

## **Questions/Suggestions by the Family Advisory Board Responses by Kyle Kaminski – MDOC Administrator**

### **PAROLE**

#### **Will the parole process for those past or near their ERD be expedited?**

The parole board is reviewing cases that are parole eligible, as well as those approaching parole, including cases they previously continued or placed on deferral status. This does not mean all post-ERD prisoners will be released, as the board must still ensure each case doesn't present a risk to public safety, but they are reviewing eligible cases. The Parole Release unit has expedited its release processing, including moving up a number of approved paroles. There is still a law in place that requires 28-days' notice to any victim and the prosecutor before the physical release of the prisoner. We are going to be seeking waivers from prosecutors to allow release prior to 28 days (but after ERD), but we must still abide by the 28-day rule if the prosecutor will not waive it.

#### **Will an inmate be paroled if they are actively showing symptoms?**

This will be addressed on a case-by-case basis. If a prisoner is quarantined on their parole date, a discussion will occur with the prisoner, their home placement, and the local health department. If a determination is made that the prisoner can be safely released to recover at home, that will be considered, and the parole may still occur. If the prisoner cannot be safely released, their parole would be delayed until they have recovered.

#### **What if a parolee shows symptoms immediately after release, who is responsible for their care?**

We are working to expedite Medicaid eligibility for all releases. If a parolee believes they are ill, they would need to contact the local health authority, hospital, or their family doctor to receive care.

**Are all parole offices closed? What is a parolee to do if they cannot report (even via phone or email) because of illness?**

All parole offices are physically closed at this time. Agents are making contact with parolees in the community, via phone, or facetime when needed. If a parolee is ill, they or their family member would simply contact the agent (parolees have their agents number).

**INFORMATION TO THE PUBLIC**

**Can MDOC do regular press releases, or, even better, press conferences specifically addressing the concerns, questions, and suggestions of the families and loved ones of those inside?**

All “official” communications related to COVID-19 must go through the State Emergency Operations Center. The MDOC has attempted to provide multiple updates to the prisoner population and staff multiple times each week, as well as adding relevant information to our website.

**When deaths resulting from this virus occur inside, will MDOC identify them as such on their chart?**

We are looking at launching an enhanced chart in the near future, but the final design has not been completed. I will share the request that deaths be included.

**Have the case count differences between the MDOC site and the Michigan.gov site been reconciled?**

We are still working on this, but DHHS is drawing its numbers from local health authority reports, not the MDOC. It appears there is a discrepancy of two cases, which were likely mischaracterized by a local health authority. These are likely either parolees or jail inmates. The MDOC has requested that these figures be changed to reflect the true MDOC prisoner count, but to date, DHHS has not done so.

**Can any new or updated information on the MDOC Corona main & FAQ page be identified as "New" or "Updated", along with the date?**

We are working to refine the Medium page to hopefully make it more user friendly.

**It seems as though certain COVID-19 protocol is being left up to the individual facilities, in the case of identifying those who have come in contact with symptomatic prisoners.**

This is not accurate, there is one COVID-19 protocol that covers all facilities and healthcare consistently determines who meets the definition of a "close contact".

### **MDOC COVID-19 PROTOCOL**

**Receiving many reports of those being isolated not being able to bring ANY property with them. In essence, they are being punished for being in proximity to someone who was symptomatic. Is this formal protocol? What can be done to ease those restrictions?**

Prisoners in isolation cannot have property as it inhibits proper cleaning. This is not punitive, it is necessary because COVID-19 can live on certain surfaces for multiple days. Based on the advice of Healthcare, we are not considering loosening this at the current time, as it is key to stopping the spread of the illness.

**Are older inmates and those with underlying health issues being isolated in every facility? Is there a formal policy surrounding this?**

It is impossible to isolate all older prisoners, because they are interspersed into the MDOC population. We have instituted special protocols for sites with older or fragile populations, including Lakeland, Woodland, Detroit Reentry Center and Duane Waters that seek to isolate the special populations at those sites.

**Will staff make an extra effort to make sure that any prisoners showing symptoms have signed, up-to-date medical release of information forms on file?**

Yes, during the daily call with the Health Unit managers they have been told to speak with all prisoners being placed in quarantine to offer them the opportunity to sign a medical release to ease information sharing.

**Regarding Money - What is the formal arrangement regarding the extra money allowed for store? Can families put more than \$50 per month on accounts during this crisis without fear of it being withheld for fines/restitution, etc.?**

The system around court fees and restitution is established by law and the MDOC cannot waive it. 50% of the total monthly deposit in excess of \$50 is subject to collection for these costs.

**Regarding Bleach - We are hearing from some facilities that individual prisoners are not being given access to bleach -only porters and staff in some cases. Is this policy? Or are individual facilities free to create the policy as they see fit. If the pure liquid form is the concern, what about wipes?**

Assigned prisoner porters have access to bleach to clean in the housing units. Bleach is a dangerous substance, so its use must be tracked and supervised, so it cannot be distributed to all prisoners. Porters are responsible for cleaning within the unit. Non-bleach cleaners, which are just as effective, are available to other prisoners if they so choose.

**Who is the contact at MDOC for coordinating donations of cleaning supplies/masks/soap/etc.? If there is no one designated as such at Central Office, are facilities free to accept donations as they see fit?**

Facilities cannot receive donations. The MDOC has its own janitorial supply factory (which also makes soap) and sewing factories that are now making masks for all prisoners and staff.

## **FAMILY COMMUNICATION**

**Who is the medical contact for anyone who believes their loved one is symptomatic or at serious risk and is not being attended to? Who do they contact if their messages go unanswered?**

Families should contact (517) 335-2263 or BHCS-Communications@michigan.gov. Families reporting a loved one who may be ill should leave the prisoners name, number and location and healthcare will have them assessed. Families should not expect a call back on these requests, as we are receiving record call volumes and healthcare staff must be focused on care. We will call out prisoners, provide services and communicate with the prisoner. Families should also not be calling simply to report that their loved one is older, or has an underlying medical condition. We are aware of those facts and spending time fielding general calls of that nature takes health care staff away from screening and treating prisoners.

**What are the details on cordless phone access for the ill? Do all facilities now have them? How often can families expect to hear from their loved ones in those circumstances? If phones are not available, will MDOC list those facilities so that families will know what to expect?**

Most facilities have phones available, but a few do not currently have portable phones that work in some quarantine areas. We are working directly with the phone contractor to get those installed ASAP. The greatest impact at the moment is parts of the Macomb Facility and the Cotton Facility. Frequency of calls will depend on the number of prisoners that must utilize the phone, as it must be sanitized between uses. The practice has allowed prisoners to place a call to family.

**Request fast-tracking the ability to implement video calls (as always, with the understanding that they will never replace contact visits)**

While the MDOC is reviewing video calls, we have no ability to fast track this project more quickly than the timeline provided by the contractor. A final decision has not been made about the deployment of this technology. quarantine so that the family is aware of their condition.

**Folks calling some facilities are being hung-up on. Numerous reports of this from different sources.**

We have spoken to the wardens about ensuring appropriate phone coverage. Callers should attempt to reach the Warden's office, rather than picking random extensions, as calls are being routed to staff that cannot assist.

**Can a specific staff member at each facility be designated as the family liaison for that facility, and return all calls and answer all questions (or point them to someone who can)?**

We are reviewing this recommendation, however, staffing has been impacted throughout the Department by COVID-19, so assigning additional staff or staff to complete only one task is very challenging at this time.