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## JHA Prisoner Response Unit Communication Bulletin April 17, 2020

**In the nine-day period from April 8 - April 17, JHA's Prisoner Response Unit (PRU) fielded approximately 100 emails, phone calls, and social media contacts, and reviewed and logged more than 160 letters from people who are incarcerated, largely relating to COVID-19 response.**

### **Important Updates Since April 8**

On April 10, [a federal court denied the requested relief of emergency release of IDOC prisoners.](#)

The vast majority of the reported IDOC COVID-19 cases were still associated with Stateville. One man at Stateville wrote, *It's hard to describe the mental toll this is taking. I knew one of the guys who died. I'm in C House which is quarantined and with over 100 cases, we're trying to remain strong, but the news just keeps getting worse.* While another stated, *You want to talk about frustration - live THIS life, where people are dying and getting sick in front of your faces - What are we supposed to think? What would YOU think?* As of April 24, IDOC has reported 10 prisoner deaths according to media reports. It is still unclear when and where these deaths occurred, although they are presumed to be all Stateville prisoners. IDOC did not post any data regarding testing during this period. JHA continues to call for more transparency in reporting.

On March 1, 2020, the population of IDOC was 37,731; on April 8, the date of JHA's last update, it was 36,463; as of April 17, it was 35,592. Admissions to IDOC from jails were halted by the Governor's Executive Order on March 26. By halting admissions alone, it can be expected to see a substantial population decrease through normal exits. JHA hopes the number of targeted releases due to administrative efforts taken in response to COVID-19 continues to rise and IDOC makes more information about this public. Additionally, currently IDOC's total population count does still include some people who are not housed at and still subject to facility conditions. For example, it counts some people who may be furloughed or on electronic detention. JHA continues to push for smart decarceration to advance public health and in anticipation of severe impending State budget issues that will worsen already unacceptable prison conditions. Additionally, we continue to push for adequate cleaning supplies and Personal Protective Equipment (PPE) for everyone in our prisons.

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JHA will continue to report on our PRU communications in the coming weeks. To supplement our monitoring during this difficult time, JHA has sent COVID-19 response surveys with prepaid return envelopes to almost all IDOC facilities, so that prisoners will be able to voluntarily and anonymously provide us with more first-hand information about their experience.

**Thank you to everyone who has called, emailed and written to JHA with your questions and updates.**

**JHA continually uses the information you have shared to follow up with administrators at the facility and at departmental levels as well as to advocate for and advance improvements.**



## **What JHA is Hearing from Impacted People About Life in IDOC During the COVID-19 Pandemic**

JHA's third summary of updates, information, and concerns related to COVID-19 shared with JHA through outside contacts through April 17 and through prisoner letters received through April 13 is provided below. This summary highlights new questions, concerns, and details volume of issues raised throughout the system. JHA relays some concerns in **blue text** verbatim. We are now sharing information as logged by issue in table format.

*Please note: JHA is not able to substantiate much of the information shared. JHA has consolidated information received and shares it as an anecdotal resource. JHA believes that there will be wide variation in issues and practices. We are sharing the information we have received in order to promote system transparency and increase public awareness of how the pandemic is impacting people who live and work in Illinois' prisons.*

**PRU CONTACT TABLE**

<b>Issues Reported to JHA by Security-level of Prison</b>					
<b><u>Issue Category</u></b>	<b><u>Security-level</u></b>				<b><u>Totals by Issue</u></b>
	<b><u>Minimum*</u></b>	<b><u>Medium**</u></b>	<b><u>Maximum</u></b>	<b><u>Mixed***</u></b>	
Early Release	65	24	5	10	104
Quarantine	9	22	6	6	43
Social Distancing	75	8	6	8	97
Use of PPE - Staff	8	10	5	5	28
Use of PPE - Prisoner	3	9	6	3	21
Communication	2	25	15	3	45
Sanitation	9	26	20	7	62
Access to Hygiene Items	10	33	24	6	73
Dietary	6	23	8	4	41
Commissary/Property	2	18	8	2	30
Access to Information	8	20	7	5	40
Medical/Mental Health Care	9	16	13	5	43
Fear	19	23	11	6	59
Other	9	28	11	6	54
<b>Totals by Security-level</b>	<b>234</b>	<b>285</b>	<b>145</b>	<b>76</b>	<b>740</b>
<p>* Minimum-security prisons mostly use dorm style housing or housing other than conventional two-man cells  ** Medium includes Graham Receiving &amp; Classification  *** Mixed limited to Dixon and Logan</p>					

<b>Issue Category</b>	<b>Issue Definition</b>
Early Release/EDSC	requests for early release for those who are medically vulnerable; close to out date, would be out with credit or restored credit; and others
Quarantine	references to lack of out of cell time, dayroom/yard, lockdown procedures, etc.
Social Distancing	references to movement, cells/dorms and shared spaces
Use of PPE - Staff	references to staff not wearing, not correctly wearing, or not having PPE
Use of PPE - Prisoners	Includes requests for PPE for prisoners

Communication	references to use of phone, emails, video visits, tablets, kiosk, and generally communicating with loved ones
Sanitation	references to cleanliness of cells, showers, shared spaces; clothing (laundry); water quality (brown water); etc.
Access to Hygiene Items/Hand Sanitizer	references inadequate access to, and need for hygiene items for living space and body, including soap, shampoo, bleach, mop/broom, rags, etc.
Dietary	references to the quality and/or quantity of food, or protocols related to food preparation and/or distribution
Commissary/Property	reference to commissary access, spending caps, product limitations, and personal property.
Access to Information	references to wanting more information, having general questions about what is going on, and loved ones trying to learn more by reaching out to facilities and Springfield; and access to the law library
Medical & Mental Health Care	references to treatment of virus-related issues, pre-existing issues, access to medication, previously scheduled outside appointments, and mental health meetings and crisis watch.
Fear	references to feeling afraid or worried about the spread of COVID-19 generally, and for personal wellbeing specifically
Other:	
Showers	references to the frequency and conditions of showers
Incarcerated Workers	references to workers wearing PPE, access to cleaning supplies, social distancing, training, being required to work, etc.
Productive Activities	references to programming, recreation activities
Staff Conduct	references related to procedures such as shakedown, crowding of prisoners, inconsistency between shifts, rude comments and behavior, etc.



## QUESTIONS

1. *How many days must incarcerated workers work in a row before getting time off?*
2. *Can tablets have added additional functionality, such as phone calls or legal research?*
3. *Are shakedowns necessary when prisoners have been locked down and they are fearful of staff spreading the virus? What precautions are taken when staff move from cell to cell?*



## EARLY RELEASE

*There is talk about an incremental mass prisoner release. While this may quell the transmission rate through the ability to quarantine individuals in single cells, an adjacent problem will arise concerning the released inmate's financial ability to secure housing. In the event of such a release, a financial stipend needs to be available as an instant temporary measure to secure an apartment. Many of us, me in particular, have the means to obtain an apartment, but do not have the money to do so. – Graham*

- Many people report they are incarcerated for non-violent offenses and believe they and others similarly situated should be considered for early release.
- People continue to seek early release for themselves and others based on people with illness inside prisons, on wanting those inside to be able to help loved ones who are ill outside prisons.
- Family members and other supporters continue to reach out seeking information on how to advocate for loved ones' early release.



## QUARANTINE

*They used [part of disciplinary segregation housing, "seg"] to quarantine us behind the door! Treated us like seg, they didn't let us bring any change of clothes, soap, toothpaste, and they kept us back there [five days]. - Menard*

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*We are not on lockdown, we are being let out 4 cells at a time and given 30 minutes of dayroom time daily to use the phones and shower. This week they've been running yard 10 inmates at a time only. We are being allowed commissary shopping once weekly. Regardless to grade status, and grade restrictions due to disciplinary sanction have been lifted for duration of the quarantine so EVERYONE can shop provided they've got the funds. – Big Muddy*

- Some people reported that new people were still being moved into their housing areas.
- Staff at facilities, people who are incarcerated and their loved ones expressed concerns regarding other facilities' tactical teams being sent to Stateville where there are many COVID-19 cases and returning to work at other facilities without diagnosed cases.



### **SOCIAL DISTANCING**

*[T]he phone isn't 6 feet from the toilet we use, even the microwave and the sink that we use is not 6 feet from the toilet. – Vandalia*

*Medical staff are not recommending removal of symptomatic prisoners until tests reveal they are positive for COVID-19, leaving us exposed to the virus since 'social distancing' is not practical. – Stateville*

*The only time they [Correctional Officers] want us to social distance from each other is when there are camera's involved. – Southwestern*

- People at various facilities still report concerns regarding being around many people without the ability to socially distance.
- Inability to socially distance was particularly noted as an issue during movement, e.g. to dietary, healthcare unit, in holding bullpens, etc.



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## USE OF PPE

*The officers only put their masks on when healthcare or the warden shows up. - Taylorville*

- JHA continued to receive reports of some staff not wearing PPE during this period. IDOC has represented that it is monitoring use.
- Many people want to know about incarcerated workers' use of PPE, particularly dietary workers. IDOC has represented to JHA on April 22 that dietary workers are provided with PPE. We will continue to monitor this concern and others.
- Some prisoners reported that they had been issued masks. IDOC represented on April 22 that people who are incarcerated at Stateville were provided with masks and that the department and use of PPE for the population is being expanded.



## COMMUNICATION

*GTL is giving us free video visits once a week, and we are on level 1 lockdown so we can't even get them. – Menard*

- People on lockdowns at various facilities reported not having access to various means of communication.
- JHA has received several contacts from people incarcerated at Reception and Classification Centers who were awaiting phone approval and had limited access.
- People at other facilities continue to report issues with their phone PINs and approved lists. JHA has been continually following up on these issues as we believe everyone should have access to communication.



## SANITATION AND ACCESS TO HYGIENE/CLEANING PRODUCTS

*Prisoners are indigent, all of our resources come from a state of dependency. We are only allowed to purchase 3 soaps every 2 weeks, but lately once a month. In order for us to meet safety requirements we need to purchase more soap for daily hand washing and showering. We are asking that IDOC provide us with body soap, laundry detergent, shampoo, and disposable wash cloths and everyone a mask, so that we can maintain proper sanitation. – Hill*

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*It's been 3 weeks since we last shopped and people are running out of soap, shampoo, pads, tampons, toothpaste, toilet paper. Yet we are still told nothing about when we will get to shop. The memo states we should have cleaning supplies given to us, but we have none. – Logan*

- Many prisoners report that they have not been given hand sanitizer. JHA's understanding is that hand sanitizer should be dispensed by staff as needed and that it is not IDOC's intention that prisoners be allowed to keep it in their possession.
- Some people continue to report inadequate or no cleaning supplies provided. The CDC recommendation for dilution of bleach is 1/3 cup of bleach per gallon of water.
- There have also been reports of issues with laundry equipment and services.
- Some people report plumbing issues and showers, sinks, or toilets not functioning properly, and water quality issues. JHA was informed that in the case of reports of water discoloration at Robinson, the town had been flushing hydrants in the area and represented that the water was safe.
- Some people report common areas (such as showers) are not being cleaned as often as they are supposed to be cleaned. IDOC has represented common areas should be cleaned multiple times per shift.
- People who had been locked down reported not showering in more than a week.



## **DIETARY**

- From Lawrence someone reported they are no longer served juice because of concern that people will make "hooch," or alcohol, in their cells.
- There were other reports about not getting the typical amount or variety of food.
- People continued to express concerns about how their food was handled, for example, people passing trays wearing gloves they also wore while cleaning, trays being touched by individuals who had not washed their hands, or dietary workers not wearing PPE.
- Some people reported that their typical medical and religious diets were not available (e.g. diabetic tray at Big Muddy).





### **COMMISSARY**

- People report that state pay of \$10 a month is insufficient to buy what they need for pandemic preparedness.
- Not having commissary offered frequently enough was a common reported issue.
- Some people reported not being able to buy food off commissary. IDOC represented to JHA on April 22 that people should be able to buy food on commissary, however, frequency will vary by facility. JHA will continue to monitor and follow up on this issue.



### **ACCESS TO INFORMATION**

- Many people are writing to JHA requesting the “504s,” or the part of the Administrative Code relating to Discipline and Grievances. All incarcerated people should have access to this at their facilities and on request.
- Some people reported they were unable to get grievance forms.
- JHA continues to receive reports of some staff being dismissive, rude, and unprofessional when people who are incarcerated attempt to obtain information from them.
- People reported difficulty getting law library services.



### **MEDICAL CARE**

- Many people are confused regarding when prisoners’ temperatures should be taken. Some people report that it is inconsistent at their facility. JHA’s understanding is that IDOC currently thinks that prisoner temperature should be taken if they are symptomatic or expressing medical concern. Different facilities seem to have different practices and there seem to have been changes over time. Staff temperature is monitored daily.
- People continued to report lack of healthcare and dental services due to administrative quarantine measures.
- Some people reported that medical permits were not being honored.





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**You can share your information, experiences and questions by leaving JHA a voicemail message at (312) 291-9183 ext. 208 or [completing our online form](#).**

JHA continues to recommend that people reach out for information from IDOC at the facility level, through the dedicated COVID-19 response phone line (217) 558-2200 ext. 7700 and/or via email using [doc.covid@illinois.gov](mailto:doc.covid@illinois.gov). JHA encourages you to continue to share your experiences with these contacts with JHA as well [using our online form](#).

JHA will continue to share information received and hope you will continue to provide updates.