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March 17, 2020

VIA Email

Thomas Feeley
Director
Buffalo Field Office
Buffalo.Outreach@ice.dhs.gov

Jeffrey Searls
Acting Administrator
Buffalo Federal Detention Facility
Jeffrey.J.Searls@ice.dhs.gov

Re: Institutional Plan for Preventative Measures Against COVID-19

Dear Mr. Feeley and Mr. Searls:

As organizations that represent detained individuals held at the Buffalo Federal Detention Facility in Batavia, New York (“Batavia”), we write to urge you immediately to release individuals who are at high risk of contracting COVID-19 and those who pose a low risk of flight and danger in order to limit exposure to the virus among detained persons, facility staff, and the surrounding community. For those who remain detained throughout this pandemic, we ask that you develop and implement proactive plans for the prevention and management of the virus at Batavia and inform the detained population and the undersigned organizations of these plans by Friday, March 20. We have reviewed ICE’s national guidelines and identified critical gaps in the agency’s response. Therefore, we propose additional recommendations, developed in consultation with Dr. Jaimie Meyer, M.D., M.S., F.A.C.P., a professor at Yale University and expert in infectious disease in jails and prisons. We appreciate your attention to this urgent matter. The failure to have appropriate safeguards in place now may cost people’s lives later.

As you are certainly aware, COVID-19 poses a serious safety risk for staff and people incarcerated at Batavia that could jeopardize the standard of care at the facility. Incarcerated people are particularly vulnerable to outbreaks of contagious diseases. They are housed in close quarters, have little control over their daily interaction with others, are often in poor health, and lack access to necessary cleaning and other supplies.¹ According to experts on public health in jails, “it is only a matter of time” before COVID-19 appears in prisons, and “[a]ll prisons and jails should anticipate that the coronavirus will enter their facility.”²

¹ Saint Louis University, “‘Ticking Time Bomb’: Prisons Unprepared for Flu Pandemic, Says New Research.” Science Daily (Sept. 15, 2006), available at <https://www.sciencedaily.com/releases/2006/09/060915012301.htm>; Dr. Homer Venters, “4 ways to protect our jails and prisons from coronavirus.” The Hill (Feb. 29, 2020), available at <https://thehill-com.cdn.ampproject.org/c/s/thehill.com/opinion/criminal-justice/485236-4-ways-to-protect-our-jails-and-prisons-from-coronavirus?amp>.

² Nicole Wetsman, “Prisons and jails are vulnerable to COVID-19 outbreaks,” The Verge (Mar. 7, 2020), available at <https://www.theverge.com/2020/3/7/21167807/coronavirus-prison-jail-outbreaks>

First, in light of the extreme risks of detention during a pandemic, we ask that you immediately review custody determinations with the goal of reducing the detained population as much as possible. Public health experts expressly have recommended that in response to the threat of COVID-19, jails should “avoid holding people for low-level offenses” and “[p]eople who aren’t a risk to public safety shouldn’t be held in a jail.”³ ICE has broad discretion to release people on bond or, if ineligible for bond, on parole for “urgent humanitarian reasons or “significant public benefit.”⁴ Here, COVID-19 presents an urgent humanitarian reason for ICE proactively to release people on bond or parole who are at high risk of serious illness if they are infected.⁵ According to the Centers for Disease Control, the high-risk category includes older adults and individuals with serious chronic medical conditions like heart disease, diabetes, or lung disease.⁶ In addition, ICE should release—either on parole, on a lower bond, or on an alternative condition of release, such as GPS monitoring—individuals for whom the agency or an immigration judge has set bond, and who remain in your custody solely due to an inability to pay that bond. In these cases, an immigration court or ICE official has already found that such individuals do not pose a danger to the community or a significant flight risk.⁷ Reducing the number of people held unnecessarily at Batavia will decrease health risks not only for those detained but the staff and surrounding community, as well.

Second, for those who remain in detention, we ask that you develop a more detailed plan to prevent COVID-19 exposure at Batavia and communicate that plan to the detained population and the undersigned organizations. To the extent you have not done so already, we urge you to work together with public health professionals, including those at the New York State and Genesee County Departments of Public Health, to create specific evidence-based plans to prevent an outbreak of COVID-19 at Batavia. We have reason to believe that as of Friday, March 13, facility leadership had not communicated any Batavia-specific plans to the people in their custody. We have reviewed ICE’s March 15 national guidelines,⁸ but they fail to address several points of concern for our organizations and our expert, Dr. Meyer. Thus, we ask that the facility develop plans that address the following points:

health-outbreak-covid-19-flu-soap (quoting and citing Dr. Tyler Winkelman, co-director of the Health, Homelessness, and Criminal Justice Lab at the Hennepin Healthcare Research Institute in Minneapolis).

³ See *id.*

⁴ 8 U.S.C. § 1226(a); 8 C.F.R. § 212.5(b).

⁵ See 8 C.F.R. § 212.5(b) (providing for discretionary release of people with “serious medical conditions in which continued detention would not be appropriate” and pregnant women).

⁶ See Centers for Disease Control and Prevention, “People at Risk for Serious Illness from COVID-19” (Mar. 12, 2020), available at <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html#who-is-higher-risk>.

⁷ See 8 C.F.R. § 212.5(b) (noting parole of certain individuals is justified “provided the aliens present neither a security risk nor a risk of absconding”).

⁸ See Immigration and Customs Enforcement, ICE guidance on COVID-19 (Mar. 15, 2020), available at <https://www.ice.gov/covid19#wcm-survey-target-id>.

- **Sanitization:** We ask that the facility provide extra handwashing and sanitizing supplies to staff, detained individuals, and visitors, and sanitize common areas after use.
- **Screening:** The ICE national guidelines state that newly detained persons will be screened on intake but do not state the plans for screening staff and others who may be entering and exiting the facility.
- **Isolation:** The ICE national guidelines state that individuals with fever and/or respiratory symptoms will be placed in single medical housing rooms or airborne infection isolation rooms, but it is unclear how many such rooms exist at Batavia. It is also unclear whether the facility plans to test detained individuals or staff for COVID-19, and, if so, how and when those tests will be made available.
- **Housing:** We have reason to believe several double-bunked units within the facility are currently at capacity, particularly those with higher security classifications. We would like to know if Batavia has a plan to reduce the population in these units and/or remove high-risk individuals from units at or near capacity to facilitate social distancing.
- **Education:** We ask that detained people be educated on the virus and prevention measures they can take as soon as practicable, as well as plans for education of staff and others in regular contact with the facility. Enclosed is a powerpoint presentation developed by Dr. Anne Spaulding for incarcerated people and correctional staff that may be of use.
- **Staffing:** We would like to know the plans for staffing the facility if large numbers of staff, including medical staff, security staff, and detained workers involved in food preparation and cleaning, become ill.
- **Flu Vaccines:** The COVID-19 pandemic overlaps with the influenza season, and detained individuals are particularly at risk of contracting both viruses at the same time. Given that Batavia recently suffered a flu outbreak, we would like to know if Batavia plans to provide the seasonal influenza vaccine to all detained persons (or if you have already done so).
- **Visitation:** Given that social visits are suspended and legal visits are restricted, we ask the facility to consider providing free access to video or telephone calls for legal and social purposes.

Having robust, detailed plans that reduce the jail population and address the above questions can prevent the need for drastic restrictions later on. We therefore ask that you (1) immediately review custody determinations to identify those eligible to be released under affordable bonds, alternative to detention programs, or parole; (2) develop Batavia-specific plans to address our concerns; and (3) inform detained persons and the undersigned organizations of these plans by Friday, March 20.

Sincerely,

/s/ Victoria Roeck

Victoria Roeck
Megan Sallomi
Staff Attorneys

Christopher Dunn
Legal Director

The New York Civil Liberties Union Foundation

/s/ Jillian Nowak

Jillian Nowak
Supervising Immigration Attorney

Nicholas Phillips
Appellate Attorney

Jim Millstein
Managing Attorney

Karen Murtagh
Executive Director

Prisoners' Legal Services of New York

CC (via e-mail): Adam Khalil; Daniel Moar; David Coriell; U.S. Attorney's Office for the Western District of New York

Enclosures:

C.V. of Dr. Jaimie Meyer, M.D., M.S., F.A.C.P.
Powerpoint – Coronavirus COVID-19 and the Correctional Facility by Dr. Anne Spaulding

CURRICULUM VITAE

Date of Revision: November 20, 2019
Name: Jaimie Meyer, MD, MS, FACP
School: Yale School of Medicine

Education:
BA, Dartmouth College Anthropology 2000
MD, University of Connecticut School of Medicine 2005
MS, Yale School of Public Health Biostatistics and Epidemiology 2014

Career/Academic Appointments:
2005 - 2008 Residency, Internal Medicine, NY Presbyterian Hospital at Columbia, New York, NY
2008 - 2011 Fellowship, Infectious Diseases, Yale University School of Medicine, New Haven, CT
2008 - 2012 Clinical Fellow, Infectious Diseases, Yale School of Medicine, New Haven, CT
2010 - 2012 Fellowship, Interdisciplinary HIV Prevention, Center for Interdisciplinary Research on AIDS, New Haven, CT
2012 - 2014 Instructor, AIDS, Yale School of Medicine, New Haven, CT
2014 - present Assistant Professor, AIDS, Yale School of Medicine, New Haven, CT
2015 - 2018 Assistant Clinical Professor, Nursing, Yale School of Medicine, New Haven, CT

Board Certification:
AB of Internal Medicine, Internal Medicine, 08-2008, 01-2019
AB of Internal Medicine, Infectious Disease, 10-2010
AB of Preventive Medicine, Addiction Medicine, 01-2018

Professional Honors & Recognition:

International/National/Regional

2018 NIH Center for Scientific Review, Selected as Early Career Reviewer
2017 Doris Duke Charitable Foundation, Doris Duke Charitable Foundation Scholar
2016 American College of Physicians, Fellow
2016 NIH Health Disparities, Loan Repayment Award Competitive Renewal
2016 AAMC, Early Career Women Faculty Professional Development Seminar
2014 NIH Health Disparities, Loan Repayment Program Award
2014 NIDA, Women & Sex/Gender Differences Junior Investigator Travel Award
2014 International Women's/Children's Health & Gender Working Group, Travel Award
2014 Patterson Trust, Awards Program in Clinical Research
2013 Connecticut Infectious Disease Society, Thornton Award for Clinical Research
2011 Bristol Myers-Squibb, Virology Fellows Award

2006	NY Columbia Presbyterian, John N. Loeb Intern Award
2005	American Medical Women's Association, Medical Student Citation
2005	Connecticut State Medical Society, Medical Student Award
2000	Dartmouth College, Hannah Croasdale Senior Award
2000	Dartmouth College, Palaeopitus Senior Leadership Society Inductee

Yale University

2014	Women's Faculty Forum, Public Voices Thought Leadership Program Fellow
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Grants/Clinical Trials History:

Current Grants

Agency:	Center for Interdisciplinary Research on AIDS (CIRA)
I.D.#:	2019-20 Pilot Project Awards
Title:	Optimizing PrEP's Potential in Non-Clinical Settings: Development and Evaluation of a PrEP Decision Aid for Women Seeking Domestic Violence Services
P.I.:	Tiara Willie
Role:	Principal Investigator
Percent effort:	2%
Direct costs per year:	\$29,993.00
Total costs for project period:	\$29,993.00
Project period:	7/11/2019 - 7/10/2020

Agency:	SAMHSA
I.D.#:	H79 TI080561
Title:	CHANGE: Comprehensive Housing and Addiction Management Network for Greater New Haven
Role:	Principal Investigator
Percent effort:	20%
Direct costs per year:	\$389,054.00
Total costs for project period:	\$1,933,368.00
Project period:	11/30/2018 - 11/29/2023

Agency:	Gilead Sciences, Inc.
I.D.#:	Investigator Sponsored Award, CO-US-276-D136
Title:	Delivering HIV Pre-Exposure Prophylaxis to Networks of Justice-Involved Women
Role:	Principal Investigator
Percent effort:	8%
Direct costs per year:	\$81,151.00
Total costs for project	

period: \$306,199.00
 Project period: 6/19/2018 - 1/31/2020

Agency: NIDA
 I.D.#: R21 DA042702
 Title: Prisons, Drug Injection and the HIV Risk Environment
 Role: Principal Investigator
 Percent effort: 22%
 Direct costs per year: \$129,673.00
 Total costs for project period: \$358,276.00
 Project period: 8/1/2017 - 7/31/2020

Agency: Doris Duke Charitable Foundation
 I.D.#: Clinical Scientist Development Award
 Title: Developing and Testing the Effect of a Patient-Centered HIV Prevention Decision Aid on PrEP uptake for Women with Substance Use in Treatment Settings
 Role: Principal Investigator
 Percent effort: 27%
 Direct costs per year: \$149,959.00
 Total costs for project period: \$493,965.00
 Project period: 7/1/2017 - 6/30/2020

Past Grants

Agency: NIDA
 I.D.#: K23 DA033858
 Title: Evaluating and Improving HIV Outcomes in Community-based Women who Interface with the Criminal Justice System
 Role: Principal Investigator
 Percent effort: 75%
 Direct costs per year: \$149,509.00
 Total costs for project period: \$821,147.00
 Project period: 7/1/2012 - 11/30/2017

Agency: Robert Leet & Clara Guthrie Patterson Trust
 I.D.#: R12225, Award in Clinical Research
 Title: Disentangling the Effect of Gender on HIV Treatment and Criminal Justice Outcomes
 Role: Principal Investigator
 Percent effort: 10%
 Direct costs per year: \$75,000.00

Total costs for project

period: \$75,000.00
 Project period: 1/31/2014 - 10/31/2015

Agency: Bristol-Myers Squibb
 I.D.#: HIV Virology Fellowship Award
 Title: Effect of newer antiretroviral regimens on HIV biological outcomes in HIV-infected prisoners: a 13 year retrospective evaluation
 Role: Principal Investigator
 Percent effort: 10%
 Direct costs per year: \$34,390.00
 Total costs for project
 period: \$34,390.00
 Project period: 12/1/2011 - 11/30/2012

Pending Grants

Agency: NIMH
 I.D.#: R01 MH121991
 Title: Identifying Modifiable Risk and Protective Processes at the Day-Level that Predict HIV Care Outcomes among Women Exposed to Partner Violence
 P.I.: Sullivan, Tami
 Role: Principal Investigator
 Percent effort: 30%
 Direct costs per year: \$499,755.00
 Total costs for project
 period: \$4,148,823.00
 Project period: 1/1/2020 - 12/31/2024

Invited Speaking Engagements, Presentations, Symposia & Workshops Not Affiliated With Yale:**International/National**

- 2019: CME Outfitters, Washington, DC. "A Grassroots Approach to Weed out HIV and HCV in Special OUD Populations"
- 2019: US Commission on Civil Rights, Washington, DC. "An Analysis of Women's Health, Personal Dignity and Sexual Abuse in the US Prison System"
- 2018: College of Problems on Drug Dependence, College of Problems on Drug Dependence, San Diego, CA. "Research on Women who Use Drugs: Knowledge and Implementation Gaps and A Proposed Research Agenda"
- 2018: Clinical Care Options, Washington, DC. "Intersection of the HIV and Opioid Epidemics"
- 2016: Dartmouth Geisel School of Medicine, Hanover, NH. "Incarceration as Opportunity: Prisoner Health and Health Interventions"
- 2010: Rhode Island Chapter of the Association of Nurses in AIDS Care, Providence, RI. "HIV and Addiction"

Regional

- 2018: Clinical Directors Network, New York, NY. "PrEP Awareness among Special Populations of Women and People who Use Drugs"
- 2018: Frank H. Netter School of Medicine, Quinnipiac University, Hamden, CT. "HIV prevention for justice-involved women"
- 2017: Clinical Directors Network, New York, NY. "Optimizing the HIV Care Continuum for People who use Drugs"
- 2016: Frank H. Netter School of Medicine, Quinnipiac University, Hamden, CT. "Topics in Infectious Diseases"
- 2016: Connecticut Advanced Practice Registered Nurse Society, Wethersfield, CT. "Trends in HIV Prevention: Integration of Biomedical and Behavioral Approaches"

Peer-Reviewed Presentations & Symposia Given at Meetings Not Affiliated With Yale: International/National

- 2019: CPDD 81st Annual Scientific Meeting, CPDD, San Antonio, TX. "Punitive approaches to pregnant women with opioid use disorder: Impact on health care utilization, outcomes and ethical implications"
- 2019: 14th International Conference on HIV Treatment and Prevention Adherence, IAPAC Adherence, Miami, FL. "Decision-Making about HIV Prevention among Women in Drug Treatment: Is PrEP Contextually Relevant?"
- 2019: 2019 NIDA International Forum, NIDA, San Antonio, TX. "Diphenhydramine Injection in Kyrgyz Prisons: A Qualitative Study Of A High-Risk Behavior With Implications For Harm Reduction"
- 2019: 11th International Women's and Children's Health and Gender (InWomen's) Group, InWomen's Group, San Antonio, TX. "Uniquely successful implementation of methadone treatment in a women's prison in Kyrgyzstan"
- 2019: Harm Reduction International, Porto, Porto District, Portugal. "How does methadone treatment travel? On the 'becoming-methadone-body' of Kyrgyzstan prisons"
- 2019: APA Collaborative Perspectives on Addiction Annual Meeting, APA Collaborative Perspectives on Addiction Annual Meeting, Providence, RI. "Impact of Trauma and Substance Abuse on HIV PrEP Outcomes among Women in Criminal Justice Systems. Symposium: "Partner Violence: Intersected with or Predictive of Substance Use and Health Problems among Women.""
- 2019: Society for Academic Emergency Medicine (SAEM), Worcester, MA. "Effects of a Multisite Medical Home Intervention on Emergency Department Use among Unstably Housed People with Human Immunodeficiency Virus"
- 2019: Conference on Retroviruses and Opportunistic Infections (CROI), IAS, Seattle, WA. "Released to Die: Elevated Mortality in People with HIV after Incarceration"
- 2019: 12th Academic and Health Policy on Conference on Correctional Health, 12th Academic and Health Policy on Conference on Correctional Health, Las Vegas, NV. "PrEP Eligibility and HIV Risk Perception for Women across the Criminal Justice Continuum in Connecticut"
- 2019: Association for Justice-Involved Female Organizations (AJFO), Atlanta, GA. "Treatment of Women's Substance Use Disorders and HIV Prevention During and Following Incarceration"

- 2018: American Public Health Association (APHA) Annual Meeting, American Public Health Association (APHA) Annual Meeting, San Diego, CA. "New Haven Syringe Service Program: A model of integrated harm reduction and health care services"
- 2018: 12th National Harm Reduction Conference, 12th National Harm Reduction Conference, New Orleans, LA. "Service needs and access to care among participants in the New Haven Syringe Services Program"
- 2018: 22nd International AIDS Conference, 22nd International AIDS Conference, Amsterdam, NH, Netherlands. "HIV risk perceptions and risk reduction strategies among prisoners in Kyrgyzstan: a qualitative study"
- 2018: 22nd International AIDS Conference, 22nd International AIDS Conference, Amsterdam, NH, Netherlands. "Methadone Maintenance Therapy Uptake, Retention, and Linkage for People who Inject Drugs Transitioning From Prison to the Community in Kyrgyzstan: Evaluation of a National Program"
- 2018: NIDA International Forum, NIDA, San Diego, CA. "HIV and Drug Use among Women in Prison in Azerbaijan, Kyrgyzstan and Ukraine"
- 2018: 2018 Conference on Retroviruses and Opportunistic Infections (CROI), CROI, Boston, MA. "From prison's gate to death's door: Survival analysis of released prisoners with HIV"
- 2018: 11th Academic and Health Policy on Conference on Correctional Health, Academic Consortium on Criminal Justice Health, Houston, TX. "Assessing Concurrent Validity of Criminogenic and Health Risk Instruments among Women on Probation in Connecticut"
- 2017: IDWeek: Annual Meeting of Infectious Diseases Society of America, Infectious Diseases Society of America, San Diego, CA. "Predictors of Linkage to and Retention in HIV Care Following Release from Connecticut, USA Jails and Prisons (Oral presentation)"
- 2017: International AIDS Society (IAS) Meeting, International AIDS Society, Paris, Île-de-France, France. "Late breaker: Predictors of Linkage to and Retention in HIV Care Following Release from Connecticut, USA Jails and Prisons"
- 2017: NIDA International Forum, NIDA, Montreal, QC, Canada. "A Mixed Methods Evaluation of HIV Risk among Women with Opioid Dependence in Ukraine"
- 2017: International Women's and Children's Health and Gender Working Group, International Women's and Children's Health and Gender Working Group, Montreal, QC, Canada. "Assessing Receptiveness to and Eligibility for PrEP in Criminal Justice-Involved Women"
- 2017: International Women's and Children's Health and Gender Working Group, International Women's and Children's Health and Gender Working Group, Montreal, QC, Canada. "A Mixed Methods Evaluation of HIV Risk among Women with Opioid Dependence in Ukraine"
- 2017: Annual Meeting of the Society for Applied Anthropology, Society for Applied Anthropology, Santa Fe, NM. "Where rubbers meet the road: HIV risk reduction for women on probation (Oral presentation)"
- 2016: International Women's and Children's Health and Gender Working Group, International Women's and Children's Health and Gender Working Group, Palm Springs, CA. "An Event-level Examination of Successful Condom Negotiation Strategies among College Women"
- 2015: CDC National HIV Prevention Conference, CDC, Atlanta, GA. "Beyond the Syndemic: Condom Negotiation and Use among Women Experiencing Partner Violence (Oral presentation)"

- 2015: International Harm Reduction Conference, International Harm Reduction, Kuala Lumpur, Federal Territory of Kuala Lumpur, Malaysia. "Evidence-Based Interventions to Enhance Assessment, Treatment, and Adherence in the Chronic Hepatitis C Care Continuum"
- 2015: International Women's and Children's Health and Gender Working Group, International Women's and Children's Health and Gender Working Group, Phoenix, AZ. "Violence, Substance Use, and Sexual Risk among College Women"
- 2014: International Women's and Children's Health and Gender Working Group, International Women's and Children's Health and Gender Working Group, San Juan, San Juan, Puerto Rico. "Gender Differences in HIV and Criminal Justice Outcomes"
- 2014: College on Problems in Drug Dependence (CPDD), College on Problems in Drug Dependence (CPDD), San Juan, San Juan, Puerto Rico. "Gender Differences in HIV and Criminal Justice Outcomes"
- 2014: Conference on Retroviruses and Opportunistic Infections (CROI), Conference on Retroviruses and Opportunistic Infections (CROI), Boston, MA. "Longitudinal Treatment Outcomes in HIV-Infected Prisoners and Influence of Re-Incarceration"
- 2013: HIV Intervention and Implementation Science Meeting, HIV Intervention and Implementation Science Meeting, Bethesda, MD. "Women Released from Jail Experience Suboptimal HIV Treatment Outcomes Compared to Men: Results from a Multi-Center Study"
- 2013: Conference on Retroviruses and Opportunistic Infections (CROI), Conference on Retroviruses and Opportunistic Infections (CROI), Atlanta, GA. "Women Released from Jail Experience Suboptimal HIV Treatment Outcomes Compared to Men: Results from a Multi-Center Study"
- 2012: IDWeek: Infectious Diseases Society of America Annual Meeting, Infectious Diseases Society of America, San Diego, CA. "Correlates of Retention in HIV Care after Release from Jail: Results from a Multi-site Study"
- 2012: IDWeek: Infectious Diseases Society of America Annual Meeting, Infectious Diseases Society of America, San Diego, CA. "Frequent Emergency Department Use among Released Prisoners with HIV: Characterization Including a Novel Multimorbidity Index"
- 2012: 5th Academic and Health Policy Conference on Correctional Health, 5th Academic and Health Policy Conference on Correctional Health, Atlanta, GA. "Effects of Intimate Partner Violence on HIV and Substance Abuse in Released Jail Detainees"
- 2011: IAPAC HIV Treatment and Adherence Conference, IAPAC, Miami, FL. "Adherence to HIV treatment and care among previously homeless jail detainees"

Regional

- 2019: Connecticut Infectious Disease Society, New Haven, CT. "Preliminary Findings from a Novel PrEP Demonstration Project for Women Involved in Criminal Justice Systems and Members of their Risk Networks"
- 2017: Connecticut Public Health Association Annual Conference, Connecticut Public Health Association, Farmington, CT. "The New Haven syringe services program"
- 2014: Connecticut Infectious Disease Society Annual Meeting, Connecticut Infectious Disease Society, Orange, CT. "Longitudinal Treatment Outcomes in HIV-Infected Prisoners and Influence of Re-Incarceration"

- 2013: Connecticut Infectious Disease Society Annual Meeting, Connecticut Infectious Disease Society, Orange, CT. "Women Released from Jail Experience Suboptimal HIV Treatment Outcomes Compared to Men: Results from a Multi-Center Study"
- 2011: Connecticut Infectious Disease Society Annual Meeting, Connecticut Infectious Disease Society, Orange, CT. "Emergency Department Use by Released Prisoners with HIV"

Professional Service:

Peer Review Groups/Grant Study Sections

- 2019 - present Reviewer, NIDA, NIH Reviewer: RFA-DA-19-025: HEAL Initiative: Justice Community Opioid Innovation Network (JCOIN) Clinical Research Centers
- 2019 - present Reviewer, Yale DCFAR Pilot Projects
- 2018 - present Reviewer, Center for Interdisciplinary Research on AIDS (CIRA)
- 2015 - present Reviewer, University of Wisconsin-Milwaukee Research Growth Initiative

Advisory Boards

- 2017 Advisor, HIV Prevention and Treatment in Cis-Gendered Women, Gilead Sciences, Inc.

Journal Service

Editor/Associate Editor

- 2019 - present Associate Editor, Journal of the International Association of Providers of AIDS Care (JIAPAC), Section Editor: Sex and Gender Issues

Reviewer

- 2019 - present Reviewer, JAIDS
- 2012 - present Reviewer, Addiction Sci and Clin Pract
- 2012 - present Reviewer, Addictive Behav Reports
- 2012 - present Reviewer, AIDS Care
- 2012 - present Reviewer, Social Science and Medicine
- 2012 - present Reviewer, SpringerPlus
- 2012 - present Reviewer, Substance Abuse Treatment Prevention and Policy
- 2012 - present Reviewer, Women's Health Issues
- 2012 - present Reviewer, Yale Journal of Biology and Medicine
- 2012 - present Reviewer, AIMS Public Health
- 2012 - present Reviewer, American Journal on Addictions
- 2012 - present Reviewer, American Journal of Epidemiology
- 2012 - present Reviewer, American Journal of Public Health
- 2012 - present Reviewer, Annals Internal Medicine
- 2012 - present Reviewer, BMC Emergency Medicine
- 2012 - present Reviewer, BMC Infectious Diseases
- 2012 - present Reviewer, BMC Public Health
- 2012 - present Reviewer, BMC Women's Health

2012 - present	Reviewer, Clinical Infectious Diseases
2012 - present	Reviewer, Critical Public Health
2012 - present	Reviewer, Drug and Alcohol Dependence
2012 - present	Reviewer, Drug and Alcohol Review
2012 - present	Reviewer, Epidemiologic Reviews
2012 - present	Reviewer, Eurosurveillance
2012 - present	Reviewer, Health and Justice (Springer Open)
2012 - present	Reviewer, International Journal of Drug Policy
2012 - present	Reviewer, International Journal of Prisoner Health
2012 - present	Reviewer, International Journal of STDs and AIDS
2012 - present	Reviewer, International Journal of Women's Health
2012 - present	Reviewer, JAMA Internal Medicine
2012 - present	Reviewer, Journal of Family Violence
2012 - present	Reviewer, Journal of General Internal Medicine
2012 - present	Reviewer, Journal of Immigrant and Minority Health
2012 - present	Reviewer, Journal of International AIDS Society
2012 - present	Reviewer, Journal of Psychoactive Drugs
2012 - present	Reviewer, Journal of Urban Health
2012 - present	Reviewer, Journal of Women's Health
2012 - present	Reviewer, Open Forum Infectious Diseases
2012 - present	Reviewer, PLoS ONE
2012 - present	Reviewer, Public Health Reports

Professional Service for Professional Organizations

AAMC Group on Women in Medicine and Science (GWIMS)

2016 - present Member, AAMC Group on Women in Medicine and Science (GWIMS)

American College of Physicians

2016 - present Fellow, American College of Physicians
2013 - 2016 Member, American College of Physicians

American Medical Association

2005 - present Member, American Medical Association

American Medical Women's Association

2011 - present Member, American Medical Women's Association

American Society of Addiction Medicine

2009 - present Member, American Society of Addiction Medicine

Connecticut Infectious Disease Society

2011 - present Member, Connecticut Infectious Disease Society

Infectious Disease Society of America

2008 - present Member, Infectious Disease Society of America

InWomen's Network, NIDA International Program

2013 - present Member, InWomen's Network, NIDA International Program

New York State Medical Society

2005 - 2008 Member, New York State Medical Society

Yale University Service

University Committees

2016 - 2018 Council Member, Leadership Council, Women's Faculty Forum

Medical School Committees

2015 - 2016 Committee Member, US Health and Justice Course, Yale School of Medicine

2014 - present Committee Member, Yale Internal Medicine Traditional Residency Intern Selection Committee

Public Service

2019 - present Faculty Member, Yale University Program in Addiction Medicine

2017 - present Faculty Member, Arthur Liman Center for Public Interest Law, Yale Law School

2013 - present Mentor, Women in Medicine at Yale Mentoring Program

2012 - present Faculty Member, Yale Center for Interdisciplinary Research on AIDS

2009 - 2011 Instructor, Preclinical Clerkship Tutor, Yale School of Medicine

2002 Fellow, Soros Open Society Institute

1998 - 1999 Fellow, Costa Rican Humanitarian Foundation

Bibliography:

Peer-Reviewed Original Research

1. Meyer JP, Qiu J, Chen NE, Larkin GL, Altice FL. Emergency department use by released prisoners with HIV: an observational longitudinal study. *PLoS One* 2012, 7:e42416.
2. Chen NE, Meyer JP, Bollinger R, Page KR. HIV testing behaviors among Latinos in Baltimore City. *Journal Of Immigrant And Minority Health / Center For Minority Public Health* 2012, 14:540-51.
3. Chitsaz E, Meyer JP, Krishnan A, Springer SA, Marcus R, Zaller N, Jordan AO, Lincoln T, Flanigan TP, Porterfield J, Altice FL. Contribution of substance use disorders on HIV treatment outcomes and antiretroviral medication adherence among HIV-infected persons entering jail. *AIDS And Behavior* 2013, 17 Suppl 2:S118-27.

4. Chen NE, Meyer JP, Avery AK, Draine J, Flanigan TP, Lincoln T, Spaulding AC, Springer SA, Altice FL. Adherence to HIV treatment and care among previously homeless jail detainees. *AIDS And Behavior* 2013, 17:2654-66.
5. Althoff AL, Zelenov A, Meyer JP, Fu J, Brown SE, Vagenas P, Avery AK, Cruzado-Quiñones J, Spaulding AC, Altice FL. Correlates of retention in HIV care after release from jail: results from a multi-site study. *AIDS And Behavior* 2013, 17 Suppl 2:S156-70.
6. Williams CT, Kim S, Meyer J, Spaulding A, Teixeira P, Avery A, Moore K, Altice F, Murphy-Swallow D, Simon D, Wickersham J, Ouellet LJ. Gender differences in baseline health, needs at release, and predictors of care engagement among HIV-positive clients leaving jail. *AIDS And Behavior* 2013, 17 Suppl 2:S195-202.
7. Meyer JP, Wickersham JA, Fu JJ, Brown SE, Sullivan TP, Springer SA, Altice FL. Partner violence and health among HIV-infected jail detainees. *International Journal Of Prisoner Health* 2013, 9:124-41.
8. Meyer JP, Qiu J, Chen NE, Larkin GL, Altice FL. Frequent emergency department use among released prisoners with human immunodeficiency virus: characterization including a novel multimorbidity index. *Academic Emergency Medicine : Official Journal Of The Society For Academic Emergency Medicine* 2013, 20:79-88.
9. Meyer JP, Cepeda J, Springer SA, Wu J, Trestman RL, Altice FL. HIV in people reincarcerated in Connecticut prisons and jails: an observational cohort study. *The Lancet. HIV* 2014, 1:e77-e84.
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Coronavirus COVID-19 and the Correctional Facility



Updated for NCCHC Webinar, Pandemic Day 3

Anne C. Spaulding MD MPH

March 13, 2020

Emory Center for the
Health of Incarcerated Persons

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Please do not alter content without contacting author and collaborators



EMORY

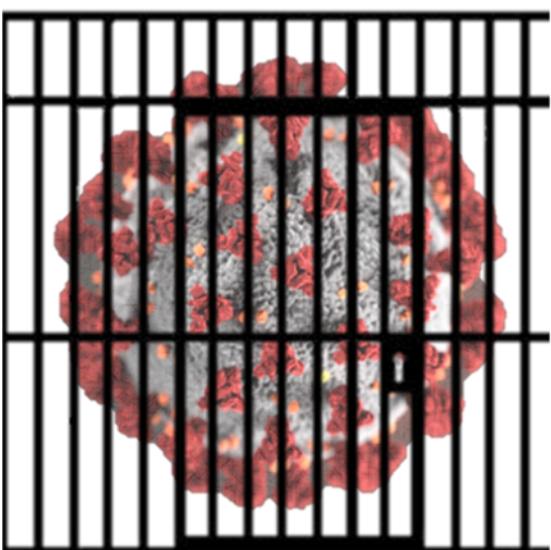
ROLLINS
SCHOOL OF
PUBLIC
HEALTH

PRE-TEST

Item	Response	Your Points
1. Exchanged contact information with local/state health department? Established a point of contact?	Yes and Yes: +9 points Will contact them today: +1 point No: subtract 1	
2. Does your facility have plans in place to send ill staff (both public sector, contractors) home/to hospital?	Yes: +1 point No: subtract 1	
3. Screening folks entering your custody for exposure? Cough, OR shortness of breath, OR temp. > 100.4 F?	Yes and Yes: +2 Yes or Yes: +1 No: subtract 1	
4. Are you (or will you be) separating sick (isolation) from exposed (quarantined) from general population?	Yes: +1 points No: subtract 1	

Outline: COVID-19 Overview for a Congregate Environment

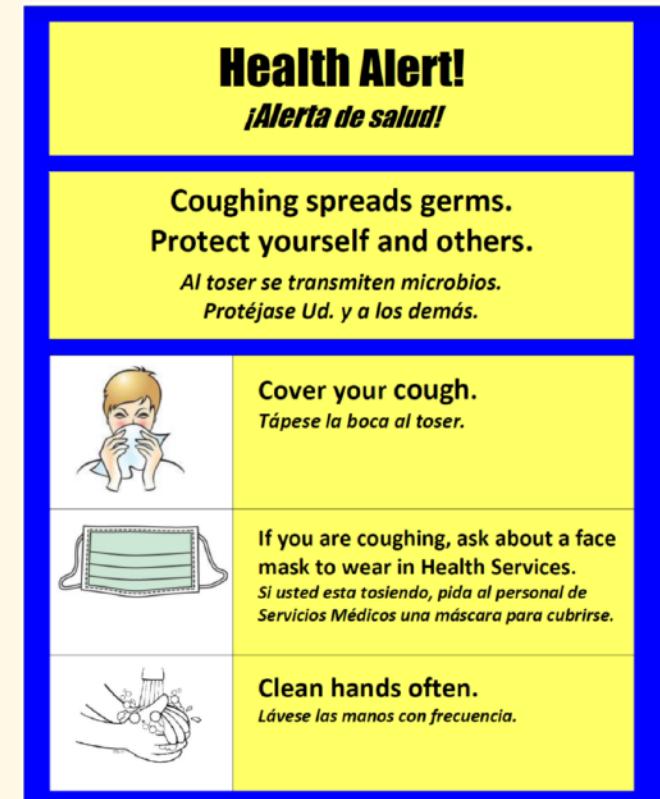
1. Spread
2. Prevention: *Actions taken to prevent the spread of virus within a facility that include handwashing, environmental cleaning, and social distancing between well*
3. Symptoms, Diagnosis and Treatment
4. Facility Management
 - *Isolation—procedure of separating the already sick from those not ill, to prevent the spread of disease. The term isolation is distinct from the term quarantine.*



- *Quarantine—procedure of separating and restricting the movement of persons not sick yet, but were exposed. Allows rapid identification of those who become sick.*
- *Other implications for corrections.*

3.13.2020

BOP signage

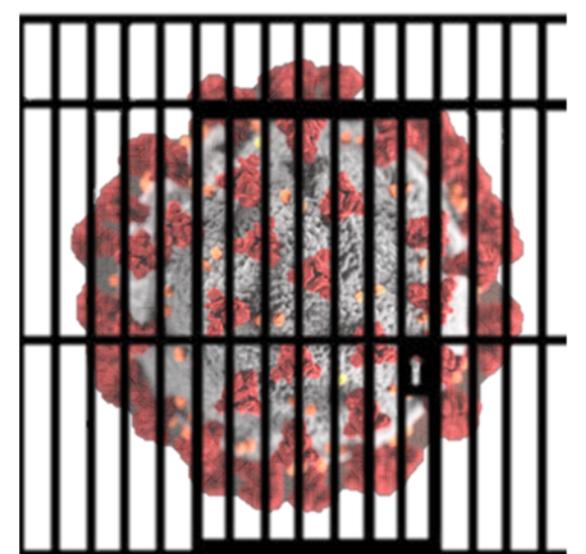


COVID-19 Overview: Spread

- COVID-19 is a viral disease
 - *The virus' official name is "SARS-CoV-2"; COVID-19 is the name of the disease*
- Transmission
 - The virus is thought to spread mainly from person-to-person. Incubation period: 2-14 days.
 - Between people who are in close contact with one another (within about 6 feet)
 - Via respiratory droplets produced when an infected person coughs or sneezes.
 - Droplets can land in mouths/eyes/noses of people nearby or possibly be inhaled into lungs.



- May spread from inanimate objects that have virus on them, but this is not the main way it spreads.
- People are thought to be most contagious when they are the sickest.
- Some spread might be possible before people show symptoms, but this is not the main way it spreads.

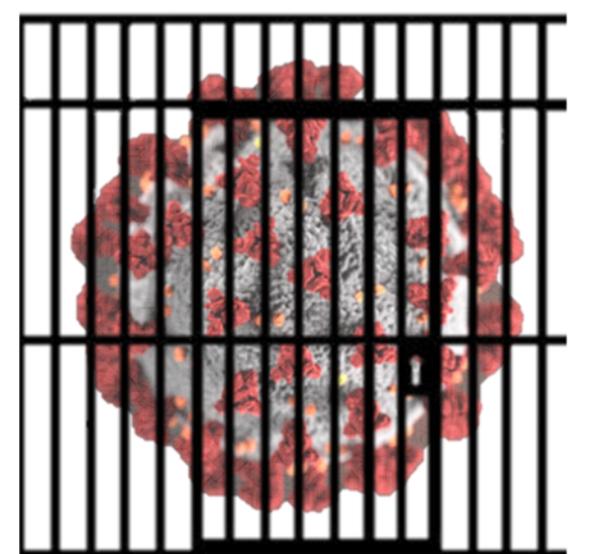


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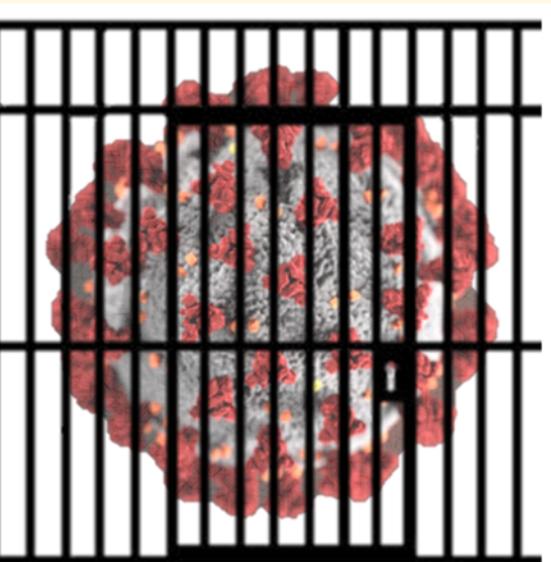
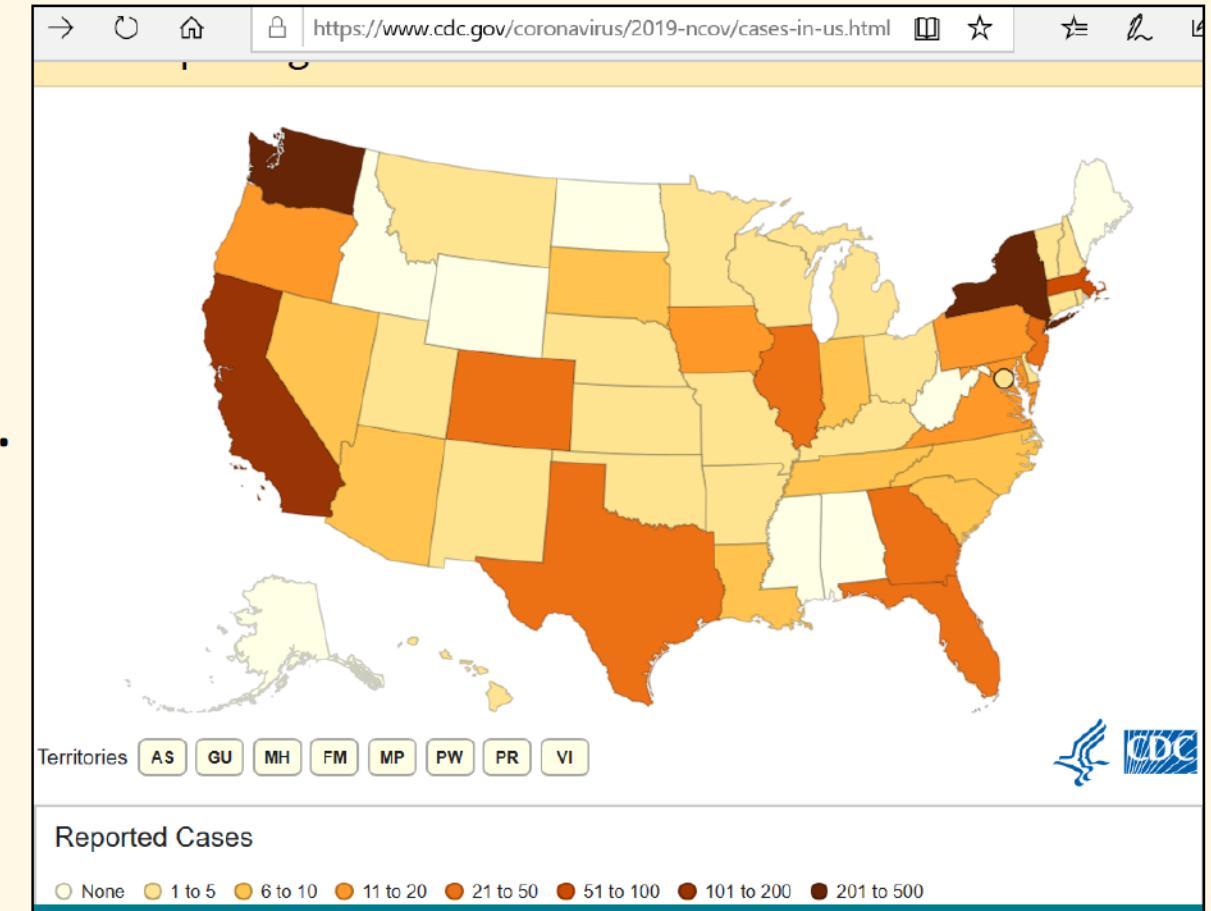
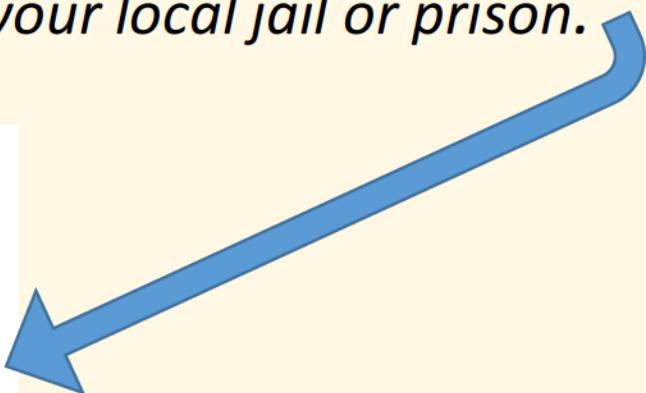


- May spread from inanimate objects that have virus on them, but this is not the main way it spreads.
- Sicker person: more contagious.
- Some spread before people show symptoms, but this is not the main way it spreads.



COVID-19 Overview: Spread

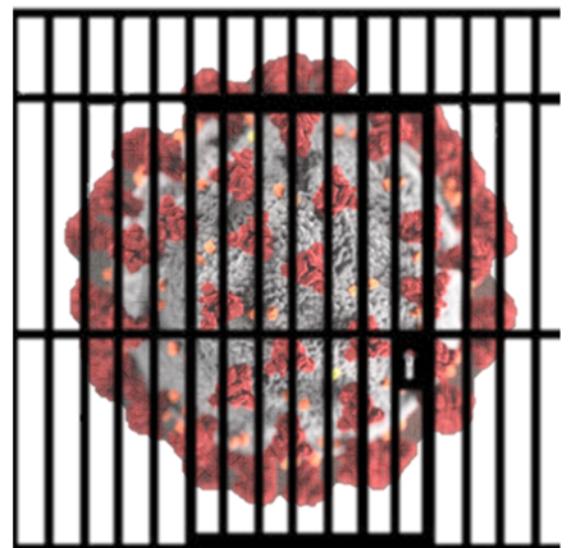
- From Wuhan to Worldwide.
- Mid-March 2020, several US hotspots.
- Keep up with local situation.
- *If it's spreading in your community, it's likely to show up in your local jail or prison.*



Persons entering your correctional facilities could have been exposed while in a highly prevalent region, near or far, or may have been in close proximity to just one case...

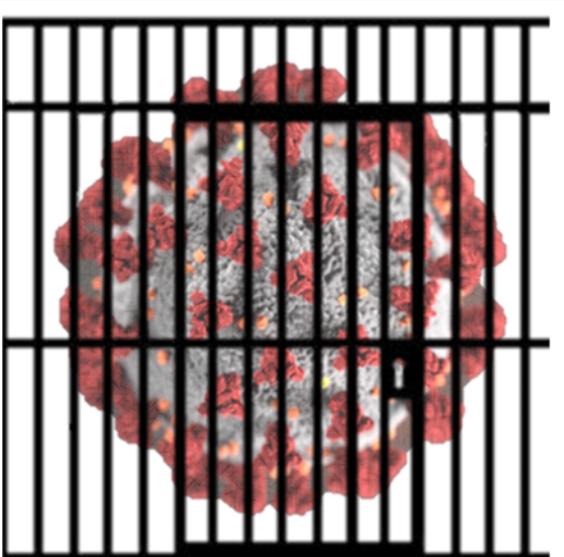
COVID-19 Overview: Prevention

- Avoid close contact with people who are sick. No hugs, no handshakes.
- Avoid touching your eyes, nose, and mouth.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Wash your hands with soap and water frequently, esp. after cough.
 - Wash for 20 seconds—as long as it takes to sing the Happy Birthday song.
- Clean/disinfect frequently touched objects/ surfaces: hospital-grade disinfectant.
- Follow CDC's recommendations for using facemask, isolation of infected persons.
- Correctional staff should stay off from work if they feel sick.
*Have a cough, fever and/or shortness of breath? Stay home.
If illness becomes worse, seek medical care; call ahead before you go!*



Overview: Symptoms & Diagnosis

- Many people are asymptomatic or only have mild symptoms.
- Can appear soon (~ 2 days) or long (~2 weeks) after exposure.
Average: 5 days.
- Some common symptoms: fever, cough, shortness of breath.
Which sounds an awful lot like the flu...



Tip: finish up your flu vaccine stock now!

**COVID
19** | SYMPTOMS OF CORONAVIRUS DISEASE 2019

Patients with COVID-19 have experienced mild to severe respiratory illness.

Symptoms* can include

- FEVER** (Illustration of a person with a thermometer)
- COUGH** (Illustration of a person coughing)
- SHORTNESS OF BREATH** (Illustration of a person having difficulty breathing)

*Symptoms may appear 2-14 days after exposure.

Seek medical advice if you develop symptoms, and have been in close contact with a person known to have COVID-19 or if you live in or have recently been in an area with ongoing spread of COVID-19.

CDC

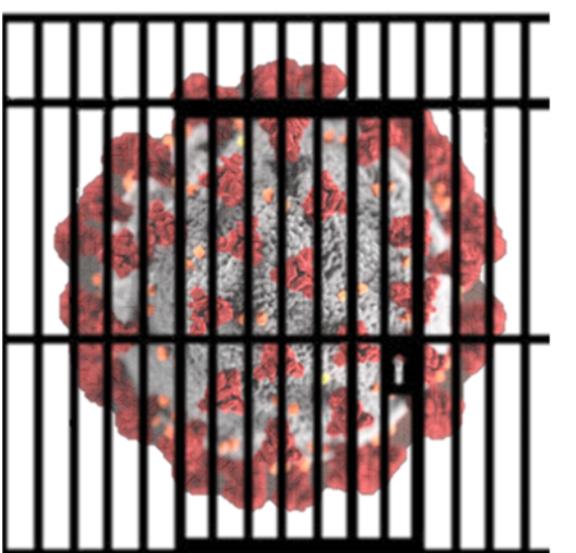
For more information: www.cdc.gov/COVID19-symptoms

Overview: Symptoms & Diagnosis

To review, the **common symptoms** are : 1) fever, 2) cough, and 3) shortness of breath.

Diagnostic guidelines, best tests are evolving, so check your local and state health department for latest updates. Also: go to CDC.gov

1. CHECK where patient has been within 14 days of the onset of symptoms—
-- Any place on current list of areas where there is local transmission??
2. ASK about contact with an infected person.
3. ASSESS Symptoms—note fever may not be evident if taking fever suppressing medications.

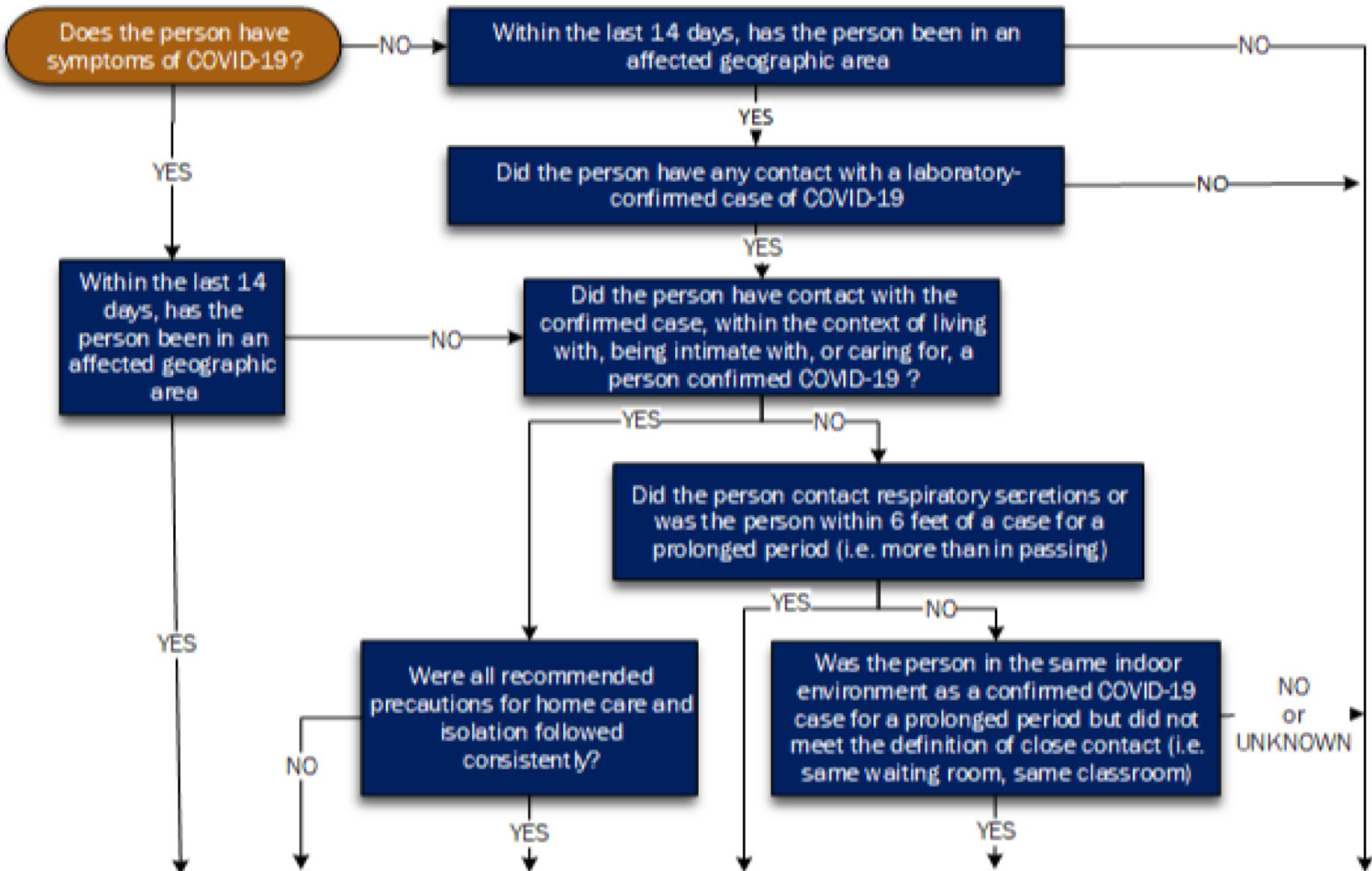


Alaska DOC Flow Chart:

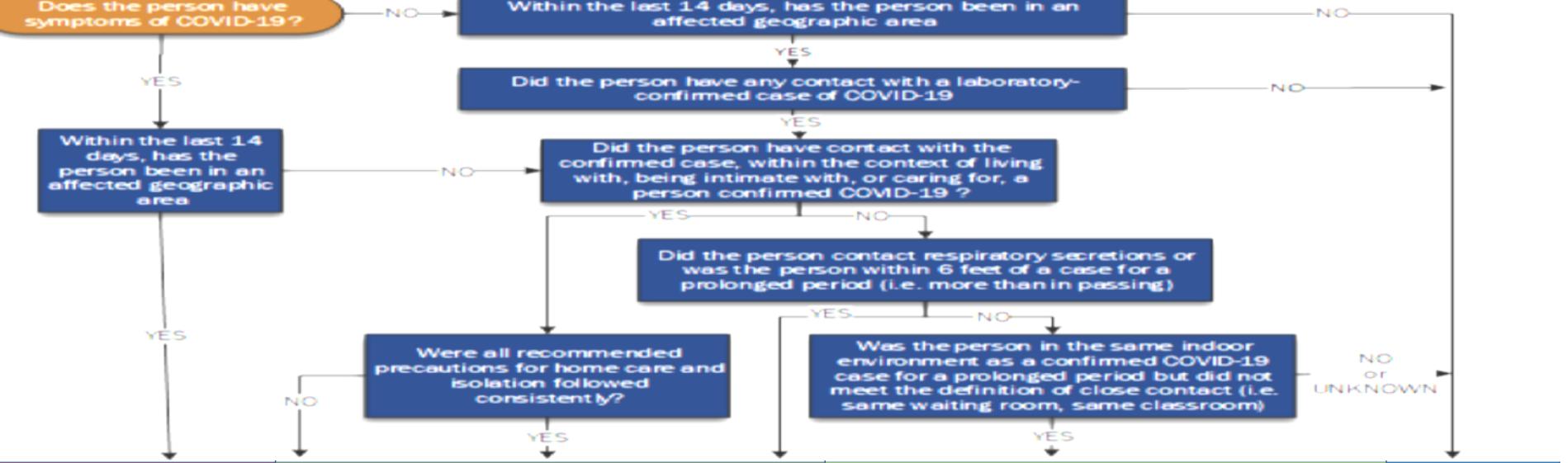
Cohort as
last
resort.

Only cohort
symptomatic
patients with
lab diagnosed
COVID
together.

courtesy: R.
Lawrence

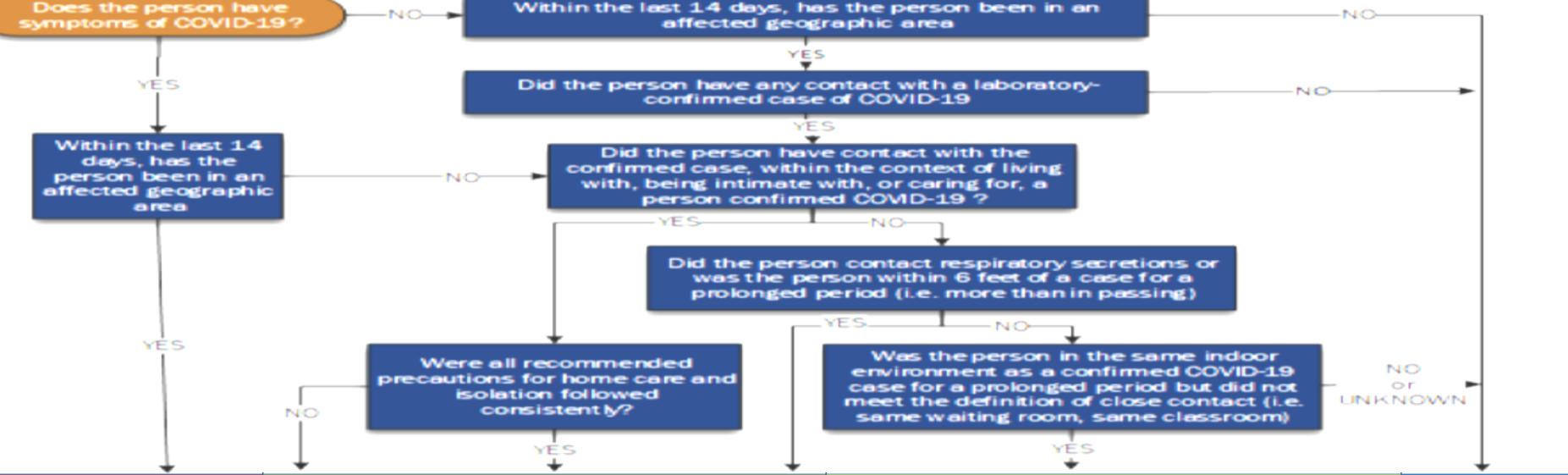


Alaska DOC Flow Chart



	HIGH RISK	MEDIUM RISK	LOW RISK	NO IDENTIFIED RISK
Actions for no COVID-19 symptoms	Place in quarantine. Remain under quarantine authority. No activities in public settings.	House in single cell. Monitoring to include VS with temperature bid. No congregate activities. Mask for transport out of cell.	House single cell. Monitoring to include VS bid. Wear mask in congregate settings or when moving within the facility.	None
with COVID-19 symptoms	Immediate isolation; medical evaluation per PUI instructions. Pre-notify hospital/ER of any transfers. Mask for all movement outside isolation.	Immediate isolation; medical evaluation according to PUI guidelines. Mask for all movement outside cell.	House in single cell. Avoid congregate activities. Wear mask for any movement outside cell.	Routine care

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COVID-19, the new type of coronavirus

For those not needing hospital transfer:

- Treatment

- Rest; Drink fluids to prevent dehydration
- Take medicine to reduce fever (for example, acetaminophen)
- Research is ongoing on the use of already-developed medications
- Health care staff should be made aware if patient worse symptoms develop, e.g., SOB

- Vaccination

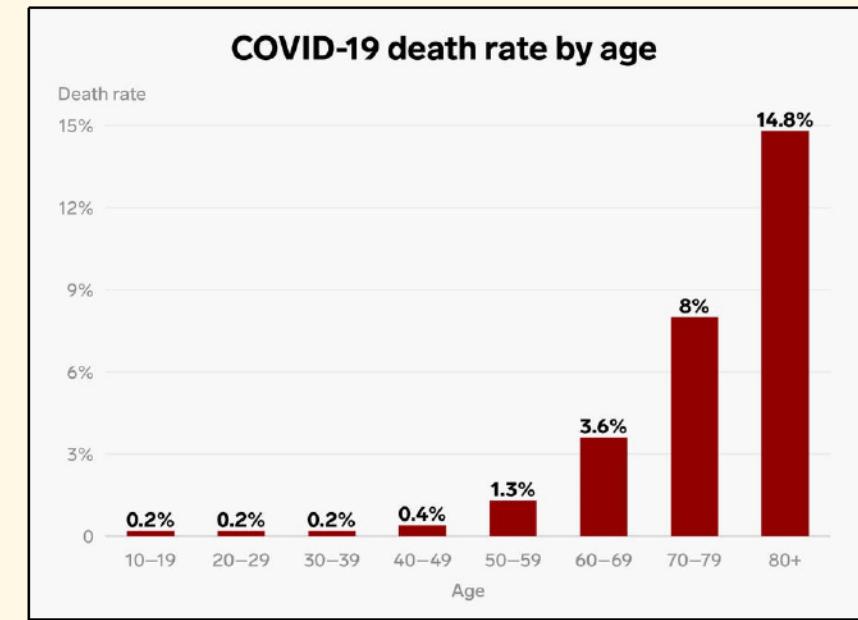
- None yet for COVID-19 as of mid-2020; trials starting soon, results in > 1+ year



COVID-19 Risks: Make a List of Most Vulnerable

1. In anyone, COVID-19 can become serious or be fatal.
2. Serious disease, death: most common in older persons and/or those with underlying medical conditions
3. Medical should make custody aware of most vulnerable patients; no need to disclose the nature of their diagnoses and violate HIPAA.

If downsizing of population needed,
then persons at high priority from
health point of view targeted.



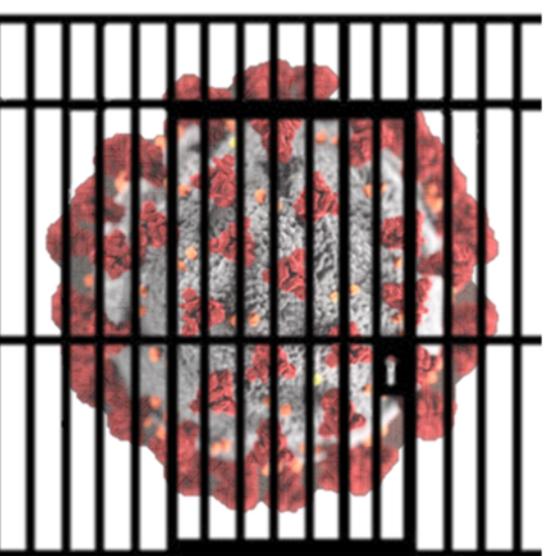
Source: China CDC

Think of your patients in chronic care clinics, your pregnant patients and how you will keep them safe from disease.



Implications for Correctional Health Staff

1. Healthcare staff should be aware of ongoing updates to clinical guidelines.
2. Have your pandemic plan in place
3. Share with your local health department: role of your facility in prevention, identification, and management of infectious disease.
 - Remind them that you are in their territory. Swap contact information.
 - Just b/c you have a healthcare staff... (which may be hired via a private vendor)



...doesn't mean that HD shouldn't consider how the presence of a jail and prison, and movement of folks in/out of the facility, impacts public health.

And: Work with your facility on planning now: where to cohort persons (placing persons diagnosed with coronavirus together, but at a distance from folks who are well) if many people are getting sick at the same time.

Health Services: Check for updates local health department and <https://www.cdc.gov/coronavirus/> and regional/corporate infection control coordinators, if any) as needed for latest guidelines on:

1. How to isolate persons—when is negative pressure room indicated?
2. How long to quarantine those exposed, isolate those infected?
3. What personal protective equipment needed, for whom: eye shield,
N95/surgical mask,
gloves, gowns?
4. How to handle those exposed to case of COVID-19, especially after 1st test is negative: when to repeat before infection can be ruled out?
5. When can isolation be lifted?



no boot covers

Alaska DOC Levels of Quarantine:

courtesy R. Lawrence

Level	Description	Scenario	Details
I	Individual level	Exposed individual is booked into a DOC facility	Quarantine of an exposed individual to include single cell housing, in-cell meals, restriction of movement, and separation from congregate activities for duration of incubation period.
II	Module level	An ill individual is identified in a single module	Quarantine of all inmates in a module with restriction of movement to within the module, in-module meals, separation from congregate activities outside the module for the duration of the incubation period.
III	Facility level	Multiple ill individuals are identified in separate modules or areas	Quarantine of all inmates in an exposed facility to include restriction of movement to and from the facility for the duration of the incubation period.
IV	Inter-facility level	An ill individual is identified after movement between facilities during the infectious period	Quarantine of exposed inmates in multiple modules within multiple facilities with restriction of movement to and from the facilities/modules, and separation of exposed inmates from congregate activities.

Alaska DOC Levels of Quarantine

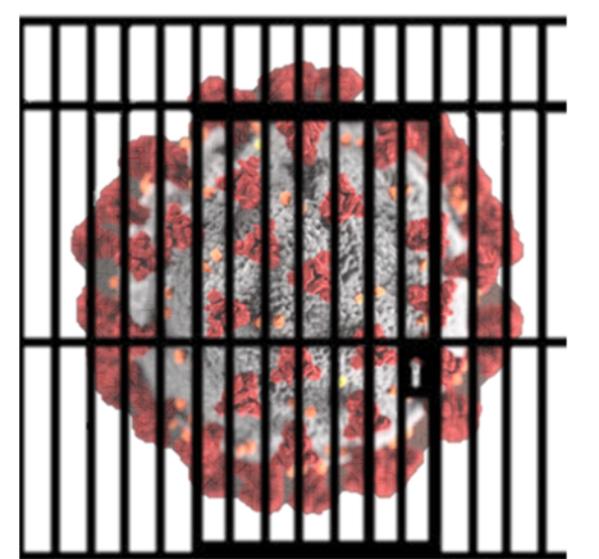
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Implications for Correctional Custody Staff

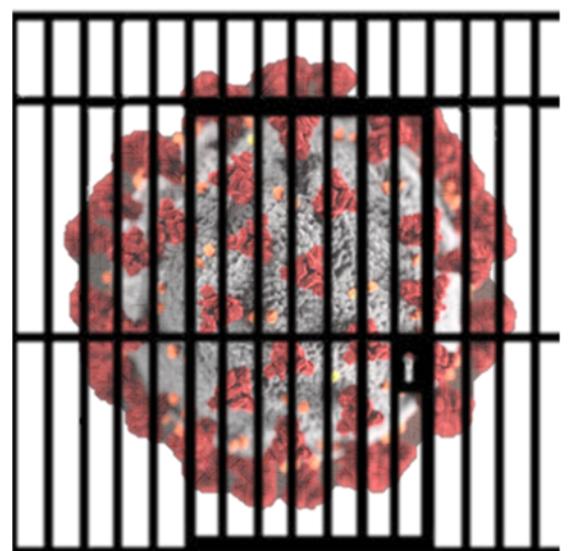
- Jurisdictions need to understand that incarceration of persons defying quarantine orders could lead to exponential increases in jail cases and cases in the community.
 - Measures other than detention should be considered, such as at-home electronic monitoring.
 - Custody should plan on future absenteeism of ill correctional officers.
 - Supply chains (medicines, food, etc.) may become disrupted.
 - Consider alternatives to incarceration, in order to keep stock population down (diversionary courts, community corrections) .
 - If COVID-19 is in your jurisdiction, consider restriction of movement in and out (visitors, non-essential vendors, tours).



Other Issues for Correctional Healthcare



- Make sure persons confined in your facility have access to soap for hand washing; tissue for nasal discharge, etc.
- Consider suspending co-pay for medical visits to evaluate sore throat, cough, fever, shortness of breath.
- Consider what will happen if health care workers sick and need to stay home, or home caring for others.

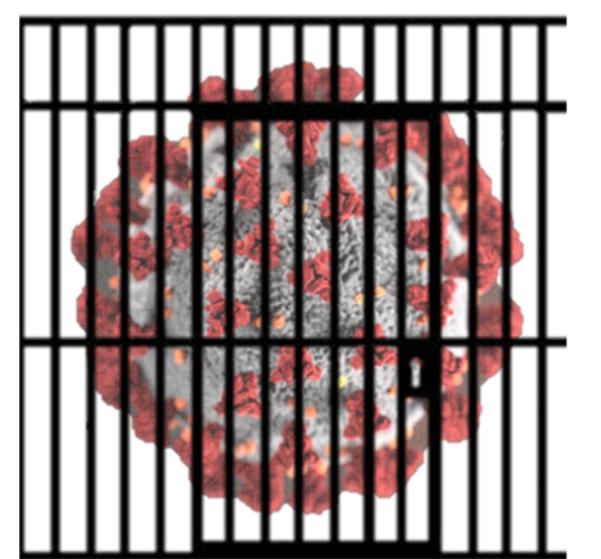


- Prepare for absenteeism/discourage “presentism”

Post-test for Corrections

Question: where do individuals dwell in close proximity, sleep in close quarters, eat together, recreate in small spaces, with staff close by?

- A. Jails
- B. Cruise Ships
- C. Prisons
- D. A & C
- E. All of the above



Resources:

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

Many correctional systems have developed pandemic flu plans. These plans can be readily adapted to COVID-19 and readapted as we learn more
The BOP plan is available online:

- [https://www.bop.gov/resources/pdfs/seasonal influenza guidance.pdf](https://www.bop.gov/resources/pdfs/seasonal_influenza_guidance.pdf)

- Questions? Aspauld@emory.edu
- Emory Center for the Health of Incarcerated Persons, Atlanta GA

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To check the CDC websites for areas of current activity:

Int'l: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

US: <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>