What is COVID-19 and How Can It Affect You?
COVID-19 is a virus that can cause fever, respiratory problems, and sometimes gastrointestinal symptoms. Since emerging in China in December 2019, this new coronavirus has caused a global health emergency. It is likely to be transmitted in droplets from coughing or sneezes, or by touching contaminated surfaces or objects and then touching your eyes, nose or mouth. The virus has a 2 to 14 day incubation period. That means people could be infectious for quite a while before symptoms like fever, cough, or shortness of breath emerge.

The United States, along with several other countries, has imposed a “shelter in place” order, requiring Americans who do not work for “essential businesses” (like restaurants, hospitals, and grocery stores) to stay at home. The Government is also requiring everyone to abide by a “social distancing” policy where there must be at least 6 feet of space between people.

As you might imagine, these requirements present particularly troubling concerns for those who are incarcerated in America’s prisons and jails. Incarcerated folks, who are kept in close quarters, are unable to take many of the disease-prevention measures other people are now practicing. Therefore, COVID-19 is especially dangerous to the incarcerated population, for whom social distancing is impossible.

Prisoner Advocacy Guides on COVID-19

How This Guide Can Help You Navigate Risks of COVID-19 in Prison
This Guide is intended to help you understand the steps you can take inside and outside of prison to (1) prevent contracting and transmitting COVID-19, and (2) advocate for getting people out of prison due to COVID-19.

Ways to Prevent the Spread of COVID-19 According to the Center for Disease Control (CDC) and World Health Organization (WHO)
- Recommended protocol for wearing masks:
  - Place mask carefully to cover mouth and nose and tie securely to minimize any gaps between face and mask. While in use, avoid touching the mask.
○ Remove the mask by using an appropriate technique (i.e. do not touch the front but remove by the headband from behind).
○ After removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand sanitizer (if available) or soap and water.
○ Replace masks with a new clean, dry mask as soon as they become damp/humid.
○ Do not reuse single-use masks.
○ Discard single-use masks after each use, and dispose of them immediately upon removal (consider a central place in the ward/cell block where used masks can be discarded).
○ Cloth (e.g., cotton or gauze) masks are not recommended if you are exhibiting symptoms. Double-sided cloth masks can be used if you are healthy.

● Disinfecting protocol: First, clean surfaces with a mix of soap and water, or a detergent. Then apply the disinfectant for the required contact time, as per the manufacturer’s recommendations. The disinfectant may be rinsed off with clean water after the contact time has elapsed. If possible, keep the door closed with windows open to improve airflow and ventilation while using detergent and disinfection products.

● Waste: Should be treated as infectious clinical medical waste. Don’t touch with bare hands.

● Laundry: Clothes, bedclothes, bath and hand towels, etc. can be cleaned using regular laundry soap and water or machine-washed at 60–90°C with common laundry detergent.

● Terms to Know
  ○ Medical Isolation – Medical isolation refers to conning a confirmed or suspected COVID-19 case (ideally to a single cell with solid walls and a solid door that closes), to prevent contact with others and to reduce the risk of transmission. Medical isolation ends when the individual meets pre-established clinical and/or testing criteria for release from isolation, in consultation with clinical providers and public health officials. In this context, isolation does NOT refer to punitive isolation for behavioral infractions within the custodial setting.
  ○ Quarantine – Quarantine refers to the practice of conning individuals who have had close contact with a COVID-19 case to determine whether they develop symptoms of the disease. Quarantine for COVID-19 should last for a period of 14 days. Ideally, each quarantined individual would be quarantined in a single cell with solid walls and a solid door that closes. If symptoms develop during the 14-day period, the individual should be placed under medical isolation and evaluated for COVID-19. If symptoms do not develop, movement restrictions can be lifted, and the individual can return to their previous residency status within the facility.
What You Can Do to Advocate For Getting People Out of Prison Due to COVID-19

- **Write to us:** let us know what information you need, what information you have, and what you are seeing happen and not happen. If you want us to share this information with other organizations or the press, please state if you give us your permission to share it more widely.

- **File a 602 seeking early release:** If you believe that you are medically high risk because you have underlying health conditions such as diabetes, hypertension, respiratory illness, or cardiovascular disease, and/or are elderly (over 50), identify yourself by filing a 602 seeking early release due to risk of COVID-19. List all medical conditions that make you high risk and attach any recent medical records documenting your conditions. The 602 will build a record for a habeas or writ of mandate claim seeking release or damages relating to COVID-19. State clearly: **I am not adequately protected from a coronavirus infection at this facility because** (describe the conditions that threaten you with infection, such as inadequate sanitation of facility or availability of soap, disinfectant, or hand washing facilities; inadequate isolation of symptomatic people; inadequate quarantine of exposed persons; inadequate exclusion of symptomatic or exposed staff, contractors or volunteers, inadequate testing and reporting, or inadequate health care for the infected)

- **File a 602 if adequate precautions are not taken within your facility:** CDCR has said it will follow its typical protocol for influenza (flu) outbreaks, which includes isolation of people with symptoms and separate quarantines of others who are exposed to those with symptoms. File a 602 or a Group 602-G if precautions are not taken around you, including: Provision of adequate soap and disinfectant free to all incarcerated persons; distribution of double the amount of soap; provision of hand sanitizer when hand washing facilities are not available; sanitation of high-touch surfaces throughout the facility including phones, counters, tables, eating surfaces, doorknobs, faucets, and all bathroom surfaces. Bathrooms should be sanitized three times a day.

- **Write to the Prison Law Office**, General Delivery, San Quentin, CA 94964 identifying your serious medical conditions and ask to be included in a list of individuals for early release. Your evidence may help PLO and RBGG in their lawsuit against CDCR, in which they demand population reduction to a level that allows 6-foot social distancing due to COVID-19, on the basis of Coleman v. Thompson and Brown v. Plata. PLO and RBGG have demanded release to parole or post-release community supervision of all people who (1) are at low risk as determined by CDCR’s risk assessment instruments, or are serving a term for a non-violent offense, or (2) are paroling within the year. The attorneys also asked that CDCR release or relocate all incarcerated people who are at high risk of contracting COVID-19, including people who (a) are 65 and over (b) have
chronic lung disease or moderate-to-severe asthma (c) have severe heart conditions (d) are immunocompromised (for example, due to cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, or prolonged use of immune-weakening medications) (e) are severely obese (f) have uncontrolled diabetes (g) suffer from renal failure (h) have liver disease and (i) are pregnant. In the alternative, the attorneys demanded that CDCR release to parole or post-release community supervision as many people as necessary to achieve safe social distancing in prisons and to create sufficient space for quarantines and isolation.

- **Update your forms on file with CDCR** about who you want to be involved in your medical care and how you want them to be involved. Mail copies of the various forms below and share with whom ever you authorize for release of information and decision-making on your behalf.

  - **Health Record Authorization Release Form 7385** gives someone outside the ability to get information about you from CDCR’s California Correctional Health Care Services (CCHCS), including access to your medical and custody records and the ability to speak with someone at the prison about your health via phone calls, emails, or faxes with this information.

  - **CDCR 7421 Advance Directive** is a document that allows you to write your wishes about end-of-life care. It allows you to say what you want so that family, friends, doctors, nurses, and other health care staff will know for sure what you want if you can no longer speak for yourself (for example: “I don’t want CPR (to be revived) or a breathing machine if my heart stops or I cannot breathe on my own. If I cannot eat on my own, a feeding tube is okay.”). It also allows you to name someone as your Medical Decision-Maker to make health care choices for you if there comes a time when you cannot physically advocate for yourself. They can tell others about your wishes for treatment at the end of life and make sure they are followed.

    - The Advance Directive is NOT a “Will” and has NOTHING to do with your possessions or assets inside or outside of prison.

    - **Please note**: PAN/your PAN advocate cannot serve as a Medical Decision-Maker on your behalf.

  - **CDCR 7465 POLST** is short for Physicians Orders for Life Sustaining Treatment. This form is in addition to form CDCR 7421 Advance Directive form. The POLST is a form used by all hospitals in California (and other states) and is used to write a patient’s wishes about end-of-life care. Ask your counselor or health care provider for one.
Your Responsibility in Using These Guides

PAN’s COVID-19 Guides, including its Declaration Guide, 602 Appeals Guide, and Self-Help Litigation Guide, are not intended to give legal advice, but rather general legal information. No attorney-client relationship is created by using any information in this guide. You should consult an attorney for legal advice specific to your situation.

When putting PAN’s COVID-19 Guides together, we did our best to give you useful and accurate information because we know that people who are currently or formerly incarcerated often have difficulty getting legal information. However, the laws change frequently and are subject to differing interpretations. Prisoner Advocacy Network does not have the resources to make changes to this material every time the law changes. If you use this information, it is your responsibility to make sure that the law has not changed and applies to your particular situation. Most of the materials you need should be available in a law library.

In Solidarity,

Prisoner Advocacy Network