

Local Family Council COVID-19 Informational Call Notes

Call Details

Facility: Stafford Creek Corrections Center

Date and Time: 05/11/2022 3:00 PM

DISCLAIMER: These notes are from a meeting one week ago; therefore, many of these answers are outdated at this time. SCCC is in a different place this week and the notes do not reflect where we are at now.

Attendees

DOC IT Bradley, Keaton, Sec Sr. Clift Autumn, HSM1 Evans, Shane, Lisa Flynn Correctional Program Administrator, Asst. Supt. Van Ogle, CUS Jones, Greg, RN4 Lynch, Melissa, Malhuish, Caroline, Asst. Supt. Gina Penrose, Perkinson Paige, Ramos, Gladys AA3, Richardson, Samantha LBA, Ritter, Monica, Ryan Taylor Dawn, Wakeman, Gary

Non-DOC: Wade, Susan, Sifres, Diane, Schoen Lydia, Lewis Vanessa, Johnson, Heather, Ivanov Anna, Holmes Shawnte, G. Tammy, DuSchene Bea, Champion, Jessica, + 4 phone call numbers.

Family members – Roll Call wasn't taken

Weekly Updates:

Facility Wide Outbreak

Definition

Outbreak definition: A group of confirmed cases of COVID-19 that includes at least one incarcerated individual.

Two or more confirmed cases of COVID-19 in incarcerated individuals occurring within 14 days who reside in the same living area

One or more confirmed cases of COVID in an incarcerated individual AND one or more confirmed cases of COVID in staff or volunteers working in proximity to the incarcerated individual case/cases occurring within 14 days.

Two or more Limited Area Outbreaks that are connected, occurring simultaneously in the same facility.

All visitation and programs are closed due to Positive Incarcerated Individuals in H1, H3, H4, H6, and 9 Positive staff.

Quarantine tested H3, H4 H6 on 5/10/22. Today we are testing H1/H2/H5 G. unit H1, H2 and H5 today.

A total of 71 positive Incarcerated Individuals as of this afternoon 83 in Isolation 110 recovered. We are utilizing to try to make up small work crews for laundry and kitchen staff. All meals are being served in units currently,

pill line, insulin assessments in units by nursing staff entering those areas daily for wellness checks. We will provide as needed Emergent concerns in those units until further notice.

Visit room area is being set up for more Positives individuals from our gym site. Quarantine in F south on day room schedules with cohort schedule that are in 6 groups per pod 1/3. With less individuals in day dayroom to keep track of. This Version of variant appears more contagious than those in the past we have experienced, this time it has over run Stafford Creek Corrections facility quickly. We are doing the best we can to be safe and keeping all your loved ones save.

Last weekend was very stressful we had positive cases that came in which we had to cancel visits expectedly. The two folks here in my absence did not understand the communication process protocols and visit staff didn't know either or had guidance. Some families drove Across state to visit and were very upset upon arriving. We were not organized and prepared and it effected ruining many Mothers' Day. Conversation about protocol who is on duty to deal with are being implemented in a better matter. Spending a whole day traveling was not acceptable we truly apologize.

Tuberculosis update

Lisa Flynn Correctional Program Administrator

Incident command post on Tuberculosis clinic has begun at Stafford Creek Correctional facility. Direction in place with supplies and information which this allows our clinical, operation team early next week access to resources from medical entities on testing. Assurance to be successful at protecting all from tuberculosis at Stafford Creek Correctional Facility.

Video information to be announced onto television channels playing Tuberculosis informational segments coming soon. Keaton from our IT department will be working on looping it in after movies. Very informative and educational for the incarcerated, that we are providing your loved ones. Adding Counseling and a lot of answers for questions on COVID 19 & Tuberculosis. Determination of Tuberculosis if infected is through testing. Involving a skin test, or blood test. A chest x ray is part of the active process. If latent many people do not have symptoms and are not contagious to others.

State Library- Lisa Flynn Correctional Program Administrator

No librarian still with off COVID restrictions, State Library owns the inside materials. Department of Corrections is a Separate entity that houses all those materials. Until the State gets a new librarian, our past one retired in 2020. We will then be able incorporate more availability for Incarcerated individuals to access it.

Department of Corrections is in contact with the legislative Library Administration on two vacancies they are recruiting to hire soon for Stafford Creek Facility. State Legislation is funding 1.5 million too our state to hire more staffing, more importantly paraprofessional if a Librarian is gone, they can fill those vacancies. On a more consistency to always have someone available in the State Library to keep access open as needed.

We are including Incentives for the Incarcerated for Tuberculosis testing as incentives.

COVID

Associate Superintendent of Programs Gina Penrose

Removal of patients from medical isolation status requires review by the Infection Prevention Nurse or designee or Medical Consultant or designee for prisons. Patients who tested negative for COVID-19, influenza, and other respiratory viruses will remain in medical isolation until:

***They have been asymptomatic for 14 days, unless they have a definitive confirmed alternate diagnosis that explains their symptoms.**

*** They have been asymptomatic for at least 72 hours and have tested negative for COVID-19 twice with at least 48 hours between tests**

Stats for staff testing positive for COVID-1. Eight to Nine staff employees in the last week or two. Why Facility is on facility wide outbreak is currently in motion. Daily testing for staff is twice a week 1 rapid and 1 PCR.

Safety compliance and PPE wear of Quarantine & Isolation housing of Positive individuals. We have N95 full PPE accessible, to avoid COVID 19 spreading it around your loved ones. Helping reduce and maintain spread and fit testing. We are doing the best of equipment me we have.

ROUNDTABLE

Participant Questions-

Question 1 Incarcerated Individuals in EFV units.

Answer RN4 Lynch individual Tuberculosis active cases they must be separated from population at this time. EFV s. are used due to SCCC not having enough negative pressure rooms.

Question 2 EFV length of Tuberculosis cases in these units.

Answer RN4 We must conduct sputum collection. Then we send it out to culture for active or latent tuberculosis there is no definitive time. The Goal is not to keep I/I in the EFVs due to SCCC only having one Negative pressure available here.

Question 3 4 EFV s units and one person in one unit currently being used. While the other three units are still not open? Why are we not allowed to come and have visits?

Answer The outside yard divider is by chain link fences. Concern for that and families to be exposed and SCCC does not want to take those chances.

Question 4 Closure time has a huge impact on families, think about ways to open these EFVS for viewing or one unit at least to be accessible to families.

Answer Appreciate it, and will work on vacant availability, we must first do this while building a plan.

Question 5 Stafford Creek Correctional facility is the only facility with Tuberculosis cases currently?

Answer We do not have that information, we don't know?

Question 6 Fundraiser when will our Loved ones be able to do one?

Answer We are scrambling to get everything into a new order during these times. Tuberculosis clinic and COVID 19 testing requires primary concern with Facility wide outbreak. Fundraisers will not happen immediately due to shortage all around for it to be a possibility.

1. Question 7 Is Department of Corrections in ownership of any outbuilding? Portable showers, that individuals can use for relieving some stress on space.

Answer Lisa Flynn Correctional Program Administrator

We identify these needs through our Head Quarters logistic leads. Portable trailers or x ray machines added staff contracted is in assistance with that piece. SCCC needs to project what is possible currently onsite. If SCCC needing any positive follow ups of x ray and Sputum of individuals due to tuberculosis. The process for housing the Latent Tuberculosis cases. Head Quarters division active looking at data with suspected or active Tuberculosis.

Question 8 Cohorts taking out a tier at a time? Many are not happy with it at all, not working well, with frustration among and really upset.

Answer

1/3 tier sections, 6 cohorts 11 cells out per cohort currently.

We appreciate the information provided; it is the expectation to adhere at this time. The Cohort schedule is due to how contagious this round of COVID is. SCCC is avoiding the spread to continue of this virus. Please encourage your loved ones to cooperate. We understand, we are working on yard time for pod and fresh air.

Question 9 - To late why not rapid testing instead of PCR?

Safe start states patients per Center Disease Control can still test positive. How are we ensuring that has been done? Who makes sure the on the last positive test?

Answer It is the authorized test for this situation per DOC Medical team in conjunction with Department of Health regulations for facilities. SCCC DOC has tracking for both the RAT/ PCR. RN4 Lynch with a PCR we catch it faster rather than when shedding the virus. Why we PCR individuals, if they are out of Isolation then we are rapid if not shedding the virus.

Antigen rapid/ COVID shed antigen. Rapid will cure on that antigen while a PCR will find it before leaving the body. We get a more accurate response than shedding antigens vs contagious.

Question 10 How many Individuals active symptomatic.

Answer Lynch RN4 We do not have a number currently. It seems this strain is with more symptoms but mild. Sore throat congestion and muscle aches. No one has been taken to the hospital.

Question 11 In the past you cannot staff only per cohort if someone calls out. I think it is time to see this as an option. Inmate co horts in H2, H3, H4 everything entirely cancelled for everyone. There would have been no reason do this if not brought through cross contamination. List employees by cohort and not cross match to other units to avoid spreading any further. I didn't have any visits and this has been taken too far.

Answer

Penrose / Roster

Captain? Are you on the line to answer this Question?

Dan Van ogle- Our staff is moving handcuffed people around. They bid on positions with their union when availability becomes open to certain spots. In Isolation currently we have assigned our ERT to those positives' cases on 12 hours shift. Also, the visit room to limit contact with positive case. In reg post in living unit 5 day a week. Other 2 by a relieve staff 2 days in another in and some 356 staff custody staff and eliminate where post cases.

Question 12 Testing why PCR / RAT on same day takes out that would shed until. If post on the rapid test stop the spread more efficiently took the I/I out. Staff not wearing mask properly/ with mask on their units.

Question 13 – What is SCCC doing wrong with so many positive and no other prisons with the same situation? We have loved one's witness groups of Correctional staff together on the breezeway. Mask down spreading germs not thinking of our loved ones. The Incarcerated are not leaving the facility. Units are getting punished because COVID is coming in. I had a plane ticket to travel and now you are closed. Having this happen again for the second time.

Answer

Penrose- we are trying to; we fully understand this.

Question 14 Q.

On safe start – staff doing testing are not changing their gloves. H5 testing as we speak are not sanitizing their hands. There is no accountability, your method is not working what is the next step to follow protocol.

Question 15 We are needing clarification no arbitrary or discretion. This is policy and not implemented.

Question 16 Can it be made policy that staff do not eat together with mask off?

Answer We will follow up on that, there is direction out there for all staff.

Question 17 Providing N95 to the incarcerated, deliver one to each Incarcerated Individual. That they can be protected due to staff.

Answer

Difficult since to wear a N95 I/I must be fit tested; voluntary agree to wear due to the sealed face and clean-shaven requirements.

Question 18 What consequences are put in place for Correctional staff on not wearing masks.

Depends on level of consequences, Verbal's & written type of reprimands.

Answer We enforce it and keeping our eyes on it. We have hired someone to walk around and police proper PPE, mask wearing, Supplies and signage for allowed personnel in certain spaces. What PPE is required; properly worn we are working on this.

Question 19 Too Lynch- RN4 Is Medical or clinical debating on what we are waiting for? COVID not going anywhere, our loved ones get sick and stuck on Quarantine and then it comes back. COVID is not as dangerous as it is, we are always to continue with it regardless of changes. What are we doing with our federal funds it is depleting? Center of Disease Control on guidelines changes? Has anything changed in its last few weeks? What about safe start when will we anticipate changes, when will we be done with mask? How much more can we go through can CDC just stop it.

Answer Center of Disease Control and Dr. Lara Strick will be looking at existing Prison environments with recommendation we must follow. The levels of case and data, Center of Disease Control new guidelines to do as an agency. Governor Mandate on congregating living that we must follow per Center of Disease Control. Which inquires on such protocols from nursing homes, hospital placements as an example. We will see some more changes in months to come from Center of disease Control & Department of Health.

Comments/Closing – Thank you all for your participation. Please be safe.