1 2 3 4 5 6 7 8 9 10 11 12	HELEN GUGEL* (NY SBN 4910105 ROPES & GRAY LLP 1211 Avenue of the Americas New York, NY 10036-8704 Telephone: (212) 596-9000  Counsel for Plaintiff-Petitioners Additional counsel listed on following p	) (joan.mcphee@ropesgray.com) N 4463691) (alexander.simkin@ropesgray.com) ) (helen.gugel@ropesgray.com)			
13	UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF CALIFORNIA				
14 15 16 17 18 19 20 21 22 23 24 25 26	Jacinto Victor ALVAREZ, Joseph BRODERICK, Marlene CANO, Jose CRESPO-VENEGAS, Noe GONZALEZ-SOTO, Victor LARA-SOTO, Racquel RAMCHARAN, George RIDLEY, Michael Jamil SMITH, Leopoldo SZURGOT, Jane DOE,¹ on behalf of themselves and those similarly situated.  Plaintiff-Petitioners,  v.  Christopher J. LAROSE, Senior Warden, Otay Mesa Detention Center,	Case No.  CLASS ACTION  COMPLAINT – PETITION FOR WRIT OF HABEAS CORPUS AND INJUNCTIVE AND DECLARATORY RELIEF			

<sup>1</sup> Plaintiff Jane Does seeks to proceed under pseudonym to protect her personal medical information. Counsel for Plaintiffs will file a motion to proceed under pseudonym and observe all related requirements.

1	Steven C. STAFFORD, United States			
2	Marshal for the Southern District of California,			
3				
4	Donald W. WASHINGTON, Director			
5	of the United States Marshals Service.  Defendant-Respondents.			
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19	GABRIEL ARKLES* (NY SBN 4391918) (garkles@aclu.org) CLARA SPERA* (NY SBN 5590229) (cspera@aclu.org)			
20	AMERICAN CIVIL LIBERTIES UNION FOUNDATION			
21	125 Broad Street, 18th Floor			
22	New York, NY 10014 Telephone: (212) 549-2569			
23				
24	*Application for <i>pro hac vice</i> forthcoming			
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### **INTRODUCTION**

- 1. This emergency action seeks immediate court intervention to prevent a public health crisis at the Otay Mesa Detention Center ("OMDC"). Plaintiff-Petitioners ("Plaintiffs") challenge their continued detention, and the detention of all similarly situated individuals, under conditions of confinement that imperil their lives in violation of the Fifth and Eighth Amendments to the U.S. Constitution by placing them at substantial risk of contracting the novel coronavirus and falling gravely ill with COVID-19. Even as COVID-19 continues to claim the lives of thousands of people across the country every single day, the U.S. Marshals Service ("USMS") has failed to take timely and necessary action to reduce the risk of this disease to detained persons and staff. As a result, COVID-19 cases are rapidly proliferating within OMDC, endangering countless lives.
- 2. OMDC is a privately-owned "minimum/medium security" detention facility that provides services to both the USMS and U.S. Immigration and Customs Enforcement ("ICE"). This case concerns only the detained persons in USMS custody at OMDC.<sup>2</sup> There are approximately 330 to 340 USMS detained persons at OMDC, including at least 50 persons who have been arrested but not yet convicted of any crime and at least 50 persons who have been convicted of a crime but not yet sentenced.
- 3. COVID-19, which has been characterized as the world's worst viral outbreak since 1918, possesses an estimated lethality rate between 0.3% and 3.5%—at least five to thirty-five times deadlier than the common flu that kills

<sup>&</sup>lt;sup>2</sup> A separate class action has been filed on behalf of a class of ICE detainees held in OMDC and Imperial Regional Detention Facility: *Rodriguez Alcantara v. Archambeault*, No. 3:20-cv-00756 (S.D. Cal. filed Apr. 21, 2020).

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thousands a year. The World Health Organization ("WHO") estimates that one in five people who contract COVID-19 require hospitalization.<sup>3</sup>

- 4. There is no known treatment for or vaccine against COVID-19, and there is no known cure. According to the U.S. Centers for Disease Control and Prevention ("CDC") and public health experts, the only known measure effective in reducing the risk of COVID-19 is the practice of "social distancing," which requires maintaining a minimum distance of six feet between people. Additionally, vigilant personal and environmental hygiene, including cleaning and disinfecting all surfaces for exacting periods of time with products containing specific alcohol contents and avoiding any areas accessed by a sick person, are essential.<sup>4</sup> These measures are particularly important because the coronavirus spreads aggressively, and people can spread it even if they do not exhibit any symptoms.<sup>5</sup>
- 5. The United States leads the world in confirmed cases of COVID-19 with approximately 804,194 cases and 43,200 deaths as of April 19, 2020, and approximately 865,585 cases and 48,816 deaths as of April 24, 2020.<sup>6</sup> In an attempt to minimize the spread of the virus, over 300 million individuals in the United States are under some instruction to stay home as of the filing of this complaint.

<sup>4</sup> Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in

<sup>&</sup>lt;sup>3</sup> *Q&A on Coronaviruses (COVID-19): "Should I Worry About COVID-19?,"* WHO, https://www.who.int/news-room/q-a-detail/q-a-coronaviruses.

Correctional and Detention Facilities, CDC, Mar. 23, 2020 ("Both good hygiene practices and social distancing are critical in preventing . . . transmission."), https://www.cdc.gov/coronavirus/2019-ncov/downloads/guidance-correctional-detention.pdf.

<sup>&</sup>lt;sup>5</sup> *How COVID-19 Spreads*, CDC, Apr. 13, 2020, https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html.

<sup>&</sup>lt;sup>6</sup> Cases of Coronavirus Disease (COVID-19) in the U.S., CDC, Apr. 24, 2020, https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html.

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- 6. Even as the virus is spreading aggressively across the country, the rate of infection in jails, prisons, and detention facilities is far surpassing that in the U.S. population at large. For example, the rate of increase of infection at Bureau of Prisons ("BOP") facilities is almost thirty times higher than the general population (notwithstanding that the numbers are almost certainly an undercount in light of limited testing).<sup>7</sup> A number of infected prisoners have died of COVID-19 at facilities across the United States, including fourteen prisoners in Bucks County, Pennsylvania;<sup>8</sup> seven federal prisoners in FCI Oakdale in Louisiana;<sup>9</sup> and six federal prisoners at FSL Elkton.<sup>10</sup>
- 7. OMDC has not been spared the devastation wrought by COVID-19. As of April 23, 2020, OMDC had 97 confirmed detainee cases (38 persons detained

<sup>7</sup> Federal Defenders of New York, *BOP-Reported Positive Tests for COVID-19 Nationwide*, <a href="https://federaldefendersny.org/">https://federaldefendersny.org/</a> (last visited Apr. 22, 2020, 9:30 a.m.). As of April 23, 2020, the number of infected detained persons and staff of the BOP over the course of the past month increased by almost 40,000 percent. *Id.* 

<sup>&</sup>lt;sup>8</sup> Larry R. King, Bucks County COVID-19 Deaths Reach 14; Four Cases Confirmed at Prison (Apr. 4, 2020),

http://buckscounty.org/sitefinitypfxn/newreader/2020/04/05/bucks-county-covid-19-deaths-reach-14-four-cases-confirmed-at-prison.

<sup>&</sup>lt;sup>9</sup> Bureau of Prisons, COVID-19 Cases, https://www.bop.gov/coronavirus/index.jsp (last visited Apr. 17, 2020).

<sup>&</sup>lt;sup>10</sup> Rachel Polansky, *3 inmates at eastern Ohio prison dead from suspected cases of COVID-19*, WKYC, Apr. 4, 2020,

https://www.wkyc.com/article/news/health/coronavirus/3-inmates-at-eastern-ohio-prison-dead-from-suspected-cases-of-coronavirus/95-2307d060-afc1-463a-bdc6-f708793834c4.

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by USMS and 59 persons detained by ICE), 18 CoreCivic employee cases, and 8 ICE employee cases.

- 8. Plaintiffs and other people detained at OMDC report increasing fear and desperation throughout the facility, as many worry about being unable to protect themselves from falling ill with the virus.
- 9. In recognition of COVID-19's threat to life, and the near impossibility for people confined in prisons, jails, and detention centers to engage in social distancing—the Attorney General has issued a directive to the BOP regarding the release of prisoners to home confinement. Meanwhile, a growing number of courts have ordered the release of numerous individuals held or incarcerated under the federal criminal system over the past several weeks. For example:
  - *Wilson v. Williams*, No. 4:20-cv-00794 (N.D. Ohio Apr. 22, 2020) (ordering federal prison to identify, within one day, all members of a medically vulnerable subclass and to evaluate their eligibility for transfer, including through compassionate release or furlough, within two weeks);
  - *United States v. Meekins*, No. 1:18-cr-222-APM, Dkt. No. 75 (D.D.C. Mar. 31, 2020) (post-plea, pre-sentence order releasing defendant with three pending assault charges due to extraordinary danger COVID-19 poses to people in detention);
  - *United States v. Davis*, No. 1:20-cr-9-ELH, Dkt. No. 21 (D. Md. Mar. 30, 2020) (releasing defendant due to the "urgent priority" of decarcerating, to protect both the defendant and the community, and to preserve Sixth Amendment rights in this perilous time);
  - *United States v. Muniz*, Case No. 4:09-cr-199, Dkt. No. 578 (S.D. Tex. Mar. 30, 2020) (releasing defendant serving 188-month sentence for drug conspiracy in light of vulnerability to COVID-19: "[W]hile the Court is

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aware of the measures taken by the Federal Bureau of Prisons, news reports of the virus's spread in detention centers within the United States and beyond our borders in China and Iran demonstrate that individuals housed within our prison systems nonetheless remain particularly vulnerable to infection.");

- United States v. Hector, No. 2:18-cr-3-002, Dkt. No. 748 (W.D. Va. Mar. 27, 2020) (granting release pending sentencing after Fourth Circuit remanded detention decision requiring court to specifically consider extraordinary danger posed by COVID-19 to individuals in prison);
- *United States v. Grobman*, No. 18-cr- 20989, Dkt. No. 397 (S.D. Fla. Mar. 29, 2020) (releasing defendant convicted after trial of fraud scheme in light of "extraordinary situation of a medically-compromised detainee being housed at a detention center where it is difficult, if not impossible, for [the defendant] and others to practice the social distancing measures which government, public health and medical officials all advocate");
- *United States v. Mclean*, No. 19-cr-380 (D.D.C. Mar. 28, 2020) ("As counsel for the Defendant candidly concedes, the facts and evidence that the Court previously weighed in concluding that Defendant posed a danger to the community have not changed with one exception. That one exception COVID-19 however, not only rebuts the statutory presumption of dangerousness, *see* 18 U.S.C. § 3142(e), but tilts the balance in favor of release."); and
- *United States v. Harris*, No. 19-cr-356 (D.D.C. Mar. 26, 2020) ("The Court is convinced that incarcerating Defendant while the current COVID-19 crisis continues to expand poses a far greater risk to community safety than the risk posed by Defendant's release to home confinement on . . . strict conditions.").

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10. Detained persons at OMDC cannot maintain a six foot distance from other individuals: they sleep, eat, bathe, and engage in other activities in close proximity with each other. Cleaning standards in OMDC common areas and Plaintiffs' cells are inadequate, and cleaning supplies are not always available. Under these circumstances, release of individuals at high risk of major health consequences, followed by monitoring and possible staggered release of further individuals until social distancing can be maintained throughout OMDC, is the only meaningful way to prevent death and mitigate the proliferation of the virus among those in USMS custody at OMDC.

- Absent intervention from this Court to align the USMS's operation of 11. OMDC with CDC guidance and public health principles—first and foremost, by releasing as many incarcerated persons as necessary to allow proper social distancing among those remaining in OMDC—devastating, and in many cases deadly, harm will befall incarcerated persons, facility staff, and the greater San Diego community.
- 12. Plaintiffs seek to represent two classes of persons detained in USMS custody at OMDC: pretrial detained persons, and post-conviction detained persons. Each of these classes contains a subclass of medically vulnerable detained persons. By this action, Plaintiffs seek the immediate release of the medically vulnerable Plaintiffs and subclasses, coupled with appropriate support and conditions upon release, as informed by public health experts. Plaintiffs further request various improvements to, and ongoing monitoring of, detention conditions at OMDC, and the staggered release of remaining Plaintiffs and other class members until necessary social distancing and hygiene measures can be sustained. If this Court does not grant the requested relief on the basis of this Petition-Complaint, Plaintiffs

request a hearing as soon as possible. Given the rapid spread of COVID-19 at OMDC, there is no time to spare.

13. As set forth below, the danger posed by Plaintiffs' detention during the COVID-19 pandemic is "so grave that it violates contemporary standards of decency to expose anyone unwillingly to such a risk" and violates their constitutional right to safety in government custody. *Helling v. McKinney*, 509 U.S. 25, 36 (1993). Without this Court's intervention, the Plaintiffs and the classes they seek to represent will continue to be at imminent risk of severe, preventable illness or death.

### **JURISDICTION AND VENUE**

- 14. This Court has subject-matter jurisdiction over this action pursuant to 28 U.S.C. §§ 2241 (habeas corpus), 1331 (federal question), 1346 (original jurisdiction), 1361 (Mandamus Act), and Article I, Section 9, clause 2 of the United States Constitution (the Suspension Clause). Sovereign immunity against actions for relief other than money damages is waived pursuant to 5 U.S.C. § 702.
- 15. This Court may grant relief under 28 U.S.C. §§ 2241, 2243 (habeas corpus), 2201-02 (declaratory relief), 1651 (All Writs Act), 5 U.S.C. § 702 (judgment against U.S. officers), Federal Rule of Civil Procedure 65 (injunctive relief), Federal Rule of Civil Procedure 23 (class action), as well as the Fifth and Eighth Amendments to the U.S. Constitution.
- 16. Venue is proper in the Southern District of California pursuant to 28 U.S.C. § 2241(d) because the Plaintiffs and all other class members are in custody in this judicial district and venue. Venue is proper pursuant to 28 U.S.C. § 1391(b)(2) because a substantial part of the events or omissions giving rise to Plaintiffs' claims occurred in this district.

### **PARTIES**

17. Petitioner-Plaintiff George RIDLEY is a 51-year-old man who has been in pretrial custody at the OMDC since around October 2019. He suffers from blisters in his left lung and is missing one third of his right lung. He is extremely vulnerable to serious harm if he were to contract COVID-19. Mr. Ridley was arrested for sex trafficking/pimping, though not a version of the offense involving violence or threats of violence. He shares a small cell with another person and is unable to maintain six feet of distance from other people at the facility. If released, he would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at his home in San Diego, CA. He appears on behalf of himself and all other medically vulnerable detained persons held pretrial in USMS custody at OMDC who are at high risk of severe illness and death due to COVID-19.

18. Petitioner-Plaintiff Jane Doe is a 46-year-old woman who has been in pretrial custody at the OMDC since December 16, 2019. At least two detained individuals in her pod have tested positive for COVID-19. She has been unable to maintain six feet of distance from other detained persons in her pod. Although she volunteered to serve meals, Ms. Doe did not receive masks from USMS when doing so. Ms. Doe is HIV positive and is therefore at high risk of severe complications or death if she contracts COVID-19. Ms. Doe was arrested for illegal reentry and a supervised release violation. If released, she would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at her aunt's home in Los Angeles, CA. She appears on behalf of herself and all other medically vulnerable detained persons held pretrial in USMS custody at OMDC who are at high risk of severe illness and death due to COVID-19.

- 19. Petitioner-Plaintiff Leopoldo SZURGOT is a 36-year old man who has been in pretrial custody at the OMDC since November 5, 2019. He has high-blood pressure, suffers from kidney stones, has had his gallbladder removed, and has an untreated head injury. He is particularly vulnerable to COVID-19. He is in a pod with roughly 68 other individuals. Many of the detained people in his pod are exhibiting flu-like symptoms, and he has been told by staff that at least four or five people tested positive for COVID-19 in his pod. He cannot stay six feet apart from individuals in his pod. Mr. Szurgot was arrested for drug importation. If released, he would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at his cousin's home in Helendale, CA. He appears on behalf of himself and all other medically vulnerable detained persons held pretrial in USMS custody at OMDC who are at high risk of severe illness and death due to COVID-19.
- 20. Petitioner-Plaintiff Jacinto Victor ALVAREZ is a 54-year-old man who has been in pretrial custody at the OMDC since November 4, 2019. He is detained in a pod with nearly 100 other detained persons and shares a 3-by-4 meter cell (approximately 10-by-13 feet) with another cellmate. He is unable to ensure six feet of distance from other people in the facility. He worked in the kitchen prior to its closure. Mr. Alvarez was arrested for illegal reentry. If released, he plans to self-quarantine where necessary and practice other recommended measures, including social distancing, in a halfway house. He appears on behalf of himself and all other medically vulnerable detained persons held pretrial in USMS custody at OMDC who are at high risk of severe illness and death due to COVID-19.
- 21. Petitioner-Plaintiff Joseph BRODERICK is a 35-year-old man who has been in pretrial custody at the OMDC since January 13, 2020. He shares a small cell with another person. It is effectively impossible for him to maintain six

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feet of distance from other persons at the facility. Until April 23, 2020, when the kitchen was closed, he worked shoulder-to-shoulder with other detained persons in the kitchen. Mr. Broderick was arrested of wire fraud. If released, he would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at his sister's home in Los Angeles, CA. He appears on behalf of himself and all detained persons held pretrial in USMS custody at OMDC who are at risk of severe illness and death due to COVID-19.

- Petitioner-Plaintiff Victor LARA-SOTO is a 42-year-old man who has 22. been in pretrial custody at the OMDC since November 10, 2019. He is detained in a pod with nearly 100 other detained persons and shares a 3-by-5 meter (approximately 10-by-16 feet) cell with three other individuals. He is locked in his cell from 10:00 p.m. each night until approximately 8:00 or 9:00 a.m. the following morning. It is effectively impossible for him to maintain six feet of distance from other persons at the facility in or out of his cell. As part of his job duties at the facility prior to the kitchen's closure, he prepared and served food. OMDC only provided him with a mask and gloves when he worked in the kitchen, and OMDC staff members took away the protective equipment when he left. Mr. Lara-Soto was arrested for drug importation. If released, he would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at his father-in-law's home in Fresno, CA. He appears on behalf of himself and all detained persons held pretrial in USMS custody at OMDC who are at risk of severe illness and death due to COVID-19.
- 23. Petitioner-Plaintiff Michael Jamil SMITH is a 42-year-old male who has been in custody at the OMDC since October 9, 2019. Mr. Smith suffers from high blood pressure, diabetes, and sleep apnea and is particularly vulnerable to COVID-19. He is located in a pod with approximately 80 other individuals and has

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- 24. Petitioner-Plaintiff Jose CRESPO-VENEGAS is a 54-year-old man who has been in custody at the OMDC since November 29, 2019. He was convicted of illegal reentry and a supervised release violation. He shares a small cell with three other individuals and he cannot maintain six feet of distance from other persons. He worked in the kitchens prior to their April 23 closure. He appears on behalf of himself and all other detained persons held post-conviction, presentencing in USMS custody at OMDC who are at risk of severe illness and death due to COVID-19.
- 25. Petitioner-Plaintiff Noe GONZALEZ-SOTO is a 47-year-old man who has been in custody at the OMDC since around September 2019. He was convicted of drug importation and is awaiting sentencing. He shares a small cell with another individual and he cannot maintain six feet of distance from other persons. Mr. Gonzalez-Soto has tested positive for COVID-19. He appears on behalf of himself and all other medically vulnerable detained persons held post-conviction, presentencing in USMS custody at OMDC who are at high risk of severe illness and death due to COVID-19.
- 26. Petitioner-Plaintiff Marlene CANO is a 33-year old woman who has been in custody at the OMDC since December 20, 2019. She was convicted of drug

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importation and is awaiting sentencing. She shares a small cell with another individual. Her pod is currently in quarantine. She cannot stay six feet apart from other people in her pod and cell. She has developed a cough and flu-like symptoms. If released, she would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at a friend's house in Chula Vista, CA. She appears on behalf of herself and all other detained persons held post-conviction, presentencing in USMS custody at OMDC who are at risk of severe illness and death due to COVID-19.

- 27. Petitioner-Plaintiff Racquel RAMCHARAN is a 23-year-old woman who has been in custody at the OMDC since October 24, 2019. She shares a small cell with another individual. She cannot stay six feet apart from other people in her pod and cell. Her pod is currently in quarantine. Ms. Ramcharan was convicted of possession with intent to distribute and is awaiting sentencing. If released, she would be able to self-quarantine where necessary and practice other recommended measures, including social distancing, at her aunt's house in San Diego, CA. She appears on behalf of herself and all other detained persons held post-conviction, presentencing in USMS custody at OMDC who are at risk of severe illness and death due to COVID-19.
- 28. Respondent-Defendant Christopher J. LAROSE is the Senior Warden of the Otay Mesa Detention Center. As the Senior Warden, he is responsible for overseeing the administration and management of the facility, where Plaintiffs are detained. Defendant LaRose is a legal custodian of Plaintiffs. He is sued in his official capacity.
- Respondent-Defendant Steven C. STAFFORD is the United States 29. Marshal for the Southern District of California. Defendant Stafford is a legal custodian of Plaintiffs. He is sued in his official capacity.

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Respondent-Defendant Donald W. WASHINGTON is the Director of 30. the United States Marshals Service. Defendant Washington is responsible for USMS policies, practices, and procedures, including those relating to the detention of Plaintiffs. Defendant Washington is a legal custodian of Plaintiffs. He is sued in his official capacity.

### **FACTUAL ALLEGATIONS**

#### I. COVID-19 Poses a Significant Risk of Serious Illness, Injury, and

- The novel coronavirus that causes COVID-19 has led to a global 31. pandemic. As of April 23, 2020, there were more than 2.54 million reported COVID-19 cases throughout the world, of which more than eight hundred thousand are in the United States.<sup>11</sup> More than 175,000 individuals worldwide have died as a result of COVID-19, including more than 40,000 in the United States. 12 These numbers are growing, with more than 73,000 new cases worldwide in the 24-hour period between April 21 and April 22 alone.<sup>13</sup>
- 32. Nationally, CDC projections indicate that over 200 million individuals in the United States could be infected with COVID-19 over the course of the epidemic without effective public health intervention, with as many as 1.7 million deaths in the worst projections.
- The virus is highly contagious and known to spread from person to 33. person through respiratory droplets, close personal contact, and from contact with

<sup>&</sup>lt;sup>11</sup> Coronavirus disease 2019 (COVID-19) Situation Report – 94, 1, 4, WHO. (Apr. 23, 2020), https://www.who.int/docs/default-source/coronaviruse/situationreports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0 4.

<sup>&</sup>lt;sup>12</sup> *Id* 

<sup>&</sup>lt;sup>13</sup> *Id*.

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contaminated surfaces and objects.<sup>14</sup> The virus may be transmitted through personto-person contact when one is as close as six feet of an infected individual, and as far as twenty-seven feet.

- 34. People can also spread COVID-19 while asymptomatic, making testing or seclusion of only those who are exhibiting symptoms an ineffective solution.
- 35. COVID-19 can result in respiratory failure, kidney failure, and death. In serious cases, COVID-19 causes acute respiratory disease syndrome ("ARDS"), which is life-threatening; those who receive ideal medical care with ARDS have a 30% mortality rate. Infected individuals who do not die from the disease may experience serious damage to the lungs, heart, liver, or other organs, resulting in prolonged recovery periods, including extensive rehabilitation from neurological damage and loss of respiratory capacity.
- 36. Complications from COVID-19 can manifest at an alarming pace. Patients can show the first symptoms of infection in as little as two days after exposure, and their condition can seriously deteriorate in as little as five days or sooner.
- 37. People age 45 and over face a high risk of serious illness from COVID-19, while those over the age of 55 face a high risk of serious illness or death from COVID-19. Certain underlying medical conditions increase the risk of serious illness or death from COVID-19 for people of any age, including lung disease, heart disease, hypertension, asthma, chronic liver or kidney disease, diabetes, epilepsy, compromised immune systems (such as from cancer, HIV, or an autoimmune

<sup>&</sup>lt;sup>14</sup> Interim Infection Prevention and Control Recommendations for Patience with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings, CDC, Apr. 2020, https://cutt.ly/ztRAo0X.

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disease), blood disorders (including sickle cell disease), metabolic disorders, stroke, neurological conditions, and others.

- 38. COVID-19 patients in higher-risk categories who develop serious illness will need advanced support, including access to specialized equipment (including ventilators and dialysis machines, which are in limited supply), and entire teams of care providers. Critical COVID-19 patients may require 1:1 or 1:2 nurse-to-patient ratios, respiratory therapists, and intensive care physicians. Many of the drastic measures implemented by government officials over the past several weeks are to "flatten the curve" of the spread of the disease, to ensure that health care systems are not overwhelmed by too many serious COVID-19 cases at once.
- 39. Even some younger and healthier people who contract COVID-19 may require supportive care, which may include supplemental oxygen, positive pressure ventilation, and in extreme cases, extracorporeal mechanical oxygenation.
- 40. There is no vaccine against COVID-19, nor is there any known medication to prevent or cure infection from the virus.
- 41. While hand washing and disinfecting surfaces are advised, social distancing—remaining physically separated from known or potentially infected individuals—is the main strategy to prevent infection. For social distancing to be effective, it must occur before individuals exhibit any symptoms.

### II. COVID-19 is Particularly Dangerous in a Custodial Setting.

42. Detention facilities are breeding grounds for infectious diseases, due to such factors as shared bathrooms, telephones, eating spaces, and common areas; high rates of turnover and mixing between detained persons and staff, who may be infected by persons outside the facility; close quarters that prevent social distancing; poor ventilation; minimal access to sinks, showers, toilets, water, personal hygiene supplies, and facility cleaning supplies; and substandard medical

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services. Viruses like COVID-19 that are transmitted through droplets pose special risks, as detained persons are not able to keep the necessary six-foot distance to avoid a cough or sneeze. And higher-than-average rates of chronic conditions among incarcerated people may increase their susceptibility to infection and the likelihood that they will become sick. Those risk factors are either absent or less acute when a detained person is able to shelter in place in the community, leading public health experts to recommend release as a safer alternative to incarceration.

- 43. Cognizant of the heightened risks of COVID-19 in custodial settings, the CDC issued a guidance on March 23, 2020, recommending that all correctional facilities take preventative measures, including: ensuring an adequate supply of hygiene and medical supplies; allowing for alcohol-based sanitizer throughout facilities; providing no-cost soap to all detained persons for frequent handwashing; cleaning and disinfecting frequently touched surfaces several times per day; performing pre-intake screening and temperature checks for all new entrants to a facility; increasing space between all detained persons to at least six feet, staggering meals; and having healthcare staff perform regular rounds.<sup>15</sup>
- 44. The USMS has failed to implement or abide by this guidance at OMDC.
- 45. As contagious as the coronavirus is in daily life in any given community, the virus is significantly *more* likely to spread in detention facilities than outside of them. In the community, scientists estimate that one person with COVID-19 will infect about two and a half people without social distancing, and about one person with strong social distancing and quarantining. By contrast, scientists estimate that, in confined settings like prisons and cruise ships, one person

<sup>&</sup>lt;sup>15</sup> United States v. Kennedy, No. 18-20314, Dkt. 77 (E.D. Mich. Mar. 27, 2019) (citing Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities, CDC, Mar. 23, 2020).

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with COVID-19 will infect about 11 people, each of whom will in turn infect up to eleven other people.

- 46. The BOP implemented a multi-phase COVID-19 plan, which it began preparing with help from the CDC and WHO in January 2020. 16 Phase One of BOP's plan involved obtaining guidance from its Health Services Division on the nature of COVID-19 and tactics to mitigate its spread. Phase Two involved, *inter alia*, suspending social visits, legal visits, and transfers of detained persons; implementing measures such as staggered meal and recreation times to maximize social distancing; screening new arrivals; and quarantining or isolating individuals with certain risk factors.
- Oakdale, Louisiana "exploded" with COVID-19 cases in March, leading to the first COVID-19-induced death of a federal detainee. BOP-confirmed cases across the country have continued to rise. As of April 23, the BOP reported 620 inmates and 357 staff had tested positive for COVID-19—more than fifteen times the number of cases reported on April 1,<sup>17</sup> and still almost certainly an undercount as BOP is only testing very sick inmates—and at least 24 inmates had died of COVID-19 in federal custody.<sup>18</sup>
- 48. As depicted in the below chart, the rate of increase in COVID-19 cases among those in BOP custody continues to be magnitudes higher than the rate in the

<sup>&</sup>lt;sup>16</sup> Federal Bureau of Prisons, *Federal Bureau of Prisons COVID-19 Action Plan* (Mar. 13, 2020), https://bit.ly/3bQ1xlM.

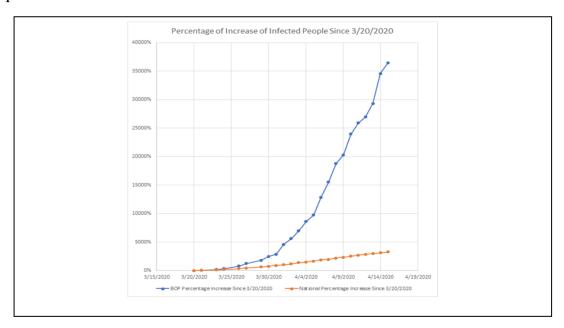
<sup>&</sup>lt;sup>17</sup> Bureau of Prisons, *Open COVID-19 Tested Positive Cases* (last accessed Apr. 22, 2020) https://www.bop.gov/coronavirus/; Bureau of Prisons, *Open COVID-19 Tested Positive Cases* (Apr. 1, 2020),

https://web.archive.org/web/20200401000146/https://www.bop.gov/coronavirus/.

<sup>&</sup>lt;sup>18</sup> Bureau of Prisons, *Open COVID-19 Tested Positive Cases* (last accessed Apr. 23, 2020), https://www.bop.gov/coronavirus/.

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general population<sup>19</sup> and will keep rising because social distancing is effectively impossible in detention:



- 49. On April 3, 2020, the Attorney General issued a memo encouraging the BOP to release prisoners to home confinement.<sup>20</sup>
- 50. Significantly, neither the BOP's multi-phase COVID-19 plan nor the Attorney General's April memo govern individuals in USMS custody at OMDC. Nor has the USMS adopted its own plan. Instead, the USMS has simply claimed that it "continues to pay close attention to the Coronavirus (COVID-19) situation and will follow the recommendations of CDC as well as state and local public health agencies where USMS offices are located."<sup>21</sup>
- 51. Numerous detained persons and staff at OMDC have already tested positive for COVID-19. In addition, because of limited testing and widespread

<sup>&</sup>lt;sup>19</sup> Federal Defenders of New York, *BOP-Reported Positive Tests for COVID-19 Nationwide*, https://federaldefendersny.org/ (last visited Apr. 22, 2020).

<sup>&</sup>lt;sup>20</sup> Memorandum from Attorney General William Barr to Director of Bureau of Prisons, *The Increasing Use of Home Confinement at Institutions Most Affected by COVID-19*, https://politi.co/2UV3JBi.

<sup>&</sup>lt;sup>21</sup> Coronavirus (COVID-19), USMS, https://www.usmarshals.gov/coronavirus/, (last accessed Apr. 23, 2020).

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community exposure to the virus throughout Southern California, it is likely that additional staff and detained persons are, or will soon be, exposed to the virus in their day-to-day life without knowing it. The number of positive cases in San Diego County has jumped to 2,643 positive cases as of April 22, with 152 new cases reported just that day.<sup>22</sup> Notably, on March 30, San Diego County's chief medical officer, Dr. Nick Yphantides, reported that "four 'congregate living sites'—which can be assisted living facilities, prisons, or anywhere where large groups of people congregate in one living location—have tested positive for 33 cases and include two of the county's deaths from the illness." These positive cases emerged despite the fact that those sites were "under strict health protocols."

The San Diego area healthcare system risks being overwhelmed.<sup>23</sup> A surge of hospitalizations from OMDC due to Defendants' failure to reduce the detained population will divert scarce local medical resources in San Diego at a time when the community is taking drastic measures to "flatten the curve." If local public health systems are overwhelmed, they will be unable to provide necessary care to community members in need. This, in turn, will increase the likelihood of preventable deaths in the San Diego community.

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<sup>&</sup>lt;sup>22</sup> Covid-19 Cases by Date Reported, Cty. San Diego, Emergency Operations Ctr. (Apr. 23, 2020),

https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/Epidemiolo gy/COVID-19%20Bar%20Graph%20of%20New%20and%20Total%20Cases.pdf.

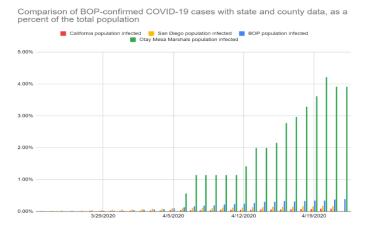
<sup>&</sup>lt;sup>23</sup> Will Huntsberry, *How Fast the Coronavirus Could Spread in San Diego, in One Chart, Voice of San Diego*, Voice of San Diego, Mar. 25, 2020, https://www.voiceofsandiego.org/topics/public-safety/how-fast-the-coronavirus-could-spread-in-san-diego-in-one-chart/.

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### III. A COVID-19 Outbreak Is Underway at OMDC.

53. A COVID-19 outbreak is underway at OMDC. Individuals detained in the facility thus face an imminent threat of irreparable harm via illness, permanent injury, or even death.

54. As of April 23, OMDC had 97 confirmed detainee cases (38 persons detained by USMS and 59 persons detained by ICE), 18 CoreCivic employee cases, and 8 ICE employee cases. The spread of the virus has been faster among USMS detainees at OMDC than it has in BOP facilities as a whole:<sup>24</sup>



55. The OMDC facility does not appear to conduct widespread testing for COVID-19, and there is no way to be certain how far the virus has already spread. Responses to a survey conducted by the Federal Defenders of San Diego of their detained clients in early April estimated that 22 to 40 detainees had tested positive

The infection rate dropped on April 19 not because of any improvement in conditions at OMDC, but because of an increase in the number of Marshals detainees held there. On April 19, there were 304 Marshals detainees. On April 20, there were 309 detainees, and on April 21, there were 332 detainees. The graph compares infections of detained persons to infections in California. Data for the graph comes from BOP's COVID-19 tested positive list on its website, plus these sources: Federal Bureau of Prisons, *Population Statistics* (last visited Apr. 2, 2020), https://bit.ly/2UDxt71 (BOP inmate population); California Department of Public Health, *CDPH News Releases 2020*, (last visited Apr. 2, 2020), https://bit.ly/2JD0Z6I (California positive cases); United States Census Bureau, *QuickFacts: California* (last visited Apr. 2, 2020), https://bit.ly/2ypzjQ6 (California population).

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56. Because OMDC detains individuals under the custody of the USMS, it is particularly vulnerable to a COVID-19 outbreak. Individuals in USMS custody are generally awaiting trial or sentencing. As a result, the detained population is transitory, with intake and release being far more common than at a long-term

Additionally, because the facility is intended for relatively short-term stays, OMDC does not provide the same level of medical care to detained individuals as long-

detention facility. This, in turn, increases the risks of exposure to COVID-19.

term detention facilities might.

distancing and other essential mitigation efforts.

57. The facility does not and cannot adequately provide the mitigation measures that public health experts and the CDC recommend. It is virtually impossible for individuals at OMDC to comply with the CDC's recommendation to remain six feet apart at all times. Individuals detained at the facility share communal living space and items such as phones, toilets, showers, and sinks.

58. Persons detained at OMDC are housed together in pods, which consist of roughly 70 to 100 persons each. The pods house individuals in close quarters, well under the distance of six feet apart that the CDC recommends. Within each pod, most individuals share small cells with two or three persons per cell. For example, Plaintiff Lara-Soto shares a 3-by-5 meter (approximately 9-by-16 foot) cell with three other people and, like everyone at the facility, is locked in the cell every evening with his cellmates for at least seven hours until morning.

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- 19 20 21 22 23 24 25
- sharing tables, telephones and showers. They cannot reliably maintain a six-foot distance in communal areas. Chairs and tables in communal areas are bolted to the ground and chairs are less than three feet apart. To watch television—a key source of COVID-19 news—individuals have to sit or stand in close proximity to each other. In one of the pods, more than 100 individuals recently crowded around four televisions at once in a small room. The preparation and distribution of food at the facility has been particularly problematic. Before April 6, in order to get to the cafeteria, individuals were crowded in a locked sally port with fifteen to twentyfive other detained individuals. At the cafeteria, they had to stand approximately one foot apart from one another in line to retrieve their food, which was delivered in a fifteen-person work-line with individuals standing shoulder-to-shoulder. The dining area was often crowded. By April 23, detained persons no longer ate in the cafeteria but ate within their pod. However, detained individuals still had to wait in a single file line—less than six feet apart—to get food within their pod. Many detained individuals had to eat at the communal tables in the pods, while some individuals resorted to eating on the toilet in their cell where possible in an effort to try to distance themselves from others. As of April 14, 2020, one individual with symptoms consistent with

When not in their cells, detained persons use common spaces together,

- COVID-19 was still working in the kitchen and other kitchen staff who worked in close proximity with individuals from pods that have had positive COVID-19 cases were still preparing and serving food for the entire facility, some without masks. As of April 23, due to additional positive COVID-19 cases, the OMDC kitchens appear to have closed and food is primarily distributed through boxed lunches.
- Not only is social distancing essentially impossible in these conditions, but the hygienic situation in the facility is inadequate to abate the spread

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of COVID-19. The facility relies on "volunteer" cleaning by detained persons, who are not provided with sufficient protective equipment, such as gloves or masks. Showers, which all individuals within a pod must share, are only cleaned once or twice a day rather than after every use. Telephones—which are generally not six feet apart—are not wiped down after each use. Plaintiff Ridley reported that cleaning supplies used in the facility are highly diluted. Plaintiff Cano, who works in the kitchen, reported not having cleaning solution and cleaning her area of the kitchen with only a wet rag, and Plaintiff Szurgot reported having to reuse rags to wipe down communal surfaces because clean rags are not always available.

- 62. Individuals detained at OMDC also lack access to sufficient personal hygiene products. Detainees report receiving only one small bar of soap every few days—an insufficient amount given the rigorous handwashing required to avoid contracting COVID-19. No hand sanitizer is available and—in at least one case—facility staff have confiscated soap from individuals. The facility often runs out of toilet paper—sometimes for multiple days. In one instance, after Plaintiff Cano asked for a roll of toilet paper, a correctional officer told her that they ran out and that she should use a sock instead.
- 63. OMDC has not been providing detained persons adequate protective equipment such as masks and gloves. Approximately two weeks ago, detained persons received only one disposable mask each and were told they had to use it for a period of two weeks. Detention center staff themselves are not consistently wearing masks or gloves and are not practicing social distancing.
- 64. Despite these conditions and the existing positive COVID-19 cases, OMDC does not appear to be conducting widespread testing. Many detainees report flu-like symptoms consistent with COVID-19 but are not tested. OMDC staff provides sick detainees with Tylenol or ibuprofen pills or tells them to drink water

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with salt. Even in pods where individuals have tested positive for the virus, OMDC staff have informed detained persons that they would only test those with severe symptoms or that testing everyone would be too expensive. This is particularly alarming given that COVID-19 carriers can be asymptomatic or not show symptoms for up to two weeks after exposure. "Screening people based on observable symptoms is just a game of catch up." *In re. Extradition of Toledo Manrique*, No. 19-mj- 71055, 2020 WL 1307109, at \*1 (N.D. Cal. Mar. 19, 2020) (ordering release on bail in part because government's management plan did not "say anything about testing"). Moreover, to the extent that detained persons are tested, even positive test results are not immediately communicated and acted upon: at least one detained person was informed by his counsel, not OMDC officials, that he had tested positive for COVID-19 and was not removed from his pod until approximately an hour and a half later.

- 65. These policies are turning OMDC into a ticking time bomb. Plaintiff Gonzalez-Soto, for example, recently had a high fever and was vomiting for two days. Once he was able to see a doctor, he received a physical and some Tylenol. The doctor informed him that he would only be tested for COVID-19 if he displayed symptoms for five days. Gonzalez-Soto was not isolated from his cellmate and continued his laundry duties while sick, delivering laundry to every person in his pod daily. He has since tested positive for COVID-19.
- 66. Given the alarming situation at the facility, a number of Plaintiffs and other detained individuals have filed or attempted to file grievances asking for protective gear, hygiene products and improved conditions to no avail. Grievance slips (the only means of filing grievances) are supposed to be available in each pod for individuals to fill out and file. Yet the slips are not consistently available, and a direct request for slips from staff may not be responded to for up to five days.

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Some detained persons have not filed grievances because they believe they will be rejected as a matter of course. In one case, after an individual learned that his prior cellmate had tested positive for coronavirus and had to be hospitalized, he filed a grievance merely asking to be tested for COVID-19. The grievance was denied. When responding to grievances, the USMS has not consistently provided a means of appeal.

- 67. The situation has become unbearable for those in detention at OMDC, and both a pod and kitchen crew have gone on a hunger strike to protest conditions. Among their requests are that OMDC (1) test everyone, (2) tell the detained persons whether they have been exposed via identified cases among the staff, (3) provide clarity on those who have become sick and sent for treatment but not tested, and (4) provide disinfectant and require its use.
- 68. The CDC recommendations previously described are virtually impossible at OMDC. Under these conditions, none of the Plaintiffs are able to consistently maintain a six-foot distance from others. Detained persons are aware that the facility is woefully inadequate, and many fear dying at the facility.

### IV. Release is Essential to Ensure the Safety of Class Members and the General Public.

69. Because of the severity of the threat posed by COVID-19 and its potential to rapidly spread throughout detention facilities, public health experts recommend the immediate release from custody of people most vulnerable to COVID-19. Release protects the people with the greatest vulnerability to COVID-19 from transmission of the virus and allows for greater risk mitigation both for people who remain detained and the broader community. Release of the most vulnerable people from custody also reduces the burden on the region's health care infrastructure by reducing the likelihood that an overwhelming number of people

- 70. Across the country, state officials and jail staff have recognized the threat posed by COVID-19 and released high numbers of detained persons. Jail administrators in Cuyahoga County, Ohio;<sup>25</sup> Los Angeles, California;<sup>26</sup> San Francisco, California;<sup>27</sup> Jefferson County, Colorado;<sup>28</sup> and the State of New Jersey,<sup>29</sup> among others, have concluded that widespread release of detained people is a necessary and appropriate public health intervention.<sup>30</sup>
- 71. Widespread release of vulnerable individuals is necessary because it is extremely difficult, if not practically impossible, for facilities like OMDC to adopt policies that can sufficiently protect detained persons.

<sup>&</sup>lt;sup>25</sup> Scott Noll & Camryn Justice, *Cuyahoga County Jail Releases Hundreds of Low-Level Offenders to Prepare for Coronavirus Pandemic*, (Mar. 20, 2020 6:04 p.m.), https://www.news5cleveland.com/news/local-news/oh-cuyahoga/cuyahoga-county-jail-releases-hundreds-of-low-level-offenders-to-prepare-for-coronavirus-pandemic.

<sup>&</sup>lt;sup>26</sup> Alene Tchekmedyian, *More L.A. County Jail Inmates Released Over Fears of Coronavirus Outbreak*, L.A. Times, Mar. 19, 2020, https://cutt.ly/ltRSCs6.

<sup>&</sup>lt;sup>27</sup> Megan Cassidy, *Alameda County Releases 250 Jail Inmates Amid Coronavirus Concerns, SF to Release 26*, San Francisco Chronicle, Mar. 20, 2020, https://cutt.ly/0tRSVmG.

<sup>&</sup>lt;sup>28</sup> Jenna Carroll, *Inmates Being Released Early from JeffCo Detention Facility Amid Coronavirus Concerns*, KDVR Colorado, Mar. 19, 2020, https://cutt.ly/UtRS8LE.

<sup>&</sup>lt;sup>29</sup> Erin Vogt, Here's NJ's Plan for Releasing Up to 1,000 Inmates as COVID-19 Spreads (March 23, 2020), https://cutt.ly/QtRS53w.

<sup>&</sup>lt;sup>30</sup> See also Wilson v. Williams, No. 4:20-cv-00794 (N.D. Ohio Apr. 22, 2020) (ordering federal prison to identify, within one day, all members of a medically vulnerable subclass and to evaluate their eligibility for transfer, including through compassionate release or furlough, within two weeks).

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72. Defendants' continued detention of Plaintiffs and members of the proposed classes under current conditions and population levels puts them at a high risk of exposure to a highly contagious disease resulting in serious illness, severe harm, or death, in violation of the pretrial Plaintiffs' and classes' Fifth Amendment right to due process and the post-conviction Plaintiffs' and classes' Fifth Amendment rights and/or their Eighth Amendment right to be free from cruel and unusual punishment.

## I. The Pretrial Plaintiffs' Incarceration at OMDC during the Current COVID-19 Pandemic Violates their Fifth Amendment Right to Due Process.

- 73. The Fifth Amendment to the U.S. Constitution guarantees individuals the right to be free from punitive conditions of confinement. The government violates this guarantee when conditions of confinement lack a "reasonable relation to the purpose for which the individual is committed." *Jones v. Blanas*, 393 F.3d 918, 931 (9th Cir. 2004). This standard is met when the conditions create an unreasonable risk to detainees' safety and health, such that pretrial detainees need only show "an intentional decision" regarding conditions that puts detainees at "substantial risk of suffering serious harm" and a failure to "take reasonable available measures to abate that risk." *See Gordon v. Cty. of Orange*, 888 F.3d 1118, 1125 (9th Cir. 2018).
- 74. Defendants are harming pretrial Plaintiffs by detaining them in a facility where they are at a high risk of contracting COVID-19. Given the existing outbreak of COVID-19 at the facility and the availability of alternatives to confinement, continued pretrial detention lacks a reasonable relationship to any legitimate governmental purpose. It is excessive in relation to the goals of pretrial detention and its objectives can easily be accomplished through alternatives to

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detention. Moreover, the policies adopted by the BOP since the emergence of COVID-19—including a multi-step action plan and a recommendation of home confinement in some cases—evince that individuals in pretrial detention at OMDC are being held in worse conditions of confinement than those in BOP custody who are already convicted of crimes.

- II. The Post-Conviction Plaintiffs' Incarceration at OMDC during the Current COVID-19 Pandemic Violates Their Fifth Amendment Right of Due Process, and/or Their Eighth Amendment Right to be Free from Cruel and Unusual Punishment.
- 75. Defendants' continued confinement of Post-Conviction Plaintiffs similarly lacks a reasonable relationship to any legitimate governmental purpose given the substantial risks imposed by COVID-19, the existing outbreak at the facility, and the available alternatives to confinement, in violation of their Fifth Amendment rights. Additionally, the Eighth Amendment prohibits punishment that is "cruel and unusual." To the extent that conditions violate the Eighth Amendment, they necessarily violate the Fifth Amendment as well. *Jones*, 393 F.3d at 933.
- 76. Under the Eighth Amendment, prison officials "must provide humane conditions of confinement;" "ensure that inmates receive adequate food, clothing, shelter, and medical care," and "take reasonable measures to guarantee the safety of the inmates[.]" *Farmer v. Brennan*, 511 U.S. 825, 832 (1994) (internal quotation marks omitted). This obligation also requires corrections officials to address prisoners' serious medical needs. *See Estelle v. Gamble*, 429 U.S. 97, 104 (1976); *Brown v. Plata*, 563 U.S. 493, 531-32 (2011).
- 77. Conditions that pose an unreasonable risk of future harm violate the Eighth Amendment's prohibition against cruel and unusual punishment. *Helling*, 509 U.S.at 33–34 ("That the Eighth Amendment protects against future harm to inmates is not a novel proposition. . . . It would be odd to deny an injunction to inmates who plainly proved an unsafe, life-threatening condition in their prison on

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the ground that nothing yet had happened to them."). Corrections officials are thus obligated to protect incarcerated people from infectious diseases such as COVID-19; they may not wait until detained persons are already infected, ill, or dying.

78. Detention officials violate the Eighth Amendment by acting with "deliberate indifference" to a substantial risk of serious harm. *Farmer*, 511 U.S. at 828. With respect to an impending infectious disease like COVID-19, deliberate indifference is satisfied when corrections officials "ignore a condition of confinement that is sure or very likely to cause serious illness and needless suffering the next week or month or year," even when "the complaining inmate shows no serious current symptoms." *Helling*, 509 U.S. at 33. Here, Defendants' deliberately indifferent failure to allow post-conviction Plaintiffs and class members to engage in proper social distancing and other medically recommended mitigation efforts violates their Eighth Amendment rights.

### III. 28 U.S.C. § 2241 is an Appropriate Vehicle to Remedy These Violations.

- 79. Section 2241(c)(3) allows this court to order the release of detained persons such as Plaintiffs who are held "in violation of the Constitution." 28 U.S.C. 2241(c)(3); *Preiser v. Rodriguez*, 411 U.S. 475, 484 (1973) ("It is clear, not only from the language of §§ 2241(c)(3) and 2254(a), but also from the common-law history of the writ, that the essence of habeas corpus is an attack by a person in custody upon the legality of that custody, and that the traditional function of the writ is to secure release from illegal custody."); *Peyton v. Rowe*, 391 U.S. 54, 67 (1968) (Section 2241(c)(3) can afford immediate release for claims other than those challenging the sentence itself).
- 80. The Ninth Circuit and Supreme Court have held that where "prisoners would have been entitled to immediate release from prison [if successful], habeas was the exclusive remedy for the[] claims." *Nettles v. Grounds*, 830 F.3d 922, 927

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81. Alternatively, this Court may order release pending resolution of the Plaintiffs' habeas petition in the form of enlargement, a remedy sometimes referred to as "release" or "bail," in which an individual remains in custody, but the place of custody is enlarged by the Court. *See Wilson v. Williams*, No. 4:20-cv-00794, at \*8 (N.D. Ohio Apr. 22, 2020) ("District courts have inherent authority to grant enlargement to a defendant pending a ruling on the merits of that defendant's habeas petition."). The Ninth Circuit has recognized a District Court's authority to order enlargement where there are "special circumstances or a high probability of success." *Land v. Deeds*, 878 F.2d 318 (9th Cir. 1989). Recently, in *Wilson*, the Court ordered this remedy for a medically vulnerable subclass of incarcerated individuals in light of the COVID-19 pandemic. *See Wilson*, No. 4:20-cv-00794 at \*8–9 (finding exceptional circumstances and a likelihood of success on the merits and ordering respondents "to determine the appropriate means of transferring medically vulnerable subclass members out of [a federal prison]").

### **CLASS ACTION ALLEGATIONS**

82. Plaintiffs bring this action pursuant to Rule 23 of the Federal Rules of Civil Procedures on behalf of themselves and a class of similarly situated individuals.

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- 84. The "Pretrial Medically Vulnerable Subclass" is defined as "All current and future people detained at OMDC who are aged 45 years or older or who have medical conditions that place them at heightened risk of severe illness or death from COVID-19."<sup>31</sup>
- 85. Plaintiffs Alvarez, Broderick, Lara-Soto, Ridley, Szurgot, and Doe can represent the Pretrial Class because each Plaintiff is currently housed at OMDC in pretrial custody. Plaintiffs Alvarez, Ridley, Szurgot, and Doe can represent the Pretrial Medically Vulnerable Subclass because each Plaintiff is over the age of 45 and/or suffers from a qualifying medical condition.
- 86. Plaintiffs Cano, Crespo-Venegas, Gonzalez-Soto, Ramcharan, and Smith each seek to represent a class of all current and future people in post-conviction, presentencing detention at OMDC ("Post-Conviction Class"), including a subclass of persons who, by reason of age or medical condition, are particularly vulnerable to injury or death if they were to contract COVID-19 ("Post-Conviction Medically Vulnerable Subclass").

<sup>31</sup> Qualifying medical conditions for class membership will fall within standards

set by the CDC. See, e.g., People Who Are at Higher Risk for Severe Illness, CDC, Apr. 15, 2020, https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/people-at-higher-risk.html. Pregnancy should also qualify someone for Subclass membership because the CDC acknowledges that "[p]regnant people have had a higher risk of severe illness when infected with viruses from the same family as COVID-19." See Pregnancy and Breastfeeding, CDC, Apr. 15, 2020, https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html.

- 87. The "Post-Conviction Medically Vulnerable Subclass" is defined as "All current and future people detained post-conviction at OMDC who are aged 45 years or older or who have medical conditions that place them at heightened risk of severe illness or death from COVID-19."
- 88. Plaintiffs Cano, Crespo-Venegas, Gonzalez-Soto, Ramcharan, and Smith can represent the Post-Conviction Class because each Plaintiff is currently housed at OMDC in post-conviction custody. Crespo-Venegas, Gonzalez-Soto, and Smith can represent the Post-Conviction Medically Vulnerable Subclass because each Plaintiff is over the age of 45 and/or suffers from a qualifying medical condition.
- 89. This action has been brought and may properly be maintained as a class action under federal law. It satisfies the numerosity, commonality, typicality, and adequacy requirements for maintaining a class action under Fed. R. Civ. P. 23(a).
- 90. Joinder is impracticable because (1) the classes are numerous; (2) the classes include future members, and (3) the class members are incarcerated, rendering their ability to institute individual lawsuits limited, particularly in light of the conditions at OMDC and generally reduced legal visitation and court closures in the Southern District of California instituted to address COVID-19 concerns.
- 91. There are at least 50 current people detained and an unknowable number of potential future people who will be detained in the proposed Pretrial Class. There are at least 50 current people detained post-conviction and an unknowable number of potential future people who will be detained post-conviction in the proposed Post-Conviction Class. The precise size of the proposed Pretrial and Post-Conviction Medically Vulnerable Subclasses are not presently known to Plaintiffs.

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- 92. Common questions of law and fact exist as to all members of the proposed Classes and Subclasses: all have a right to receive adequate COVID-19 prevention, testing, and treatment.
- 93. Named Plaintiffs have the requisite personal interest in the outcome of this action and will fairly and adequately protect the interests of the class. Plaintiffs have no interests adverse to the interests of the proposed classes. Plaintiffs retained pro bono counsel with experience and success in the prosecution of civil rights litigation. Counsel for Plaintiffs know of no conflicts among proposed class members or between counsel and proposed class members.
- 94. Defendants have acted on grounds generally applicable to all proposed Class members, and this action seeks declaratory and injunctive relief. Plaintiffs therefore seek class certification under Rule 23(b)(2).
- 95. In the alternative, the requirements of Rule 23(b)(1) are satisfied, because prosecuting separate actions would create a risk of inconsistent or varying adjudications with respect to individual class members that would establish incompatible standards of contact for the party opposing the proposed classes.

### **CLAIMS FOR RELIEF**

96. Plaintiffs in the Pretrial Class and Pretrial Medically Vulnerable Subclass seek relief under the Fifth Amendment to the U.S. Constitution because the Defendants' actions have subjected these individuals to unlawful punishment and amounts to deliberate indifferent to a substantial risk of serious harm. Plaintiffs in the Post-Conviction Class and Post-Conviction Medically Vulnerable Subclass seek relief under the Fifth Amendment and/or the Eighth Amendment to the U.S. Constitution because the Defendants' actions violate their rights to due process and amount to deliberate indifference to a substantial risk of serious harm to their health and safety.

97. OMDC has neither the capacity nor the ability to comply with public health guidelines to manage the outbreak of COVID-19 and, therefore, cannot provide for the safety of the Plaintiffs and proposed class members, absent a substantial reduction of the detainee population.

98. Defendants' actions and inactions result in the confinement of members of the Classes in a detention center where Defendants have not followed and seem incapable of following public health guidance regarding social distancing and personal hygiene, and treating or preventing COVID-19 outbreaks and deaths, all of which violates Plaintiffs' and the proposed class members' rights to treatment and adequate medical care.

# FIRST CLAIM FOR RELIEF: VIOLATION OF FIFTH AMENDMENT RIGHT TO SUBSTANTIVE DUE PROCESS (UNLAWFUL PUNISHMENT)

99. Plaintiffs incorporate herein the allegations set forth in the preceding paragraphs of this complaint.

100. Defendants have subjected the Pretrial and Post-Conviction Plaintiffs and proposed class members—particularly those Plaintiffs in the Medically Vulnerable Subclasses who by virtue of their age and/or medical conditions are at a high risk of severe illness or death if they contract COVID-19—to punishment, in violation of the Fifth Amendment, by providing conditions of confinement that substantially increase their risk of contracting COVID-19, for which there is no known vaccine, treatment, or cure. Defendants are therefore subjecting Plaintiffs and proposed class members to an unreasonable risk of serious harm and punitive conditions, in violation of their rights under the Due Process Clause. For the Medically Vulnerable Plaintiffs and Subclasses, these individuals' underlying

conditions—of which Defendants are or should be aware—render them especially vulnerable to severe illness or even death if they contract COVID-19.

- 101. Defendants' continued detention of Plaintiffs (and proposed class members) fails to adequately protect Plaintiffs and proposed class members from the risks of contracting COVID-19.
- 102. Plaintiffs' and the proposed class members' ongoing confinement, particularly under the dangerous and unsanitary conditions in OMDC, lacks a reasonable relationship to any legitimate governmental purpose or is excessive in relation to its purpose. To the extent that there is a purpose to Plaintiffs' and proposed class members' confinement, that purpose can be achieved through alternative and less harsh methods.
- 103. Defendants continued detention of the Pretrial and Post-Conviction Plaintiffs and proposed class members is punitive and therefore violates the Due Process Clause of the Fifth Amendment.

# SECOND CLAIM FOR RELIEF: VIOLATION OF FIFTH AMENDMENT RIGHT TO SUBSTANTIVE DUE PROCESS (DELIBERATE INDIFFERENCE)

- 104. Plaintiffs incorporate herein the allegations set forth in the preceding paragraphs of this complaint.
- 105. Defendants acted with knowing disregard for the maintenance of hygienic and safe conditions under which the Pretrial and Post-Conviction Plaintiffs (and proposed class members) are detained.
- 106. Defendants have acted with reckless or knowing disregard for the health and safety of the Pretrial and Post-Conviction Plaintiffs (and proposed class members) by failing to mitigate the risks of COVID-19 to Plaintiffs and proposed class members.

- 107. Defendants are subjecting the Pretrial and Post-Conviction Plaintiffs to a substantial risk of serious harm, particularly those Plaintiffs in the Medically Vulnerable Subclasses who by virtue of their age and/or medical conditions are at a high risk of severe illness or death if they contract COVID-19, for which there is no known vaccine, treatment, or cure.
- 108. Defendants are aware of or have recklessly disregarded the substantial risks COVID-19 imposes upon the Pretrial and Post-Conviction Plaintiffs and proposed class members.
- 109. Defendants have failed to take reasonable measures to abate the risk that the Pretrial and Post-Conviction Plaintiffs (and proposed class members) will contract COVID-19.
- 110. Defendants have acted with objective deliberate indifference to the health and safety of the Pretrial and Post-Conviction Plaintiffs (and proposed class members), in violation of the Fifth Amendment Due Process Clause.

## THIRD CLAIM FOR RELIEF: VIOLATION OF THE EIGHTH AMENDMENT (DELIBERATE INDIFFERENCE)

- 111. Plaintiffs incorporate herein the allegations set forth in the preceding paragraphs of this complaint.
- 112. Defendants are aware of the substantial risk COVID-19 poses to members of both Classes, and particularly members of the Medically Vulnerable Subclasses, yet have failed to take meaningful action to reduce the population of OMDC and otherwise mitigate the risk of harm to the Class members.
- 113. Defendants have therefore acted or failed to act with deliberate indifference to that risk in violation of the Post-Conviction Plaintiffs' (and proposed class members') Eighth Amendment rights.

114. Defendants' actions and inactions subject the Post-Conviction Plaintiffs and proposed class members to a risk of harm that contravenes contemporary standards of decency and is not tolerated in today's society.

115. By failing to implement controls necessary to contain the COVID-19 outbreak and stop preventable deaths at OMDC, Defendants have violated the Eighth Amendment rights of the Post-Conviction Class and particularly the Post-Conviction Medically Vulnerable Subclass.

### **REQUEST FOR RELIEF**

WHEREFORE, Plaintiffs and Class Members respectfully request that the Court:

- Certify this Petition as a Class Action and appoint named Plaintiffs as class and subclass representatives and the undersigned counsel as class counsel;
- b. Issue a writ of habeas corpus requiring the immediate release of both Medically Vulnerable Subclasses and the orderly release, with appropriate precautionary public health and safety measures, of a sufficient number of class members to reduce the overall population of USMS detainees at OMDC to levels that permit adequate social distancing, maintenance of hygiene, and provision of medical care, on the grounds that continued detention of class members under current conditions violates the Fifth and Eighth Amendments of the U.S. Constitution;
- c. In the alternative, issue injunctive relief or a temporary restraining order requiring Defendants, their officers, agents, servants, employees, attorneys, and all other persons in active concert or participation with any of the foregoing persons to immediately release both Medically Vulnerable Subclasses and ensure the orderly release,

with appropriate precautionary public health and safety measures, of a sufficient number of class members to reduce the overall population of USMS detainees at OMDC to levels that permit adequate social distancing, maintenance of hygiene, and provision of medical care, on the grounds that continued detention of class members under current conditions violates the Fifth and Eighth Amendments of the U.S. Constitution;

- d. Issue an order requiring Defendants to provide to Plaintiffs and the Court, at intervals the Court deems proper, information regarding the ongoing COVID-19 outbreak at OMDC;
- e. Order, following immediate release of all members of the Pretrial and Post-Conviction Medically Vulnerable Subclasses, a plan, to be immediately submitted to the Court and overseen by a qualified public health expert pursuant to Fed. R. Evid. 706, which outlines:
  - Specific mitigation efforts, in line with CDC guidelines to prevent, to the degree possible, contraction of COVID-19 by all Class Members not immediately released;
  - ii. A housing and/or public support plan for any released Class or Subclass Members for whom testing confirms exposure to or infection with COVID-19 and who do not readily have a place to self-isolate for the CDC-recommended period of time (currently 14 days).
- f. If immediate release is not granted on the basis of this Petition alone, then expedited review of the Petition, including oral argument, via telephonic or videoconference if necessary;

1	g.	Issue a judgement decla	aring that the conditions under which
2		Defendants have confined	d Plaintiffs and OMDC class members
3		violate the Due Process Cla	ause of the Fifth Amendment with respect
4		to both the Pretrial and I	Post-Conviction Classes, and the Eighth
5		Amendment's prohibition a	against cruel and unusual punishment with
6		respect to the Post-Convicti	ion Class;
7	h.	Grant Plaintiffs their reason	nable attorneys' fees and expenses pursuant
8		to the Equal Access to Ju	ustice Act, 28 U.S.C. § 2412, and other
9		applicable law; and	
10	i.	Grant any further relief as t	his Court deems just and proper.
11			
12			Respectfully submitted,
13			
14	DATED: A	pril 25, 2020	ROPES & GRAY LLP
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28	Dat for Writ of Hoborg Company and Compilaint for Injuration and Dealers to		
	Pet. for Writ of Habeas Corpus and Complaint for Injunctive and Declaratory Relief		

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