



March 16, 2020

Governor Doug Ducey
1700 W Washington St
Phoenix AZ 85007

David Shinn, Director
Arizona Department of Corrections, Rehabilitation & Reentry
1601 W Jefferson St
Phoenix AZ 85007

Dear Governor Ducey & Director Shinn:

We write regarding the likely spread of Coronavirus Disease 2019 (COVID-19) to people incarcerated in Arizona's prisons. Although American Friends Service Committee-Arizona (AFSC-AZ) has attempted several times to obtain information regarding the practices of Arizona's Department of Corrections, Rehabilitation & Reentry (ADCRR) to contain the spread of the virus, we have not received responses to those requests.

As you know, the World Health Organization (WHO) has designated COVID-19 a global pandemic, and President Trump has declared a national emergency. While there are currently no reported cases of COVID-19 within ADCRR facilities to date, that is likely to change. Given the mortality rate associated with the virus, we are concerned about the virus's spread to at-risk people, particularly the elderly and those who require chronic care, within the closed confines of a prison setting.

Following the guidance of our friends at the [Southern Center for Human Rights](#), we ask ADCRR and the Arizona Board of Executive Clemency to implement the following measures to reduce virus transmission and potential loss of life:

1. Comply with the Centers for Disease Control (CDC), Arizona Department of Health Services (AZDHS), and National Commission on Correctional Health Care (NCCHC) Guidelines. We urge ADCRR to be in regular contact with experts at the CDC, AZDHS, and NCCHC. In particular, we ask ADCRR to follow guidelines issued by NCCHC and WHO.

2. Eliminate Co-Pays. ADCRR and its private contractors, particularly Centurion, should eliminate all medical co-pays while the pandemic is ongoing. Alternatively, ADCRR should eliminate all co-pays for medical visits from persons with reported respiratory illness, fever, shortness of breath, or other virus-related symptoms. Co-pays may discourage people from reporting symptoms and seeking care. Elimination of co-pays on a temporary basis will



encourage people who may be infected to seek care and could avoid further spread of the virus.

3. Ensure Access to Soap, Tissue, Cleaning/Sanitizing Products, and Clean Laundry.

People in prison should be given increased supplies of soap, tissue (or toilet paper), and cleaning/sanitizing products. Additional steps should be taken to ensure that people have clean laundry on a regular basis. Cleaning and sanitizing products should be provided and available at no cost to incarcerated people or their families.

4. Provide detailed, updated information on a regular basis to all staff, incarcerated people and their families regarding the risk factors, preventive measures, ADCRR testing and treatment guidelines, and any changes regarding prison operations or policies related to the virus. Policies adopted in response to COVID-19 should be transparent and clearly communicated to the public and to people in prison. This includes providing regular updates via press releases and on the ADCRR website about the spread of the virus and the measures being taken to address it. Prison officials should have a plan to address an anticipated increase in the number of calls from family members seeking information.

5. Implement Medical Quarantine where appropriate. In consultation with experts at the CDC and/or AZDHS, prison medical providers should develop a medical quarantine plan for people who have been exposed to COVID-19. This plan should consider how to isolate people with the virus; how long to quarantine those who are exposed; what personal protective equipment is needed, and for whom; and when isolation can safely be lifted. Any plans for quarantine should be nonpunitive and limited in scope and duration based on the best science available.

6. Take steps to mitigate the effects of medical quarantine. Periods of medical quarantine may be stressful for both incarcerated people and staff. We urge ADCRR to ensure that those who are quarantined have positive ways to spend time, including reading materials, tablet access, electronic programming, crossword puzzles, and the like. Access to time on the prison yard is particularly important. These measures will help to keep tensions and anxiety levels down.

7. Ensure that incarcerated people can meaningfully contribute to their legal case. People who are in prison should continue to have access to regular communication with their legal team, and access to court proceedings.

8. Implement an emergency staffing plan. ADCRR and its medical providers should develop a plan to reinforce staffing and provide for effective care in the event of a mass outbreak at facilities where vulnerable populations are housed. If not already in place, ADCRR should implement paid sick leave to encourage staff members not to come to work if they are ill.



9. Facilitate communication with loved ones. While in-person visitation is suspended, incarcerated people who can pay can communicate with loved ones through their electronic devices and the prison phone system. However, incarcerated people without funds will now have no means of speaking with their family members. We ask the ADCRR to make video visitation available to indigent people so that they can communicate with family members.

10. Create a plan for transfers of people whose care cannot be safely managed in prison. We urge ADCRR and its medical providers to plan for how they will accommodate a possible need to transfer a large number of people to hospitals for advanced levels of care.

11. Compile a list of people to prioritize for release. This list includes those identified by ADCRR's medical providers as high risk of infection but low risk to the public. In distributing such a list to others, healthcare workers should not disclose personal health information, but rather should list the persons identified as being at higher risk for becoming ill based upon their underlying medical conditions.

12. Direct the Board of Executive Clemency to review, on an expedited basis, the cases of elderly and chronically/terminally ill incarcerated people, so the Governor or Department may order the compassionate release of all chronically/terminally ill, elderly, and immuno-compromised incarcerated people who are at high risk of infection but low risk to the public.

13. Suspend revocations to prison for technical probation and parole violations (e.g. nonpayment of fines, reporting violations), except where necessary in individualized instances to protect public safety.

14. Immediately release any and all incarcerated people who qualify for Transition Program and/or SB1310.

15. Suspend or reduce the number of prison admissions for low-level drug offenses, or other short-term, low-risk individuals. Prison space should be reserved only for those who pose a legitimate public safety risk. Those who have been convicted of low-level offenses should be participating in social distancing along with the rest of the population. In addition, prison staff should be asked to spend their time supervising only those people who need to be in custody during the pandemic.

Because of the growing number of inquiries that we are receiving from incarcerated persons and their loved ones, we are sharing this letter publicly. We appreciate the steps that your agencies are taking to respond to COVID-19. We urge you to adopt the additional measures listed in this letter, for the protection of people in prison, correctional staff, and the public at large.



**American Friends
Service Committee**
ARIZONA OFFICE

Also, please note that these measures have been endorsed by hundreds of taxpayers and voters who have signed onto [AFSC-AZ's online petition demanding accountability from ADCRR and the Governor's Office.](#)

Thank you for your consideration,

Caroline Isaacs, MSW
AFSC-AZ Program Director