
**2021 Prison
Communications
Briefing**



A Snapshot of Life in Prison

A summary of concerns, questions, and perspectives provided by incarcerated people and their loved ones at the beginning of 2021

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Briefing Overview

In January 2021 JHA staff fielded more than 200 communications, including more than 140 letters from people who are incarcerated which were mailed from late December 2020 through January 2021 and over 60 contacts (letters, emails, calls) from people outside IDOC. These communications reported correctional conditions, largely relating to COVID-19 response within IDOC, during this month and a half time period.¹

JHA first issued [Communication Bulletins](#) at the initial phase of the pandemic and is providing this report to highlight thematic issues that continue to be reported and responses from IDOC. Thank you to everyone who has called, emailed, and written to JHA with your questions and updates. Our ability to monitor issues is enhanced when people share information with specificity with us.

JHA uses the information you have shared to follow up with administrators as well as to advocate for and advance improvements. Examples of where JHA has discussed particular issues and concerns reported through communications with IDOC administrators are included in textboxes below, in addition to related IDOC responses.² While IDOC has provided JHA with some additional requested facility-specific data, we continue to request access to IDOC COVID-19 protocols pertaining to medical quarantine and isolation and the related definitions of statuses, privileges, and standards such as access to showers, phones, yard, out-of-cell time, property, etc. JHA has not yet been provided the protocols to understand underlying policies behind reported facility practices. Further, those in custody have also not been provided with relevant guidance from what we hear from people who reach out to JHA asking for this information. JHA encourages IDOC to make these protocols publicly available in order to address many of the questions we receive regarding basic information about what is happening inside the prisons at this time.

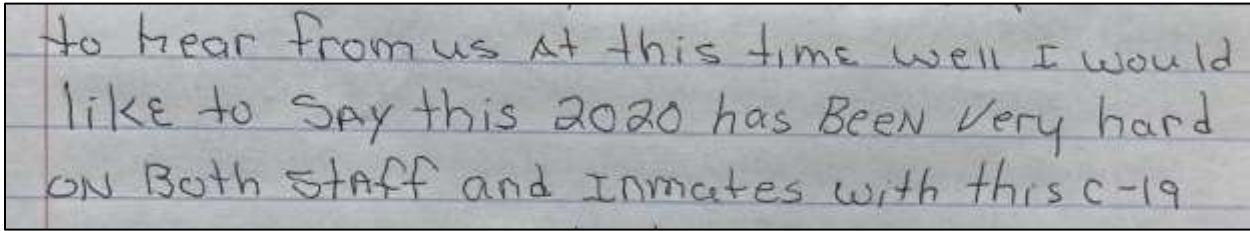
¹ While some people were clear regarding the time and place of their reports or that some issues were current and ongoing, some people recounted experiences from earlier in the pandemic, or the location or timeframe of the issues they reported was unclear. Additionally, many people did not describe if they were reporting during a period or location where there was an active outbreak at a particular prison entailing greater health and safety restrictions. IDOC does not provide public information about which facilities or parts of facilities are more restricted under medial quarantines so this could be tracked, although JHA has repeatedly recommended this practice.

² JHA shared a draft of this report with IDOC Administrators on February 11, 2021 and discussed the report on February 25, 2021. At that time, IDOC informed JHA that they did not plan to issue a written response, but indicated their willingness to continue conversations regarding these issues.

On January 31, 2021, the population of IDOC was 28,671, down nearly 10,000 people from a year prior. The decline in population numbers is likely due mainly to decreases in admissions over 2020 and not concerted efforts to release many people early. IDOC reported that since the start of the pandemic there had been 2,793 administrative Population Management Releases at the beginning of January; by the end of the month this had increased to 2,898. There had been just 22 medical furlough releases since the start of the pandemic and this number remained static for the month of January. While JHA received some communications regarding early releases for pandemic reasons in early 2021, there were nowhere near as many inquiries as in the early months of the pandemic response when people likely had more hope that this would be feasible.

IDOC significantly increased COVID-19 testing in late 2020, and by the beginning of January 2021 approximately 30,700 staff and 74,900 prisoner tests had been conducted. By the end of January over 66,400 staff and 203,700 prisoner tests had been conducted. JHA has urged increased testing and believes this effort has been critically important to mitigation efforts.

By the end of January 2021, IDOC reported over the course of the pandemic that 3,967 staff and 10,343 had tested positive for COVID-19. **One staff member and 85 incarcerated people had died.** There were 172 staff at 31 facilities (as well as administrative staff at headquarters or the academy and parole staff members) and 377 prisoners at 22 facilities with active cases. Active prisoner case numbers were down significantly from the beginning of the year when there were approximately 1,900. The highest number of active prisoner cases at the end of January were at Pinckneyville (83), followed by Big Muddy (77) and Danville (76). Outside community hospitalization for IDOC prisoners at the end of January included 10 prisoners with four on ventilators, this was reported to be down from approximately 40 hospitalizations and 12 people on ventilators at the beginning of the month.

A photograph of a handwritten note on lined paper. The text is written in blue ink and reads: "to hear from us at this time well I would like to say this 2020 has been very hard on both staff and inmates with this c-19".

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– Dixon

JHA's summary of updates, information, and concerns related to COVID-19 shared with JHA through outside contacts and through prisoner letters received in late December through January is provided below. This summary highlights questions, concerns, and details issues raised throughout the system. We share some of the concerns verbatim.

Please note: JHA is not able to substantiate much of the information shared. JHA has consolidated information received and shares it as an anecdotal resource. JHA believes that there will be wide variation in issues and practices over time and across the state. We are sharing the information we have received in order to promote system transparency and increase public awareness of how the pandemic is impacting people who live and work in Illinois' prisons.

In providing an anonymous summary of these reports, JHA staff have worked to limit identifying information as much as possible while still providing a substantive explanation of the concern in order to share as much as possible while protecting confidentiality.

Communications Summary: By the Numbers

COVID-19-Related Issues Fielded by JHA by Security Level of Prison*					
Issue Category	Security Level				Totals by Issue
	Minimum**	Medium	Maximum	Mixed***	
Quarantine & Medical Isolation	2	23	5	2	32
Time out of cell	-	10	2	-	12
Use of PPE - Staff	-	11	1	2	14
Use of PPE - Prisoners	-	2	-	1	3
Communications	-	13	3	-	16
Commissary	1	10	2	1	14
Dietary	3	6	2	-	11
Sanitation & Access to Hygiene Items	3	11	2	-	16
Access to Information	7	41	19	1	68
Medical Care & Mental Health	5	24	10	1	40
Staff Conduct	11	43	19	2	75
Totals	32	194	65	10	301

* Numbers do not include communications received from or about facilities that are out-of-state, Illinois county, federal, or unidentified, or any communications not related to COVID-19.

** Minimum-security prisons mostly use dorm style housing or housing other than conventional two-man cells.

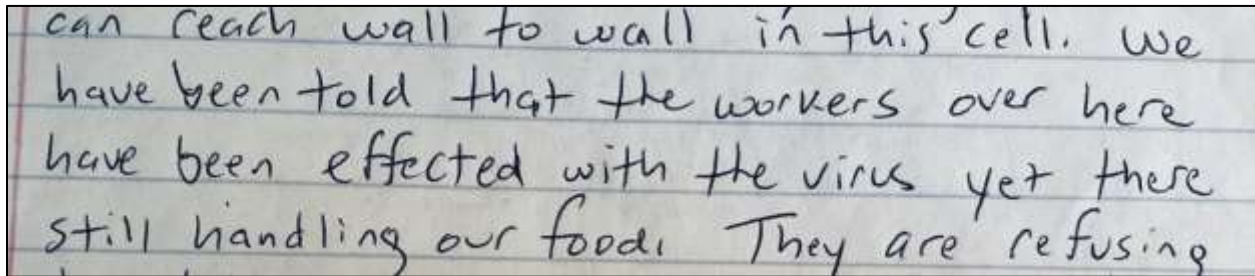
*** Mixed limited to Dixon, JTC, and Logan.

COVID-Related Issues Fielded by JHA by Illinois' Geographic Region*				
<u>Issue Category</u>	<u>IL Geographic Region</u>			<u>Totals by Issue</u>
	<u>Northern</u>	<u>Southern</u>	<u>Central</u>	
Quarantine & Medical Isolation	11	20	7	38
Time out of cell	6	4	1	11
Use of PPE - Staff	3	4	5	12
Use of PPE - Prisoners	-	1	2	3
Communications	3	6	5	14
Commissary	3	6	4	13
Dietary	-	4	3	7
Sanitation & Access to Hygiene Items	2	8	4	14
Access to Information	15	26	22	63
Medical Care & Mental Health	15	13	10	38
Staff Conduct	15	19	29	63
Totals	73	111	92	276

* Numbers do not include communications received from, or about out-of-state, Illinois county and federal, or unidentified facilities, or any communications not related to COVID-19.

** JHA received reports from the following facilities broken down by geographic region by IDOC: the Northern region included reports from Crossroads ATC, Dixon, East Moline, Fox Valley ATC, Hill, Illinois River, Sheridan, Stateville, and Stateville NRC; the Southern region includes Big Muddy River, Centralia, Lawrence, Menard, Pinckneyville, Robinson, and Shawnee; and the Central region includes Danville, Graham, Logan, Southwestern, Vandalia, and Western.

Quarantine & Medical Isolation



can reach wall to wall in this cell. We have been told that the workers over here have been effected with the virus yet there still handling our food. They are refusing

- Sheridan



When somebody tests positive for COVID-19 they quarantine you in a cell, they take all your belongings - all of your clothing, and I mean everything including underclothing, and give you some old clothing that somebody has used before, they take your own food and just put you in a cell like a punishment. – Illinois River



People going on hunger strike, people on suicide watch, some just plain crazy... A grown man cannot be locked in a cage 23 ½ hours a day and not go through severe psychological and physiological problems as gradually his mind and spirit and body atrophies. In the beginning, the COVID quarantine was tolerable as measures were not that drastic; inmates spent 1 hour in the dayroom, went to pick up their meals while observing PPE protocols, had yard time once a week. Those days are over, more drastic measures mean we are locked in except for 30 minutes a day for two cells at a time. It's been like this for 3 months now with no end in sight, and still COVID-19 infections are occurring... They doing testing frequently and every time 3 or 4 people come up positive and are placed on quarantine wing, which is the same as in general population except it has different label. – Danville



Locked down 23.5 hours a day – will we get time off our time? – Shawnee



I don't understand why it's okay for us to come out Mon, Wed, Friday during the outbreak but not the other days if we come out following each guideline. – Sheridan



In response to the concern raised by JHA regarding taking prisoners' property during isolation IDOC administrators responded, "Originally when we first got several offender cases, we did isolate the offenders on a wing with limited property in hope to reduce the risk of the virus contaminating their personal property. That property was also bagged and quarantined. We did start giving each offender their own property while they were isolated. Anything they did have was always cleaned and sanitized before they received it." JHA did receive a report that detailed that people were allowed to keep property in medical isolation at Dixon, although the letter expressed concerns including regarding lack of sanitation and hygiene items.

- As reflected in the above quotes, people continued to perceive COVID-19 restrictions as punishment and to express concerns about physical and mental health consequences of lockdowns. People reported uncertainty and distress regarding what protective measures were in place at prisons experiencing outbreaks and what should be occurring. Some people reported extreme deprivations during medical quarantines or isolations. Again, IDOC policies regarding medical quarantine and isolation have not been provided to JHA or made public despite repeat requests and ongoing dialogue.
- People at various facilities reported that prisoners who were known to be COVID-19 positive, or to have been exposed to COVID-19, were not quarantined, and were still preparing, serving, and delivering food between housing units. This concern has reportedly resulted in some prisoners choosing not to eat the food provided.
- Additionally, people reported concern about staff who were sick not staying home and quarantining for the recommended period. IDOC administrators have said that staff need medical clearance to return to work; some staff have pointed out some people would prefer to stay home the full two weeks, implying extra time off, but that is not the CDC guidance.
- JHA received numerous reports from family members and prisoners that people who were COVID-19 positive and negative were housed in the same housing units and were not separately cohorted. Where they were, positive and negative prisoner cohorts were not social distancing from each other. This information was not confirmed by IDOC, but JHA notes the prevalence with which this concern was shared.
- Others expressed concerns regarding ongoing housing movements. Several people reported testing COVID-19 positive after being housed with a new cellmate who had previously been

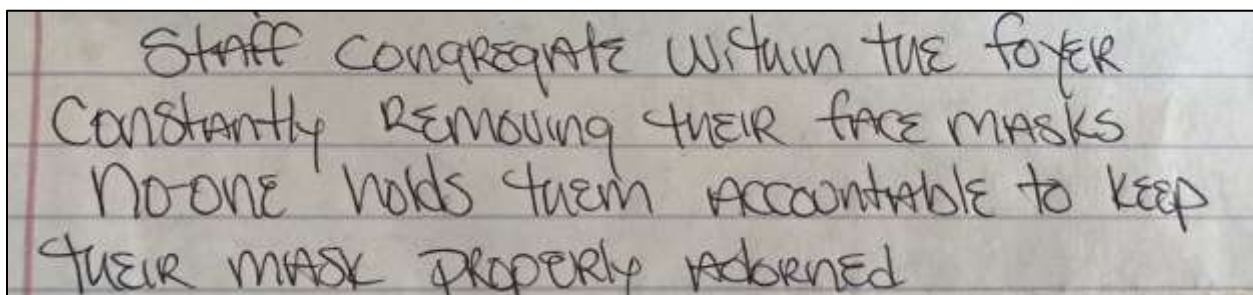
housed on a wing with COVID-19 positive prisoners. Some reported that cellmates were not COVID-19 tested prior to being moved.

- Some people reported staff were conveying some dangerous misinformation about countering COVID-19 absent official guidance. At Danville some people reported that they believed Danville administrators were intentionally attempting herd immunity with housing movements. Someone at Lawrence wrote housing moves continued and *“the message is the faster everyone gets infected and recovers the faster we get back to normal, yard, dayroom and commissary.”* Someone at Shawnee wrote that there were days with no heat when the outside temperatures were in the mid-30s and upper 20s at night: *“The reason they told us is to stop the COVID virus.”*
- People continued to report fear after learning about COVID-19 outbreaks and deaths, as well as concern about the lack of consistent protocol for disinfecting spaces, wearing of PPE, and moving prisoners. Some people reported that correctional officers had shared these same fears about inconsistent practices with them.
- JHA received reports from family members and prisoners concerning limited out-of-cell time, with some people providing specific details about time ranging from 15 to 30 minutes, inconsistent practices of not always making the full time available, or out-of-cell time being skipped entirely on some days and shifts. Restrictive housing, which is a practice that IDOC is trying to move away from due to its harms, is typically defined as 22 or more hours in cell. Some prisoners even reported gaining weight – as much as 15-20 pounds – during COVID-19 lockdowns that they attributed to the lack of out-of-cell time to walk or work out.
- JHA received concerns from people stating that they do not believe staff are held responsible for not running out-of-cell time properly or safely. JHA shared with IDOC administrators that people may not be aware of what is supposed to be occurring and whether they are cohorted (i.e., purposely grouped with others who are also COVID-19 positive or negative), as the protocols for quarantine and shower/phone time have not been made available to people in prison, their loved ones or the public.

IDOC provided JHA with charts of general information detailing what facilities are providing for out-of-cell time as of November 18th and as of January 14th. While several communications received by JHA from both Big Muddy and Danville reported being given 30 minutes of out-of-cell time for dayroom, this IDOC data does not get more specific than stating dayroom time is provided “daily” at Big Muddy and “daily for 3 days continuously then 1 day off” at Danville as of January. This does not indicate the length of time out-of-cell for dayroom. November information from IDOC indicates that dayroom out-of-cell time at Danville was provided 30 minutes daily with alternating times throughout the day at that time. People recently reported to JHA that Pinckneyville had 15 minutes of dayroom out-of-cell time, and similarly IDOC data reports dayroom time is being given “daily.”

In regard to frequency of showers, IDOC responded to JHA stating that prisoners are allowed out to shower and use the phone even when on medical quarantine, and that each month’s schedule is on file at the facility. According to the IDOC data from mid-January, the vast majority of facilities reportedly allowed out-of-cell time for showers daily except for Centralia (every other day); Danville (according to dayroom schedules with showers daily for three continuous days with one day off); Kewanee medical quarantine (four days a week); Menard (three days a week); Stateville (three times a week); and Stateville Northern Reception and Classification Center (four times a week).

Use of PPE (Personal Protective Equipment)



– Danville

COs aren't wearing their masks properly, they are using dayroom bathrooms, sticking their bare hands into our ice buckets, and coming into our cells and touching our belongings leaving germs and bacteria. I feel that because of these practices this prison is going to kill me!

– Pinckneyville



When staff are not wearing their mask correctly or any PPE at all, everyone knows that mentioning it will cause you problems and retaliation. The nurses come around passing out meds without wearing their mask up over their mouth and nose. It's a chin strap for most and very, very rarely is full PPE even worn on the wings and protocol followed. – Graham



Guards don't wear their masks, and you can tell when they are visibly sick. We write grievances but get them sent back with no response. When I told an officer to please respect boundaries because he had no mask on, he made me vacate my room, he took my food and stomped on it, took my drinking cup and threw it in the toilet. He then put me back in my room and coughed on me and slammed the door on me. I wrote a grievance but that got sent back with no response.

– Shawnee



- JHA continued to receive a number of reports from family members and prisoners about staff not wearing their masks or not wearing them consistently. Reports with general statements such as “staff don’t wear their masks” or “there’s a lack of mask wearing by staff” were sent from or about Danville, Dixon, Graham, Lawrence, Pinckneyville, and Shawnee. More specific reports stating, “nearly all staff,” “much of the staff,” or “a lot of the staff” do not wear their masks came from Big Muddy, Illinois River and Sheridan. Of particular concern, several people reported healthcare staff not complying with PPE requirements.
- Several people wrote that staff are not held accountable for not wearing PPE properly, if wearing it at all, and that staff are disciplining prisoners for not wearing PPE properly.
- People reported that some supervising staff for prisoner assignments (including dietary) refused to wear masks, and that people who questioned that practice were threatened that their job assignment would be taken away along with other negative consequences such as withholding pay for work completed and receiving a disciplinary ticket that could impact other future opportunities and privileges.

- Prisoners reported having to reuse their masks. For example, someone from Dixon reported having to wear the same mask for a two-week period of time before being issued a replacement. Additionally, one person reported in great detail that the collection of used PPE on quarantine units was not occurring according to protocol.

JHA contacted IDOC administrators with representative examples of all of the above reported concerns. IDOC represents that pandemic protocol is to issue prisoners new KN95 masks weekly, or upon request when masks are soiled or damaged. However, it is [better practice](#) to rotate use of multiple masks than to reuse the same mask. JHA is unaware of IDOC adapting to this practice. IDOC administrators also stated that when masks are disseminated, used PPE is also collected, bagged, sealed, and disposed of, but JHA was told that this will be reiterated to staff.

IDOC stated that administrators and signage are constantly reminding staff and prisoners about social distancing, mask wearing and hand washing. IDOC continues to report that there is a zero-tolerance policy in place requiring strict adherence to PPE requirements for all staff and prisoners. IDOC further reports that staff and prisoners are monitored daily, frequently reminded of the importance of properly wearing PPE, and that corrective action is initiated for those who are caught violating the policy (e.g., staff that have been seen not wearing PPE properly have been investigated and given discipline, and a log is kept by the Chief Administrative Officer (Warden) documenting people not wearing their mask correctly). Progressive staff discipline was explained as being similar to what is supposed to be used with prisoners: that at first the person would be told to fix their mask and given a chance to comply, then they may get a formal verbal or a written reprimand in their file, then they may have to have a disciplinary hearing where further consequences could be imposed.

Communications

How are you supposed to take a shower and talk to people on the phone in 15 minutes! And on top of that, they are so inconsistent with the way they run it that you don't know if you are going to get it for the day. This is a very stressful situation for us and for our family who worry about us. – Pinckneyville



- Given limited out-of-cell time, use of phones and kiosks is restricted. Some people reported being told they would have to choose between taking a shower and calling their family.

- People at various facilities report delays in mail. Reports from Sheridan and Lawrence reported delays of almost two months, while emphasizing the importance of communications at this time. Someone reported that mail was frequently given to other prisoners, implying that staff were not checking identification when passing mail. Others reported mail tampering, including mail getting flagged and returned without the required explanation. JHA received a couple reports from Lawrence and Pontiac about [privileged](#) legal mail being opened outside the prisoner's presence. Additionally, we received a report that a prisoner was unable to write to the IDOC Director.

JHA addressed representative mail concerns with IDOC administrators who responded that, "Mailroom concerns are addressed individually with each complaint. Offenders are reminded to share with their families the mail rules that are posted on the IDOC website. If those rules are not followed mail is returned to sender." IDOC's website pertaining to the incoming mail rules is [here](#). JHA encourages more specific public information be shared with prisoners about what will be censored. IDOC administrators responded that mail sent from prisoners to the Director are processed at the facility level, then the facility Warden is made aware of any concerns and is directed to respond.

- JHA has received ongoing reports and concerns related to problems with video visits. Several people reported staff had falsely told their visitor that the prisoner had cancelled the visit. Outside family and supporters reported visits not starting on time, being cut short, technology issues preventing connection, and/or not getting money back for missed or shortened visits.

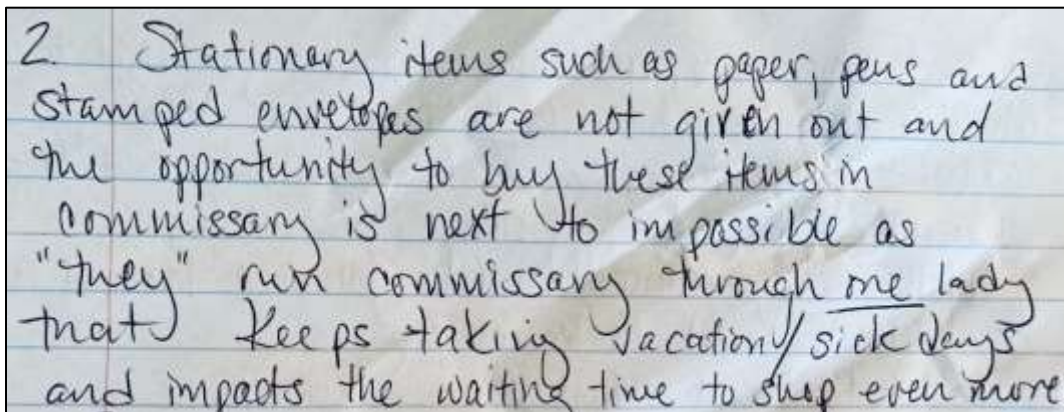
JHA contacted the facility administration about concerns regarding video visits being cancelled. JHA was not surprised video visits were cancelled given that the reports were made during an outbreak but encouraged the facility to communicate the rationale for the cancelled visits and to do so in advance. Additionally, having more public information about use or extent of medically quarantined units at a facility would help families appreciate this. It is clear from our communications that people believe these cancellations are occurring arbitrarily. IDOC has not responded to these renewed video visitation concerns reported by JHA.

- Some people reported concerns that emails are being censored for expressing political views or opinions about the facility. People reported being charged for these unsent censored emails

and having no recourse to correct or appeal, unlike with mail censorship. Further, people reported they are not told the rules for these communications and that there is inconsistency between staff regarding what will be permitted, making it harder to predict. As with mail rules, JHA recommends that the Department make clearer guidance about impermissible communications publicly available and allow for review/appeal process.

- JHA continues to receive requests related to GTL, asking for expanded access to a digital law library and improved signals so that subscriptions can be used and families can be contacted reliably.

Commissary & Property



2 Stationary items such as paper, pens and stamped envelopes are not given out and the opportunity to buy these items in commissary is next to impossible as "they" run commissary through one lady that keeps taking vacation/sick days and impacts the waiting time to shop even more.

– Stateville NRC



I'd like to know the laws regarding them passing out proper hygiene. The facility does pass out one bar of soap and one roll of tissue weekly, but with not shopping every 30 days, I need toothpaste and deodorant. When we do shop, we are limited to 4 bars of soap, 2 deodorant and 1 toothpaste. I have enclosed a printout showing how frequently we've been able to shop, with a 6-week gap back in the fall, and now since 11/19/20 I have not gotten to shop and it's been 5 weeks and they tell us we're not going to shop again until Jan 4th. They only sold us hand sanitizer once and only a few inmates got it. There was no memo ever posted telling us what hygiene supplies are available, we find out by gossip. – Danville



We've been on quarantine since September. As for me being here on a writ without my property, I've been here almost a year without my TV, hot pot, or Mp3 player. None of the writs have their property. – Danville



- Common issues reported included not having opportunity to shop at commissary offered frequently or consistently enough and lack of commissary options, including hygiene supplies being limited.
- People on writs or in reception often have very concerning property and shopping limitations. JHA continues to hear of individuals held in reception facilities unsuitable for long stays for months.
- Some people also reported when they were moved to different housing units this could significantly delay their opportunities to shop and no special allowances were made. Others reported facilities changed the order that housing units were shopped resulting in extended delays between opportunities.
- Several people requested JHA provide any laws or department rules related to commissary and dietary, indicating a need to clarify what should be expected.
- People reported commissary concerns that related to communications and even access to the courts. For example, JHA received a report that a prisoner was not able to appeal a denied grievance within the required time period because he was unable to go to commissary to purchase necessary writing utensils.

JHA again reported specific examples of concerns related to commissary to IDOC administrators, sharing concerns about the length of time between opportunities to shop, and as a result people running out of necessary hygiene items. IDOC provided JHA with a recently approved standardized commissary schedule set as of mid-January, with shopping limits determined by security level and disciplinary grade. IDOC represented this updated schedule was to be applied to everyone across the state, even during COVID-19 quarantines. JHA has heard some staff concerns about ability to implement the new shopping schedule. For those without grade restrictions, the schedule is as follows: twice a month shops with \$100 limit per shop for maximum security facilities; once a week shops with a \$150 limit per shop at medium facilities; once a week shops with a \$200 limit at minimum facilities. IDOC administrators stated the only exception is for people on B-Grade and C-Grade who will have a monthly shop and [\\$30 limit](#). IDOC also stated that each listed spending limit does not include permit items or art supplies. Reports provided to JHA are not yet consistent with this standardized plan, but JHA recognizes that reports received in January would not necessarily reflect these recent changes and that changes may take some time. We also note many other correctional systems exclude communication purchases (write-outs, phone minutes, emails, etc.) from spending limits and we believe this is best practice and should be adopted in Illinois. Making uniform, predictable, more generous commissary rules is a step in a positive direction.

Dietary

We inmates eat off the same plastic trays every day. Inmates keep getting COVID in different buildings and I was wondering should they be feeding us off Styrofoam trays instead, considering the first time someone got sick with COVID they passed Styrofoam trays out?

– Western



The trays of food we are receiving are way under the daily 2,000 calorie requirement. Plus, the food is cold. We are having the hardest time shopping, which is important because the trays don't have enough food on them. – Big Muddy



- Numerous prisoners and loved ones reported concerns related to dietary workers continuing to work and serve food while exhibiting COVID-19 symptoms and staff and workers not adhering to COVID-19 protocols while preparing the food. The fear of catching COVID-19

through the food was reported as the reason for several people not eating the food being served and relying even more on food purchased in the commissary.

- In addition to reported issues of reduced food amount, inappropriate serving temperatures, concern about cleanliness, or lack of freshness, people frequently stated food served was not in compliance with dietary menu requirements based on caloric intake, that there was repetition of meals, or that meals lacked essential components.
- Some people reported issues related to being fed in their cells, including only being permitted 5 – 10 minutes to eat, dirty trays and cold food.

JHA reported concerns about worker health screenings to IDOC administrators who responded that all people working in Dietary are temperature checked before and after their shifts, and that anyone showing symptoms does not work. Further they reiterated that all staff are screened daily before entering the facility and are sent home if they are showing symptoms. IDOC administrators also responded that all plastic trays are run through the dish machine after each use, and that Styrofoam trays are used on Quarantine or Isolation wings. When JHA reported other representative examples of dietary issues to IDOC administrators, one surprising response was that the facility was not aware of any complaints.

- JHA also received some concerns about drinking water. For example, a prisoner reported not being able to drink the water at Pontiac due to there being a foul smell and black specks in it. In another instance, JHA requested that people at Pinckneyville be given greater access to drinking water during the town-wide boil order as reportedly people were at best getting a cup with meals and not throughout the day as needed or with medications.

Sanitation & Access to Hygiene Items

I should mention they do give us one small bar of hand soap a week. It is not even antibacterial. That & the mask are the only protection we have. Clearly what they claim

– Big Muddy



We've currently been quarantined since March 11, 2020. During this time we've been placed in cells with limited access to cleaning supplies. For the last three months we have not been allowed to clean our cells nor have we had consistent access to commissary which would allow for us to purchase proper hygiene. Basic necessities have been refused, several times inmates have had to go on crisis watch because we were refused showers, commissary and access to the outside world. – Illinois River



- Several people requested to be provided with the rules related to access to hygiene items, concerned about the lack of provided hygiene supplies or being given the opportunity to buy them in commissary. A couple of prisoners from Big Muddy reported receiving one bar of soap weekly, and IDOC provided data confirming a 4.5 oz. bar of soap is provided to each prisoner at Big Muddy weekly. This is a larger size than provided at some other facilities; several facilities reportedly provide two 1.5 oz bars per week. Again, people did not seem to have been provided with the CDC or other health authority information suggesting that regular non-anti-bacterial soap is effective against COVID-19.
- As noted above in the Communications section, numerous people reported that the limited out-of-cell or dayroom time available does not permit them to use the phone and shower, so they must choose between the two.
- JHA received reports about lack of social distancing being observed during showers and showers being unsanitary or broken, resulting in more crowding.
- Some people wrote reporting issues related to having incarcerated people in porter jobs and responsible for cleaning, given the importance of maintaining sanitation during COVID-19. One person felt that there were not sufficient standards or screening for hiring or maintaining porter positions, noting that porters “running stores” was a common problem, and it was recommended that porters be drug tested. There was also an impression that security staff did not address porter issues.
- It was reported by people who were COVID-19 positive and in medical isolation that no hand soap or cleaning supplies were given.
- Some people reported that isolation cells were unclean and that when COVID-19 positive people were moved out of cells they were not properly sanitized.

In response to issues raised regarding porters, IDOC stated the facility has trained the porters in the buildings and have strict cleaning schedules that must be adhered to and surprisingly responded that they “have not seen nor heard of offenders running stores or trafficking meds.” This is quite a common issue within corrections that should be monitored to ensure safety.

When JHA reported a representative detailed concern regarding conditions in medical isolation to IDOC administrators, they responded that the isolation area in question is sectioned off and sanitized daily and stated that when a person is removed from Quarantine/Isolation, they have a trained cleaning crew sanitize the cells from top to bottom.

- People echoed JHA’s recommendation that outside health inspectors should visit IDOC facilities. For example, someone at Southwestern wanted the Illinois Department of Public Health to tour their facility.

Access to Information

We've been treated inhumane and offered no explanation of why. Since Thanksgiving we have been completely shut in and shut out with an exception of a 20-minute call every 4 days and a 10-minute shower. Today 12/23 is our shower day, yet we were told that we would not receive showers nor phones when asked for a reason none was given. – Illinois River



The law librarian has been refusing to copy Grievances and is preventing inmates from getting their own copies to keep of Administrative Directives, which are needed to properly complete grievances. She told me that I can only review Department Rules and Administrative Directives, which we know is not true. – Menard



Of the 26 requests and 8 grievances I've submitted only about 20% have been returned, and 5% have been addressed. I have submitted 17 requests and 3 grievances to see a counselor to

get some questions pertinent to my ability to be released answered. Between August 2020 and today, no counselor has met with me. – Centralia



As inmates it is understood that we are entitled to recreation, kiosk/video visit access and emails, haircuts/grooming, and the staff here simply doesn't care and or simply answers "COVID-19" as if this 4-syllable answer is enough to suspend our rights. – Stateville NRC



- JHA received calls and outreach from family members and loved ones of people in IDOC looking for basic information about what is happening inside the facility where their loved one is incarcerated; as we have repeatedly raised with IDOC, many of the questions could be answered by having the IDOC protocols publicly available.
- Several people different facilities reported concerns about the law library. Prisoners from Dixon, Lawrence, Stateville NRC, and Western referenced not being able to access the law library or legal materials with COVID-19 protocols in place. Someone at Hill reported he could not go to the law library because he could not walk up stairs. Other reports from Lawrence, Menard and Western were concerned about staff refusing to provide copies of specific case law, department rules or Administrative Directives, or grievances. JHA's understanding is that it is common within IDOC that grievances will not be copied prior to receiving a response. Many people would like to be able to retain a copy of the grievances they file.
- Several people reported concerns related to grievances: some say they were unable to get grievance forms, have not been able to get access to the rules to properly complete their grievance form, have had their submitted grievance forms thrown in the trash, and many report that grievances have gone unanswered.
- JHA has received requests for department rules and updates related to many areas, including dietary, recreation, commissary, clothing and bedding, legal mail, restrictive housing, and sentencing credits.
- Others reported requesting information on Center for Disease Control (CDC) and Illinois public health guidelines on COVID-19 but being denied this request.
- JHA continues to receive reports of some staff being inconsistent, dismissive, rude, and unprofessional when people who are incarcerated attempt to obtain information from them. In particular, JHA has received a concerning number of reports regarding healthcare staff not

providing information including test results or appropriate information regarding follow up care, which is discussed further below in the next section.

- JHA also received several requests for an explanation of how the Illinois Criminal Justice Reform Omnibus Bill [HB 3653](#) impacts a specific prisoner. This bill was passed in January by both the Illinois Senate and House and is awaiting Governor Pritzker's signature. He has expressed his support for the bill. Among the many provisions in this bill, changes to earning sentence credits and length of time someone is on Mandatory Supervised Release impact people inside Illinois prisons. Much remains to be seen in terms of whether provisions will change due to newly introduced legislation and how provisions of the bill will be implemented if this bill is signed into law.
- Family members and prisoners contacted JHA asking for information about the possibility of, and timeline for people incarcerated in Illinois to receive the COVID-19 vaccine. IDOC has shared some vaccine updates and educational materials including materials from community groups with their population, on their [webpage](#) and via their social media.
- Some people expressed concern about lack of Warden rounds on isolation wings and lack of responses to kites.

Medical Care & Mental Health

They are refusing to let me see a Dr., nor will they allow me to see paperwork or documentation showing my positive results for my COVID test. I've written requests, medical requests, and grievances to no avail. – Sheridan



I arrived at Pinckneyville in September, and in October my cellie and I were tested and the results came back positive. I was in extreme pain, my whole body was hurting from my head to my toes, for about 2 days straight I was throwing up blood, coughing, sore throat, and headaches. I had no taste or smell and my breathing was very poor. I couldn't eat for about 4 days, I just drank liquids and was in fear for my life, and I thought am I going to die in this cell by myself? As the days went on, the fear settled in harder, because my window overlooked the parking lot, and all I could see is the county ambulance pulling up daily to remove one of us positive virus inmates and no one was returning. That same day, we got word that two inmates

died. I decided to call my wife who picked up the phone and I could hear the crying in her voice, she said the facility called her a few days before and told her that I was very, very sick and had tested positive for COVID-19. I'm a living witness that the officers have not given us any cleaning supplies, no bleach, no hand sanitizer, nothing. – Pinckneyville



A lot of the medical staff could do a better job looking in on the older inmates with C-19. I was in an isolation cell for 12 days I never did get to see any doctor... never seen no wardens come on the isolation wing to talk with us sick inmates. I wrote to the Warden's office... never no answer from them. – Dixon



We are not offered any type of mental health. Not once in almost a year of lockdowns have I been asked or offered help for my mental state. The toll it has taken is horrible. It has also been absolutely terrible on my physical health. – Big Muddy



There's so many reasons a person's mental, physical and rehabilitational health are jeopardized it's sickening. I'm aware things have been much worse prior to associations such as yourself. – Decatur



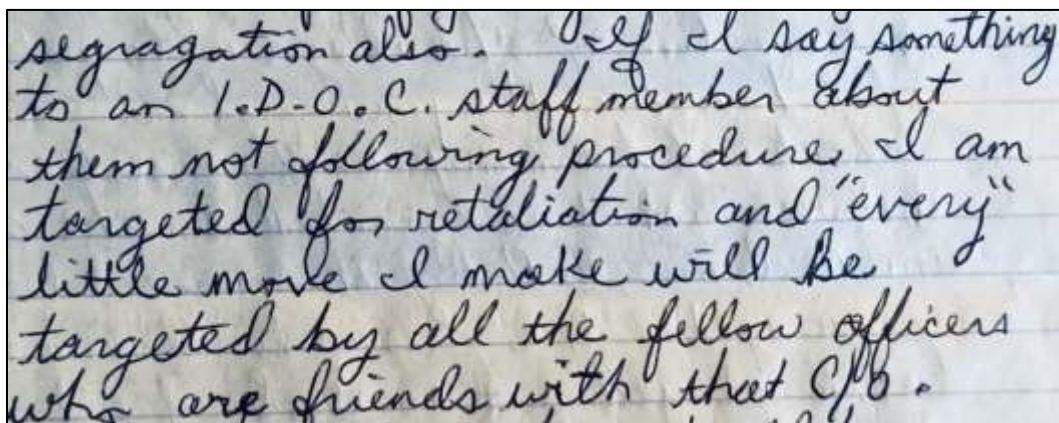
With depression and suicide numbers on the rise by people who have their freedom, what do you think is going on inside the prisons? – Big Muddy



- Multiple family members and prisoners report lack of healthcare and dental services due to administrative quarantine measures, including no refilling of prescriptions, lack of pain medications, delayed scheduling of outside surgeries and procedures, and a problematic lack of communications among providers, records office, and patients or their families.
- Some people reported being told by the facility that their medical requests were being denied because of the pandemic.
- Someone reported that staff were not checking identification when passing out medications, resulting in mistakes and missed dosages.

- Several people reported continued concerns about prescribed CPAP machines being taken from prisoners with known pre-existing conditions as part of IDOC COVID-19 protocol. JHA has previously discussed the removal of CPAP machines with IDOC who have confirmed CPAP machines are being taken in settings where they are dangerous for spreading COVID-19 via aerosoling.
- JHA received calls and outreach from family members concerned about their loved one's mental health after being locked down and in near "solitary conditions" for months.
- JHA received some reports regarding mental health staff discussing healthcare information with officers. This issue was reported to IDOC.
- Some people reported untreated Vitamin D deficiencies, which is more concerning at this time given that research shows Vitamin D might help fight COVID-19, and prisoners are lacking sun exposure and choice of food or supplements. This concern was reported to IDOC.
- Prisoners reported healthcare not being responsive to concerns.
- Someone who previously received a prescribed special diet tray due to a medical diagnosis, wrote to JHA that the facility doctor reportedly denied the accommodation before reading his medical background based on a determination that the facility was giving away too many special diet trays.

Staff Conduct



segregation also. If I say something to an I.D.O.C. staff member about them not following procedure I am targeted for retaliation and "every" little move I make will be targeted by all the fellow officers who are friends with that C/O.

– Graham

Every time I would try to ask an officer a question, I get a sarcastic answer or get disrespected by getting called out of my name. I wrote a grievance and it was never received. After the grievance was sent to [an officer] he tried to intimidate me and told me it wasn't going to do anything. – Vandalia



These officers are taunting and harassing people, especially the SMI [people designated as Seriously Mentally Ill] inmates. These officers need to be investigated because my cellie almost got killed by the officers and no one is addressing the issue. – Pinckneyville



I overheard staff say they are purposely bringing in COVID to get two weeks off with pay. – Lawrence



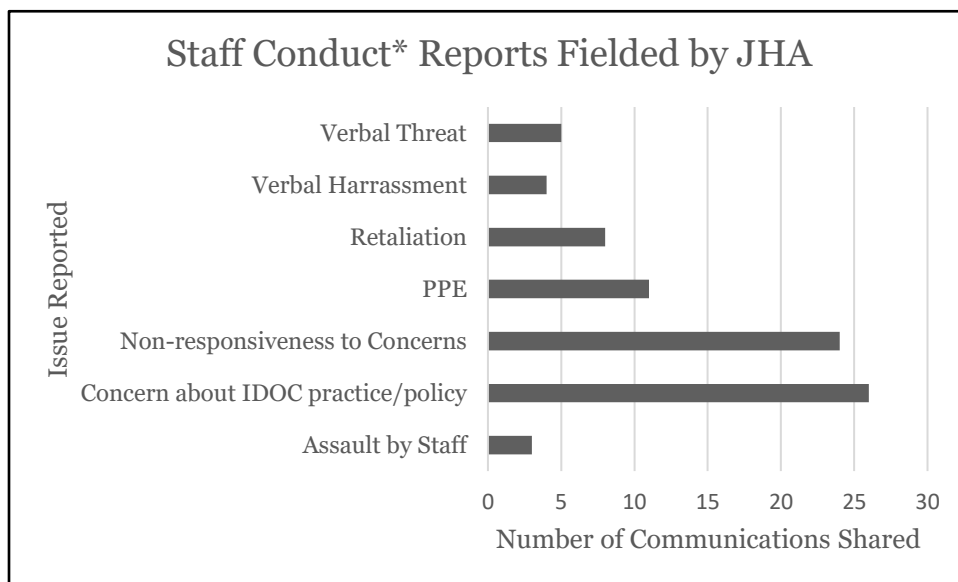
[Staff] walked by our cells saying 'Brianna Taylor and George Floyd deserved their fate.' They repeated this more than once. – Illinois River



- The lack of recourse or accountability for staff misconduct is frequently referenced in reports to JHA. We received outreach from some family members concerned about staff who are targeting their loved one reporting use of threats and obscenities. We encourage prisoners and their supporters to document and grieve these issues so they can be recorded and investigated. This is an area where increased data collection, independent oversight, and an improved grievance system are required.
- People continued to express concern regarding grieving staff conduct when they do not know the staff person's identity. For example, a prisoner reported that staff did not have their name or number on their state uniform. JHA has repeatedly communicated concerns with IDOC administrators over the past years about staff not wearing visible identification as required. Previously, JHA was told that staff were being allowed to send uniform shirts for embroidery with their names to the Danville Illinois Correctional Industries shop or could get the embroidery of identification done themselves using the approved font. IDOC must ensure that all staff show identification; the delay due to the excuse of uniform switches is tired.
- Prisoners have also reported being threatened or given tickets for insolence when they ask for staff identities. Based on reports, people believe they cannot write a grievance or be

successful with a grievance regarding staff conduct without this information. JHA does not believe this is true, and that prisoners should be able to grieve instances without this information according to [the rule](#), which states, “The grievance shall contain factual details regarding each aspect of the offender's complaint, including what happened, when, where, and the name of each person who is the subject of or who is otherwise involved in the complaint. This provision does not preclude an offender from filing a grievance when the names of individuals are not known, but the offender must include as much descriptive information about the individual as possible.” It is IDOC’s responsibility to know which staff are assigned to areas, particularly given that the issue with lack of visible identification is widely known and longstanding.

- Various reports from people who are incarcerated and their supporters indicate that trying to ensure COVID-19 best practices are complied with gets them labeled “snitches” and subject to staff retaliation.
- JHA received reports of officers discussing prisoners’ cases with other prisoners, which is prohibited. This issue was reported to IDOC.
- JHA also contacted IDOC administrators regarding some reports of discriminatory practices for housing moves and use of discipline at a particular facility. JHA requested that the Facility Racial Disparity Committee track and reviewing these reports of racism per [agency rule](#). JHA continues to request results of such reviews and that deidentified information be made public.



* Staff Conduct is used to indicate a report of something staff did or did not do.

JHA encourages you to continue to share your experiences and the information you are hearing from people who are incarcerated by leaving JHA a detailed voicemail message at (312) 291-9183 ext. 208 or completing our online form [here](#). JHA will continue to share information received and hope you will continue to provide updates.

Through the correspondence we receive, JHA is aware that people incarcerated in Illinois need more access to information and legal assistance. As an independent prison monitoring organization, we are documenting this issue and advocating for resources to be made available to people in prison so that they can access essential information that impacts their lives and better advocate for themselves. The letters, phone calls, and emails we receive continue to inform our work and drive our advocacy efforts. For everyone who contacts JHA seeking individual recourse or representation, we appreciate your understanding that JHA does not have the authority or capacity to provide either of these things, but the information shared with us provides increased transparency on what is happening inside and fuels our reform efforts.

This report was written by JHA staff. Media inquiries should be directed to JHA's Executive Director Jennifer Vollen-Katz at (312) 291-9555 x205 or jvollen@thejha.org

Incarcerated individuals can send privileged mail to report concerns and issues to the John Howard Association, P.O. Box 10042, Chicago, IL 60610-0042. JHA staff are reading every letter and tracking this information to monitor what is occurring behind prison walls and to advocate for humane policies and practices. Family and friends can contact JHA via our website www.thejha.org or by leaving a message at 312.291.9183 x208.

Since 1901, JHA has provided public oversight of Illinois' juvenile and adult correctional facilities. Every year, JHA staff and trained volunteers inspect prisons, jails, and detention centers throughout the state. Based on these inspections, JHA regularly issues reports that are instrumental in improving prison conditions. JHA humbly thanks all the persons who agreed to be interviewed for this report and who graciously shared their experiences and insights with us.



The John Howard Association was the proud recipient of the 2015 MacArthur Award for Creative and Effective Institutions