

Allegheny County Jail Oversight Board Meeting Minutes
March 4, 2021

Judge Clark:

Good afternoon. We are here for the monthly meeting of the ACJ Oversight Board. I am Judge Kimberly Clark, Chair of the Board and President Judge of Allegheny County. I'm going to take a roll call and we'll begin.

Councilwoman Hallam: here

Mr. Kamara: here

Ms. Klein: here

Ms. Lazzara, or Judge Lazzara, I'm sorry: Here, it doesn't matter, Beth works too.

Ms. Moss: here (Ms. Moss indicated her presence slightly later)

Sherriff Mullen: here

Ms. Parees: here

and Ms. Wagner: here

Alright and then we also have Mr. Bacharach from the county solicitor's office and Erin Dalton from DHS as well as our community corrections folks who will be making presentations during the meeting. And I believe Mr. Korinski is here because I received a message that Ms. Wagner will have to leave the meeting early and Mr. Korinski will be her proxy for the remainder of the meeting.

I am going to start with the rules. I have not been reading the rules that we developed when our meetings were in-person, but I want to make sure we have an orderly and respectful meeting. It applies to everyone that is participating, even us. The number one, most important rule is that everyone be treated with dignity and respect. Number two, everyone will have the opportunity to be heard. Obviously within reason. The last meeting went very long and I think sometimes we have to curtail some things so the board gets to the business. There are some action items that we want to make sure we give them the attention they need. So, the third rule is that anyone wishing to address the board must sign up. Obviously we are not having people present in person because of the pandemic and we receive many public comments and I want to say to the folks that are submitting the public comments, thank you for your interest and your concern for some of our most vulnerable citizens. And those are our citizens who are currently residing in the ACJ. But, depending on the business the board must conduct, I may have to limit the number of comments I read. I have been trying to read all of them. It takes a really long time. We can't answer all of them. Some of them are just comments, not questions, and I really appreciate them and I know that a couple of times I've missed one. I've gotten some accusatory emails that I have deliberately left out someone's question and so I can assure you that I have not. The only comments or questions that I would not read are those I think are inappropriate and might contain profanity or really unkind comments about folks. I might choose not to read those, but every comment is given to the board and I believe all of them are later posted. I would say that I really take to heart the interest the public has in what occurs at the jail. And I read every one of them and I try to address and hopefully I try to give answers, answers I can't promise will satisfy you. If you feel that I slighted you, I apologize for that. I have not. It is not intentional. If I leave something out, you can send me an email or call my office, but please be kind to my staff when you speak to them. I try to treat everyone with dignity and respect and I hope you would give me the same courtesy when you address me whether it is in person or in email. The last thing again is everyone will be treated with dignity and respect and I thank you for your consideration.

We are going to begin with a presentation on the MacArthur Safety and Justice Challenge by Erin Dalton, our soon to be Director of the DHS.

Dalton:

Thank you for the opportunity to share. I wanted to make sure the oversight board was up to speed on this project. There was an announcement last month of the second phase of this project, so we have been working with MacArthur for about 4 years and just got another set of funding from them. Just for background, MacArthur has made big investments. They're making big investments in criminal justice reform. These are the sites around the country you can see Allegheny County and Western PA as an implementation site. We've been working with them since the beginning of their initiative, closer to 5 or so years ago. And we are working with them because the goals closely align with the goals of partnerships between the courts, ACDHS, the jail, office of public defender and the DA's office about how to make improvements in the systems across the board.

The goals of the Initiative and the local goals are to safely reduce the population at the ACJ and to reduce racial and ethnic disparities in the justice system, in the jail and throughout the system. So those are the two main goals, big important goals.

Why do we want to reduce the jail population? First, both nationally and locally, there's been an overreliance on jails. When the jail opened in 1995, it opened in this county at the height of the crime wave, if you will, when crime, violent crime and property crime were at its highest. The capacity of the jail at that time was about 1850. I wasn't in Allegheny County at that time but we've heard people say, we never thought we would fill that jail. We went on to fill it pretty quickly, so in the past 20+ years, crime has dropped a lot, property crime by 46%, violent crime by 32% but the jail population grew significantly: by 62%. So, highlighting, with some data, the over reliance on the jail. There are other important reasons as well. We know that keeping low level offenders, low risk defendants awaiting trial, in jail even 2-3 days has found to increase the likelihood that they will commit new crimes in the future. If we can keep low risk folks out of the jail entirely, that can increase public safety. It's at least this much, but we know it's a really high cost to taxpayers and communities. The county expends 32% of its direct expenditures on the justice system, \$91 million on the jail, so a very high cost. Hard on taxpayers, disrupts communities, affects those incarcerated in the jail but also their families, employees, communities. Just highlighting the disparate impact despite only making up 13% of the local population, African Americans make up 66% of the jail population.

We know that far too many people who are in the jail are really there because of their behavior, resulting in disorders like mental illness and substance use issues. So, finding a different solution and care for them would help everyone. So, that's why.

There are dashboards up on Allegheny County Analytics that are updated daily. You can look at the jail population trends in a number of ways. This is the average daily population. So significant drops with a little bit of rise in the more recent months but still a significant drop, largely because of Covid.

What are the strategies we are working on? I will walk through these quickly and maybe at future meetings we can dig in on one or another of these.

Speaking to the issues around mental health and substance use issues, the County and its partners, particularly DHS and 911, convened a group recently and got recommendations that were vetted publicly and we are just finalizing to really improve how we help people in crisis and

avoid criminal justice involvement. So how do we strengthen our mental health/substance use/housing. How do we work better with first responders to avoid the justice system for people who would be better off in care and getting the help that they need.

That's an important set of strategies. Reducing booking at first appearance, so providing representation by the public defender's office, implementing a revalidated pretrial assessment with extended thresholds on that assessment.

The courts are partnering with Harvard on a Study: Racial Disparity and Bail Decisions. Those are also really critical strategies to reduce booking at first appearance.

Length of stay in jail is a real issue, even before Covid. Covid makes court processing far more challenging but if the courts can move faster and we can reduce the amount of time people spend awaiting trial, that will significantly reduce jail population.

And then lastly on the more system level strategies, reducing the number and length of retainer. So, managing the retainer population through policy and resolving probation violation and those new charges together and, again, faster if we can.

So, a number of other approaches we're working on. This grant from MacArthur involves a jail redesign. We are working on this now. We are going to seek outside consultants to get community and other stakeholder input and develop a set of ideas, options for design of the jail to increase safety, improve rehabilitation, and reflect the need for a smaller population. Making sure that the physical plant meets with our desires around care, rehabilitation and a smaller size. We've launched a community advisory committee that's met one already and we are working on a number of different racial equity strategies.

I am also very excited about an Institute of Politics study that involves 2 different research teams that are doing a deep dive on both the qualitative side of the policies of racial disparities that could lead to those, as well as the quantitative side. And working on racial equity.

In summary, a full implementation of these strategies, plus this redesign to reflect an improved space, can result in a significantly smaller jail. So that's the summary. If there are questions, I am happy to take those.

Judge Clark: I think the community advisory committee has met twice. We had an orientation with them but I understand they met with Chief Deputy Court Administrator Ms. Stock ... so I think they've met twice. I'm excited about the community advisory community having a diverse membership of the community to work with the courts and the DHS and others at the jail to really look at some of the identified issues so that's great. Does anyone have any questions for Erin?

Hallam: Ms. Dalton, if you could speak to who is on the advisory committee? Is there list posted? And how they got on there? Were they appointed? Did they apply?

Judge Clark:

If I knew they were going to have the presentation today, I would have the list for you, but I can send it to you with the names. So we were looking for a number of different communities. The faith based community, LGBT, an advocacy organization, obviously African American community and additionally African American organizations, someone with lived experiences in the jail and the criminal justice system.

I'm not sure where all the names came from, but together Mr. Fitzgerald and I selected the names. We had lists of names that people gave us and we chose the names. We sent an invitation and invited them to participate. It was obviously not mandatory and so that's how the list came about.

Hallam: Ok, can you tell us who is on, or you will just send it later?

Judge Clark: I will send it later. I do believe there was a press release. I don't know whether the press release had the names in there. But I can send you the names Ms. Hallam. Most of the names I think you will know on the list, or many of them anyway.

Hallam: Thank you

Judge Clark: Any other questions or comments? Thank you, Erin, I really appreciate that. We are going to move towards some old business

Old Business

Judge Clark:

We had several questions at the last meeting about the revenue generated by the tablets and the amount shared with the jail and stats on the usage was requested in the minutes and we also have some questions this time when I get through public comment about the tablets. So I would ask if the Warden has had a chance to gather that information to present today.

Warden: I do have the information pertaining to the tablet revenue and I am going to start with June of 2020, the revenue was \$86,471
July of 2020 the revenue was \$138,918
August \$128,135
September \$135,702
October \$313,800
November \$274,241
And that is all the data I have at this time

Judge Clark: What happens with the revenue warden?

Warden: It goes to the Allegheny County general fund.

Judge Clark: There was also a question about usage and I don't remember specifically what the question was but do you have any information about usage? Of the tablets. I'm not sure what that means, I'd have to go back to page 14 & 15 of the minutes.

Warden: I don't know anything about the usage. I cannot get that information at this time.

Judge Clark: Alright, thank you. Does anyone have any questions?

Hallam: I do. My first question is just to clarify those numbers that were given. Is that the revenue the county got or was that the total amount spent by the incarcerated folks each month?

Warden: This is the revenue generated total.

Hallam: Thank you, so did that money go to the general fund, that's not split with the tablet company?

Warden: This revenue went to the general fund

Hallam: OK. Do you have any data on what the money is being spent on? Like specific apps, is it music, do you have any data on that?

Warden: I do not.

Hallam: Is that something that you would even be able to get? Is that a report that's available?

Warden: I don't know. I'd have to check with our team to see if that's available.

Hallam: Ok, thank you very much, I'd appreciate that.

Judge Clark: Any other questions?

Moss: I just wanted to tell you that I was here.

Judge Clark: Thank you Ms. Moss, I'm glad you're here. The next question, there was a question about holding an Executive session to review the claims in the pending lawsuits. So we held the executive session maybe I should look at the minutes and see what specifically that is and come back to that.

There was a request for data on use of the restraint chair. Warden can you provide a report on that please?

Warden: Yes. I wasn't really clear on the data they were really talking about so I did get data on use of the restraint chair for February 2021. And in February of 2021, last month, we utilized the restraint chair 18 times.

Hallam: I'm sorry, was that in February it was used 18 times? I just want to make sure I heard that correctly?

Judge Clark: So, February 2021?

Warden: Yes, last month, February 2021, we used the restraint chair 18 times.

Judge Clark: Does anyone have any questions about the restraint, about that issue?

Hallam: I just have one, of those folks that the restraint chair was used on in February, how many of them had a mental health condition at the time?

Warden: I can't answer that at this time Ms. Hallam so I can make sure that my next report in March and April has that information for March.

Hallam: Thank you. I would very much appreciate that.

Judge Clark:

We have several public comments about the restraint chair. I think we can have some discussion about that once I read some comments on it. I have some thoughts on it myself about what the board should be looking at or doing on the issue of the restraint chair. Any other questions?

Wagner: To the warden, if you could elaborate on that a little, our understanding is that each time the restraint chair is used that there is a restraint chair report form that is completed. So, if you could elaborate on that and what I would request is that we be able to see that information and

certainly you could redact the identifier information as to an inmate. But I think that is some of the information that the board is trying better to understand.

Warden: Ms. Wagner, there is a report that is called a restraint chair form, we use every time we use it. I could present that data on reports to the board if we meet at the courthouse and I can show the individual board members the unredacted report if we can come up with a meeting to meet a separate location. I can show the documents.

Wagner: Ok, I appreciate that. I think that this type of arrangement and questioning how we best may be able to view documents over which there's some concern. So just a suggestion that I would add and maybe for later discussion to Judge Clark. I have wondered if maybe there would be some way even for those types of documents to be held in your courtroom or your chambers so that individuals would be able to see them? Not to put you on the spot, I am just trying to think logistically a way that we can bridge this gap. Thank you.

Judge Clark: I think the short answer to that is the Warden and I talked about this and I think he was going to, in his report, present on that. They could be available at the courthouse. Right now, my staff and I are mostly working remotely so we do come in on some days. For example, I have an in-court hearing Monday, so I will be in the courthouse on Monday. Right now there are no ways to just leave them there and for my staff to pull them out but any policies that you wanted to see we could schedule a time for you to come and view them. Either in my office or courtroom or some other location in the courthouse or family courthouse or Frick building. We could designate a place. The warden felt that way documents would not have to be redacted and that the board members would be able to review the policies and documents that they wanted to see in a better way. So we can come up with a plan on how we want to do that while we're still in sort of pandemic mode and then a plan for when we get back to some normalcy about how those can be more easily viewed by board members without having to go to the jail.

Because even after the pandemic, there's a lot more security and things that have to happen when you enter the jail than you would have to if you are coming to my office or to my courtroom. It would be significantly easier for you to view those documents. We could have better space, a conference room or whatever for you to sit down and look at them. Which would be a better environment, so we can talk about that.

I would just ask that if you have any suggestions on that that you shoot me an email and copy the warden so we can see what works best for board members. But right now with respect to the restraint chair reports, if you want to look at them, then we can schedule a date or a time for the warden to bring them to the courthouse and for board members to look at them. I can send around a poll to see what your availability is. If that's what you want to do.

Then I'll send that information around and then we can set up a time to do that .

Wagner: Thank you

Judge Clark: Anything else with respect to that?

Then there were some record requests from the board on sick call queues and so forth and I think those were sent out to the board. members. Did you receive those?

Williams: Is it ok if I provide some context to the board members because they may not be familiar with what they are looking at?

Judge Clark: Yes

Judge Lazzara: What I was going to say is that we got them but I had no idea what they were.

Judge Clark: Ok, then we'll ask Deputy Warden Williams to present on that. Thank you.

Williams: Absolutely, so I did send across the queues that you requested and in our health care records we have the capability of scheduling essentially appointments or the inmates have the ability of requesting those by sick call. So, I sent the sick call mental health queue, the sick call medical queue, the sick call dental queue, as well as the psychiatrist queue. You'll be able to see the schedule date which means when we received the request. So, for the sick call mental health queue, there were 5 appointments that needed to be addressed. The longest one was waiting for 1 day. For the dental queue, there were 2 appointments that needed to be addressed with the longest one waiting 1 day. For the sick call medical, there were 29 appointments, the longest appointment was 8 days old and I need to clarify. You'll see it's number "29" if you are looking at it. Next to the booking date of that person, you'll see "TP" in parentheses. What this means is that this person has been temporarily transferred from our facility so we make sure that we follow up with them. We do not remove them from our queue. The health care record will keep that in.

There had been reports of people waiting 91 days or something along those lines and when individuals are transferred to other facilities, such as Torrence State Hospital, or other jurisdictions, they remain in these queues. We cannot complete them, that would be falsification of records, and we do not want to cancel them because we want to make sure that we address the person's needs when they return to custody. If we look at the individuals who are currently in the building for the sick call request medical, the longest appointment is 2 days.

The sick call psychiatrist queue includes 38 appointments. The longest appointment is waiting 8 days and that individual was scheduled to be seen today.

Judge Clark: Any questions? Thank you Deputy Warden Williams. The next piece of old business that we had from the last meeting was what happens to the money left on the inmate's tablet accounts?

Warden: So Your Honor, with the commissary accounts, once the inmate is released from our facility, they are provided a check with those amounts on the check. Inmates that have monies on our tablets, they are given contact information to GTL in which they are responsible for calling GTL to arrange to get those refunds

Judge Clark: So is there any way I guess to follow up? I don't care whether the inmate gets it but my concern is that it's money that came from the Inmate Welfare Fund for the use of the inmates and I don't think that GTL should keep it. I think it should go either to the inmate or be returned to the Inmate Welfare Fund. So is there any way we can find out whether the inmates are actually following through and getting that money and if they're no, I would prefer that if it's money that was put on their tablet accounts that it be returned to the Inmate Welfare Fund so that we can give it to other inmates since they haven't used it. It really is for that use. But I don't think GTL should keep it and so can we kind of figure that out? I guess Warden, I am asking, can you contact them and find out 1. If inmates are requesting it and if not, how to get that returned to the Inmate Welfare Fund?

Warden: I will definitely jump on that ASAP ma'am.

Judge Clark: Thank you. Any other questions or comments about that? Is everyone in agreement for what I asked the Warden to do? I don't think it needs a vote.

Judge Lazzara: Judge we had a discussion about the money that the IWF has been giving to and we talked about both the commissary money and the tablet money. I don't know if you wanted me to skip ahead on your list but we have a unanimous recommendation from our committee that the money be given to the folks as they are leaving the jail, so not just the commissary money, but the tablet money as well.

Judge Clark: That's fine and we'll wait for your report then. I gather they are getting the money from the commissary, the warden says there is a process where they are collecting it from GTL, but what I would like to know are inmates requesting it? If I were to hazard a guess, I would say a very small percentage of people are then following through and contacting GTL. I don't think GTL should keep the money. I think it should go back into the IWF or it should go back into or given to the folks as they are leaving the jail or at some point. We'll wait for your report. Thank you Judge Lazzara and thank you Warden Harper for providing that information.

So the next is sort of old business and continuing business. But the COVID update including a vaccination plan. And I would say there are a lot of public comments that ask those sorts of questions about testing, the vaccine, the spread of COVID and the vaccine. When we get to public comment, some of their questions might have already been answered, so I'm just stating that. Deputy Warden Williams?

Williams: I have broken this down to discuss the infection rates and then the vaccination rates of secondary, so I hope that's acceptable. I first wanted to acknowledge that Allegheny County activated the Emergency Operating Center on March 14, 2020 and our community is nearly one year into this pandemic. The numbers on our website reflect that 2,163 inmates have been tested. Of those, 287 or 13% have been found to be positive throughout the duration of the pandemic. 42 are presently positive in the facility, primarily coming from 2 different housing units. We've had 1,703 negative tests. We currently have 162 pending tests.

Since the last meeting we have tested 705 inmates. We do not have any inmates hospitalized from COVID 19 at this time. We've had reports from 326 employees who've been tested with 125 being positive, 200 that have tested negative and 1 that is pending results. We have 114 recovered and back to work. And 11 employees that remain out and are in their recovery process.

Every month there have been a lot of questions, recommendations, belief systems regarding the testing practices of the facility and though it's been discussed at a number of meetings involving the ACHD, and AHN, it is worth revisiting today. The CDC has published recommendations for when testing may be needed specific to correctional agencies as well. These considerations are always discussed in concert with the ACHD. The recommendations indicate 3 scenarios in which incarcerated or detained individuals may need to have a SARS 2 viral test. These are not rapid antigen tests which can have a high error rate and are primarily recommended for individuals who are demonstrating symptoms only.

The 3 categories are testing individuals with minor symptoms consistent with COVID 19, testing asymptomatic individuals with recent known or suspected exposure, and testing asymptomatic individuals with no known exposure for early identification. The recommendations also indicate that the recommendations for broad testing need to be practical and provide the following checklist recommendations

1. Work with state and local health departments to help inform decision making about broad based testing in correction and detention facilities.
2. If a facility decides to implement broad based testing, use viral tests as opposed to the antigen tests.
3. If pursuing broad based testing, strongly consider a program that includes testing for both the incarcerated population and staff .

The ACJ has and continues to consult with the ACHD. We utilize NT swabs and viral testing media that is consistent with processing in the labs and the equipment of the health department and labs at the state level. We follow specimen collection and storage procedures for testing. Early in the pandemic, it was not recommended to test asymptomatic individuals without contact exposure. In fact, it was not recommended to test asymptomatic individuals at all.

These recommendations have changed and we have continued to adapt our procedures in accordance with the guidelines and recommendations from subject matter experts. We tested an entire housing unit for the first time July of 2020 after one inmate tested positive. The entire housing unit was 2A, our kitchen workers, and they were tested. Of a population of 72 individuals, 72 were negative. Since that time we have fully tested entire housing units on 24 different occasions. We have conducted broad testing in the facility but we have not done universal mass testing of the entire facility at one time. It is not recommended, mandated, supported to test the entire facility unless there were evidence to support disease presence. We have additionally tested random samples of individuals throughout the pandemic. These tests were required by state correctional institutions, Torrence State Hospital, justice related services, community residential rehabilitation centers, inpatient programs and many more. In the month of February, we tested at least one individual who was asymptomatic and not known to have exposure from 28-29 housing units. For those that may be confused, we have 31 housing units opened, but 2 are used for isolation quarantine or testing purposes.

The ACJ has been abiding by the recommendations and standards set forth. The healthcare staff has been diligent to assess and identify individuals who fit within the testing criteria. And we test.

Within the community there have been spikes and our facility has been no exception to those peaks in numbers. We have not hidden from this. We have not stopped testing. We've not stopped monitoring. We will remain diligent. We will remain persistent. Currently we have 5 units under an isolation status and 4 units under a quarantine status. We will continue to take the appropriate steps to ensure the safety and well-being of this population.

In terms of vaccinations, in partnership with the ACHD, we've been affording the opportunity for our employees to receive the Moderna vaccine. We began vaccinating employees December 29, 2020. And we continue those efforts today. Out of 675 eligible employees, 102, 15.11% have received one dose. 227 which is 36.3% have received both doses. 330 or 48.89% have received any doses. So, they are either completely done with their vaccination process or they are in process. 172, 25.84%, employees have refused. It may be interesting to note that 132 out of 441 officers have refused. 20 out of 110 health care staff have refused.

We have 84 employees who are still waiting to receive an injection and 90 employees who have neither accepted nor rejected the vaccine.

Last month it was requested that we identify our employees who have been vaccinated but not through our processes, so that is 8 out of the 330 employees have been vaccinated elsewhere. So either UPMC, AHN, Walgreens or fire department.

There was misunderstanding in some of my responses during last month though I thought I was clear. I did not state that we had a finalized or formalized plan for vaccinating the inmate population. We are drafting our vaccination plan. This has included a great deal of collaboration with the PA Department of Health, ACHD, Torrence State Hospital, and several other stakeholders. Prior to vaccinating the inmate population, we will be providing education and information through the inmate tablets to assist in informing them on the risks and benefits of vaccines. Following that, the healthcare staff will be available to answer questions that they may have as well. The information that will be given includes the emergency use authorization, frequently asked questions regarding these vaccine and how MRNA or messenger RNA vaccines work. As previously reported, our facility applied to be a vaccine provider in December of 2020. We've received approval and are fully equipped with storage procedures to store the Moderna vaccine. We have applied to receive vaccines every week but have not received any allotment of stock to this date. The Commonwealth of PA is currently experiencing a shortage of vaccine. We are still working to achieve second dose vaccines for employees that have already been delayed due to this. The efforts to provide vaccines have been extraordinary and we remain motivated to join the institutions that are providing this vaccine. Thank you very much.

Judge Clark: Thank you. Does anyone have any questions?

Hallam: I do Judge Clark.

Judge Clark: Yes, Ms. Hallam

Hallam: You said that the education around the vaccines ... I think that's awesome. Is there any plan to provide hard copies, paper copy packets because there are lots of people in the jail who don't have access to the tablets for a variety of reasons. What is the plan to distribute paper copies with that same information?

Williams: Everybody has access to the tablets, however we do think that there is a lot of value in providing paper versions. Any inmate that requests that or at time of release gets vaccinated and they are seeking that information, we'll be sure to make that available.

Hallam: I'm sorry Deputy Warden Williams, everyone does not have access to the tablets. For instance, the women's mental health pod, 8E, restricted housing units. A lot of folks in the jail do not have access to tablets.

Warden: That is not necessarily true. Every inmate has access to the tablets to include 8E. Now if you have a psychiatrist or somebody that says that the individual should not have the tablets of course they are not going to have the tablets but everyone has access to the tablets ma'am.

Hallam: But not if the psychiatrist says they can't. I just want to make sure that there will be paper copies distributed to the folks who are not currently using tablets.

Judge Clark: And I think the answer to that is yes, there will be paper copies available.

Hallam: OK, thank you. Then I understand there was some confusion about what was said in the last meeting about vaccinations. So, to confirm, there is not currently a formalized or finalized plan for vaccinating the incarcerated population?

Williams: I said it once and I'll say it again, it has not been finalized Ms. Hallam.

Hallam: OK, thank you. I heard you say about the positivity rate since the beginning of the pandemic. What I am most concerned about is how much it has skyrocketed just this year since January. It went from 3% to now 33% positivity. I am concerned about the numbers and you said how many people are currently infected. And I think you said that there are 5 pods currently in isolation, is that correct?

Williams: Yes

Hallam: And how many folks total are on those 5 pods?

Williams: I don't have the exact count in from of me for those housing units. I do know that we have a number of pending tests from those units which is why they're on isolation status.

Hallam: OK, I was confused by a quote I read in the Trib the other day from Warden Harper, it says, "inmates in isolation are those who have Covid. Those in quarantine are those who have been exposed or potentially exposed to the virus whose movement is restricted to see if they become sick." So, are you saying that there are folks on the isolation pod who have not yet tested positive?

Williams: On our isolation units when we do full testing of a housing unit, everybody is tested and in our continuing of operations plan, if you are tested, you are deemed a suspected case which indicates that you have to remain in isolation until your results are received. When results are received, those individuals who are negative or we have individuals that are known to be positive, we take the appropriate measurements to segregate those positive individuals off of housing units to a unit where we will isolate them for the duration of their illness and where they can be monitored more closely. Through this process we also identify additional suspected cases that may require retesting. If somebody has a cellmate that is positive and they tested negative, we will move them into the isolation unit. We will wait the recommended 5 days post exposure from the known positive and then we will retest them.

Hallam: How does that compare to the quarantine pods? For those folks that have gotten tested or is no one tested on the quarantine pod? I'm just trying to understand the difference between the isolation pods and the quarantine pods because it just seems like there is some overlap.

Williams: Quarantine housing units are units that are under suspicion or review. So for a reason, a clinical reason specifically, a unit is being evaluated to determine if disease presence exists and whether or not any testing will occur. Sometimes a unit is put on quarantine status if we've had a test of an individual on that unit who has tested positive. That unit will implement an immediate quarantine which means that there is limited movement within the unit and no movement on or off and additional precautions are taken. After review from the providers it will be determined whether or not testing will occur. so, yes, to answer your question, overlap does happen. Quarantine and isolation can be fluid. Housing units can change their status throughout the day because the disease presence does as well.

Hallam: Thank you. And you said there are no current hospitalizations. Have any folks who were in the jail been hospitalized due to COVID?

Williams: We have had 3 individuals total who have had hospitalizations during their illness. All have recovered and none were on a ventilator.

Hallam: Can you define recovered? Does it mean they were cleared to come back to jail? Does it mean they have tested negative? Cause folks who were asymptomatic who have “recovered” never had symptoms in the first place. Can you just speak to what recovered means?

Williams: “recovered” is usually utilized as a clinical decision once somebody has exhausted a minimum of 10 days of medical isolation from either onset of symptoms or their PCR test so their viral test was done. 10 days post that will indicate a recovered status unless they maintain symptoms. So some individuals have a recovery period of more than 10 days but it is a minimum of 10 days.

Hallam: Ok, and you said that since the beginning of the pandemic, 273 had contacted COVID?

Williams: 287

Hallam: I’m sorry, 287. Thank you very much. Did you figure out a source of any of those infections? Was it a CO? Health care provider? A pod worker? Another incarcerated person?

Williams: I am not going to discuss that at this time, but we have been able to investigate sources through contract tracing.

Hallam: Why can’t you discuss that at this time?

Williams: You’ve asked me information related to employee health or personnel issues

Hallam: I’m not asking about the employees unless that’s the answer to the question that that’s where it came from. I just want to know if you decided is there one single source that the folks in the jail, just in general

Williams: I’ve provided my answer.

Hallam: I do not believe that it’s an answer and it does not violate HIPPA so can you identify the status of the source?

Judge Clark: I don’t think she is comfortable identifying the source. So, Deputy Warden Williams, has there been a single source or multiple sources identified, if you could answer that one. And Mr. Bacharach is still with us I believe. Can she answer that question?

Bacharach: She can answer whether there was a single or multiple sources identified.

Williams: There have been multiple sources for contact tracing.

Hallam: OK, thank you and then just another general question. Has contact tracing been conducted on all of the positive cases?

Williams: We have not exhausted video review. When we’ve done full unit housing others have indicated contract tracing, yes.

Hallam: My last question is, could you speak to quarantine procedures in the intake department. Are they quarantined by themselves? Are they quarantined in groups? What does that consist of?

Williams: We do a routine quarantine who are in the facility. Some are single cell if they are on the mental health unit or they are on the medical housing unit. But, like many other facilities, we double cell individuals when they come into incarceration for a number of safety reasons. We will do 134 days in the intake housing units of which we have 3: 2 for males and 1 for females. When they've exhausted their quarantine period, they will be able to be moved into general population. We also have them screened daily by our health care staff as well as providers that may be monitoring them for other things [and] continues to ask them about symptoms and do early identification testing. We frequently test folks from our intake housing units because they are coming from the community. Some report exposures and then they are isolated from the start and then tested as soon as it is deemed clinically appropriate.

Hallam: So, there is no point in the intake process where more than 2 incarcerated folks are congregated together in a space?

Williams: I'm sorry, you had asked me about our intake quarantine procedures which means something different to us here. In intake there are individuals who are in a cell, more than 2 at a time. Though we work to expedite individuals through that process, they are provided with masks. Anybody that has reported an exposure, is displaying symptoms, or should not be housed with others, they will be separated from the population. I apologize, I misunderstood.

Hallam: It's OK, I might have used the wrong language. This is my actual last question, is there a maximum number of people in that room you just said where there's more than 2 people? Is there ever more than 20? Can you say the maximum number that are congregated together there?

Warden: We do not have a maximum number. What we try to do is make sure that cells are not filled where individuals will not be able to socially distance.

Hallam: Ok, thank you.

Judge Clark: Any other questions? Alright, then I think that we have a couple of reports. Judge Lazzara, the Inmate Welfare Expense Fund subcommittee report. That's a mouthful.

Judge Lazzara: It is. We have been abbreviating it IWF because I can't type that we;;. We have a great committee they are incredibly responsive, always ready to meet and we always have good discussions which are long and thoughtful which I think is a wonderful thing. We went over this meeting the question of the contract with the University of Pittsburgh School of Social Work to see if that is moving forward on the needs assessment. I have reached out to Erin Dalton. She advised that the contract is still going through. It hasn't been finalized, but she sees no concerns and she has agreed The Pitt team can continue to work towards that needs assessment, so that is all occurring. She is also requesting that there be a meeting with herself and Dean Farmer and either the Warden or deputy warden about that contract.

I have requested to Ms. Dalton that also there be someone from the IWF subcommittee be present on that meeting since it was our idea that it move forward and wanted to make sure that the person who had the most contact with Dean Farmer was present. Terri Klein from our committee has volunteered and I have passed on contact information for her to Ms. Dalton.

We also at your request talked about what should happen to the money that is placed on the books when they leave, what happens to their commissary money? What happens to their tablet money? That was quite an interesting conversation that went all over the board for a while. But we settled on a very unanimous decision that any money that is placed on their books for either

the tablet or the commissary should be refunded to that inmate when the inmate leaves the jail. The idea behind that being that being that certainly we don't know how much that is going to be, in some cases it may be close to \$50. In some cases, it might not be. We felt it would be useful to the person leaving the jail to have a little bit of the money that was left over going with them so it could help them with maybe back rent, getting food, maybe with other things. So it continues the help that the folks need. It was a unanimous recommendation from all of the members of the IWF subcommittee

Judge Clark: So in as much as the warden has already reported, that the commissary money, they do provide that. My question is, are you making a motion? And can you just state what the motion is and then we'll get a second.

Judge Lazzara: So I am making a motion that any money provided by IWF to people who are incarcerated in the jail to either their commissary or tablet accounts, that those monies, any money remaining at their time of discharge from the jail be refunded to that person leaving the jail.

Hallam: Judge Lazzara, I would like to second that but I would just like to ask because of the information that we got from the warden, can we clarify that that money is released to the people in this motion and not that they have to go after it?

Judge Lazzara: I think that money should either come back, to me it makes most sense that it comes back to their books, so then it can all be released from the books at the same time. I think there should be some process that allows for GTL to return the money to the people directly without a request.

Hallam: Then I will second that motion. Thank you

Judge Clark: Is there any discussion or questions on the motion? Then we will call for a vote? All those favor? Opposed? Any abstentions? Motion passed. And I would just ask the warden, when you speak with the folks from GTL advise them what the board has voted on and what is the process for getting that money back, so that it's not left up to the person who has been discharged from the jail to request it. So, if you could do that, we could work with them in any way to make that possible. Thank you.

Warden: Yes

Judge Clark: Anything else Judge Lazzara?

Judge Lazzara: We started a discussion about ways to improve the inmate's conditions in the jail. It was a preliminary discussion so we need to have a much longer meeting and the great people on this committee have agreed to do that and so we will get that scheduled so we hopefully have some news before the next meeting.

Judge Clark: I am hoping that your survey will help to inform that as well. I think that's part of it. And I think that when we get to the point where we have exit interviews that information should also inform that as well. I am really excited about that. I want to thank Judge Lazzara and her committee. They are really working hard.

With respect to the suicide prevention. It's really an update from Warden Harper as to what's been happening with regards to the recommendations in that report.

Warden: I would like to report to the board that due to our continuations of our COVID 19 mitigations at the jail, we have not been able to further any progress pertaining to the remaining recommendations from the NCIC, but we are going to try everything in our power tomorrow to try to do something for the April report.

Judge Clark: Thank you, any other old business? Mr. Kamara do you have anything that you want to report on Book Em?

Kamara: I'd like to have a formal report for our April meeting. We have been in contact with various parties. We have a meeting set up tomorrow. I would like to have a formal report for April. We will have a recommendation that we can process in front of the board for April.

Judge Clark: Thank you

Warden: Can I say something? Mr. Kamara, I would like to have a conversation with you before the next board meeting pertains to that, so can we arrange a time that we can talk?

Kamara: Absolutely. I missed your call earlier this week. I apologize for not being able to return your call. I meant to earlier today, but part of this conversation has to include you before we put anything in front of the board.

Judge Clark: Thank you. I have not had the opportunity again to meet about the exit interviews. I would like to ask if there is a board member that would like to work on that project because I'm really swamped and I don't want it to get put on the back burner. I think it's important. Once we figure out what we want to do about the exit interviews maybe the folks who are looking at the survey can also just take a look at it to make sure there is consistency and nothing in conflict. I would like to get that underway as soon as possible. There's a number of things that need to happen and information that we need to gather in order to do it. So far it is just me and Mr. K working on it and I have not been able to really give it the attention. There's just too many other things.

Moss: I will help.

Judge Clark: Thank you, I really appreciate that. I can set up a meeting, at least the 3 of us. I will send information out to the board and anyone who would like to join us can certainly feel free to join. I am not turning down anyone's help.

Hallam: I'd like to help also Judge Clark.

Judge Clark: Thank you. I think that is all for the old business. I think you were sent out the minutes for the old meeting, the February meeting. I just want to thank Ms. Rowland. She does an excellent job. They're long, there's a lot of stuff in there and she does a great job of going through them and even with the agenda and the old business, putting which pages of the minutes reflect the old business. So, I just wanted to thank her for it because it's a lot of work and just generally, because I am constantly sending her things to forward to the board and she graciously does it right away, so I really appreciate her. I would entertain any additions or corrections to the February 4 minutes or a motion

Motion by Hallam
Second Judge Lazarra
Any discussion?

Warden: Since the minutes have become so many pages, I would like to request that I receive the minutes approximately a week after the JOB meeting. Because we are asked to conduct so much additional work, I really need time to review the minutes so that when I appear before the board I have ample time to address every issue that the board brings up.

Judge Clark: What I can do is, Ms. Rowland also has another job, so I will ask her to try to do them as soon as she can within her parameters and that the rough draft or whatever be sent to you as soon as she does that. I feel like I can't really, I don't feel comfortable making a demand of someone who is basically volunteering her time to do this rather large job and she does it wonderfully, but I will ask her to try to get them to you as soon as she possibly can so that you can make sure that the questions or issues that were raised at previous meetings, that you are prepared to answer them. That's the best I can do Warden.

Warden: Alright, I appreciate that ma'am.

Hallam: If they're done a week after the meeting or whenever they are done can you send them to the whole board at that time as well?

Judge Clark: Ms. Rowland sends them out and so what I'll do is I'll discuss it with Ms. Rowland about the process by which she sends them out and we'll try to get them to you as soon as possible. I'm very appreciative of the work she does. I'm not going to be demanding of her. I think when she does them, we get them. I've been in boards where we don't get them before and these are long and there's a lot of stuff in there and she has a job. This is not it. And so, I am just really appreciative of it. I will speak with Ms. Rowland. I'll communicate with her and I'll come up with something. I think that should work for her and for the board.

Hallam: When you make that request Judge Clark, can you please communicate the deep appreciation that us members of the board have for Ms. Rowland?

Judge Clark: Yes. I think she understands that. She's here and she can hear you and I'm assuming that she's not taking it as a criticism. I'm hoping not because we are very appreciative so I just will make sure that that is conveyed though.

Hallam: We couldn't do it without her. I want to make sure she knows that.

Judge Clark: Alright. We have a motion and a second. If there's no other discussion, I will call for the vote. All those in favor? (I) Any opposed? Any abstentions? Alright so the minutes are approved. So now we're going to go to the public comment.

Public Comments

Judge Clark: I think many of the comments, the questions have been answered but I'm going to read as many of them as I can between now and I will say, it's 5:13, so the next 20 minutes, so whatever we get to. Then if we have questions that have gone unanswered, we will make sure we answer them at the next meeting and like I said, if I've left anybody out and your question has not been answered, please feel free to email me. It appears everybody knows my email address so that doesn't appear to be an issue. Even though I try to do them in order, there's one that had some suggestions that I really liked and I want to start with it. It's more of a comment but I sort of agreed and I thought the board should hear it. This is from:

1. Erica Brusselars

Comment: Erica Brusselars: “My name is Erica Rocchi Brusselars. I am a volunteer with ALC Court Watch. Thank you for continuing to take time to read and respond to the public’s questions. First, I will reiterate my question about tablet revenue, as the J.O.B. and Warden Harper did not answer my query last month.

Judge Clark: And I think that those questions were answered about the revenue.

“Is any of the revenue from tablets shared back to ACJ part of the contract with the for-profit vendor? If so, what are the specifics of the revenue sharing? How do the actual usage and revenue streams compare to what was assumed or projected when the contract was executed?”

Judge Clark: I don’t know if the warden will be able to answer that the next meeting. what was projected, and what was actual.

“The public needs to understand what entities are profiting from this revenue stream both generally and with the exceptional confinement that the pandemic, our courts, and ACJ management continue to foster. “

Judge Clark: And this is the part that I really wanted you to hear

“Second, would the JOB and leadership and staff of ACJ consider using person-centered language when referring to our loved ones who are incarcerated? The simple change from saying “inmate” or “prisoner” to “person who is incarcerated” or “people in our jail” has power. This could be considered for the name of the Inmate Welfare Fund; potentially considering a shift to something like the “Welfare Fund [for People in ACJ].” Our loved ones on the inside are people first and this should be reflected in the words we use.”

Judge Clark: I thought this was particularly lovely and I agree wholeheartedly. I think we should, ourselves, the board members and the jail leadership and hopefully it will filter down to staff, maybe use some word other than inmate. I would ask Judge Lazzara’s committee at the request of Ms. Brusselars, to see if they can come up with another name besides the Inmate Welfare Fund. That’s why I wanted to read that one even though it’s one of the comments that I got later. I don’t know if anyone wants to say anything or has any disagreement? Great. I want to thank Ms. Brusselars. I hope she is listening for her comment.

I’m going to go back in order. The first one is from John Kenstowicz. It’s kind of long. His question is regarding the ACJ mental health services and so there’s a lot of statements that he has there from the National Center for Correctional Health Care’s Suicide Prevention report.

2. John Kenstowicz – PA Prison Society: “Questions Regarding ACJ Mental Health Services. The following statements are taken directly from the National Center Correctional Health Care’s report on suicide prevention at ACJ and then is followed by my questions. Regarding Cell Side Interviews: “We were told that most patient interviews are at cell side, creating privacy issues and barriers to clinical-client relationships” ... “We observed and were told that communication is largely at cell side. This is not conducive to establishing rapport and trust” ...” All mental health residential units have interview rooms, but from our observations and conversations with staff we do not think they are used regularly”. Concern: One cannot develop a therapeutic relationship with a client if the communication is heard by a third party. Question: Are the mental health visits now being conducted in interview rooms? Regarding Treatment Plans: “Treatment plans for suicidal inmates were incomplete and did not meet NCCHC standards” ... Our record review found that treatment plans were incomplete and not well documented”. Concern: Treatment plans are a

blueprint of how and why treatment will be provided. Providing treatment without a treatment plan is like driving a car with no brakes. Question: Are treatment plans being created and completed for every person in treatment at ACJ? Regarding Individual Therapy: "Therapeutic programming on mental health residential units is limited"" It (the schedule) listed only 1 hour of individual sessions for the entire week conducted by a bachelor's level intern" Concern: NCCHC's standard, J-F-03, requires individual counseling "for all inmates who need them." Questions: How many individual counseling sessions are being conducted weekly at ACJ? Is everyone receiving individual counseling who needs the service? Note: A subcommittee of the Jail Oversight Board was charged with the responsibility of overseeing ACJ's compliance with NCCHC 's recommendations. What actions has the committee taken on these issues? Did the subcommittee examine people's individual charts?"

Judge Clark: : One of the questions: are the mental health visits being conducted in interview rooms?

Williams: There were a couple of questions that were within this and I wanted to start by acknowledging that the reports from NCCHC were very expansive and we were very impressed with the level of detail and thoroughness which they conducted the survey. I want to draw attention though that the survey was completed by NCCHC in September and October of 2019. When this comes up every single month it's reported that all of these things are still happening and that is not true. We acted upon a lot of the recommendations from the survey immediately. I can state that some interviews for the safety of the patient or the staff still occur cell side. Additionally, some are just check ins, they are not confidential settings. If it is deemed appropriate or a longer conversation is indicated then that can be done in a confidential setting. But you would see health care staff standing at a door, speaking to an individual who's incarcerated who may or may not be having a mental health need. Sometimes check ins occur that are not necessary for confidential settings. We have the capacity in interview rooms on the housing units to have confidential settings and we've identified other secure settings away from other people's earshot so they can be confidential if they are not in an interview room. The report also indicated that a Bachelor's level intern was the one that was conducting this. That was specific to one of our substance abuse programs, who had an intern. Our counselors and our mental health specialists, with the exception of one, all have Masters. We have a licensed psychologist in the facility who provides counseling sessions. I wanted to offer that information not to negate or dismiss the findings of the report, but to make sure everybody is aware we are talking about a lot of past issues that are not present issues.

Judge Clark: I will just say this, I don't know that it was reported that its continuing. The question is, have these things been resolved. So that's how I took it. So the next question is...

Hallam: Before you move to the next question, can I ask two quick things about that last one?

Judge Clark: Yes

Hallam: The Warden said this report is from September 2019, I think I understand that. Can you then speak to which of the recommendations from this report have not been addressed yet?

Judge Clark: I think that's something we can talk about, we can ask in the next meeting for when the warden presents his report because that's not what's in the public comment and I want to get to the public comments.

Hallam: Can I ask about the check ins that he referenced? I just have a quick question about that.

Judge Clark: Go ahead

Hallam: You mentioned the check ins by door. Are those check ins considered visits by mental health staff?

Williams: It depends on how you determine a visit. They would require documentation in the electronic health record so they would count as an encounter but they would not count as a therapy session.

Hallam: Ok so

Williams: Sometimes there is coordination for case management, discharge needs, etc. , so the check in might involve a mental health specialist going back to a patient and stating, I was able to speak to your treatment coordinator in the community The discharge plans are still continuing. That would be a check in.

Hallam: The reason I wanted to ask because in the documentation that you provided, the ones that we requested back in January, check in wasn't a term that was used anywhere on that documentation so I'm just wondering, what is the corresponding term on the official documentation for the check ins?

Williams: I'm confused what documentation you're referencing right now.

Hallam: The documentations about the queues and the mental health calls and the documentation that you provided to us in the reports that were referenced earlier. The term check in wasn't on their anywhere so I'm just wondering, does it count as treatment, does it count as consultation? I was just wondering how you classified the check ins?

Williams: It counts as a case management. When we are in the community there are billable hours for therapy sessions, there are non-billable hours which would be something like case management. A check in, I apologize for not using terminology consistent with the healthcare report. There are separate issues. What I'm discussing does not have anything to do with the queues I've provided to you. I was merely indicating that healthcare staff do routine stops at the door. That doesn't mean that they were attempting to conduct a confidential setting door side, they are simply providing an update to the inmate.

Hallam: Ok that clears it up. Thank you very much

Judge Clark: OK, so the next question from Mr. Kenstowicz: "are treatment plans being created and completed for every person in treatment at the jail?"

Williams: Treatment plans are being completed but again we have to discuss what treatment means. Treatment plans are created and developed extensively for individuals who are on our mental health units who need to meet different goals or objectives within a period of time, either short term or long term. Those would mirror community treatment plans. Treatment plans are done via progress note for individuals who may be prescribed psychotropic medication. Any time a medication is prescribed the provider would need to, number one, discuss the benefits and risks of the current medication with the patient , they would need to discuss the treatment objectives of that. They would also need to discuss the plan which may include the length of time, the duration, whether they will be time training or waning that medication with the patient. So treatment plans

are created in a multitude of settings and treatment means a number of different things. It's either psychotropic or counseling or monitoring.

Judge Clark: The next question is how many individual counseling sessions are being conducted weekly in the jail and is everyone receiving counseling who needs the service?

Williams: That is difficult for us to pull, the discreet data in our electronic health care records so we're trying to figure out how we are going to be able to conceptualize that. We have a couple of different forms that are utilized, our mental health encounter form. Our psychiatrists also use, or advanced practitioners I should say, use psychiatric notes. We're trying to figure out a way that we might be able to report on that information. As far as is everybody receiving it who needs it? Um, maybe not, but everybody who is prescribed it is receiving it.

Judge Clark: The final question is a subcommittee of the oversight board was charged with overseeing the compliance with NCCHC recommendations. Which actions has the committee taken on these issues and did the subcommittee examine people's individual charts? I am going to ask Ms. Parees to say what the plan was a while ago, but I would assume the subcommittee did not examine people's individual charts. Ms. Parees can you update or remind us what the action was that the subcommittee took on the NCCHC? One of them is that we would get a monthly update by from Warden Harper about the progress on the recommendations which he has been doing and he did not do one this month but will do one next month. Is there anything else that the subcommittee did or recommended?

Parees: The subcommittee, after he does those reports, it is put into a format where we're able to look at every recommendation, see what the progress to date has been on that recommendation, and we know which are completed and which are still to be done. In fact, I send it after every board meeting as quickly as I can though last time I was later. I was just in the process of sending it to the committee, resending it again since Bethany asked the question and I looked at it. It does indicate which ones are completed, which ones are not. If my date shows when the progress was made and I believe that there are four that are not completed of the 13 if I am correct about that. I was just in the process of counting. Thank you.

Judge Clark: Thank you. The next comment is from concerned parent: "Why does the CDC recommend mass tasting in jails and prisons yet it is not being done at ACJ despite the fact it is always being said "we follow the guidance of the CDC" Especially when numbers are increasing at the jail, why wouldn't you all want to play it safe?"

That question has already been answered. Deputy Warden Williams gave a lengthy presentation which included the CDC guidelines and recommendations from correctional facilities and what the jail is doing. So, the next one is from employees.

4. Employees "It is not fair that if we want the second dose of the Covid vaccine we have to go to Monroeville on our own time. What about those that have responsibilities before or after work the clinic is only until 4? What about those that take the bus? These vaccinations will be wasted when people can't make it there. This is not right!"

This is really more of a comment. I would ask the warden, if a person is scheduled to get a vaccine during work hours, what happens?

Williams: I'll answer this one.

Williams: We were able to host three clinics on site and then at a location that I won't give because I don't have the health department's permission to do so. There was a location located downtown within walking distance where many employees were accommodated for their vaccination. Very recently the Commonwealth was experiencing a shortage of the Moderna vaccine and it was related to many factors. One of them was the weather. Supplies were severely delayed. Another was that many vaccine providers were not saving any doses for the allowed second doses. I want to be very clear that these issues are not the issues of the Allegheny County Health Department. These are facing Pennsylvania and the nation. If we could have done differently, we would have done differently. Our employees were notified that the clinics were scheduled to occur downtown. We typically accommodate those during work hours and we release those employee so they can get over there. There are several captains and a major who have been in. It's unbelievable how they have been able to coordinate this while maintaining the operations of the facility, getting people relieved and vaccinated. Very recently because of the shortage, we weren't able to do that. Many employees were provided with the option to go to Monroeville and we scheduled those for them. Some employees elected not to and stated that they would be ok with deferring those doses. I can understand that there were transportation issues for some people, We will still work to get them vaccinated as soon as we have the doses available to us but ultimately employees need to weigh out those challenges and make the best decisions for them. I don't want to sound ungrateful and I certainly do understand the risks to our employees as well as the population but we have vaccinated an incredible amount of employees in a very short period of time while maintaining operations and that has not been extended to the majority of the community who is still also at risk for COVID 19. We feel very fortunate that we're a county entity and that we've had the support of the Allegheny County Health Department. We will work until we get every employee who is eligible to receive their vaccine, fully vaccinated.

Judge Clark: Thank you, next we have a comment from Janice Roberts.

"You all at the prison board claim to read questions as they are submitted, it seems this is a lie. I submitted a question last month that was not read. I will ask again, my son was in the jail and said he was in the area called process in intake for two days without seeing a nurse. He sat there for over 5 shifts waiting to be seen, waiting to get detox meds, waiting to have his medical issues addressed. This is unacceptable and when something happens it will be catastrophic. Every month people bring up lack of staff, how can a building run like this? Every month they site the pandemic or people call off. That place is so understaffed as it is, articles are in the paper weekly, no one wants to work there. Something has to give. The great pay increases they claim to have given sure doesn't seem to bring more staff in to treat the prisoners needs. I am often called by my son who claims staffing is horrendous, evening meds are passed at times at 4pm. Medical needs are not tended to, and people running the jail have no medical background."

I am not sure that there is a question. It's more of a statement. But if Deputy Warden Williams wants to make any comment to the comment.

Williams: I can comment. There has not been in the last month, I've reviewed intake reports to try and figure out who had been down there for 5 shifts waiting to be seen. If this individual is listening right now, I would encourage you to reach out to me via email so I can fully investigate what reportedly happened. We have healthcare staff in the intake department at all times. There are times when they are deployed to different areas of the intake department, particularly if there are no inmates that require processing or they are deployed to other areas. I have said in multiple meetings that we have not hidden from the fact that we have been one of the many healthcare entities that has been challenged with staffing throughout the pandemic. We have struggled because we cannot compete with \$150+ dollar an hour rates where multiple \$1000 a week

bonuses for travel nursing assignments. We have very dedicated staff and I think we constantly focus on the negative which is a disservice to the people who've been working their butts off the entire time. Whether I have a medical background or not doesn't seem to be a point that matters when we have skilled clinicians in the entire building including a medical director who is a physician overseeing the healthcare processes within the institution. So, I'm planning to give an update as far as staffing goes in the deputy warden's report. Other than that, I don't have any further comments.

Judge Clark: Hopefully they will reach out to you. The next is a comment from Darwin Leuba

6. Darwin Leuba "At the February 4th Jail Oversight Board meeting, Deputy Warden Williams indicated that there is a plan to vaccinate vulnerable incarcerated individuals. I submitted a right to know request for that plan and was told that there are no records of a plan on February 24th. I understand there is a plan to "follow CDC guidelines" but are there any specific records detailing plans to vaccinate the population of the jail? The response to the right to know request would seem to indicate the plan does not exist in any records. On what day will a publicly available document be available detailing the jail's plan for: vaccine procurement, education to and sign-up by incarcerated individuals, prioritization of who receives doses, dose tracking (especially for those who are released after a single dose), symptom monitoring, and other relevant details? In addition, what is the jail's plan for vaccinating staff? The public, the workers, incarcerated individuals, and all their families deserve to know how the jail plans to competently and professionally vaccinate its population. Recent spikes in cases and the bologna and apple sauce incident demonstrate a dire need for competent vaccine policy and practice. To begin answering this question, I ask the Board to repeatedly ask Deputy Warden Williams and Warden Harper for a direct answer to the following questions: Does a plan to vaccinate incarcerated individuals exist digitally or on paper, and when will it be released (in draft or final form) to the board and the public? Beyond fear of public scrutiny and transparency, is there any downside in releasing a draft form for public review?"

Judge Clark: We had a lot in Deputy Warden Williams' report on COVID and the vaccine. She talked extensively about the staff and who had been vaccinated and she also just give a little more information and she talked about the beginnings of the formulation of the plan to vaccinate the population at the jail. Is there any target date when a plan would be released Deputy Warden Williams? I guess that's the question.

Williams: I don't think it was part of our plan to release the plan when it is finalized, but we do not have a date yet. It is still in flux. I am not sure if many of the listeners are aware but the Pennsylvania Department of Health has an interim vaccination plan. It's in its 5th version. So as of mid January, the 5th version was published. This plan from the Dept. of Heath continues to change, which makes it difficult to finalize our plan until we really know what we're going to be looking at.

Judge Clark: Thank you. We have a comment from Rosalie Garfinkle.

7. Rosalie Garfinkle: "As you know, the Jail Oversight Board is mandated to protect the well-being of those incarcerated and ensure the proper management of Allegheny County Jail. How can this be done when the board has not walked through the jail in at least a year? Regular visits are a necessary function of this board. Those incarcerated at Allegheny County Jail are experiencing horrible conditions, including a lack of care given to those sick with COVID. Put yourselves in ACJ to understand what needs to be done to correct conditions and as well as hold the management and administration accountable."

Judge Clark: There were several comments requesting the board to do its twice yearly inspections of the jail. We are discussing a plan to do that. Ms. Hallam has contact with someone and they actually do training with the board in what to look for in inspection in corrections facilities so I asked her to kind of work with that person and to then present something so I think what I will try to do with the board is to get an idea and maybe start at least having some dates for the board when we could do these inspections. At least we would have sort of some things penciled in our personal calendars for that. That's just for the board so we're not going to discuss that at the meeting because they're to be unannounced visits to the jail and then we'll work with Ms. Hallam to kind of do some trainings for the board about what we really should be doing. I think we should do more than just walk through and look. I've been to the jail but what am I to look for? What things should I be considering when I'm making this visit? So, I don't know. Ms. Hallam, if you want to say anything about that or we can just follow through with scheduling something for the board and having some presentation later.

Hallam: I can say something about that. I've been in contact with another member of the board, with a professor with a pretty amazing resume. He specializes in jail visits, not just in United States, but in other countries as well. He has seen a wide spectrum in his decades of experience. He has volunteered his time to us to prepare us on how to do a proper jail visit and what to look for, where to go, how to conduct ourselves while we're in the jail. He has offered his expertise. I forwarded his resume to Judge Clark. I am looking forward to us working with him.

Judge Clark: The next comment is from Jodi Lincoln – PA Prison Society. Hers is concerning COVID testing and vaccine I do believe that her questions have been answered but I will read it.

8. Jodi Lincoln – PA Prison Society: “Concerns and suggestions regarding COVID Vaccination: Can Warden Harper or Dept Warden Williams provide an update on # and % of staff members that have been fully vaccinated.”

And that was answered.

“Having this data available on the Jail's covid Dashboard would be extremely helpful. “

Judge Clark: I don't know whether that's allowed or appropriate, but I will ask the warden and deputy warden to consider that.

“Has the jail developed a policy for reassigning staff members who refuse to get vaccinated so they are not working in contact with incarcerated people?”

Judge Clark: That question was not specifically answered. We did hear about the number of people who refuse to receive the vaccination. What is the plan for those that don't get the vaccination? Is there a plan for those who do not get/ refuse the vaccine?

Warden: We do not have a plan at this time.

Judge Clark: Alright. Thank you.

“What is the jail's current plan for distributing the vaccine to incarcerated people? Please provide any details about anticipated timeline for vaccination, plan for distributing the vaccine (prioritization, availability to people on intake, logistics, etc.).”

Judge Clark: And we heard about that so far.

“I encourage the JOB to ask specific questions and for a copy of the policy that has hopefully been developed and written down. I would also like to know specifics about the Jail's plan for educating individuals about the vaccine. How will they be distributing information, answering questions and concerns, etc. Will the medical staff be readily available to speak with folks about the vaccine. Using the tablets could be a great strategy to provide educational materials about the vaccine.”

Judge Clark: Obviously that's part of the plan.

‘As a vulnerable population, it's extremely understandable that people incarcerated at the Jail could be distrustful of the jail's vaccination efforts. How are you taking this into consideration?’

Judge Clark: And I think all of those things have been answered.

“Thank you for your time. I encourage the JOB to push for details and specifics from Jail leadership.”

Judge Clark: I believe her questions have been answered, but I will read “What is the plan for those who refuse the vaccine?”

Thank you for your comment and questions Ms. Lincoln. Next is Charnita Thomas, a former officer.

9. Charnita Thomas: Former Officer: “This question if for Chief Williams. As of February 21, the jail had 14 of 30 units no movement on/off, with 4 of them isolation status. Meanwhile, inmates on the other housing units are not getting an hour rec due to the increase in population from the lack of open units. First, knowing all of this, who thought it would be a wonderful idea to resume Hope programming on 2C, when you have the most units closed EVER during this pandemic? Does it make sense to house 32 inmates on that unit while other levels that are NOT isolated or on no movement struggle to provide an hour of rec with their high population numbers? Why not increase 2C back to 65 by taking 5 or 6 inmates off of Level 3, to ensure their entire population is getting their one hour rec? OR . . . With 4 units open, that's an additional 440 beds. Why not open another unit to accommodate the transfer of inmates off of the pods with high numbers, so inmates are getting their one hour rec, under federal law.”

Judge Clark: So warden, I don't know if you want to say anything about this at this time.

Bacharach: John Bacaharch your honor

Judge Clark: Yes

Bacharach: That's a very specific question that relates to an ongoing lawsuit. I think it would be inappropriate to answer that specifically in detail. As far as a general explanation, if the warden thinks he can do that, that's fine, but I would not want him to get into the specifics.

Judge Clark: In as much as you have said that, I would want him to be able to communicate with you before he answers. We will let that go for this one but maybe there can be an answer that can be given at the next meeting.

Bacharach: Thank you your honor.

Judge Clark: The next one is from Mae Menk and its partially about inspections by the board which I think we've talked about. but she says:

10. Mae Menk "It is unacceptable that the JOB has not had a walk through of the jail in over a year. How are you supposed to monitor conditions that way? Additionally, Ritch Fitzgerald should be attending these meetings instead of a proxy. The electronic tablets the prisoners use also require better maintenance, including making sure they are charged, and the fee to use them should be reduced.

Judge Clark: So, that's a comment, there's no question there. The next is from Amanda S.

11. Amanda S.: "More staff have left over the past month including three agency nurses and others have submitted their two-week notices including a medical assistant and mental health staff. Did ACJ administration notify the prison board of these staff leaving? Does the prison board plan to interview these staff members? Everyone is leaving....no new staff are coming in. How much longer will this happen before the prison board actually investigates what is going on?"

Judge Clark: I don't believe the jail would notify the board of every staff member that is leaving. That has not happened in the past. and it has not been required. We have done a couple of exit interviews and it is my intention to meet with the folks that participated in the exit interviews to see if they have any recommendations for the board and a plan to whether we want to do any additional interviews of staff who leave and how that might happen. It's still under discussion. The next is from Carrie Washington

12. Carrie Washington: "My son was recently arrested and went through the intake process. He said there were multiple shifts where there were not any nurses in the back seeing inmates. The response he received was there was no medical staff in the building to put back there. He sat down there multiple shifts before seeing a nurse. How often is this happening because he said other inmates were complaining that this happens all the time now. I have read multiple news paper articles about the jail and short staffing."

Judge Clark: We're going to get an update on the staffing and the medical department when Deputy Warden Williams presents her report. The next one is Maddy Kirk.

13. Maddy Kirk: "My boyfriend lives on 8e. Why were positive coronavirus inmates kept on the same pod as him? He said everyone that is positive moves to another product but none of those inmates moved. My boyfriend has significant asthma and health issues. There were over ten inmates on that pod that remained on the pod instead of being moved. Why is my boyfriend being put at risk to be exposed?"

Judge Clark: I think we had testimony, not testimony, I'm showing my judge side. we had discussion during the COVID report on how the inmates are housed, except we're not going to use inmates, how the folks in the jail were housed and I don't know whether Deputy Warden Williams wants to add anything to that.

Williams: We had everybody single celled on that housing unit and we have the capability of isolating, doing medical isolation on multiple different housing units. 8E is one of them. This is a specialty population, so much like our acute mental health individuals, we housed positive inmates on our acute mental health units as well. We make sure that we take all additional precautions,

that staff wear additional PPE, that we do not have these individuals around anybody else, that they are monitored by healthcare staff. But sometimes it is safest to leave an inmate on a housing unit where they reside instead of moving them.

Judge Clark: Thank you. Alright, now we have Sheila Marr, a former jail staff.

14. Sheila Marr: "Why are you sending captains around telling Officers that we are going to get written up if the inmate workers are caught not cleaning everything on the sanitization list. Or they are telling the workers they are getting fired. With only 8 actual inmates out besides the worker, many areas of the pod are not in contact with the inmates out. Eight inmates aren't sitting at all 15 tables, because the chairs are removed. They aren't touching both railings. Or all the door handles. The pod workers can't get commissary, shoes, or even extra trays most times and you are telling them if it's not all cleaned they'll be fired. Your outbreak isn't related solely to cleaning. You don't have Officers down in intake wearing face shields and N95 masks with new arrests coming in. Then these Officers go all over the building in the elevators for lunch, the locker room, and then forced to other areas for work after their initial 8 hour shift. How many people have been quarantined from all three shifts in intake in the last 30 days and how many of them get forced to some of the pods on isolation now? Are you going to suspend the employees that are able to come to work? ALL of the sergeants, captains majors, deputy wardens, chief deputy wardens, and yourself are not enough to run ONE single shift in this jail. When will the harassment end? Is it easier to do this then test entire units to catch the positive cases and isolate them faster? Because the average overtime hour is running \$39.50, is that cheaper than testing? You won't even ask your bosses to give your employees hazard pay now you gonna send us all home because an inmate worker not getting anything either missed something? Where was this staff attention to detail when we were getting stabbed in your building four years ago sir?"

Judge Clark: I don't know that that's a question to be answered at this time. We're going to go to the next one and I think this will be the last one. This is from Brenda Williams.

15. Brenda Williams "My son has been retaliated against and placed in RHU without a hearing simply for filing grievances about the horrendous conditions at ACJ. There is no due process at the jail, and my son says that the warden and jail administrators are taking advantage of the outbreak by further restricting prisoners rights to movement, including to the law library, phones, and rec. COs are coming to work sick with the virus, further adding to the rot of ACJ. I have tried many times to get in touch with Rich Fitzgerald to voice my outrage, including here at these meetings, but he refuses to abide by his own responsibilities by not showing up. When will Rich Fitzgerald start doing his job and come to these meetings so that I may ask him my questions directly? I do not want to speak with a surrogate. Thank you."

Judge Clark: I think that's more of a comment and there's no real question other than about seeking with Mr. Fitzgerald directly so I'm going to stop there. There's a number of other comments that I didn't get to and I will just what I will do is present them at the next meeting. I may decide, some of them are just comments so the comments will be posted. Any questions, we will try to answer. Any questions that I can answer personally, I will respond to the email and will take them up at the next meeting and I apologize but there are just so many and we just can't read them all. I think at every meeting. Alright so we are going to move on to our agenda.

President's Report

I don't have anything to report myself other than things that I stated throughout the meeting so I'll move to the warden for his report. Warden Harper?

Warden's Report

Warden: Thank you. The first thing I want to do is to thank the men and women at the ACJ for the outstanding work they do to mitigate this virus. As the chief deputy stated, 2,163 inmates were tested and only 13% found positive. I commend the men and women at the jail for the outstanding work they do.

Next I would like to advise that starting Monday, March 1st, the jail has a new food vendor. The food vendor is Summit. The company will manage all food production and distribution inside the facility. The kitchen produces over 8,000 meals a day for inmates and employees. This includes 3 daily meals, a menu reviewed by a registered dietician to ensure that they feed the recommended dietary allowances and caloric intake. Summit will continue to make provisions for special diets for health and religious reasons.

I want to talk about the inmate library. We continue to work with Overdrive to finalize the addition of free online books on the tablet. This is through purchases of titles made by the facility as well as the cataloguing belonging to Carnegie Library. The company has had some challenges in providing this access but continues to work through them. The book-drive that occurred at the end of 2020 resulted in tens of thousands of books being donated. All books were searched to ensure there's no contraband and we are adding them to a database for accountability. Because of the success of the book drive, I am recommending future book drives to take place twice a year. This will allow us the time to process the books received and make them available on the pod before the process ends. And your honor that is all I have for the board,

Judge Clark: Does anyone have any questions for Warden Harper?

Hallam: I do Judge Clark.

Hallam: My first question is I know in previous meetings we talked about the potential for court hearings being delayed because of all of the pods on quarantine and isolation. But a new issue has been brought to my attention that I don't know if it was completely on my radar before about lawyer visits. So, as we know a lot of lawyers need to meet with their clients to discuss plea deals or defense strategies prior to hearings and I've been made aware that the carts that have the specific video capabilities that are used for the hearings are not being extended for lawyer visits. There's often paperwork that needs to be signed and because folks are on isolation and quarantine, that is not happening and because of that hearings are being delayed, postponed and folks are being kept in the jail a lot longer than they need to be. Is there any plan to address that? I feel uncomfortable that we are denying incarcerated folks the right to consult with their attorney.

Warden: Well, I just want to respond like this, attorneys have the capability of coming to the jail and visiting their clients through the glass. That's one way in which he can see his client. All they have to do is wear a face mask, get a temperature check, and answer the questions. Secondly, we build a video conference that's on the first floor which attorneys use Teams to see their client and we've also extended the hours on the first floor and on the fifth floor so that attorneys can see their client. We are looking at other avenues as to how we can provide more availability for the attorneys but I think we've done a wonderful job during this pandemic to try to accommodate everybody that's trying to see our inmates, trying to see the person living in our facility.

Judge Lazarra: Bethany, can I say something?

Judge Lazzara: Warden, there's no doubt for people who are not on a quarantine pod that there are multiple ways for the attorneys to reach them. The problem has become, it is the people on the quarantine or isolation pods that the attorneys and JRS and probation, like my mental health coordinator, that they haven't been able to reach people and Bethany's talking about a problem that I've also heard a lot about. And I've had hearings that have had to be cancelled or postponed because waivers can't be filled out because the people are on quarantine pods and the remote system is not working for the attorneys, JRS, or probation on those quarantine pods, so I think that's what Bethany is referring to. If that helps you understand the issue.

Warden : I understand the issue but you guys got to realize, we recently had an increase of the quarantine pod. We've just come up with a method of how we can provide for the quarantine pod and as I stated earlier, we're trying to develop a way in which we could provide more attorney visits using the video carts maybe after hours so I will advise the team of the plan of how we could provide more attorney visits for inmates, persons living in our facility on quarantine pods.

Hallam: Thank you Warden Harper, I would just like to suggest, I've also gotten reports that the carts because there are so many pods and so many on quarantine and isolation that the pods, I mean the carts that have the video capability for the hearings are not nearly enough or on high demand as it is. I would just like to suggest that we find some other way for folks to not be denied access to their legal counsel regardless of quarantine or isolation status.

Warden: Could you give me suggestions as to what you think we could give to provide this access?

Hallam: I'm so glad you asked. I do have a couple ideas. The first thing would be to make sure that folks have tablets that are capable of visiting with their lawyers that they are confidential, that they are guaranteed that they're not being recorded. Maybe have a specific cell that they can go into that is quiet to have you know private communication. If it involves some sort of renegotiation of the contract with GTL to ensure that there is a secret, safe, confidential communication line that can be there for lawyer visits only. I think that is a great start if that is something that is an issue. I think that having a cell that is sanitized in between each person ... having maybe one cell or one space on each pod that is used specifically for that. I also think that even having people go up and do visits maybe up on the upper deck where the normal visits take place with their attorneys, but maybe one at a time so that we don't have multiple incarcerated folks up there at a time. I would love to have a meeting with you and just like brainstorm possibilities if that's something you're interested in. I just do think this is of the utmost urgency because we're talking about a constitutional guarantee to representation by legal counsel and they cannot represent their clients in the courtroom if they cannot meet with them to discuss ahead of time.

Warden: I really appreciate you giving me some recommendations because I'm going to as I stated before, attorneys already have the capability of coming into our jail to visit using the glass on the N level. So that's something that we can definitely look at going forward. I will report back to the board once I talk to my team to see if that's feasible. I will also contact GTL to see if there's any way that attorney visits can be done on the tablets. So I really appreciate your recommendations.

Hallam: Thank you very much. I know the lawyer visits are there for folks who aren't in quarantine and isolation, I just want to make sure I'm specifically referencing folks who are incarcerated on quarantine and isolation. So, yeah, if we could make those same services available to them, I think that solves the problem right there so thank you very much.

Hallam: I have one more question. It's about an article about a suspected pest problem in the jail a quote from Warden Harper says that "the jail does not have a pest problem like other food facilities, the jail kitchen has a pest control plan in place. An exterminator visits the facility twice a week and treats all levels of the facility to ensure that remains the case. there have not been any reports of infestation or other issues from that team." My question is, an exterminator twice a week? I've worked in a lot of different buildings and lived in a lot of different places and I've never heard of someone proactively has an exterminator come

Warden: We want to make sure we can prevent any type of infestation in our jail and the way to do that is have individuals come to our facility and periodically exterminate. It's just like in my home. I have an exterminator come to my home to exterminate to prevent infestation of a facility and they go to different areas. They go to our kitchen, our intake area, certain offices on the level. But what I'll do next month is I'll give you an exact diagram or location where they exterminate.

Hallam: That would be very helpful. Also, is it one company that the jail uses to provide these extermination services? Can you tell me what that company is?

Warden: We do have a contract and I can get you that information.

Hallam: Thank you very much.

Judge Clark: Anything else for Warden Harper? Deputy Warden Williams can we have your report please?

Deputy Warden Report

Williams: Last month Ms. Hallam requested I provide updates regarding staffing levels, specifically to agency staff. Though we are contracted to a multitude of staffing agencies, there are only 2 agencies presently providing staff to our organization and those agencies include Maxim and Reliant. Between the two they provide 5 registered nurses, 4 licensed practical nurses and 5 medical assistants. We received submissions for one med tech and one LTN this week from one of our agencies. We are in the on-boarding process for 3 full time county staff to begin this month or next month. We did on-board a full time registered nurse last month. We have also started to see additional applicants recently. We have openings for several full-time county open positions and the county offers excellent benefits and the vacant positions are primarily members of the United Steelworkers Union. There are a multitude of negotiated benefits for our union members. For example, their education is reimbursed if it is in a field of study relevant to their professional development. They are given 21 vacation days, 10 sick days, uniform stipends and employer matching on retirement immediately upon employment. Our RN's, physical and mental health start at \$34 an hour. LPN's that start at \$28 an hour; Mental health specialists and substance use counselors start at \$25.18 an hour; Medical assistants, psych aides and medication technicians start at \$16.32 an hour. These raises were conducted very recently and we're looking forward to interviewing and on boarding additional staff. If you or someone you know may be interested in applying, please go to the county website.

Judge Clark: Anything else that you wish to report, Deputy Warden Williams?

Williams: I think I gave extensive report on COVID 19 so

Judge Clark: You did

Williams: That's all I have prepared.

Judge Clark: Thank you. Any questions for Deputy Warden Williams?

Klein: Judge Clark am I muted? This is Terri.

Judge Clark: No, you are not muted.

Klein: Is it possible that we on the board could get a copy of the new menus? Even if it's just one out of one week a month in our packet that you provide.

Warden: Yes ma'am.

Klein: Thank you

Judge Clark: Thank you. Alright so we have a couple of items of new business.

New Business

Judge Clark: So I'm going to turn it over to Ms. Hallam.

Hallam: Thank you so much. The first one is a request for money from the Inmate Welfare Fund for the commissary accounts of each person. As of me submitting this motion there were 1625 folks incarcerated in the jail. We're asking for \$50 in commissary for each person which comes to a total of \$82,250 from the IWF. I would like to make a motion to approve this expenditure.

Judge Clark: Is there a second to the motion?

Judge Lazzara: Second

Judge Clark: Any discussion?

Moss: Yeah, is is 82 or 81?

Hallam: \$81,250. It's \$50 times 1625. I'm sorry if I said that wrong.

Moss: Ok, just making sure. Thank you.

Hallam: You're welcome

Judge Clark: Those in favor? (aye) Any opposed? Any abstentions? The motion is approved. Miss Hallam?

Hallam: The next one is a request for money from the Inmate Welfare Fund to the tablet account to each person in the jail. Again, at the time of me submitting this for the agenda there were 1625 folks incarcerated in the jail. Asking for \$50 for the tablet accounts of each person, again comes to a total of \$81,250. I would like to move to approve this motion.

(Second)

Judge Clark: There's a motion and a second by Ms. Hallam and a motion by Ms. Klein. Any discussion? All those in favor? (aye) Any opposed? Any abstentions? Alright, the motion is carried. And I believe Ms. Hallam you have one other item?

Hallam: I do, yes, thank you. This one is not going to be news to anyone who has been on this board over the past year. It's something I tried to do in the middle of last year when there was a spike in cases. I've just been super concerned with a 33% positivity rate in the jail, current since January and in the spike of cases that we're seeing both with incarcerated people and in the staff members. According to CDC guidelines updated in December of 2020, they are advocating for universal testing in jails and prisons. I would like to make a motion for universal testing in the Allegheny County Jail and I would ask for a second?

Judge Clark: Alright, is there a second to Ms. Hallam's motion?

Korinski: I will second.

Judge Clark: Alright, are you substituting, Ms. Wagner is gone?

Korinski: I am Judge Clark, thank you. Brad Korinski.

Judge Clark: Alright. She was on the phone so I can't tell whether she was gone or not. Any discussion?

Hallam: One thing I will just add for the discussion. I think they're on the agenda. I did forward the link to the CDC guideline, the updated guideline which I can read just an excerpt from for the purpose for the people who didn't have the ability to read it. It says basically just that 50% of people that contract COVID 19 have mild or no symptoms and suffer from long lasting affects and the updated guideline for correctional facilities is recommending a mass testing approach such as routine testing of newly admitted inmates to prevent asymptomatic spread when there have been positive cases at the correctional facility or when there is a high rate of transmission within the community. Those are two things that we both have here. We have both high transmission within the community and asymptomatic spread within the Allegheny County Jail. We meet the guidelines for universal testing. I know it was either the warden or the deputy warden spoke earlier on how they have done routine testing on some pods already so I think that it only makes sense to extend to the full jail.

Judge Clark: I think Deputy Warden Williams did a good job talking about the guidelines, the CDC guidelines in consultation with the health department and medical providers that they're following and the increase in number of testing and mass testing on certain pods. I don't know whether anyone wants a recap or whether anyone has any questions or comments before I entertain a vote on the motion?

Klein: I have a question

Judge Clark: Ms. Klein, yes

Klein: So, Bethany, are you proposing that, maybe you can tell me what you mean more by universal testing? Every new person? You tell me.

Hallam: That would be ideal, every person that comes in that we're doing testing in intake. But this motion specifically is for every person who is incarcerated right now. So what we have is a

unique opportunity because of COVID, folks are already locked down 23 and 1. We have a lot of pods you know that are already on quarantine and isolation status. Originally a concern was when this was presented close to a year ago that there were not enough tests. It is abundantly clear that there are plenty of available tests to do this now. We already have a partnership with AHN for providing medical services in the jail so we already have a built in, capable facility. And so this is specifically talking about the 1635 people that we just discussed. Those are the folks I would like to see tested. Again, one time, get an idea and try to stop the spread now because we've seen such a drastic spike again, from January until now, the positivity rate in the jail has went from 3% to 33%. There are over 200 pending tests right now. I do not think, according to CDC guidelines, that it makes sense to be doing mass random testing. We should just do a universal test, get a snapshot in time, separate folks who have COVID from those who don't and then move forward from there. I do believe that that is the only way to stop the spread and that was the explanation that was given for the CDC for why their guidelines were updated to support this.

Warden: So I would like to say something your honor.

Warden: I just need for the board to understand what this is going to entail if you guys vote and approve this. If you guys approve this, this entire jail will be locked down. Nobody can come out, nobody can come in. It will be locked down. I just want the board to realize that we are doing very good compared to other facilities in this state with how we mitigate the virus. I want everybody to understand , if you vote to do this, you know the jail will be entirely on isolation status. Nobody will be able to come out their cells except for showers and I need you guys to understand that.

Judge Clark: Thank you. I have a question. When people are tested what sort of average time it takes to get the test results back?

Williams: That's dependent on a number of factors. I would say we had an anomaly weekend where the weather was really, really bad and we had sent our samples to the bureau of labs and it took 7 or 8 days to get some of our test results back when we were doing large unit testing. Generally speaking we receive tests within 72 hours. If we were to do the full facility, the majority of those would be sent to the bureau of labs and could not be processed locally at the Allegheny County Health Department which would then require us to do it on their timeline. So, it could be a minimum of 3 day wait up to we've seen 8 days from the bureau of labs.

Judge Clark: What is the number of pending tests that you have now? You're waiting for results.

Williams: We have 162 pending tests. Additionally, it's important to recognize that some of the individuals in our facility have tested positive within the last 90 days and there is zero recommendation to retest those individuals during that time period. I needed to offer that information as well.

Judge Clark: Alright, thank you Deputy Warden Williams. Any other questions? Or...

Parees: I had a question, could you say a little more warden or chief about the logistics of doing this? You mentioned a lockdown and Ms. Hallam mentioned AGH but I'd like to know, who would make this happen and over what period of time? And then if we're looking for a moment in time, would we then have to isolate everyone who comes into the jail who has not been part of this cohort until we get the results so we know what it is we're looking at and don't sort of contaminate the pool. Could you say a little more about that? Because it's not quite as easy as it's sounding I think.

Williams: So the ideal to get a snapshot is to reduce or limit contact with any other individual because of the incubation period. Ideally, you would isolate someone for 5 full days before even testing them unless you have evidence of symptoms. So for asymptomatic transmission, you would want them to be away from other individuals so we would be locking individuals now. And then we would complete the paperwork with the health department, we would procure the supplies that we would need to go unit by unit. We have AHN providers who are also tasked with providing actual care to the individuals in the facility as well as nurses who are to provide assessments as well as medications throughout the building, mental health staff who would then have to be visiting every single housing unit, probably far more than they could because individuals would be locked down for a significant period of time. We would then test everybody. It takes approximately an hour and a half to 2 hours with a really, really efficient and quick team and a population that is willing to comply with these recommendations, to test an entire housing unit with about 70 individuals. They would be locked down and treated on medical isolation status that would require full PPE for every single interaction with them which would include their meal tasks as well as their medication tasks and any additional contact with those individuals. They would be limited and reduced in movement because we would want to have true results and make sure that they weren't exposing each other before we knew what their results were. They would not be permitted to be out of their cell or congregating. They would have access to tablets but they would not be able to do family visits because they would not be in the docking station. They would have to have all of their meals in their cell where they also use their facilities to move their bowels or release their urine. And we would be locked down without providing capabilities of access to courts as Ms. Hallam had indicated because we will be expanding this now to every single housing unit in the facility. And we do not have the capability of making sure that everyone would meet their court or legal needs at that time. They would be very restricted and we would not be able to process those labs so I know I've stated that on a number of occasions, we've provided for specimen collection and we transport it to the lab or the courier will get that for us. The Allegheny Health Department locally would not be able to process that. Specimens would need to be processed within a certain time period and I do believe that is 72 hours upon collection. If we were to stagger, we would still have to stop all movements in the facility until we knew the status of every single housing unit. which could delay our processes from 14 to 30 plus days. If we were receiving new intakes into the facility, we would then have staggered quarantine dates for those intake housing units, We would need to receive all of those results from the bureau of labs and then process those. We would then need to facilitate any movement. As Ms. Hallam stated, we do in fact move those that are COVID positive or suspect them to have COVID to an isolated section. Or if we are doing mass testing then we would just keep everybody locked in, segregated on their housing units, until the disease had been, you know, stopped.

Judge Clark: Thank you. Any other questions or comments before we take a vote?

Hallam: I would like to just add one more thing. I have not heard a proposed solution other than this for containing COVID. Month after month we hear what's happening but yet the numbers continue to climb. I feel like all of the other options have been exhausted. The administration has had a year now to figure out how to contain the spread of COVID. Let's try something that we've seen to work in other facilities, something that is recommended by the CDC. As far as the restriction on movement, a lot of pods are restricted already and have been. I consider it better to do this one time, get it done, get our snapshot and know where the problems and who to isolate as folks who I've talked to in the jail who are on quarantine status or isolation status over and over again. So it's not as much an inconvenience to the folks in the jail as it sounds because this could one and done it.

Williams: We can't one and done in our population because we have a transient population. We continue to receive transfers from other facilities including the federal and state facilities to our institution. There is no one and done which we've talked about in a number of different meetings. And you've received that information, not just from me, but from the Allegheny County Health Department with epidemiologists that study disease spread. You've also heard it from AHN. So we have had disease presence in the facility and we've always indicated that. We don't see that as a failure because we are in fact testing. When we find people to be positive, treatment and monitoring and separating them from others. I disagree with your belief and you've clearly stated that they are your beliefs. You've also broadly interpreted the CDC guidelines. You are taking portions where they do allow for broader testing which we've already indicated that we do within the facility. So, though you are asserting your perspective, those of us who work in the institution and consult with the health department have also equally asserted ours.

Judge Lazzara: I quite frankly think it might be helpful. You know the last time this came up. We met with the people from AHN in an executive session so we could ask questions and find out whether it was recommended. At that time it was not and so the board chose not to do the testing at that point. I think it might be beneficial before we vote on this to maybe have another one of those sessions where we could find out if the physicians believe that the situation has changed enough to put people through this. Because it is going to be very difficult Ms. Hallam. People are going to be locked in longer. They're not going to be able to do court. I'm getting people out of that jail everyday by doing court cases and to have that not happen, to have my mental health court people sit there and not be able to go to a program that's ready to take them because they have to wait for a COVID test, that I don't know whether the medical personnel believe is necessary or not. So I would just think that we did it the last time. We had it done pretty quickly and I don't see why we can't do that same thing so we have the experts in the medical field weighing in and letting us know whether now is the time to do it. And it may be. I am worried about the spike in cases as well. It's just I'm not a doctor and I don't have that white coat and I can't say whether or not it's a really necessary to do it at this point.

Hallam: I agree it would be nice to have that input. I just think that a lot of excuses are being thrown around for not doing it that really don't make sense because when we're talking about folks being on lockdown, I was talking to people who haven't been able to shower for 4 or 5 days on quarantine or isolation. So there are issues that are going on now that are saying that universal testing will result in that are already happening. So I'd rather just do this, put folks on lockdown for what is it You said 73 hours or 5 days, whatever it might be to get an idea of where we're at as opposed to each week going into it blind and just waiting for folks to get sick before we test them. Waiting until folks have a confirmed case or have symptoms or have a confirmed exposure before we're testing. And I agree because one of the points that were brought up is a transient population. I do know for transfers when folks are coming out of the Jail, that they are being tested before they move to another facility. I have heard that is happening at the state and federal institutions as well so I don't know why that wouldn't be the case for the folks who are being transferred to the Jail. I would also be very in favor of intake testing because the population is transient. And so I do think that all of those things combined together provide for a better picture for all of us to discuss a plan going forward for all of us. And I do agree that the folks that wear the white coats should be brought in for that plan.

Parees: I would have, if I missed that this was going to be on the agenda tonight I apologize, but I would have appreciated knowing that it was going to be so that I or we could have had more information about that. I recall that when AHN was with us in our executive session. I recall the doctors saying that mass testing tells you everything about today and nothing about tomorrow. And that has stuck with me through this whole ordeal over these years and hearing what the

logistics of the are. I think that we can't oversimplify or you know the affect that this is going to have on operations and all the people involved. You're also not talking about testing the staff I think. Is that correct?

Hallam: I would be open to adding that if that would get your support for this. Is that something you would be supportive of, adding the staff?

Parees: No. No, I'm advocating, I'm advocating for a full medical. Because I don't hear how this is going to inform what we do. I think the protocol that the jail has been following in terms of isolating as soon as someone is symptomatic and all of that is all in sync with what the state and the health department say to do. And I don't know that this one whole mass testing event will inform what we do tomorrow in any way, in any significant way. And so weighing the two against one another I would just like more information. I'm very uncomfortable having to vote at this late time in the meeting on such an important issue.

Hallam: Ms. Parees, to clarify, this was on every draft of the agenda that went out ahead of the meeting along with all of the meeting information, the public comments, the prior meeting minutes, the warden's report. This was included on the agenda.

Parees: I'm sorry, Pardon me.

Hallam: This was included on the agenda that went out.

Parees: I apologize if that's the case. I missed it.

Judge Clark: OK, so there is a motion on the floor, so we can either have a vote on the motion. It's been suggested that more information might be helpful so we can have a motion to table or we can vote on the motion. So, um.

Hallam: I believe we already have a motion and a second Judge Clark

Judge Clark: Ok, yes, alright, so any other discussion?

Korinski: We did speak, Ms. Hallam and I months ago to Montgomery County who has done mass testing and it didn't seem, I mean from their perspective like an arduous ordeal. They found it useful. I think Judge Lazzara makes an excellent point. I would defer to the epidemiologists but I think there is some benefit and as I look around the country, other places have done it. I don't think its as exceptional as it may be portrayed.

Judge Clark: Thank you. Any other comments or discussion? Alright, then we'll take a vote. All in favor of the motion please say aye.

Hallam: aye

Korinski: aye

Judge Clark: All those opposed

Others: (Aye)

Judge Clark: So I'm going to take a roll call because I don't understand what people are voting on. Alright, Ms. Hallam

Hallam: aye

Judge Clark: Alright, Mr. Kamara

Kamara: nay

Judge Clark: Ms. Klein

Klein: abstaining

Judge Clark: Judge Lazzara

Judge Lazzara: I would have to be a no at this point until we have some indications from the medical community that it's a good idea

Judge Clark: Ms. Moss

Moss: It's a no, I feel the same as Judge Lazzara.

Judge Clark: Sheriff Mullen

Mullen: nay

Judge Clark: Ms Parees

Parees: nay

Judge Clark: and Mr. Korinski

Korinski: I like to hear from AHN

Judge Clark: Alright

Hallam: So can we introduce a motion on the floor. Can I introduce a motion to consult

Judge Clark: Wait. I haven't recorded the votes. So the motion has failed. Alright now, Ms. Hallam

Hallam: Yes, I was wondering if the board would be amenable to me introducing a motion that was not on the agenda and that would be for us to set up a meeting ahead of the next which would be the April jail oversight board meeting, so sometime between now and then with folks from AHN. I think as Brad mentioned it would be important to bring in the legislators from Montgomery County

Judge Clark: So I don't think that we need a motion, I think it's clear that

Hallam: OK

Judge Clark: That we have a consensus that people would like to hear so I would propose that we work to schedule an executive session. However, I think though that we may actually need to have someone available from AHN at the next meeting because executive sessions we can only gather information and then if we have another meeting and there's a motion to vote and we're referencing that I think it becomes complicated. So I will work to schedule a meeting, an executive session with AHN between now and the next board meeting. I'll get some available dates I think generally when we were asking other people to give up their time for us, we try to schedule it around their schedule so I will send times out and I'll schedule it. So I think that everybody seems to be in agreement with that. I don't think we need a motion for that.

Hallam: Thank you Judge Clark

Kamara: Judge Clark?

Judge Clark: Yes

Kamara: Judge Clark, this is Abass Kamara speaking. I just want to ask and I apologize, this is obviously going to create more work but because of the fluid nature of the situation do we want to figure out a specific, ongoing monthly meeting with AHN? Obviously because of the legislation that was proposed this is pretty pertinent now but the concerns and risks aren't going to decrease after we meet with them and anyway that we can keep that kind of dialogue open I think would be helpful to all of us.

Judge Clark: That's something we can all think about. We'll have the executive session and we'll get information from AHN and then maybe once they're gone from the session we can talk about that and see what we want to do. I think a number of factors could change that. You know it could be that but I think that's certainly not unreasonable and might be the best thing to do. I'll ask everybody just to kind of think about it. And when we're having the executive session to think about that as well. Alright so I think that's all the new business that we have at this time and so we are going to move quickly to the community corrections reports. The Program for Offenders

Program for offenders: On February 7th, the program, we had our second clinic for our staff to receive their second dosage of the vaccine. As of today we have 37 staff members who have received their second vaccine, the Moderna. And we are on track to have 2 of our women who are currently residing at the West Homestead site to receive their first doses of the vaccine, I believe it's tomorrow. So those are two of our residents that are scheduled to have a vaccine tomorrow through Allegheny Health Network.

Judge Clark: Great, great, Thank you.

Program for offenders: You're Welcome. Thank you.

Judge Clark: Renewal

Renewal: Good evening, Adam Zack reporting for Renewal. Last Friday, February 26, Giant Eagle came to our facility and our staff received a second dose of the Moderna vaccine. On February 17 mental outreach came and reentrance in the 1A phase received the first dose of the Pfizer vaccine. The second dose will be administered to the reentrants this Tuesday March the 9th. We're very appreciative to Giant Eagle and central outreach for doing this and we're definitely looking forward to the next phase of the vaccine rollout. And finally, on March 20, Tucker

Arensberg Law will be conducting a harassment and bias training for our management staff and in turn we will forward the training curriculum and resources to our respective staff members.

Judge Clark: Thank you. And Electronic monitoring

Electronic monitoring: Good Evening, Steve Esswein for the probation office. So outside of the report that you all have, nothing new to report outside of that. Just to highlight, we did have 86 clients successfully complete the program during the month so that is all.

Judge Clark: Thank you. Any comments or questions from the board?

Hallam: I just have one Judge Clark. It just seems like the you know, the community corrections facilities have really been like on the ball with vaccinating folks who are eligible in their facilities.

Judge Clark: Because they can use Giant Eagle and other resources that I think the Jail can't so that's part of the issue. You know the court, our court employees have also not received vaccines. And so that's been an issue for court staff. We don't need. The ones that meet criteria can go to whatever medical program of their choice and get it but many of our court employees don't meet the current criteria of people who are eligible to receive the vaccine. And additionally, the health department only gets about ten percent of the vaccines. They go to the hospitals. So I see in my walks, AHN has big clinics at PNC Park. It's wonderful. I see many elderly people being wheeled in and being wheeled out having gotten their vaccines. It's really good to see. But that doesn't include our residents at the county jail so it's a little bit easier for Giant Eagle to come to Renewal. They're not going to come to the jail to do it.

Hallam: Is there something in the contract with AHN that prohibits Giant Eagle from coming into the jail? I don't mean to vaccinate everyone but at least for the folks who are 1A eligible? Is there a reason that they can't do exactly what they're doing at Renewal?

Judge Clark: I don't know that there's a reason that they can't. I'm just saying that's probably not what they are going to do, come into the jail and give vaccines but and it's a smaller number when you're talking about folks that are in Renewal or in the Program for offenders as opposed to inmates or residents in the county jail. I can't really answer that, that's just my guess that Giant Eagle isn't just going to show up at the jail. And then there are people, other people that I know that are in the community that still are waiting to get on lists that do meet the criteria for the vaccine. So it's complicated and I could, you know, we had lots of test, not testimony. We've had lots of information given by Deputy Warden Williams and I would just ask the question is the health department or AHN the source or will be the source of the vaccinations for the residents of the jail?

Williams: Your honor, we've applied to be a vaccine provider indecent of the health department.

Judge Clark: OK

Williams: We were approved for that. Our application was submitted in December when it opened to other institutions. We are still awaiting, and we've been requesting every single week, an allotment. We would like to start vaccinating, we just haven't received any vaccines yet. We are still considered to be 1B from the state government because we have an incarcerated population. So that is something that they determine when we will receive our allotment.

Hallam: Judge Clark, the 1A category, that's folks 65 and older. Currently there are 30 people incarcerated in the jail who are 35 and over

Judge Clark: 65 and over

Hallam: Yeah, 65. I thought I said that. There are 30 people in the jail right now who are age 65 and over. Just because they're incarcerated and that specific demographic puts them in 1B, does not mean that their age does not preclude them 1A. So I understand that the jail has been waiting to be their own provider. I am specifically asking why AHN or Giant Eagle or wherever can't come in and vaccinate those 30 people who are eligible because of their age alone. They are in 1A.

Judge Clark: Deputy Warden Williams is there a reason that another provider can't come in and provide vaccines to residents of the jail who meet the 1A category?

Williams: At this time we do not have any agreements from any willing participant to do so

Hallam: I would be more than happy myself to reach out to vaccine providers and see if they would be willing to come in and do that if you're open to that conversation.

Judge Clark: I think that's something that the medical department at the jail should do and I could speak with Deputy Warden Williams and Warden Harper about that, whether that is possible. And if it's possible, if it can be done, if that's the pleasure of the board

Hallam: I would like to at the very least see the folks in 1A have the same access or opportunity to get the vaccine as anyone else does and as of now just on age alone there are 30, that's not even including folks with a qualifying health condition who are in 1A because of those.

Judge Clark: Alright thank you. I'll speak with Warden Harper and Deputy Warden Williams about that to see what can be done. That's something that in our executive session with AHN we might want to ask them about as well. Alright, anything else? If not, we'll have a motion to adjourn.

Judge Lazzara: So moved

Judge Clark: Alright thank you, Judge Lazzara. A motion to adjourn does not require a second. All those in favor (aye) Any opposed? Alright, I will ask everyone to please stay safe and to remember that while we're in the process of administering the vaccines, COVID is still very much a threat to our safety. Please remember to wear your masks and to socially distance ad even though I understand that 2500 people or so attended the Penguins game, I personally would not advise it. But, you know, we're all grown, we can make our choices. But if you do, make sure that you socially distance yourselves from this who choose not to attend those large functions. But stay safe and I will be in touch with you about the executive session. And we are adjourned. Thank you.

Kindest regard,



Chelsa Wagner

Public Comment – Jail Oversight Board Meeting – 3/4/2021

Comment: Darwin Leuba: At the February 4th Jail Oversight Board meeting, Deputy Warden Williams indicated that there is a plan to vaccinate vulnerable incarcerated individuals. I submitted a right to know law request for that plan, and was told that there are no records of a plan on February 24th. I understand there is a plan to "follow CDC guidelines" but are there any specific records detailing plans to vaccinate the population of the jail? The response to the right to know request would seem to indicate the plan does not exist in any records. On what day will a publicly available document be available detailing the jail's plan for: vaccine procurement, education to and sign-up by incarcerated individuals, prioritization of who receives doses, dose tracking (especially for those who are released after a single dose), symptom monitoring, and other relevant details? In addition, what is the jail's plan for vaccinating staff? The public, the workers, incarcerated individuals, and all their families deserve to know how the jail plans to competently and professionally vaccinate its population. Recent spikes in cases and the bologna in apple sauce incident demonstrate a dire need for competent vaccine policy and practice. To begin answering this question, I ask the Board to repeatedly ask Deputy Warden Williams and Warden Harper for a direct answer to the following questions: Does a plan to vaccinate incarcerated individuals exist digitally or on paper, and when will it be released (in draft or final form) to the board and the public? Beyond fear of public scrutiny and transparency, is there any downside in releasing a draft form for public review?

Response: During the February 4th meeting, Chief Deputy Warden Williams indicated that a plan is in process. The plan is still in draft form and has not been finalized. It was reported that the facility has applied (and been approved) to be a vaccine provider and has submitted requests for vaccines. We have not received any allotment of vaccines at this present time. The Pennsylvania Department of Health has drafted an Interim Vaccination Plan (currently in its 5th edition) that articulates the phased approach to vaccine administration. The jail has assisted in the coordination of vaccinations for many employees and remains motivated to offer vaccinations for the inmate population.

Comment: Janice Roberts: You all at the prison board claim to read questions as they are submitted, it seems this is a lie. I submitted a question last month that was not read. I will ask again, my son was in the jail and said he was in the area called process in intake for two days without seeing a nurse. He sat there for over 5 shifts waiting to be seen, waiting to get detox meds, waiting to have his medical issues addressed. This is unacceptable and when something happens it will be catastrophic. Every month people bring up lack of staff, how can a building run like this? Every month they site the pandemic or people call off. That place is so understaffed as it is, articles are in the paper weekly, no one wants to work there. Something has to give. The great pay increases they claim to have given sure doesn't seem to bring more staff in to treat the prisoners needs. I am often called by my son who claims staffing is horrendous, evening meds are passed at times at 4pm. Medical needs are not tended to, and people running the jail have no medical background.

Response: This is a comment.

Comment: Employees Employees: It is not fair that if we want the second dose of the Covid vaccine we have to go to Monroeville on our own time. What about those that have responsibilities before or after work the clinic is only until 4? What about those that take the bus? These vaccinations will be wasted when people can't make it there. This is not right!

Response: Due to extenuating circumstances, the Commonwealth of Pennsylvania received delayed shipments of vaccines and resources were scarce. Employees were not required to go to Monroeville, but were offered that opportunity to receive their second vaccination. Efforts will continue to ensure that employees are fully vaccinated. Ultimately, employees will need to weigh out these personal challenges to make the best choice for them.

Comment: Concerned Parent: Why does the CDC recommend mass testing in jails and prisons yet it is not being done at ACJ despite the fact it is always being said "we follow the guidance of the CDC" Especially when numbers are increasing at the jail, why wouldn't you all want to play it safe?

Response: Throughout the pandemic, the recommendations have changed/adapted. The processes in the Allegheny County Jail have mirrored those changes and have closely consulted with experts at the Allegheny County Health Department. The CDC does not recommend mass testing in jails. The CDC allows and supports broader testing, which does occur in the Allegheny County Jail. The most recent recommendations (advised by the CDC) indicate that testing may be needed in the following 3 scenarios: testing individuals with signs/symptoms consistent with COVID-19, testing asymptomatic individuals with recent known or suspected exposure

to SARS-CoV-2 to control transmission, and testing asymptomatic individuals without known or suspected exposure to SARS-CoV-2 for early identification.

The Allegheny County Jail employs all 3 recommended strategies. Individuals who are displaying symptoms or report a recent exposure are immediately isolated from the rest of the population and tested. Individuals who are known contacts of those that are displaying symptoms or known to be positive (i.e. cell mates) are tested. Lastly, full housing units are tested when there is evidence of “disease spread” (i.e. 2 positive cases or more). In January 2021, 3 full housing units were tested. In February 2021, 6 full housing units were tested. In this month, 4 full housing units have been tested. When indicated, housing units are “retested” (all known negatives) 4-7 days after their original negative testing to determine if there is any continued evidence of disease within the unit. It is important to remember that testing gives you a “point in time” sample and that additional strategies (like 14 day quarantine periods) are still recommended, by the CDC, even when testing occurs.

The numbers have increased in the Allegheny County Jail and containment efforts have also increased on these units. Additional precautions are being taken on a number of housing units to increase safety measures. Every correctional agency is different. The Allegheny County Jail does not have dormitory style living. There have been indications to increase broader testing when dormitory style living environments exist due to the limited capacity to contain or manage disease spread.

Throughout the pandemic, continuous consultation and collaboration has occurred with the Allegheny County Health Department.

Comment: John Kenstowicz – PA Prison Society: Questions Regarding ACJ Mental Health Services The following statements are taken directly from the National Center Correctional Health Care’s report on suicide prevention at ACJ and then is followed by my questions. Regarding Cell Side Interviews: “We were told that most patient interviews are at cell side, creating privacy issues and barriers to clinical-client relationships” ... “We observed and were told that communication is largely at cell side. This is not conducive to establishing rapport and trust” ...” All mental health residential units have interview rooms, but from our observations and conversations with staff we do not think they are used regularly”. Concern: One cannot develop a therapeutic relationship with a client if the communication is heard by a third party. Question: Are the mental health visits now being conducted in interview rooms? // Regarding Treatment Plans: “Treatment plans for suicidal inmates were incomplete and did not meet NCCHC standards” ... Our record review found that treatment plans were incomplete and not well documented”. Concern: Treatment plans are a blueprint of how and why treatment will be provided. Providing treatment without a treatment plan is like driving a car with no brakes. Question: Are treatment plans being created and completed for every person in treatment at ACJ? // Regarding Individual Therapy: “Therapeutic programming on mental health residential units is limited”” It (the schedule) listed only 1 hour of individual sessions for the entire week conducted by a bachelor’s level intern” Concern: NCCHC’s standard, J-F-03, requires individual counseling “for all inmates who need them.” Questions: How many individual counseling sessions are being conducted weekly at ACJ? Is everyone receiving individual counseling who needs the service? // Note: A subcommittee of the Jail Oversight Board was charged with the responsibility of overseeing ACJ’s compliance with NCCHC ‘s recommendations. What actions has the committee taken on these issues? Did the subcommittee examine people’s individual charts?

Response: Mental Health visits, if indicated by the healthcare staff, are able to meet in an interview room or a confidential setting. Not all conversations, with mental health professionals, require this interaction – this is indicated by the determination made by the clinician. Treatment plans are being completed. The survey was completed by NCCHC in September and October of 2019, many changes were made before, during, and after the survey. Individual counseling is provided by a licensed psychologist as indicated.

Comment: Maddy Kirk: My boyfriend lives on 8e. Why were positive coronavirus inmates kept on the same pod as him? He said everyone that is positive moves to another product but none of those inmates moved. My boyfriend has significant asthma and health issues. There were over ten inmates on that pod that remained on the pod instead of being moved. Why is my boyfriend being put at risk to be exposed?

Response: We are able to medically isolate individuals on several different housing units. 8E has the capacity to medically isolate individuals.

Comment: Carrie Washington: My son was recently arrested and went through the intake process. He said there were multiple shifts where there were not any nurses in the back seeing inmates. The response he received was there was no medical staff in the building

to put back there. He sat down there multiple shifts before seeing a nurse. How often is this happening because he said other inmates were complaining that this happens all the time now. I have read multiple news paper articles about the jail and short staffing.

Response: There have been nurses staffing intake during every shift. Our intake department is divided into several areas and the nurse may be primarily stationed in the "front" on intake. It would be helpful to have dates or names to investigate this. During review, there were a few exceptional circumstances, in the last month, in which an inmate was in intake for more than 24 hours. Lastly, employees at the ACJ can use approved benefit time and there are times in which nursing staff are quarantined due to the pandemic. We have discussed staffing every month and have reported the same response. There are continued efforts to ensure staffing, but this is largely out of control of the building.

Comment: Amanda S: More staff have left over the past month including three agency nurses and others have submitted their two week notices including a medical assistant and mental health staff. Did ACJ administration notify the prison board of these staff leaving? Does the prison board plan to interview these staff members? Everyone is leaving....no new staff are coming in. How much longer will this happen before the prison board actually investigates what is going on?

Response: The administration has not notified the board when these staff have submitted their notice. New staff are scheduled to begin this month. Over the last month, the following reasons have been provided for individuals leaving their employment at the ACJ: physical health reasons, new job opportunities, personal reasons.

Comment: Mae Menk: It is unacceptable that the JOB has not had a walk through of the jail in over a year. How are you supposed to monitor conditions that way? Additionally Ritch Fitzgerald should be attending these meetings instead of a proxy. The electronic tablets the prisoners use also require better maintenance, including making sure they are charged, and the fee to use them should be reduced.

Response: This is a comment.

Comment: Charnita Thomas: Former Officer: This question is for Chief Williams. As of February 21, the jail had 14 of 30 units no movement on/off, with 4 of them isolation status. Meanwhile, inmates on the other housing units are not getting an hour rec due to the increase in population from the lack of open units. First, knowing all of this, who thought it would be a wonderful idea to resume Hope programming on 2C, when you have the most units closed EVER during this pandemic? Does it make sense to house 32 inmates on that unit while other levels that are NOT isolated or on no movement struggle to provide an hour of rec with their high population numbers? Why not increase 2C back to 65 by taking 5 or 6 inmates off of Level 3, to ensure their entire population is getting their one hour rec? OR . . . With 4 units open, that's an additional 440 beds. Why not open another unit to accommodate the transfer of inmates off of the pods with high numbers, so inmates are getting their one hour rec, under federal law.

Response: Throughout the pandemic, many programs have had to adapt in the services that are provided. When individuals are housed on a housing unit together – they are a group/cohort. If services can be provided in that setting, we strive to provide those services. Many inmates have requested resuming services as they are supportive of their overall health/happiness and reintegration. Other housing units are able to receive their recreation time unless they are subject to isolation.

Comment: Jodi Lincoln – PA Prison Society: Concerns and suggestions regarding COVID Vaccination : Can Warden Harper or Dept Warden Williams provide an update on # and % of staff members that have been fully vaccinated. Having this data available on the Jail's covid Dashboard would be extremely helpful. Has the jail developed a policy for reassigning staff members who refuse to get vaccinated so they are not working in contact with incarcerated people? What is the jail's current plan for distributing the vaccine to incarcerated people? Please provide any details about anticipated timeline for vaccination, plan for distributing the vaccine (prioritization, availability to people on intake, logistics, etc.). I encourage the JOB to ask specific questions and for a copy of the policy that has hopefully been developed and written down. I would also like to know specifics about the Jail's plan for educating individuals about the vaccine. How will they be distributing information, answering questions and concerns, etc. Will the medical staff be readily available to speak with folks about the vaccine. Using the tablets could be a great strategy to provide educational materials about the vaccine. As a vulnerable population, it's extremely understandable that people incarcerated at the Jail could be distrustful of the jail's vaccination efforts. How are you taking this into consideration? Thank you for your time and again, I encourage the JOB to push for details and specifics from Jail leadership.

Response: Since the jail began vaccinating employees, that information has been provided on the website (though the percentages have not been). The ACJ has not developed a policy to reassign employees who have refused the vaccination. As an institution, there are many mitigating factors to consider in assignment of duties. We do not have a finalized written plan for vaccinations with the inmate population. Information to educate the inmate population is being sent via the tablets, first, and then in person consultations will occur with the healthcare providers when vaccinations begin. The information being sent to the inmate population includes the Emergency Use Authorization for Moderna, Understanding mRNA vaccines, FDA's explanation of emergency use authorization, and some frequently asked questions. We cannot control individuals' belief systems and whether or not they trust our efforts. We will continue to make decisions based on recommendations from the CDC, PA Department of Health, and Allegheny County Health Department.

Comment: Rosalie Garfinkle: As you know, the Jail Oversight Board is mandated to protect the well-being of those incarcerated and ensure the proper management of Allegheny County Jail. How can this be done when the board has not walked through the jail in at least a year? Regular visits are a necessary function of this board. Those incarcerated at Allegheny County Jail are experiencing horrible conditions, including a lack of care given to those sick with COVID. Put yourselves in ACJ to understand what needs to be done to correct conditions and as well as hold the management and administration accountable.

Response: This is a comment.

Comment: Anonymous123 124: I am writing on behalf of Michael Kiselka. Mr. Kiselka is a former cancer patient. He is immunocompromised and suffers from residual neuropathy, which causes him severe pain. As you recall, the Jail Oversight Board learned about Mr. Kiselka's plight at ACJ last year. Specifically, Mr. Kiselka's court hearing was postponed eight times because of repeated Covid outbreaks at the jail. After Councilwoman Hallam inform the Board of Mr. Kiselka's situation, he was transferred to Renewal. Unfortunately, for weeks, Renewal refused to provide Mr. Kiselka with neurontin, which had been prescribed for his neuropathy condition, and he received at ACJ. Mr. Kiselka was in extreme pain without his medication. A lawyer attempted to assist Mr. Kiselka and repeatedly called his caseworker at Renewal, seeking to resolve the matter and alleviate Mr. Kiselka's pain. Outrageously, the caseworker threatened to send Mr. Kiselka back to ACJ if he or the lawyer continued to ask for his prescribed medication. The caseworker also refused to speak with the lawyer even though Mr. Kiselka had executed two medical releases. After this threat, Mr. Kiselka was returned to ACJ. Around that same time, Mr. Kiselka's judge for his criminal case changed from Judge Lazarra to Judge Mariani—the judge currently being sued for civil right violations. Judge Mariani ignored Mr. Kiselka's treatment plan and sentenced him to 1-2 years for a DUI. However, that same day, Judge Mariani gave lighter sentences to people convicted more serious offenses. Mr. Kiselka is glad to hear that the JOB and courts are now requiring ACJ to ensure that inmates on quarantine or isolation pods are able to attend their video court hearings. Nevertheless, Mr. Kiselka raises two issues for JOB to address: (1) What is JOB doing to ensure that individuals at Renewal receive their prescribed medications in a timely manner? (2) Why was Mr. Kiselka's case transferred to Judge Mariani?

Response: This is for the Board to respond.

Comment: Erica Brusselars: My name is Erica Rocchi Brusselars. I am a volunteer with ALC Court Watch. Thank you for continuing to take time to read and respond to the public's questions. First, I will reiterate my question about tablet revenue, as the J.O.B. and Warden Harper did not answer my query last month. Is any of the revenue from tablets shared back to ACJ part of the contract with the for-profit vendor? If so, what are the specifics of the revenue sharing? How do the actual usage and revenue streams compare to what was assumed or projected when the contract was executed? The public needs to understand what entities are profiting from this revenue stream both generally and with the exceptional confinement that the pandemic, our courts, and ACJ management continue to foster. Second, would the J.O.B. and leadership and staff of ACJ consider using person-centered language when referring to our loved ones who are incarcerated? The simple change from saying "inmate" or "prisoner" to "person who is incarcerated" or "people in our jail" has power. This could be considered for the name of the Inmate Welfare Fund; potentially considering a shift to something like the "Welfare Fund [for People in ACJ]." Our loved ones on the inside are people first and this should be reflected in the words we use.

Response: Response regarding revenue will be included in the Warden's presentation.

Comment: Alexander Berkman: Inmates at ACJ are routinely subjected to unsafe and cruel treatment. I would like to ask Warden Harper if he has ever experienced the violence he is comfortable inflicting on others. Warden Harper: Have you ever been arrested or jailed? Have you ever been tasered? Have you ever been sprayed with a chemical irritant? Have you ever been forcibly placed in a restraint chair? Were you left there for more than eight hours with no breaks? Have you ever been solitarily confined? What is the

longest you have been confined with little or no human contact? It seems only fair to me that if the Warden allows inmates at his facility to be subjected to these methods he should actually understand the pain and suffering he is causing.

Response: As part of my correctional training, throughout my career, I have been exposed to the taser and chemical munitions. The response to all other inquiries would be no. Additionally, we do subject inmates to unsafe, cruel, or inhumane treatment.

Comment: Jesse Dillon: I recently saw a photo of the food being given to incarcerated folks and it is repulsive. I have heard from someone that there are major inconsistencies with the food, where it will be fine one day and inedible the next. Why is that? What is causing these inconsistencies? The food I received a photo of looked as appetizing as dog food. The incarcerated people at ACJ are human beings and deserve, at the very least, edible food. Maybe the oversight board would be aware of these issues if they did a walkthrough of the facility. Warden Harper has previously stated that the facility follows a contract provided by a food supplier. However, this seems impossible given inconsistencies. The food people are being given at ACJ is inexcusable and must be fixed.

Response: This is a comment.

Comment: Emma Goldman: The conditions at Allegheny County Jail include inedible food, freezing temperatures, inadequate medical and mental healthcare, the use of torture such as solitary confinement and restraint chairs, and other horrifying abuses. Any one of these issues on its own would be unacceptable; together they paint the picture of a jail administration that is either unable or unwilling to provide a basic standard of living to those under its care. If the Warden and Deputy Warden are capable of resolving these issues, it is absolutely inexcusable that they allow them to continue. If they are not capable of fixing them, they must resign and allow others to do so. If ACJ cannot be run safely and humanely it should be permanently closed.

Response: This is a comment.

Comment: Alexander Vanlaningham: In every one of the past 4 months of the JOB meetings I've attended, questions have gone unanswered regarding the current conditions of the ACJ medical facilities and its staffing levels, the inappropriate use of force and restraint chairs, and the general well-being of incarcerated individuals at ACJ. When asked about these issues individually, warden Harper and deputy warden Williams deflect, dismiss, and outright deny any issue. There's a unifying theme in their attitude that these concerns need not be taken seriously and they have repeatedly avoided responsibility by blaming the pandemic, staffing issues, and other inconveniences. So my question is simple: what do you need to do your jobs? The constant barrage of excuses and dismissals are getting old. Make a wish list and submit it immediately so that the county can go about doing its constitutionally mandated job of providing humane conditions at ACJ. Hell, make it public! And if you and the rest of the JOB board continue to behave flippantly about the lives you are destroying through inhumane conditions at ACJ, there is no measurement for how fast the people of Allegheny county will find others to replace you who will take these matters more seriously.

Response: This is a comment.

Comment: Abhishek V: Hello I am writing to demand that the county executive attend future meetings of the jail oversight board. It is unacceptable that in his place, he is sending a retired former employee. I also demand that the jail follow CDC guidelines and provide universal COVID-19 testing for those held in ACJ and make sure that they are able to follow social distancing guidelines and keep each other safe. I would also like to know what the process for charging tablets at the jail is, and would like a walk through of the facility so that we can get a clearer picture of the conditions inside and so jail admin can be accountable. There are complaints of no heat in jail cells - I would like to remind the administrators that people in the jail are human beings and deserve basic amenities and human rights. Not only that, but they also deserve love and kindness and to be treated with respect and compassion. Lastly I want to demand that the warden stop being such a jag off. Thank you.

Response: This is a comment.

Comment: Michael Latady: Hello! I'm wondering what the JOB is doing to address the very low testing rates (before and during the pandemic) for Hep C and HIV at ACJ. The "Opt in" model during jail intakes for HIV testing is stigmatizing and leads to further undiagnosed cases. We have seen a shocking increase in Hep C incidence in the area and testing and linkage to care is incredibly crucial, no matter the cost or the criminal history of the individual. This disproportionately impacts vulnerable populations. Thank you for your consideration

Response: There are concerted efforts and initiatives to broaden testing for HIV and other infectious diseases and implementations of mobile phlebotomy carts have begun to increase the capacity of those that wish to be tested.

Comment: Lee Burkhardt: If the Jail Oversight Board is supposed to protect the well-being of those incarcerated at ACJ, and ensure the proper management of the facility... and JOB's monthly meetings are supposed to offer the public a voice to advocate for the individuals subject of so many abuses at ACJ... and to offer transparent, readily accessible information collected in warden reports etc. using every metric of measurement this board has objectively failed. During the past several meetings I have often wondered if the members of this board take seriously the tasks they are statutorily required. The list of examples is so long it is painful, nothing short of a tragedy, as the consequences of inaction harm, traumatize, and dehumanize incarcerated individuals. The stakes are much higher. And so, with every excuse for the warden and deputy warden that is made by the JOB. Every day that this board doesn't walk through the facility. Every time a member says "I didn't get around to it this month" or victim blames the failures of improper management and maintenance on the supposed mistakes or "bad behavior" of those held at ACJ: I am horrified. If this forum is the way the public has any hope of protecting, supporting, caring for our loved ones inside the odds are stacked so high against us. Some examples that support my concerns of the apathy of this board are also areas that I can see some immediate steps to increase effectiveness (I request that each of these examples/suggestions be addressed directly by the board): -Demand that county executive, Rich Fitzgerald, attend monthly JOB meetings. It is no secret he is sending a retired, former city employee in his place. His benevolence is offensive. - This board needs to do a walkthrough of the facility. I believe it should be monthly. Covid is not new, and this health crisis should not remain an excuse for inaction. Put some PPE on and do your jobs. -The meeting minutes and warden reports made available on the county controller website are published at an exorbitant delay... the most current warden report available to me as a concerned citizen is December 2020. Oh, and the information presented in the report is from data collected in OCTOBER-NOVEMBER. A four month delay is not transparency, it is insulting. Fix this. Until next time -Lee Burkhardt

Response: This is a comment.

Comment: Brenda Williams: My son has been retaliated against and placed in RHU without a hearing simply for filing grievances about the horrendous conditions at ACJ. There is no due process at the jail, and my son says that the warden and jail administrators are taking advantage of the outbreak by further restricting prisoners rights to movement, including to the law library, phones, and rec. COs are coming to work sick with the virus, further adding to the rot of ACJ. I have tried many times to get in touch with Rich Fitzgerald to voice my outrage, including here at these meetings, but he refuses to abide by his own responsibilities by not showing up. When will Rich Fitzgerald start doing his job and come to these meetings so that I may ask him my questions directly? I do not want to speak with a surrogate. Thank you.

Response: This is a comment.

Comment: Sheila Marr: Why are you sending captains around telling Officers that we are going to get written up if the inmate workers are caught not cleaning everything on the sanitization list. Or they are telling the workers they are getting fired. With only 8 actual inmates out besides the worker, many areas of the pod are not in contact with the inmates out. Eight inmates aren't sitting at all 15 tables, because the chairs are removed. They aren't touching both railings. Or all the door handles. The pod workers can't get commissary, shoes, or even extra trays most times and you are telling them if it's not all cleaned they'll be fired. Your outbreak isn't related solely to cleaning. You don't have Officers down in intake wearing face shields and N95 masks with new arrests coming in. Then these Officers go all over the building in the elevators for lunch, the locker room, and then forced to other areas for work after their initial 8 hour shift. How many people have been quarantined from all three shifts in intake in the last 30 days and how many of them get forced to some of the pods on isolation now? Are you going to suspend the employees that are able to come to work? ALL of the sergeants, captains majors, deputy wardens, chief deputy wardens, and yourself are not enough to run ONE single shift in this jail. When will the harassment end? Is it easier to do this then test entire units to catch the positive cases and isolate them faster? Because the average overtime hour is running \$39.50, is that cheaper than testing? You won't even ask your bosses to give your employees hazard pay now you gonna send us all home because an inmate worker not getting anything either missed something? Where was this staff attention to detail when we were getting stabbed in your building four years ago sir?

Response: This is a comment.

Comment: Consuelo Cruz-Martinez: I do my volunteer work with inmates who belong to the Latino community. I am the only person who visits inmates that speaks Spanish there (there is 1 guard that speaks Spanish). I go there only once a week. I pray with them and

help them cope with their pain of being incarcerated and disconnected from their families. Latino prisoners do not speak English therefore some of them have no idea why they are there, what their rights are and who can help them. They need someone that speaks Spanish in different areas: Social worker, doctor, nurse, teacher, lawyer, paralegal... What you can do to help them? They need a person to represent them and defend their rights and solve the problems of racism and many other problems inside the jail. GRACIAS por everything that you can do to help them. Blessings.

Response: We do have staff (correctional officers and healthcare staff) that are multilingual. These individuals do not work 24/7, but are available to provide care. Ideally, we will increase our number of employees who speak varying languages to have a more diverse representation in our employment pool that represents that of those in our care. Also, our tablets have the capability for inmates that speak French and Spanish.

Comment: Laura Perkins: Good afternoon. Today I would like to address two issues: Language access at the jail and the work done at the Discharge and Release Center. I submitted these comments last month and they were not read, so I am submitting them again. Every non-English Speaker I have spoken with that has passed through Allegheny County Jail has told me that adequate language access is NOT provided in ACJ's settings and procedures, from intake to medical requests; jail policies to discharge. Casa San Jose has met with the Warden and provided translated documents and resources to the jail, yet we consistently hear that these resources are not being used. It is the jail's obligation to provide essential information in the adequate language, and this is not being done. I am happy to be a part of solutions, but this is the jail's responsibility. In addition, I request that the jail prioritize hiring Spanish-speaking social workers, nurses, and therapists. Secondly, I know there has been discussion at the Jail Oversight Board over the funding of the Discharge and Release Center. I was shocked that this essential service was not funded in the same way that other essential services like food, medical, and intake are funded. The Discharge and Release Center should not be thought of as a luxury. In the two years I have interacted with employees at the Center, I believe it has changed leadership three times, and each leadership has been very poorly versed in the services available to people leaving the jail. I have shared resources with employees multiple times and the information is not retained. Thus, I request that the Jail Oversight Board recommend that D&RC employees meet with service providers regularly so that they can provide up-to-date information to folks being released. None of the funding for the D&RC should come out of the Inmate Welfare Fund. This part of the jail is essential to its operation, and it should be treated and funded as such.

Response: The inmate welfare fund is not responsible for paying for the Discharge and Release center. There have been 2 Lead Discharge Coordinators in the last 2 years. The allegation that they are not well versed in resources is inaccurate and an unfair characterization of the hardworking employees within that department. There has been a lot of proactive initiatives to ensure that individuals receive very supportive services upon their release from the facility.

Comment: Peter K: Last month I submitted a comment to the Jail Oversight Board regarding the use of solitary confinement (also known as segregated housing) at Allegheny County Jail. In that comment I pointed out that experts who study incarceration agree solitary confinement is a form of torture and does not contribute to rehabilitating inmates. I would like to follow-up on the answers I received from Warden Harper. In my previous comment I asked the Warden how many inmates had been placed in segregation in the last month, and the Warden responded that he does not have this data. Can the Warden please clarify – does this mean nobody at ACJ is tracking basic information about the frequency, duration, and reason for the use of solitary confinement? Allegheny County Jail Disciplinary Procedures require that this information be recorded before placing an inmate in solitary. Is this policy being followed? The JOB cannot oversee the jail if it does not have access to basic information about the jail's operation. I request that information about inmate segregation, including the number of inmates segregated, the reasons for them being segregated, and the duration of their segregation, be included in the Warden's Report each month. In my previous comment I also asked the Warden to explain how the use of solitary confinement contributes to the rehabilitation or safety of inmates at ACJ. The Warden responded by listing the reasons an inmate may be placed in solitary, but did not explain why solitary confinement is necessary in any of those situations. Inmates at ACJ spend 23 hours per day alone in their cells, in conditions that could already be defined as solitary confinement. If the purpose of segregating inmates is to physically separate them from others, this is already achieved in their usual housing. Can the Warden explain how placing inmates in segregated housing makes anyone safer, or rehabilitates those in solitary?

Response: My response to this comment last month, I do not have the data as to how many inmates have been isolated since the last JOB. Today's segregated inmate count is 241, the length of segregation is determined by the inmates conduct, whether they are a threat to themselves and the orderly operation of the facility and every 30 days each inmate in segregation is reviewed. All inmates must be cleared by our healthcare department prior to being placed in segregation. Supervisory staff and healthcare employees

determine when someone is to be segregated. Guidelines used to determine whether an inmate is segregated is based on the following. Threat to themselves and others, threat to the orderly operation of the facility, violation of policies and procedures.

The Allegheny County Jail segregates inmates from general population for the following reasons, the inmate has committed a violation of jail policies and procedures, threat to themselves or others and deemed a threat to the orderly operation of the facility. We have 2 agencies that review and approve all our policies and procedures of this facility.

Comment: Concerned Officer: Why do we have Officers passing trays by themselves on isolation units. The CDS has reported repeat short term exposure to infected people in a jail setting increases the likelihood of transmission. Why aren't you allowing a pod worker out to assist with meal pass? The guidelines are in the link at the end. Why not have another officer assist or a biohazard worker assist? That Officer increases his chances of catching COVID, but also transmitting it throughout the building going into the elevator to go to lunch. Going into the locker room. Going into the lunch room. Then going back up. Then getting forced again and walking among another housing unit for 7 hours, with a lunch time elevator ride to the break room, locker room, elevators then back up. The numbers are getting worse why not try something different? <https://www.cdc.gov/mmwr/volumes/69/wr/mm6943e1.htm>

Response: There are additional staff available for assistance. If an officer needs support, they can reach out to their Unit Managers at any time.

Comment: Joe Pasqualetti: The county executive must join the jail oversight board meetings. What authority does he have to send a proxy? What qualifies this proxy? If the county executive cannot attend meetings then he is unfit for his office. 2. When is the last time the oversight board evaluated, in person and photographs, the meals served at the ACJ? When will the next evaluation occur? This must occur regularly and in-person. 3. When is the last time the oversight board evaluated the conditions with a walk through? When will the next walk through occur? This must occur regularly and in-person. 4. More infectious strains of covid have been identified in the US. I demand regular universal testing in order to identify and treat anyone with covid before the spread gets worse. This would comply with CDC guidelines. 5. With your desire to switch to tablets what is the process for charging tablets, what about repairing tablets with under-performing batteries? Do not restrict access to books and printed materials, these do not require electrical charging!

Response: This is a comment.

Comment: Elizabeth Schongar: Considering 1)the very frequent use of the restraint chair & solitary on people suffering breakdowns due to mental illness & drug withdrawal 2)the poor medical care & the overriding of recommended medical care 3)the lack of adequate heating & food When will the Wardens be fired?

Response: This is a comment.
