

- 3/17/20: Message from the Secretary and Receiver (<https://www.cdcr.ca.gov/covid19/message-of-appreciation-and-direction-to-all-cdcr-cchcs-staff/>) sent to all staff
- 3/17/20: Updated guidelines for staff who live in the Bay Area (<https://www.cdcr.ca.gov/covid19/employees-65-employees-with-chronic-health-conditions-and-school-closures/>)
- 3/16/20: Reentry facility, parole guidelines (<https://www.cdcr.ca.gov/covid19/division-of-adult-parole-operations/>) issued
- 3/16/20: Advanced Learning Institute trainings canceled (<https://www.cdcr.ca.gov/covid19/staff-training-and-development/>)
- 3/16/20: Updated guidelines for employees age 65+ or with chronic health conditions (<https://www.cdcr.ca.gov/covid19/employees-65-employees-with-chronic-health-conditions-and-school-closures/>)
- 3/15/20: Department Operations Center activated (<https://www.cdcr.ca.gov/covid19/department-operation-center-activation/>)
- 3/15/20: In-person observers not permitted at parole suitability hearings (<https://www.cdcr.ca.gov/covid19/board-of-parole-hearings-information/>)
- 3/14/20: Family visits postponed statewide, effective 3/16/20
- 3/14/20: Updated school closure impact guidelines (<https://www.cdcr.ca.gov/covid19/school-closures-due-to-the-coronavirus/>)
- 3/14/20: Expanded precautions at institutions – mandatory verbal screening for all entering state prisons
- 3/13/20: Secretary and Receiver issue memo: Message to employees regarding COVID-19 (new coronavirus) ([https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/2020-03-13-R\\_Message-to-Employees-Regarding-COVID-19-New-Coronavirus-1.pdf](https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/2020-03-13-R_Message-to-Employees-Regarding-COVID-19-New-Coronavirus-1.pdf))
- 3/13/20: Correctional Sergeant written examination scheduled for 3/21/20 postponed until further notice
- 3/12/20: Tours canceled statewide
- 3/11/2020: 2019 Novel Coronavirus (COVID-19) (<https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/Memorandum-2019-Novel-Coronavirus-COVID-19.pdf>) memo issued
- 3/11/20: Facts sheets, posters and additional information about COVID-19 distributed to the population (<https://www.cdcr.ca.gov/covid19/population-communications/>)
- 3/11/20: Events of 250 attendees or more canceled
- 3/11/20: Normal visiting canceled statewide

# Exhibit C

# COVID-19 Preparedness

## April 11, 2020 update:

Please see today's update on CDCR and CCHCS COVID-19 preparedness and response.

## April 11 updates

- As of April 11, 2020, there are 42 incarcerated persons who have tested positive for COVID-19. See the CDCR and CCHCS Patient Testing Tracker (<https://www.cdcr.ca.gov/covid19/population-status-tracking/>) for the latest testing and case information for the incarcerated population.
- There are currently 77 CDCR/CCHCS employees who have tested positive for COVID-19. See the CDCR/CCHCS COVID-19 Employee Status webpage (<https://www.cdcr.ca.gov/covid19/cdcr-cchcs-covid-19-status/>) for a breakdown by location.
- The California Board of Parole Hearings (BPH) has held 116 parole suitability hearings by video and telephone conference between April 1-10. BPH anticipates moving forward with all scheduled hearings through video conference beginning Monday, April 13, consistent with Governor Gavin Newsom's March 24 Executive Order (<https://www.gov.ca.gov/2020/03/24/governor-newsom-issues-executive-order-on-state-prisons-and-juvenile-facilities-in-response-to-the-covid-19-outbreak/>)

## A breakdown of the hearing outcomes is below:

- 32 grants
- 42 denials
- 8 stipulations
- 8 waived
- 25 postponed
- 1 continued

## Below is comparison of grants as a percentage of hearings held by videoconference versus hearings held in 2019:

- Grants as a percentage of hearings held by video: 43%
- Grants as a percentage of hearings held in 2019: 34%
- Denials as a percentage of hearings held by video: 57%
- Denials as a percentage of hearings held in 2019: 66%

*(para español, haga clic aquí (<https://www.cdcr.ca.gov/covid19/preparacion-covid-19/>)). Las traducciones al español se proporcionan dentro de las 24 horas de una actualización)*

Executives and staff at CDCR and CCHCS are working closely with infectious disease control experts to minimize the impact of COVID-19 on our operations. To ensure we are ready to immediately respond to any COVID-19 related incident, CDCR and CCHCS activated the Department Operations Center (DOC) in order to be fully prepared to respond to any departmental impacts resulting from COVID-19.

CDCR and CCHCS are dedicated to the safety of everyone who lives in, works in, and visits our state prisons. We have longstanding outbreak management plans in place to address communicable disease outbreaks such as influenza, measles, mumps, norovirus, and varicella,

as well as preparedness procedures to address a variety of medical emergencies and natural disasters.

Public safety is a top priority for CDCR, as is the health of our community. The department has been diligent in implementing proactive efforts to ensure health and safety, including recent actions to limit the risks and spread of COVID-19. Examples include limiting all non-essential or emergency transportations between CDCR facilities; screening all who enter the prisons; and suspending visits by the public. As a further protective measure, Governor Newsom issued an executive order (<https://www.gov.ca.gov/2020/03/24/governor-newsom-issues-executive-order-on-state-prisons-and-juvenile-facilities-in-response-to-the-covid-19-outbreak/>) recently directing CDCR to temporarily halt the intake of inmates and youth into the state's 35 prisons and four youth correctional facilities. We are continuously evaluating and implementing proactive measures to help prevent the spread of COVID-19 and keep our CDCR population and the community-at-large safe.

## **BELOW IS AN OVERVIEW OF STEPS WE ARE TAKING REGARDING COVID-19**

### **Modified Program**

Effective April 8, 2020, all CDCR adult institutions will implement a mandatory 14-day modified program (<https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/04/COVID19-Modified-Program.pdf?label=Mandatory%2014-day%20Modified%20Program&from=https://www.cdcr.ca.gov/covid19/memos-guidelines-messaging/>). While movement has been limited throughout institutions already, CDCR has implemented these mandatory restrictions statewide for two weeks in order to further reduce staff and inmate exposure to COVID-19.

"This is a time where we are all truly in this together, we are all experiencing changes in our daily lives in an effort to do what's for the greater good of us all," CDCR Secretary Ralph Diaz said. "For the next 14 days there are going to be a lot of changes within our institutions, but we do it with the overall health and safety of all those who live and work in them, and the health and safety of the public, at the forefront. We will continue to seek ways for the incarcerated population to stay in touch with their support systems, retrieve items from canteen services, and have out-of-cell time that we know is important for overall physical and mental health. We ask for patience and an understanding that we are doing everything we can to create better physical distancing within our institutions, staff and inmates—we are all Californians in this effort."

While these restrictive measures are mandatory, the incarcerated population will still have access to medication, health care services, yard time, canteen, packages, and cell-front religious programming while allowing for physical distancing and proper cleaning/disinfecting. Showers and telephones will be disinfected between each use.

Meals will be served in cells or housing units. Recreation/yard time will be allowed; however, schedules will be staggered by housing unit to increase physical distancing. If canteen cannot be accommodated during yard time, staff will facilitate delivery to housing units. Only inmates classified as critical workers will be permitted to report to work.

Community Resource Managers and education staff will provide program materials, games, books, etc., to housing units. Staff will conduct additional rounds to ensure the safety and well-being of those on modified program.

### **Expedited release and plan to increase space within institutions**

On March 31, CDCR announced its plan to further protect staff and inmates (<https://www.cdcr.ca.gov/news/2020/03/31/cdcr-announces-plan-to-further-protect-staff-and-inmates-from-the-spread-of-covid-19-in-state-prisons/>) from the spread of COVID-19 in state prisons.

CDCR has expedited the transition to parole for eligible inmates who have 60 days or less to serve on their sentences and are not currently serving time for a violent crime as defined by law, a person required to register under Penal Code 290, or domestic violence.

The plan will create increased capacity and space to help with inmate movement, physical distancing, and quarantine and isolation efforts for positive COVID-19 cases.

The plan also includes making more use of the state's private and public Community Correctional Facilities, as well as maximizing open spaces in prisons, such as gymnasiums, to increase capacity and inmate movement options.

All of the approximately 3,500 inmates eligible for this expedited release will be released by Monday, April 13.

For frequently asked questions on this plan, visit our FAQ page here (<https://www.cdcr.ca.gov/covid19/frequently-asked-questions-for-plan-on-expedited-release-and-increased-physical-space-within-state-prisons/>).

### **Expanded precautions at institutions and office locations**

All staff and visitors entering CDCR correctional institutions will undergo a touchless temperature screening prior to entering the facility. This is in addition to the ongoing verbal symptom screening. This applies to CDCR state prisons and community correctional facilities. For guidance on this implementation, see the COVID-19 Facility Entrance Screening.

CDCR and CCHCS have implemented mandatory verbal screening for every person entering **any** work location, in line with screenings in place at prisons since March 14.

Those attempting to enter a state prison or office building at any time are required to verbally respond if they currently have new or worsening symptoms of a respiratory illness. If the individual's response is that they are experiencing symptoms, they will be restricted from entering the site that day.

All CDCR institutions have been instructed to conduct additional deep-cleaning efforts in high-traffic, high-volume areas, including visiting and health care facilities. Those in the incarcerated population identified as assisting with cleaning areas of the institution have received direct instruction on proper cleaning and disinfecting procedures in order to eliminate coronavirus.

Communal areas such as dayrooms, showers, restrooms and offices are cleaned at a minimum of twice per shift during second and third watch, and more if needed. Disinfecting frequency has been increased, including regular disinfecting of touchpoints (telephones, door knobs, desk areas, etc.). All cleaning practices will allow for physical distancing of staff and porters.

On March 11, all CDCR institutions were instructed to order additional hand sanitizer dispenser stations. The purchased dispensers have begun arriving at the institutions and are being placed inside institution dining halls, work change areas, housing units, and where sinks/soap are not immediately available. These dispensers will contain the type of alcohol-based hand sanitizer recommended by the Centers for Disease Control and Prevention to help eliminate coronavirus.

Additional dispensers may be placed in high-need areas where they can be monitored for safety and security of the institution.

Staff have been granted permission to carry up to two ounces of personal-use hand sanitizer. The incarcerated population is being provided extra soap when requested and hospital-grade disinfectant that meets CDC guidance for COVID-19.

CDCR and CCHCS have been actively monitoring and assessing institutions to ensure staff have an adequate supply of personal protective equipment to immediately address any potential COVID-19 exposures, and to protect staff and incarcerated people. The workgroup will continue to collaborate and maintain open lines of communication with the Governor's Office of Emergency Services to identify any deficiencies and ensure adequate supplies are available at each institution on an ongoing basis.

### **California Prison Industry Authority production**

In an effort to help prevent the spread of COVID-19, the California Prison Industry Authority (CALPIA) has begun producing hand sanitizer for use by both staff and the incarcerated population.

CALPIA is producing two types of hand sanitizer: *Cleanse*, which contains alcohol, and *Cleanse – AF* (Alcohol Free) which contains the active ingredient Benzalkonium Chloride. The alcohol-based hand sanitizer will be used in the sanitizer dispenser stations being directed into housing units, dining halls, work change areas, and other areas where sinks and soap are not immediately available. The non-alcohol based product is being produced for future needs.

The hand sanitizer is being made available to CDCR and CCHCS facilities and locations. If CALPIA's inventory exceeds the needs of those two departments, CALPIA will make the product available to other state agencies.

CALPIA worked with the California Department of Public Health and within two weeks was able to acquire the necessary licensing for relabeling, repackaging, and mixing.

CALPIA has already started delivering the bottles to CDCR facilities.

The production of the materials will occur at CALPIA's Chemical Enterprise located at the California State Prison, Los Angeles County.

To help prevent the spread of COVID-19 within the California Department of Corrections and Rehabilitation (CDCR) prisons, the California Prison Industry Authority (CALPIA) has started producing reusable cloth barrier masks to meet some of the supply needs of staff and inmates. The masks are being produced at CALPIA's Fabric enterprises at the California Institution for Women, Mule Creek State Prison, California Men's Colony, Sierra Conservation Center, Correctional Training Facility, California Correctional Institution, and Centinela State Prison. CALPIA has made approximately 17,000 barrier masks, with plans to produce 10,000 per day, and has begun distributing the masks to the institutions for both staff and inmate use. All institutions will increase laundry services in order to accommodate proper washing and drying of barrier masks.

CALPIA will continue only critical operations necessary to support the effort to address COVID-19. These operations include the Healthcare Facilities Maintenance program, which will be increasing work hours and days to seven days a week in order to provide increased frequency of cleaning and sanitation, as well as Laundry services, which will be increased to seven days a



week. Other critical operations include food and beverage packaging and the production of hand sanitizer at California State Prison, Los Angeles County.

### **Screening incarcerated population on entry into prisons**

All incarcerated persons received into a Reception Center institution are placed into an automatic 14-day quarantine for monitoring. For more on CDCR and CCHCS quarantine protocols, visit our COVID-19 Status (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2Fcdcr-cchcs-covid-19-status%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984514096&sd%3A%3D%26%3D%3D&reserved=0>) webpage.

Immediately upon entry, all inmates are screened for symptoms of influenza-like illness (ILI) including COVID-19. The inmate populations that must be screened include, but are not limited to, those entering via reception centers, receiving and release locations and fire camps, and returning from court, a higher level of care, or an offsite specialty appointment.

The screening shall include asking an individual if they have a cough, fever and/or difficulty breathing, and taking their temperature. Based on the screening questions, temperature reading, and health care staff's clinical judgement, the individual will either be placed in isolation, quarantine or other housing.

### **Social distancing**

CDCR has implemented several practices to encourage "social distancing," which is a strategy recommended by public health officials to stop the spread of contagious diseases. Social distancing requires the creation of physical space between individuals, minimizing gatherings, and ensuring space between individuals when events or activities cannot be modified, postponed, or canceled. Achieving space between individuals of approximately six feet is advisable.

The incarcerated population has received information about social distancing, and staff and inmates are practicing social distancing strategies where possible, including limiting groups to no more than 10, assigning bunks to provide more space between individuals, rearranging scheduled movements to minimize mixing of people from different housing areas, encouraging social distancing during yard time, and adjusting dining schedules where possible to allow for social distancing and additional cleaning and disinfecting of dining halls between groups.

### **Transportation/Receiving and Release protocols**

Effective March 24, CDCR will suspend intake of all incarcerated persons into both adult state prison and Division of Juvenile Justice facilities for a minimum of 30 days. California Governor Gavin Newsom issued an Executive Order (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.ca.gov%2F%2F2020%2F03%2F24%2Fgovernor-newsom-issues-executive-order-on-state-prisons-and-juvenile-facilities-in-response-to-the-covid-19-outbreak%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C1%7C637207840984524088&sd%3A%3D%26%3D%3D&reserved=0>) directing CDCR to suspend intake into state correctional facilities for 30 days. All persons convicted of felonies shall be received, detained, or housed in a jail or other facility currently detaining or housing them for that period. The order allows Secretary Diaz to grant one or more 30-day extensions if

suspension continues to be necessary to protect the health, safety, and welfare of inmates and juveniles in CDCR's custody and staff who work in the facilities.

CDCR has suspended transfers of inmates into the Male Community Reentry Program (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2Frehabilitation%2Fmcrp%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984524088&sdata=TUbkWRsQ%2BUUOazKP%2FWwNSQ62HNe3YqPcd0LYGg2pHM%3D&reserved=0>) (MCRP), the Custody to Community Transitional Reentry Program (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2Fadult-operations%2Fcustody-to-community-transitional-reentry-program%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984534085&sdata=6QxnVgYRFZEpkzr53XrFQKIPGrN7izJffrZIs1I9aTA%3D&reserved=0>) (CCTRP), and the Alternative Custody Program (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2Fadult-operations%2FACP%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984534085&sdata=L0mec3UwbZNH6nLMVKBDJ6SBGycVBA7IMvLxdddfPkE%3D&reserved=0>) (ACP) until further notice. CDCR has taken this step to limit potential exposure of staff to COVID-19 during inmate transfers to the community. Additionally, as part of this program, incarcerated persons remain under the jurisdiction and responsibility of CDCR, to include providing any required medical attention. Releasing incarcerated persons to these programs could potentially expose them to COVID-19 in the community which would require their transfer back to an institution for medical care for non-emergent health care needs, increasing risk for potential exposure within our institutions.

CDCR has also suspended transfers of inmates to the Conservation Camp program until further notice. Inmate transfers previously initiated under the approved guidelines, who are currently on layover, will be moved to their final destination.

All transfers out of Reception Centers are suspended through April 22, 2020.

Moves to Department of State Hospital beds at Atascadero State Hospital, Coalinga State Hospital, and Patton State Hospital are allowed only for mentally disordered offender (MDO) referrals.

All Interstate Compact Agreement transfers of out-of-state parolees and inmates to California will cease for 30 days.

To mitigate workload when non-essential movement resumes, this cancellation of all non-essential inmate movement impacts movement only; classification committees and review processes will move ahead as normal.

While it's required to have three staff members to make a quorum, it is only required, during this unique time, to have two staffers physically present in the committee room with the remaining committee member joining by call. All present in the room should practice social distancing.

California statute permits the Director to authorize temporary community leave for inmates from prison. To reduce risks of COVID-19 to all who work and live in the state prison system



and our surrounding communities, there will be no temporary community leave approvals at this time. We will work to make communications available to individuals in these situations.

## Visiting

As part of CDCR's COVID-19 prevention efforts, normal visiting at adult and juvenile facilities is canceled statewide until further notice based on California Department of Public Health guidance for mass gatherings. This includes overnight family visits and Division of Juvenile Justice visiting.

Institutions have been instructed to find opportunities to allow increased phone access for the incarcerated population so they may keep in touch with their support system, while also practicing social distancing and other infectious disease safety protocols.

At this time, legal/attorney visits are being held for urgent needs only. Hospice visits will no longer be held until further notice. Marriages will be postponed; those affected are encouraged to work with the institution's Community Resource Manager regarding rescheduling for a later date.

## Expanded telephone use

In recognition of the need for incarcerated people to have contact with their loved ones, the Division of Adult Institutions has expanded phone access for certain privilege groups. Access will be via current inmate phone equipment, with extra precautions taken to clean phones and allow physical distancing to limit possible exposure and transmittal of illness. Inmates on C Status (lost privileges due to disciplinary reasons) will remain on phone restrictions until C Status until that status has been completed or removed.

The following populations will be allowed to make calls above their privilege group until further notice:

- o Inmates in Administrative Segregation for non-disciplinary reasons, designated Privilege Group B, will be allowed one phone call per week (previously one per month; Privilege Group A are normally allowed one call per week)
- o All other inmates in restricted housing will be allowed to make one phone call once every two weeks (currently no phone calls permitted)
- o Reception Center inmates will be provided one phone call per week (currently one call within first seven days and one per month after)
- o Inmates in Psychiatric Inpatient Program settings will be allowed one call per week unless they are prohibited by the Interdisciplinary Treatment Team (with documented clinical justification).

CDCR's inmate telephone network provider Global Tel Link (GTL) has offered the adult incarcerated population three days of free phone calls each week through the end of April. There is no limit on the number of calls; however, each institution may limit time to accommodate need. The following days are designated for free calling:

Week 1: March 31, April 1, April 2

Week 2: April 7, 8, 9

Week 3: April 14, 15, 16

Week 4: April 21, 22, 23

Week 5: April 28, 29, 30

CDCR's electronic messaging provider for the incarcerated population, JPay, is providing reduced-priced emails to those incarcerated at the pilot institutions and free emails for those inmates who cannot afford it. The five pilot sites that currently have the technology include: High Desert State Prison, Kern Valley State Prison, California Institution for Women, Central California Women's Facility, and Substance Abuse Treatment Facility. At some of these institutions, only certain yards currently have this technology. Details will be provided to the incarcerated population at the institutions.

JPay has also extended inbound email print services to all institutions at a reduced rate. This service enables incarcerated people's family and friends to use the JPay app to send e-correspondence, which mailroom staff then print and deliver with regular mail. Family and friends purchase stamps for this service. While this will not eliminate physical mail, this process reduces COVID-19 transmission risk. This service is also a cost-effective way for incarcerated people to maintain contact with family and friends, which is especially important while visiting is closed. This service is expected to go live on April 10.

More information about JPay services is available in English ([https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/04/R\\_CDCR-Take-Ones-English-Sample.pdf](https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/04/R_CDCR-Take-Ones-English-Sample.pdf)) and Spanish ([https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/04/R\\_CDCR-Take-Ones-Spanish-Sample.pdf](https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/04/R_CDCR-Take-Ones-Spanish-Sample.pdf)).

The youth within the Division of Juvenile Justice already receive free phone calls and have begun using free Skype video calls for visiting.

### **Rehabilitative programs and volunteers**

Non-CDCR/CCHCS/CALPIA staff will not be permitted to enter state prison until further notice. This includes people who enter state prison as volunteers, or to facilitate rehabilitative programs. Paid union representatives, and Inmate Ward Labor (IWL) staff will be permitted. CalVet representatives and contractors who work with institution staff to conduct interviews and provide forensic evaluations for incarcerated veterans to receive federal disability benefits for themselves and their families pursuant to Senate Bill 776 will also be permitted.

No rehabilitative programs, group events, or in-person educational classes will take place until further notice. At this time, all tours and events have been postponed, and no new tours are being scheduled.

### **Education**

The Office of Correctional Education is working with institution principals, library staff, and teachers to provide in-cell assignments where possible in order for students to continue their studies, legal library access and educational credit-earning opportunities.

For those in our incarcerated population who need supplementary academic support, CDCR has encouraged Disability Placement Program, Developmental Disability Program, and Every Student Succeeds Act staff to coordinate with the institution instructor to provide additional assistance to enrolled students where possible.

Standardized testing has stopped until further notice, although we are encouraging education staff to continue to engage their students as much as possible to stay focused on their rehabilitation and positive programming during this time.

Recreation and Law Library Services will continue to be available to the incarcerated population even if physical access is restricted due to safety and security measures.

### **Religious programs**

CDCR recognizes the importance of religion in the daily life and spiritual growth of incarcerated people. Unfortunately, the department has limited group religious programming for upcoming holidays such as Ramadan, Passover, and Easter. These services will be provided as in-cell services as an alternative. CDCR will provide the appropriate Ramadan and Passover daily meals to allow incarcerated people to observe their religious meal traditions, including appropriately beginning and breaking their Ramadan fast.

Chaplains will conduct individual religious counseling as appropriate while maintaining social distancing, and CDCR is working to provide televised religious services to the population.

### **Health care services**

The health and safety of our population is of critical importance to CDCR and CCHCS. While our agency is working together to prepare for and respond to COVID-19, we will continue to provide urgent health care services. To reduce risks to both patients and staff, inmate movement will be minimized. In addition, some specialty and routine care may be delayed as a result of both internal redirections and external closures. All cancelled appointments will be rescheduled as soon as safely possible. Health care staff will continue to see and treat patients through the 7362 process and those with flu-like symptoms will be tested for COVID-19 as appropriate.

On March 20, CCHCS issued COVID-19: Interim Guidance for Health Care and Public Health Providers. This document provides clinical guidelines to health care providers in response to COVID-19 cases in the California prison system. View guidelines distributed to institution staff on March 20, 2020. ([https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/R\\_CCHCS-COVID-19-Interim-Guidance-3.19.2020.pdf?label=COVID-19:%20Interim%20Guidance%20for%20Health%20Care%20and%20Public%20Health%20Providers%20&from=https://www.cdcr.ca.gov/covid19/memos/](https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/R_CCHCS-COVID-19-Interim-Guidance-3.19.2020.pdf?label=COVID-19:%20Interim%20Guidance%20for%20Health%20Care%20and%20Public%20Health%20Providers%20&from=https://www.cdcr.ca.gov/covid19/memos/))

CDCR and CCHCS have launched an internal patient registry to assist institutions in monitoring patients with suspected or confirmed COVID-19. The COVID-19 Registry also tracks all individuals by risk. The registry is updated twice daily and draws from multiple data sources, including the electronic health record system, claims data, and the Strategic Offender Management System to compile risk factor data. This registry also includes release date information for each individual, in the event that individuals are to be considered for early release during the pandemic. This tool is not publically available as it contains personal health care information protected by medical privacy laws.

### **Dental care**

The California Dental Association recommends that all non-urgent dental care be suspended for the next 14 days. Effective immediately and until further notice, dental treatment shall be limited to Dental Priority Classification (DPC) 1 conditions (urgent care). For more information on what qualifies as urgent care, view HCDOM 3.3.5.4 (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fccchcs.ca.gov%2Fwp-content%2Fuploads%2Fsites%2F60%2FHC%2FHCDOM-ch03-art3.5.4.pdf&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7>)

d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C1%7C637207840984544076&sdata=32JMHUCxD1BMpHxflLgoCWd9lkcCakt9D9QfSGWqPFg%3D&reserved=0).

### **Specialty care appointments**

In order to reduce risks to patients and staff, all non-urgent offsite specialty appointments will be re-scheduled to a later time. Telemedicine appointments will continue at this time.

### **Board of Parole Hearings/Parole suitability hearings**

All in-person Board of Parole Hearings (BPH) adult parole suitability hearings are postponed for a minimum of 60 days. BPH is working to develop a process for conducting parole hearings by videoconference for all participants to attend, including incarcerated persons, attorneys, commissioners, and victims/victims next-of-kin. That process is expected to be in place by mid-April, per the Governor's Executive Order (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.ca.gov%2F2020%2F03%2F24%2Fgovernor-newsom-issues-executive-order-on-state-prisons-and-juvenile-facilities-in-response-to-the-covid-19-outbreak%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C1%7C637207840984544076&sdata=bKbYLUqwNc3%2FP9%2Fw%2FuK04kBuOYIR6LjFP%2F6H6uBRQrc%3D&reserved=0>).

Board of Juvenile Hearings proceedings will take place as scheduled via video conference only. Go to the Board website for more information. <https://www.cdcr.ca.gov/juvenile-justice/juvenile-parole-board/> (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2Fjuvenile-justice%2Fjuvenile-parole-board%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984554073&sdata=i%2FP%2F76ZpNHbLKipVcF4iFzbJi7mkldzbFlkQsk3rP3k%3D&reserved=0>)

### **Division of Adult Parole Operations**

The Division of Adult Parole Operations (DAPO) is committed to the safety of the community, staff, and those in its care. Given the increased risk associated with the use of mass/public transportation and those under parole supervision deemed a high-risk population (older adults and those with known serious chronic medical conditions), DAPO will make some operational changes to support both staff and the individuals under their care and supervision, including suspending lobby traffic except for initial parole interviews and emergencies, and suspending office visits for those age 65 and older and/or with chronic medical conditions.

All parolees' conditions of parole remain in place, with the exception of the items listed above. DAPO administrators and supervisors will assess all measures being implemented and adjust, modify, or waive required specifications as appropriate. Any questions parolees may have related to COVID-19 prevention efforts should be directed to their Parole Agent. Learn more here (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2Fdivision-of-adult-parole-operations%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984554073&sdata=oKcA3WPjx9T3e8uMvYuzuiXyJEiAi%2BW7VevmFtxaCPQ%3D&reserved=0>).

### **Modified Community Correctional Facilities and Community Reentry Programs**

CDCR's in-state contract facilities are conducting verbal screenings of staff and participants who enter the facilities. Those attempting to enter one of these facilities are required to verbally

respond if they currently have symptoms of a respiratory illness.

Visiting has also been halted at these facilities until further notice.

CDCR is committed to continuing education programs and limiting the impact our COVID-19 response has on positive rehabilitative programming for our Community Reentry Programs. Rehabilitative programs at the reentry facilities will continue with modifications made to class sizes to encourage social distancing, with some potential program closures.

At this time, participants are generally restricted from leaving the facilities outside of mandated legal reasons, urgent medical needs, if they are employed in the community, or for critical reentry services related to those within 30-45 days of release.

Participants age 65 or older are only eligible for passes to go out in the community for emergency situations only.

Visiting has been canceled at the Community Prisoner Mother Program (CPMP) in line with recommendations from public health officials and the cessation of visiting at CDCR locations statewide. This includes scheduled off-site visits for children residing at CPMP with their mothers. Family members may continue to drop approved items such as diapers, wipes, baby food and baby snacks (for children under 1), during normal visiting hours even during closure. CPMP staff are diligently working to ensure the mothers' and children's needs are met and supplies are readily available with a surplus where needed. They are working closely with community healthcare providers and medical staff at nearby California Institution for Women to keep all required appointments for mothers and children.

### **Division of Juvenile Justice**

CDCR's Division of Juvenile Justice (DJJ) will begin virtual visitation at all four of its facilities effective April 11. Video visiting appointments are requested by approved visitors for DJJ youth via a dedicated email address and scheduled in 30-minute blocks during regular weekend visitation hours. The visitation takes place on laptop computers placed on tables in standard visiting areas to give youth privacy and assure social distancing is taking place. Appointment requests (<https://www.cdcr.ca.gov/juvenile-justice/visiting-your-loved-one-with-skype-for-business/>) are screened by staff to make sure that only approved visitors are utilizing the service. A successful trial of the program was implemented on March 27 at Pine Grove Youth Conservation Camp in Amador County. A press release announcing the launch of the new program is available here (<https://www.cdcr.ca.gov/news/2020/04/07/california-division-of-juvenile-justice-implements-virtual-visiting/>).

Directions will be posted around the DJJ facilities so that youth can share the information with their support system.

Effective March 18, no volunteers are allowed to enter DJJ until further notice. All volunteer programs are postponed. When entering, all staff, volunteers and visitors will be given the same health screenings in place at other state institutions, including temperature checks.

The California Education Authority is continuing high school classes for youth in DJJ. As of April 7, all education provided will be via distance learning.

We also encourage letter writing as a way to stay in touch and are increasing the number of postage stamps available to youth.



Board of Juvenile Hearings proceedings will take place as scheduled via videoconference only. Go to the Board website for more information: <https://www.cdcr.ca.gov/juvenile-justice/juvenile-parole-board/> (<https://www.cdcr.ca.gov/juvenile-justice/juvenile-parole-board/>)

For the latest on steps DJJ is taking to protect youth from COVID-19, visit the DJJ webpage here (<https://www.cdcr.ca.gov/juvenile-justice/>).

### **Construction projects**

On March 20, 2020, CDCR suspended large-scale construction projects located within the secure perimeter of CDCR facilities. Limited construction activities are continuing as necessary to make work areas safe and protect construction areas from deterioration during the suspension. While the construction industry overall has been identified as an essential business/service under Executive Order E-33-20, the interest of CDCR as a construction owner is unique. Construction occurring at facilities under CDCR jurisdiction impacts the health and safety of thousands of employees and persons incarcerated in youth and adult institutions. The action to suspend large-scale construction projects was consistent with earlier preventive actions, such as the cancellation of visiting and volunteer entries statewide, and seeks to reduce and minimize the number of non-CDCR employees that enter CDCR institutions on a daily basis. These decisions are not made lightly, and are taken with the safety of all who work in, live in, and visit our facilities in mind.

### **Peace officer hiring and academies**

Written peace officer exams are suspended until April 6, 2020. The health and safety of our staff, cadets, and candidates is a top priority. CDCR is taking all the available precautions to ensure a safe and healthy environment. These precautions include regular office cleanings, hand sanitizer/gloves when applicable, reduced testing and physical fitness group sizes, and social distancing.

The Basic Correctional Officer Academy (BCOA) that is currently underway has been accelerated to allow graduation to move from May 1, 2020, to April 7, 2020. The BCOA scheduled to start Tuesday, March 24, will be postponed for at least 30 days.

### **Population communication**

CDCR Secretary Ralph Diaz will be releasing regular video message updates directly to the incarcerated population. You can see the latest message from March 25 here (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvimeo.com%2F400758862%2F824c4cf567&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C1%7C637207840984564065&sdata=rGtZkMRcnQN1Y5CBJdpiW27scQ3MLaG3NKEzNHib0PA%3D&reserved=0>).

Wardens, captains, public information officers, and other institution executives have been instructed to meet with their respective Inmate Advisory Councils either individually or in small groups where social distancing can be maintained. This is to encourage an open line of communication between the incarcerated population and the institution leaders in charge of their care in order to quickly and efficiently meet their needs.

To keep members of our population informed, we have created and distributed fact sheets and posters in both English and Spanish that provide education on COVID-19 and precautions recommended by CDC, which expand upon those advised during cold and flu season. We have



also begun streaming CDC educational videos on the CDCR Division of Rehabilitative Programs inmate television network and the CCHCS inmate health care television network. Learn more here (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2Fpopulation-communications%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984564065&sdata=LQUKzZExIzF0YcnEHRtdezSZLSUKAA%2FulwfKSVIIDYI%3D&reserved=0>).

Additionally, we are providing regular department updates regarding COVID-19 response to the Statewide Inmate Family Council and all institutional Inmate Family Councils who serve the family and friends of the incarcerated population to ensure they are aware of the steps the department is taking to protect their loved ones housed in our institutions.

### **Communication and guidance to staff**

CDCR Secretary Ralph Diaz will be releasing regular video message updates directly to CDCR staff. You can see the latest message from March 25 here (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fvimeo.com%2F400756098%2F8d895b053b&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C1%7C637207840984574058&sdata=YiKdJAZUjC0D8l8k8dzGDVtRisPci%2B8QocgA8OCfLKs%3D&reserved=0>).

Federal Receiver J. Clark Kelso released a video message (<https://www.cdcr.ca.gov/insidecdcr/2020/03/31/message-to-all-cdcr-cchcs-staff-from-receiver-j-clark-kelso/>) to all CCHCS and CCHCS staff.

Only in-service training (IST) for range, weapons, and chemical agents qualifications and training shall continue as long as social distancing can be achieved. All other IST has been postponed until July.

We have worked continuously to keep staff informed of the evolving situation, including creating internal and external webpages with health-related information from CDC and California Department of Public Health on how they can protect themselves against COVID-19. We have also provided staff with California Department of Human Resources (CalHR) updates on personnel and work-related questions specific to the COVID-19 issue.

CDCR and CCHCS care for the health and wellness of its workforce and have been working to accommodate those who have been impacted by this evolving situation. We will continue to work diligently with CalHR and labor organizations on how we can best keep our workforce protected and provide for the safety and security of our institutions.

For more employee resources related to COVID-19, see our webpage here: <https://www.cdcr.ca.gov/covid19/information/> (<https://gcc01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdcr.ca.gov%2F%2F%2Finformation%2F&data=02%7C01%7CDana.Simas%40cdcr.ca.gov%7Cb289a7c86e924c100f6708d7d127c0c3%7C0662477dfa0c4556a8f5c3bc62aa0d9c%7C0%7C0%7C637207840984574058&sdata=CtPoh6zi3sKjB5BJ8ZhWCIZZRWfvC8B9zqL%2Ffr6ZmMQ%3D&reserved=0>).

# Exhibit D



# CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

## MEMORANDUM

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**Date:** March 11, 2020

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**To:** Regional Health Care Executives  
Deputy Medical Executives  
Chief Nurse Executives  
Chief Executive Officers  
Chief Medical Executives  
Chief Nurse Executives  
Chief Physician & Surgeons  
Chief Support Executives  
Infection Control Nurses  
Public Health Nurses

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**From:** Heidi M. Bauer, MD MS MPH  
Public Health Epi/Surveillance Lead  
Public Health Branch

Diane O'Laughlin, FNP-BC, DNP  
Headquarters Chief Nurse Executive  
Public Health and Infection Prevention

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**Subject:** **2019 NOVEL CORONAVIRUS (COVID-19)**

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The 2019 Novel Coronavirus (COVID-19 related virus, aka SARS-CoV-2) was identified in Wuhan, Hubei Province, China, in December 2019 and is now being detected in many parts of the world, including the United States. For up-to-date information regarding the novel coronavirus, see the [Centers for Disease Control \(CDC\) Novel Coronavirus webpage](#).

Currently, there is no vaccine or pharmaceutical treatments for COVID-19. Person-to-person transmission has been demonstrated and is thought to occur by respiratory droplets, similar to how influenza or a cold is transmitted. At this time, the health risk to the general public in California from novel coronavirus remains low and there are no confirmed cases of COVID-19 among patients or staff within the California Department of Corrections & Rehabilitation (CDCR).

The purpose of this memorandum is to advise California Correctional Health Care Services (CCHCS) healthcare providers of new guidance released by the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH) and California Occupational Safety and Health Administration (CalOSHA) and to share resources for future updates that come available.

# MEMORANDUM

1. Risk assessment and initial management of patients with respiratory illness
2. Laboratory testing for COVID-19 related virus (SARS-CoV-2)
3. Surveillance and reporting requirements
4. Resources for up to date information (COVID-19 page on Lifeline and others)

## **RISK ASSESSMENT AND INITIAL MANAGEMENT OF PATIENTS WITH RESPIRATORY ILLNESS**

- Risk factors for COVID-19: Close contact to a laboratory-confirmed COVID-19 patient in the past 14 days, or exposure in an affected geographic area or cruise ship are the strongest risk factors. To date, there are no confirmed cases of COVID-19 among CDCR patients or staff; however, community transmission is now recognized in at least 7 counties in California.
- Incubation period: People with COVID-19 generally develop signs and symptoms on average 5 days after exposure (range 2-14 days).
- Clinical spectrum of COVID-19 ranges from mild disease with non-specific signs and symptoms of acute respiratory illness, to severe pneumonia with respiratory failure and septic shock.
- Signs and symptoms of COVID-19 typically include:
  - Fever (100.4° F, 38° C)
  - Cough, dry or productive
  - Fatigue
  - Myalgia
  - Dyspnea occurs in a third of patients hospitalized for COVID-19
  - Upper respiratory symptoms (sore throat, congestion) are less common
  - Nausea, vomiting and diarrhea also have been reported
- COVID-19 is an influenza-like illness (ILI). Be alert to clusters of patients with ILI who test negative for influenza and other respiratory pathogens as they could represent an outbreak of COVID-19.
  - Ensure that infection control recommendations are followed for all ILI patients awaiting diagnosis and disposition:
    - The patient is using a surgical mask
    - The patient is isolated in an airborne isolation or **single room with closed door**
    - Standard, contact, and airborne precautions are followed
    - Personal protective equipment for health care workers includes fit-tested N-95 mask, gloves, gown, and eye protection (face shield or goggles)

## **LABORATORY TESTING FOR COVID-19 RELATED VIRUS (SARS-COV-2)**

- Testing for patients with ILI:
  - COVID-19 related and influenza viral testing is important for establishing the etiology of ILI.
  - Patients with laboratory-confirmed influenza or other etiology are unlikely to be co-infected with COVID-19 related virus.

# MEMORANDUM

- While influenza remains prevalent, patients with fever (>100° F) and cough who are not at high risk for severe disease (below) may undergo testing for influenza as a first-line test, with reflex to COVID-19 testing if negative for influenza. Rapid Influenza Diagnostic Tests (RIDTs) are valuable in identifying patients infected with influenza.
    - Who to consider immediate testing for COVID-19 related virus:
      - Patients of Concern: Because early diagnosis may improve clinical outcomes, priority for COVID-19 related virus testing should be given to symptomatic individuals who are **older (age ≥ 65 years)** or have **chronic medical conditions and/or an immunocompromised** state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).
      - Clinicians should use their judgment in testing patients with ILI for other respiratory pathogens.
- Quest is now accepting specimens for SARS-CoV-2 RNA, Qualitative Real-Time RT-PCR testing:
  - Quest Test Code: **39433**
  - Preferred specimen: Nasopharyngeal (NP) Swab or Oropharyngeal (OP) swab collected in multi microbe media (M4), VCM medium (green-cap) tube or equivalent (UTM) (one swab per tube)
  - Use a separate NP or OP swab for COVID-19 testing; use a separate NP or OP swab for other tests (i.e. influenza). Do not combine swabs in the same tube.
  - Storage & Transport: SARS-CoV-2 RNA specimens must be refrigerated (refrigerated stability is up to 72 hour)
  - Follow standard procedure for storage and transport of refrigerated samples
  - Cold packs/pouches must be utilized if samples are placed in a lockbox
  - SARS-CoV-2 RNA is not a STAT test and a STAT pick-up cannot be ordered
  - Turnaround time (TAT) may be delayed: TAT (published as 3-4 days) may be impacted initially due to high demand
  - The induction of sputum is not recommended
- **Precaution for specimen collection:**
  - When collecting diagnostic respiratory specimens (e.g., nasopharyngeal swab) from a possible COVID-19 patient, the following should occur: Heath Care Personnel (HCP) in the room should wear an N-95 or higher-level respirator (or facemask if a respirator is not available), eye protection, gloves, and a gown.
  - The number of HCP present during the procedure should be limited to only those essential for patient care and procedure support. Visitors should not be present for specimen collection. Specimen collection should be performed in a normal examination room with the door closed.
  - Clean and disinfect procedure room surfaces promptly as described in the section on environmental infection control below. [CDC Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)

# MEMORANDUM

- Laboratory-confirmed cases of COVID-19 should be reported immediately to the institution public health nurse, who will conduct a contact investigation and institute quarantine for those exposed. Institution leadership should also be notified immediately.

## SURVEILLANCE AND REPORTING REQUIREMENTS

Effective immediately, California Correctional Health Care Services (CCHCS) Public Health Branch (PHB) will be assessing, monitoring and making a statewide report for leadership. This will require the institutions experiencing an outbreak or monitoring contact to report COVID-19 data *seven days a week, including holidays*. Reporting will be done via a SharePoint system described later in this memo.

Use the COVID-19 Case Definitions below to guide data reporting:

- **Confirmed COVID-19 Case**
  - A positive laboratory test for the virus that causes COVID-19 in at least one respiratory specimen (whether or not the positive test has been confirmed by the CDC).
- **Suspected COVID-19 Case**
  - Fever and cough or shortness of breath (dyspnea) with evidence of a viral syndrome (influenza-like illness [ILI]) in a person without high risk exposure and without a positive test for influenza **OR**
  - Any fever, respiratory symptoms, or evidence of a viral syndrome in a patient with epidemiologic linkage to a confirmed case of COVID-19 or linkage to a group defined by public health during an outbreak.
- **Close Contact to COVID-19 Case**
  - Close proximity (within approximately 6 feet) to an individual with confirmed COVID-19 for a prolonged period of time without the use of recommend Personal Protective Equipment
  - Direct contact with infectious secretions from an individual with confirmed COVID-19

**Reporting:** Every institution shall report daily, *seven days a week including holidays*:

- Notify CCHCS PHB **immediately** at [CDCRCCHCSPublicHealthBranch@cdcr.ca.gov](mailto:CDCRCCHCSPublicHealthBranch@cdcr.ca.gov) if there are significant developments at the institution, e.g., first time the institution is monitoring one or more contacts, first suspect case at the institution, first confirmed case at the institution, first COVID-19 contact investigation at the institution.
- By noon, report all new suspected and confirmed COVID-19 cases and all new COVID-19 contacts to the COVID-19 SharePoint: [https://cdcr.sharepoint.com/sites/cchcs\\_ms\\_phos](https://cdcr.sharepoint.com/sites/cchcs_ms_phos)
- By noon, update all case records on the COVID-19 SharePoint to reflect up-to-date information on lab results, symptoms, and patient status.



# MEMORANDUM

- By noon, update all contact records on the COVID-19 SharePoint to reflect up-to-date information on date of last exposure and monitoring status.

Training on use of the COVID-19 SharePoint reporting tool will be provided several times over the course of the next two weeks. Currently, institution Chief Nurse Executives, Public Health Nurses (PHN), PHN backup (including Infection Prevention and Control Nurses), Utilization Management (UM) nurses, and UM backup have access to the SharePoint. To ensure seven-day a week, including holiday coverage for SharePoint reporting, institutions should request SharePoint access for additional nurses who will be reporting the above data by sending their email addresses to [CDRCCHCSPublicHealthBranch@cdcr.ca.gov](mailto:CDRCCHCSPublicHealthBranch@cdcr.ca.gov). Please allow one business day for SharePoint access to be granted.

## RESOURCES FOR UP TO DATE INFORMATION

### COVID-19 PAGE ON LIFELINE:

For updates and guidance, please visit:

- [COVID-19 Page on Lifeline](#)

### CDC GUIDANCE FOR COVID-19:

- [Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease \(COVID-19\)](#)
- [Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 \(COVID-19\) or Persons Under Investigation for COVID-19 in Healthcare Settings](#)
- [Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States](#)

### CDPH GUIDANCE FOR COVID-19:

- [Guidance Documents: Coronavirus Disease 2019 \(COVID-19\)](#)

### CDPH ALL FACILITIES COVID-19 LETTERS:

- [CDPH AFL 20-17: Guidance for Healthcare Facilities on Preparing for Coronavirus Disease 2019 \(COVID-19\)](#)
- [CDPH AFL 20-15: Infection Control Recommendations for Facilities with Suspect Coronavirus \(COVID-19\) Patients](#)
- [CDPH AFL 20-14: Environmental Infection Control for the Coronavirus Disease 2019 \(COVID-19\)](#)

### CalOSHA GUIDANCE:

- [Interim Guidance for Protecting Health Care Workers from Exposure to 2019 Novel Coronavirus \(2019-nCoV\)](#)
- [Interim Guidance on Coronavirus for Health Care Facilities: Efficient Use of Respirator Supplies](#)

# MEMORANDUM

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Cc: Diana Toche, Undersecretary, Healthcare Services  
Steven Tharratt, MD, MPVM, FACP, Director of Health Care Operations  
Renee Kanan, MD, MPH, Chief Quality Officer, Deputy Director of Medical Services  
Barbara Barney-Knox, Deputy Director of Nursing Services (A)  
Morton Rosenberg, Deputy Director of Dental Service  
Deputy Medical Executives  
Wardens

# Exhibit E

State of California

Department of Corrections and Rehabilitation

## Memorandum

Date: March 13, 2020

To: CDCR Employees Statewide  
CCHCS Employees

Subject: **MESSAGE TO EMPLOYEES REGARDING COVID-19 (NEW CORONAVIRUS)**

This message is being written to all California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS) staff regarding COVID-19 (new coronavirus). We know this is a challenging time for all of you, both professionally and personally, as we work through this ongoing pandemic. Over the upcoming weeks and months, CDCR and CCHCS may operate differently than what you are used to in order to protect and support both staff and the individuals in our custody. We are committed to keeping you informed with the most accurate and current information as we receive it or when decisions are made that impact the Department. We want to assure you that CDCR and CCHCS are working closely with infectious disease control experts to prepare for scenarios wherein COVID-19 could significantly affect department operations. In order to better coordinate the Department's strategies across all disciplines, CDCR has designated Douglas Eckenrod, Assistant Deputy Director, as the COVID-19 coordinator for the Department. Mr. Eckenrod will serve as a liaison between CDCR and CCHCS to coordinate efforts and track ongoing activities relating to COVID-19.

To help keep you informed, the Department has sent out communications and created two internal pages with health-related information from the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) on how staff can protect themselves against the COVID-19, as well as personnel information provided from the California Department of Human Resources. The links have been provided below:

CDC Link

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

CDPH Link

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>


We will continue to follow CDC and CDPH guidelines for responding to the coronavirus and will maintain cooperation and communication with local and state health departments. We

CDCR Employees Statewide

CCHCS Employees

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encourage you to continue to communicate through your chain of command so any questions or concerns can be addressed directly. Specific questions related to the Department's strategies regarding COVID-19 can be sent via email to [M\\_CDCRCOVID19prevention@cdcr.ca.gov](mailto:M_CDCRCOVID19prevention@cdcr.ca.gov).



RALPH M. DIAZ  
Secretary



J. CLARK KELSO  
Receiver