

# COVID-19

## FACT SHEET: PRACTICES FOR JAILS AND PRISONS

THANKS TO THE [PRISON POLICY INSTITUTE](#) FOR THEIR INSIGHT, RESEARCH, AND LEADING THE DISCUSSION ON THIS IMPORTANT ISSUE. WE HAVE INCORPORATED AND LINKED TO MUCH OF THEIR WORK. [HERE IS A LINK TO THEIR REPORT.](#)

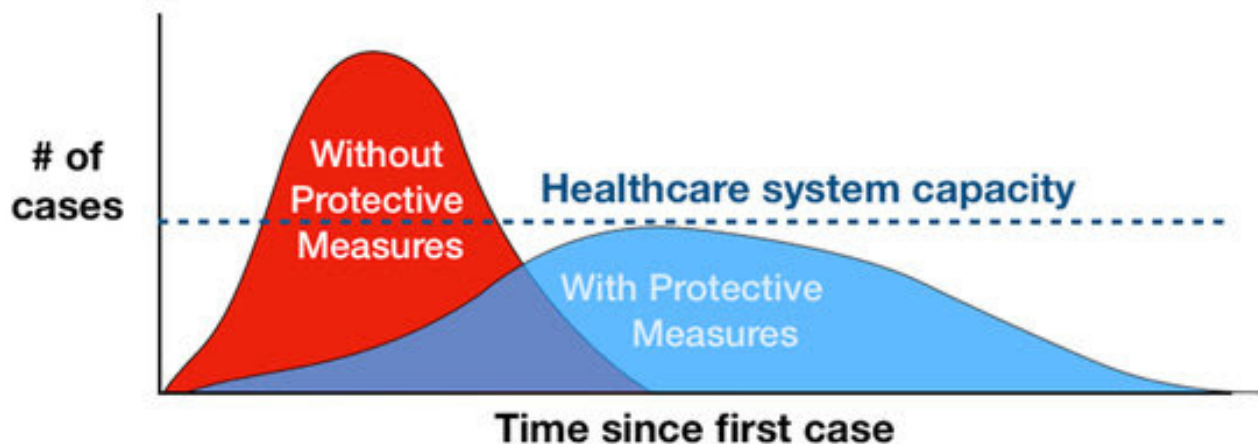
Jails and prisons in our country are full and many are severely **overcrowded**. People in custody are in close contact with each other, without frequent and adequate access to water and soap. This is a recipe for rapid spread of infection in a context where many are medically vulnerable, medical care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

Given that there is already dissemination into the general community, 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,
- assisting **older adults and those with underlying health conditions who are most at risk to avoid large gatherings of people.**

### SLOWING THE SPREAD OF COVID-19 IS CRITICAL



*Adapted from CDC / The Economist*

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 AND PRISONS<sup>1</sup>**

- **Release medically vulnerable 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<sup>2</sup>** 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 population<sup>3</sup>.)
- **Reduce overall prison and jail population.** Existing unsanitary and overcrowded prison and jail conditions will **exacerbate** the spread of the new coronavirus. Prisons and jails are not closed environments, and staff and visitors coming into the facilities and returning home, pose a considerable risk. Outbreaks of the flu **regularly** occur in these facilities, and during the H1N1 epidemic in 2009, **many** jails and prisons **dealt with high numbers of cases**. Locking down the jail would only serve, as in China, to **intensify infection rates** inside, and then spread disease into the broader community as guards and service workers move back and forth. Reducing the prison and jail population significantly will ensure that capacity of these facilities is at a level to prevent or contain major outbreaks within these facilities and the surrounding communities. By reducing the population, prisons and jails can implement commonsense public health and sanitary measures to prevent or contain major outbreaks such as ensuring that cells are not shared, there are sufficient medical beds, and enough prison staff to ensure safety for staff, people who are incarcerated, and visitors.
- **Eliminate medical co-pays within prisons** 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.

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<sup>1</sup>The Justice Collaborative is particularly grateful to Prison Policy Initiative, which provided many of these **recommendations**.

<sup>2</sup>There is **overwhelming consensus** among correctional experts, criminologists, and the National Institute of Corrections that 50 years of age is the appropriate point marking when a prisoner becomes “aging” or “elderly,” because people age physiologically faster in prison. People who are incarcerated typically experience the effects of age **sooner** than people outside prison because they are more likely than the general public to experience stresses including long histories of alcohol and drug misuse, insufficient diet, lack of medical care, financial struggles, and stress of maintaining safety while behind bars. Older people who are released from prison **pose little risk to public safety**, and that risk is even less for people released who are sick and dying. **Only 7 percent of those aged 50-64 and 4 percent of those over 65 are returned to prison for new convictions—the lowest rates among all incarcerated demographics**. Moreover, “arrest rates among older adults decline to a **mere 2 percent by age 50** and are close to zero percent by age 65.”

<sup>3</sup> 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**.

- **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.** While over **600,000 people** enter prison gates annually, there are about 612,000 people in jail on any given day. Worse, people go to jail **10.6 million times** each year, meaning people circulate quickly through the jail system and out into public. More than half of the people in jail are only in there for **two to three days.**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;
  - 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.
- **Provide soap, CDC-recommended hand sanitizer, comprehensive sanitation and cleaning of facilities and other safety measures free of charge** as recommended by the CDC for those who remain incarcerated. Experts agree that frequently washing hands and sanitizing communal spaces are among the **main ways** people can help limit the spread of the virus. However, practicing even the most simple hygiene, such as washing hands, is not a given in prisons and jails. Currently, in many prisons and jails, hand sanitizer is often treated as **contraband** because it contains alcohol and even if incarcerated people have access to water, they often have **no way to dry their hands.** To minimize further spread, the **Center for Disease Control and Prevention suggests** things like avoiding close contact with people who are sick, covering your mouth with a tissue when you cough or sneeze, and disinfecting frequently-used surfaces. However, in jails and prisons, **access to toilet paper or tissues** is often limited. Providing hand sanitizer, soap, unlimited access to hot water, cleaning supplies and other health and sanitation items can help prevent the spread of the disease
- Release to the public the existing plan and procedures in place to address COVID-19 within state and federal prisons. Prisons and jails have a responsibility to ensure the safety and well-being of those put in their charge and to be transparent and accountable about what that responsibility entails. Creating and releasing existing plans and procedures reassures people who are incarcerated, their loved ones, and the public that there is a plan to manage the risk of outbreaks. It also provides an avenue to create a stronger plan for the health and safety of the facility and the community by inviting feedback and suggestions from the public and health experts. A publicly available plan also ensures continuity for staff should corrections staff fall ill and need to be replaced.

## 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 OUTBREAK 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 and beyond.
- **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.

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