going on. The #1 Epidemiologist for the State of Washington was at CRCC two days ago. I assure you that what you are asking for us to do is going on.

Question 17
Why did it take that long to get the Health officials?
Answer
First and foremost no one has done this stuff before, we are learning and adapting on a daily, if not minute by minute basis. This is something that none of us have ever done in our careers, the bottom line that this is new to everyone. We are learning as much as we could from MCC when they were struggling with it too, the situation at MCC and the situation at CRCC is not the same. We share information so that we can all learn from each other. I am hoping that what happens here does not happen anywhere else but I assure you we are doing what we can.

Question 18
I just want to go back and ask the question of why the CO’s are not wearing the appropriate face masks.
Answer
We continue to express the importance of them wearing face masks. I can tell you from my experience, I walked around the institution yesterday and I did not encounter one staff member that did not have face mask or face covering on. All medical had the appropriate medical PPE’s on. If we see it we address.

Those issues exit everywhere to include on the streets, and there is a lot of people that are not complying with it. I would say our compliance here, I don’t necessarily want to quote the DOH but the comment was is that we are complying at a higher level then what is going on in the community. We are working very hard make sure
that and individuals and staff are compliant with PPE requirements. We have sent out several communication out. To explain that everyone here is responsible for their own health and respectful of others by wearing a mask, to socially distance. That is what we not only do here but on the streets. The only way to get past that is to work together. It is never going to be perfect.

**Question 19**
Is the staff, are they required to wear the same mask that he inmates are wearing or are they still wearing the bandanas and any type of mask that they want?

**Answer**
Please refer to the website regarding the rules of what PPE’s are required. Those are the rules that we are following. The PPE requirements are very specific and for a specific reason. We are also limiting the use of the higher level PPE’s like the N95 for those that have tested positive. There are a lot of rules regarding what you have to wear and where you wear it. Maintaining compliance on that is a huge lift but I assure you we are staying on that.

**Question 20**
If you are normally wear a mask in the health care field you would only wear for 4 hours before you are required to change it or get a new one. Now that the paper masks have been handed out, what does that look like, are they getting new ones or are they being allowed to sanitize with alcohol after use?

**Answer**
We do not have our staff switching out the use of surgical masks every 4 hours. We don’t have individuals wearing surgical mask only 4 hours. We do not have that kind of PPE. We ask them to wear them and be as judicial as possible so we are not going through them as much. We have some guidelines associate.

For incarcerated individual it is an as needed, we have the ear looped mask available in every unit. AS far as staff it is face coverings that includes a lot of different masks. Most staff I have seen prefer the ear looped ones because they are more comfortable. Anytime a staff members enters a pod in the MSC living units they are required to have the surgical mask and gloves. So face coverings are not allowed in those areas.

**Question 21**
If an individual is sick with COVID and they had to move to one of your RCF and there was keep separates there what would that look like?

**Answer**
That is a really good question. I think that they would evaluate those keep separate, right now we are moving to AHCC or MCC so they may look at moving to a different area, hospital or they may be able to manage the keep separate because they are in the Reginal Care Facility and not in general population.

**Question 22**
Mr. Uttecht as the top leader of at CRCC how do you not know how transfers are happening at CRCC. Families are concerned about decisions that are being made from the leadership at CRCC. Can we please ask that Steve Sinclair can be on the next call on Friday so we can express our concerns of how our loved ones are feelings? You made a decision of our loved ones being on a tier rotation with no medical advice, our loved ones are affected from these decisions mentally. DOC is a public entity. Your model is to protect our loved ones in your care. They have been confined longer than they deserve.
Answer
I can’t answer that question. That is not why we are here today. We are here to explain our COVID response that requires some kind of legal determination, it requires me to speak for the Secretary of corrections which I cannot and will not do. It is an unfair questions.

Question 23
Would you be willing to reach out to Sinclair and have him do that?
Answer
No that is not the intent of these conversations to have the Secretary on the Local Family Council meeting. That is outside the scope of what we are here for today.

Question 24
We were told that all the positive cases currently are in minimum. Can you tell me the last time a positive cases was taken out of the medium units?
Answer
Both sides of MSC we have positive COVID cases.

Question 25
Regarding the men coming back from the RCF, besides anything COVID related is there also a chance that the spot in their cells would be given to a new inmate coming in, just in general.
Answer
No we don’t have incoming inmates and we do everything we can to prevent putting a healthy person in a cohort of people that are currently quarantined. We can never say never because things happen in prison sometimes and we have to moves folks around but it would be the last measure for sure.

Comments/Closing
- If you have any individual questions or concerns please feel free to send me an email, miduncan@doc1.wa.gov and I will respond as soon as I can.
- Thank you for joining us. The next call will be Friday June 12, 2020 at 9:00am.