

**John Howard Association  
COVID-19 Recommendations  
April 8, 2020**

**The Illinois Department of Corrections should:**

1. Devote every available resource to placing people who can go home.
2. Allow everyone access to communications, showers and out-of-cell time to address quality of life issues while conforming with official COVID-19 prevention guidelines.
3. Make a concerted effort to allow people outside in small groups for fresh air and sunlight.
4. Provide for the basic healthcare and sanitation needs of everyone in custody.
5. Provide information in an understandable format. Ensure all individuals receive information and have an opportunity to ask questions.
6. Document all training for people who are incarcerated and staff.
7. Explain in detail expectations for who should be taking various Personal Protective Equipment (PPE) protective measures without exception or where those exceptions may be necessary to staff, to people who are incarcerated and to their outside supports.
8. Educate people on proper use of PPE, monitor use and reinforce training, and re-educate people who use it improperly.
9. Permit incarcerated people to wear masks as they feel is warranted and not just in situations where it is absolutely required, and consider making other PPE more broadly available as best practices evolve and supplies permit.
10. Explain to staff and people incarcerated how social distancing and cohorting can be expected to work in their particular prison environment, as well as their outside supports.
11. Carefully screen incarcerated workers for symptoms, provide them with appropriate PPE, maintain social distancing as much as possible (in the absence of ability to socially distance, cohort or keep the same individuals together as a group), and train them in COVID-19 best practices. Hire and cross train more workers.

12. Provide information regarding current CDC guidance and information to respond to people's common concerns about PPE and cleaning supplies. For example, available information currently suggest that ordinary soap is as effective at destroying the virus as other "more powerful" chemicals, which people believe they need to have to protect themselves.
13. Agency and outside public healthcare officials should pay close attention to ensuring all people in facilities have what is currently recommended and communicate that this is occurring.
14. Articulate what expected commissary frequency and spending limits will be during this period.
15. Respond to issues with dietary.
16. Ensure that phones and kiosks, as well as any other shared items and areas, are cleaned between use by different people.
17. Provide some free write-outs to people during this time in addition to phone calls, emails and video visits.
18. Devote staff to ensuring prompt review and approval of messaging and video visitors, email and mail, and phone list approval and purging, to improve communications during this time when in person visitation is restricted.
19. Make public information about barriers to increased functionality and utility of vendor GTL's tablets, kiosks, video visits, and other products.
20. Consider state loan program for GTL tablets so that more people can have access to these devices regardless of wealth and in case of medical isolation, ensuring WIFI functionality.
21. Make public technology vendor work order information.
22. Heighten vigilance for inter-cellmate issues and suicidality.
23. Keep staff with the same incarcerated cohort as much as possible to diminish cross-exposure.
24. Cross train staff so that they can cover other's posts more readily if necessary.
25. Aggressively recruit staff because of anticipated attrition. Be proactive for anticipatable staffing shortages, particularly with healthcare staffing. Consider calling on retirees to serve if needed.
26. Communicate plans for how people who are symptomatic and sick will be cared for to people in facilities and the public.
27. Allow for family notification on request when people are diagnosed.

28. Partake in ongoing transparent communication and information sharing vital to success during this period.
29. Post the following to their COVID-19 webpage:
  - a. Indicators for which areas of facilities are under quarantine or isolation and completely restricted (e.g. for medical isolation of symptomatic or COVID-19 positive people, or where there are heightened levels of lockdown) as it occurs, so people can appreciate that it is a temporary and deliberate measure and appreciate why they may not be receiving phone calls.
  - b. Information about whether COVID-19 positive people who are incarcerated are housed at outside hospitals.
  - c. Information regarding COVID-19 concerns received via the hotline and other methods.
  - d. Continual supplements to the COVID-19 FAQs to answer more questions, and answer with more particularity.
  - e. Staffing challenges by facility.
  - f. Updated information about early releases granted (# by type).
  - g. Counts by facility of deaths.