

**IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF PENNSYLVANIA**

MICHAEL GRAHAM; ALEXUS DIGGS; and  
HEATHER CONNOLLY, *on behalf of  
themselves and all others similarly situated,*

*Plaintiffs-Petitioners,*

v.

ALLEGHENY COUNTY; and ORLANDO  
HARPER, *Warden of Allegheny County Jail,*

*Defendants-Respondents.*

Civil Action No. 2:20-cv-00496

**ELECTRONICALLY FILED**

**IMMEDIATE RELIEF SOUGHT**

**CONSENT ORDER**

WHEREAS, on April 7, 2020, the Plaintiffs, for themselves and on behalf of proposed class members confined at the Allegheny County Jail (“ACJ”), filed this action pursuant to 42 U.S.C. § 1983 alleging violations of their rights under the Fourteenth Amendment to the United States Constitution and the Americans with Disabilities Act (“ADA”); and

WHEREAS, the Plaintiffs also filed a Motion for a Preliminary Injunction seeking to require the Defendants to remedy the alleged unconstitutional conditions of confinement and alleged violations of the ADA at the ACJ by clarifying, instituting and/or supplementing policies and offering reasonable accommodations to protect the Plaintiffs and proposed class members at ACJ from the risk of contracting COVID-19, a deadly disease that has caused a global pandemic and poses an enhanced threat to the life and health of persons and staff at congregate settings, such as the ACJ; and

WHEREAS, the parties have reached an agreement regarding the Plaintiffs’ motion for preliminary injunctive relief wherein the Defendants have agreed to clarify and/or supplement

existing policies informed by guidance from the Centers for Disease Control and Prevention (“CDC”) and the Allegheny County Health Department (“ACHD”) in an effort to protect the Plaintiffs and reduce the spread of COVID-19 within the ACJ;

It is, on this 27th day of May 2020 hereby **ORDERED, ADJUDGED and DECREED** as follows:

1. This Order is entered based on a negotiated settlement between the parties and is not to be construed as an admission of liability by any party.
2. The Defendants and their employees, agents, and assigns have adopted and implemented and shall continue to adopt and implement the ACJ Policy titled “Continuing of Operations Plan: COVID-19 (Updated)” first issued on March 9, 2020, and updated through May 21, 2020 (“the Policy”). The Policy is attached hereto as Exhibit A and is incorporated in and made part of this Order.
3. This Order is effective immediately and will remain in full force and effect until and unless the Court terminates it after a showing of good cause by either party. In any event, this Order will not terminate at least until after the Declaration of Emergency in Allegheny County issued by County Executive Rich Fitzgerald, dated March 12, 2020, has been rescinded in full.
4. After consultation with each other, each party may suggest changes to the Policy to reflect updated guidance from the CDC and ACHD and respond to new facts or conditions. To the extent that the parties disagree about the need for such revisions or changes to the Policy, the party seeking the change may petition the Court. **This, and any other request for judicial intervention contemplated throughout the remainder of this Order, is governed by § III.B.3 of Judge Bissoon's Practices & Procedures (see web page at <https://www.pawd.uscourts.gov/content/cathy-bissoon-district-judge>) (requiring telephonic conference before proceeding to motions practice).** 2
5. Because the Defendants are being directed, and have agreed, to implement the Policy as described in paragraph 2 above, this Order therefore resolves the Plaintiffs’ claim for

preliminary injunctive relief with respect to their request that the Court order the Defendants to institute policies to protect the Plaintiffs from COVID-19 that are informed by guidelines from the CDC and other public health organizations.

6. This Order, however, does not resolve the Plaintiffs' claims that the Defendants violated their rights under 42 U.S.C. § 1983 and the Americans with Disabilities Act.
7. This Order does not resolve the outstanding issue of Plaintiffs' entitlement to attorneys' fees.
8. This Order does not resolve Plaintiff's claims under 28 U.S.C. § 2241.

### **Reporting**

9. In connection with this Order, and as agreed to by the parties, once per week the ACJ shall provide the following information to the Plaintiffs through their counsel:
  - a. the daily count for each housing unit; the number of persons admitted to ACJ each day of that week; and the number of persons released from ACJ or transferred to another facility each day of that week.
  - b. the number of persons accommodated as a single cell status; due to medical vulnerabilities defined by the CDC guidelines to COVID 19.
  - c. the number of persons seen by medical providers each day of that week;
  - d. the number of and the housing unit(s) where, the following persons were held each day of that week:
    - i. persons who are Confirmed COVID-19 Cases
    - ii. persons who are Suspected COVID-19 Cases
    - iii. persons who are Close Contacts of a COVID-19 Case
    - iv. persons who have been identified as Medically Vulnerable

- e. invoices for all PPE, supplies for the week;
- f. all inmate grievances relating to COVID-19, social distancing, medical, cleaning, hygiene, recreation, housing assignments, and quarantine/isolation conditions; and
- g. weekly sick call report data.

### **Enforcement**

10. The parties agree to the jurisdiction of this Court over any proceedings seeking to enforce the terms of this consent decree.
11. If the Plaintiffs have a reasonable basis to believe that the Defendants are in substantial noncompliance with one or more provisions of this Order, Plaintiffs will notify Defendants in writing of the specific compliance issue(s). This notice will identify, with particularity, the basis of the claim that Defendants are not in substantial compliance and the specific provision(s) of this Order that are implicated.
12. Within seven days of receipt of the notification, the Defendants shall provide a good-faith written response to the Plaintiffs' notification with a full factual explanation as to why the Defendants believe they are in substantial compliance with the specified provision(s), or an explanation of the Defendants' plans to achieve full compliance with the specified provision(s). The Defendants will provide the Plaintiffs with copies of all non-privileged documents that are relevant to the Defendants' investigation of the Plaintiffs' allegations regarding Defendants' substantial non-compliance with the provision(s) of this Order.
13. If the parties are unable to resolve the dispute within fourteen days, the Plaintiffs may seek intervention from the Court by filing a motion for enforcement of the provision(s) identified through the aforementioned notice of substantial noncompliance.

14. In the event that the Plaintiffs are notified of an issue posing an immediate serious risk to health that requires resolution in a shorter time-frame in order to protect the health of the Plaintiffs or class members, the Defendants shall still be given written notification and the parties will engage in good-faith efforts to resolve the matter prior to the Plaintiffs seeking court intervention.
15. In the event that the Court finds that a party has not complied with a material provision of this Order, the Court shall have the power to order specific performance of the provision and/or any other relief the Court deems necessary to ensure compliance.

**Notice**

16. All notices required by each party in this Order will be sent to the following people:

For the Plaintiffs:

Sara Rose  
ACLU of Pennsylvania  
PO Box 23058  
Pittsburgh, PA 15222  
srose@aclupa.org

For the Defendants:

Andrew Szefi  
Allegheny County Law Department

**Miscellaneous**

17. The Court finds, based upon the entire record and the parties' stipulation and joint request, that this Agreement satisfies the requirements of 18 U.S.C. § 3626(a)(1)(A) in that it is narrowly drawn, extends no further than necessary to correct the violation of the Federal

right, and is the least intrusive means necessary to correct the violation of the Federal right of the Plaintiffs. **Moving forward, counsel must be familiar, and prepared to comply, with any and all remaining, applicable provisions of 18 U.S.C. § 3626.**

s\Cathy Bissoon

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Honorable Cathy Bissoon  
United States District Judge

# **EXHIBIT A**

**COUNTY OF**



**ALLEGHENY**

**RICH FITZGERALD**  
COUNTY EXECUTIVE

**TO: Orlando L. Harper, Warden**

**FROM: Administrative Team: Chief Deputy Wardens, Deputy Warden, and Majors**  
**Dr. Donald Stechschulte, Jr. Medical Director**  
**Lauren Bach, Infectious Disease Coordinator**  
**Robyn Smith, Healthcare Staffing Educator**  
**Assistant Director's of Nursing**

**DATE: May 21, 2020**

**RE: Continuing of Operations Plan: COVID-19 (Updated)**

## **SITUATION**

COVID-19, Coronavirus disease 2019 is a novel (new) coronavirus that was first identified in Wuhan, China. The virus is believed to be spread from person-to person through respiratory droplets that are transferred through close contact. Typically, close contact is defined as within 6 feet. Disease transfer is believed to occur when an individual who is infected coughs or sneezes and a well person inhales the respiratory droplets. It is believed that indirect contact may occur when a surface or object has the virus and a well individual touches their mouth, nose, or eyes.

No vaccine or specific treatment for COVID-19 is currently available. Care is supportive for symptom reduction, elimination, or management. Reported illnesses have ranged from mild to severe, including illness resulting in death. Individuals who have travelled to places where the virus is occurring, or areas that are defined as having community spread, are at the most risk for contracting COVID-19. Patients with COVID-19 experience a respiratory illness (ranging from mild to severe) and symptoms include: fever, cough, and shortness of breath.

The threat of disease spread can be dramatically reduced by ensuring that employees/volunteers who are ill seek treatment and stay home, employ the use of appropriate hand hygiene, reduce or eliminate hand shaking contact, cover coughs/sneezes with the use of tissues or redirection of coughs and sneezes into elbows or sleeves, and routinely cleaning surface areas and frequently touched objects. As influenza is still active, it is important for general hygiene practices to be maintained and for individuals who feel sick to seek guidance and treatment from their healthcare professionals.

Much is to be learned about this new virus and updates will continue to be provided by the Centers for Disease Control and Prevention and communicated to Federal, State, and Local Departments for dissemination through the appropriate designees. The Allegheny County Jail will continue to collaborate and coordinate with other County departments, to include the Health Department, to reduce the impact of disease spread.



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## MISSION

The Allegheny County Jail will work to effectively reduce or mitigate the spread of illness throughout the facility. The Allegheny County Jail will ensure that all precautions are taken appropriately and that the health, safety, and security of all inmates, volunteers, and employees will remain the primary focus throughout planning and response periods.

In preparation, the Allegheny County Jail began early conversations with multiple stakeholders when the Allegheny County EOC was activated on March 14, 2020. Early identification for medical isolation and quarantine spaces were identified. Information was posted throughout the facility prior to any identified cases in Allegheny County. Additionally, supply allotments and procurement processes began and have been continuous throughout the duration of this pandemic.

This emergency preparedness plan will involve communication and collaboration with multiple county departments, to include, but not limited to: Allegheny County Health Department, Allegheny County Sheriff's Department, Allegheny County Emergency Medicine Services, Alternative Housing Departments, Allegheny Health Network, and Allegheny County Courts. The Allegheny County Jail will continue to implement recommendations published by the Centers for Disease Control and Prevention (CDC) specific to the *Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities* first published on March 23, 2020.

Additionally, the Allegheny County Jail will ensure that all individuals who are placed into our custody are afforded every available service to involve medical treatment if necessary, dietary needs when applicable, safe and secure processing from arraignment to release or incarceration, in accordance with all applicable laws, and ACJ policies and procedures.

## DEFINITIONS OF IMPORTANT TERMS – adopted from the *Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities* or the CDC website

**Symptoms** – Symptoms of COVID-19 include fever, cough, shortness of breath. Like other respiratory infections, COVID-19 can vary in severity from mild to severe. When severe, pneumonia, respiratory failure, and death are possible. COVID-19 is a novel disease, therefore the full range of signs and symptoms, the clinical course of the disease, and the individuals and populations most at risk for disease and complications are not yet fully understood.

**Social Distancing** – The practice of increasing the space between individuals and decreasing the frequency of contact to reduce the risk of spreading disease (ideally to maintain at least 6 feet between all individuals, even those who are asymptomatic). Social distancing strategies can be applied on an individual level (e.g., avoiding physical contact), a group level (e.g., cancelling group activities where individuals will be in close contact), and an operational level (e.g., rearranging chairs in the dining hall to increase distance between them).

**Cohorting**- Refers to the practice of isolating multiple laboratory-confirmed COVID-19 cases together as a group, or quarantining close contacts of a particular case together as a group. Ideally, cases should be isolated individually, and close contacts should be quarantined individually. However, some correctional facilities and detention centers do not have enough individual cells to do so and must consider cohorting as an alternative.



**Medically Vulnerable (People at Higher Risk for Severe Illness)** – Based on currently available information and clinical expertise, individuals are identified as medically vulnerable if they meet one or more of the following conditions: Individuals who are 65 years of age and older, have chronic lung disease or moderate to severe asthma, serious heart conditions, are immunocompromised (e.g., from cancer, HIV or AIDS, recipient of bone marrow or organ transplantation, side effect of medications), severe obesity (BMI of 40 or higher), diabetes, chronic kidney disease undergoing dialysis, or liver disease.

**Suspected COVID-19 Case** – Shows symptoms of COVID-19 but either has not been tested or is awaiting test results.

**Confirmed COVID-19 Case** – Received a positive result from a COVID-19 laboratory test, with or without symptoms.

**Close Contact of a COVID-19 Case** – In the context of COVID-19, an individual is considered a close contact if they a) have been within approximately 6 feet of a COVID-19 case for a prolonged period of time or b) have had direct contact with infectious secretions from a COVID-19 case (e.g. have been coughed on).

**Medical Isolation** – Refers to confining a confirmed or suspected COVID-19 case (ideally to a single cell with solid walls and a solid door that closes), to prevent contact with others and to reduce the risk of transmission. Medical isolation ends when the individual meets pre-established clinical and/or testing criteria for release from isolation, in consultation with clinical providers and public health officials.

**Quarantine** – Refers to the practice of confining individuals who have had close contact with a COVID-19 case to determine whether they develop symptoms of the disease. Quarantine for COVID-19 should last for a period of 14 days. Ideally, each quarantined individual would be quarantined in a single cell with solid walls and a solid door that closes. If symptoms develop during the 14-day period, the individual should be placed under medical isolation and evaluated for COVID-19. If symptoms do not develop, movement restrictions can be lifted, and the individual can return to their previous residency status with the facility.

**Cleaning** – Removal of visible soil from objects and surfaces and normally is accomplished manually or mechanically using soap or another detergent. Refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.

**Disinfecting** – Refers to a process of using chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

**Disinfecting Agent** – Bleach solution (diluted in accordance with CDC guidelines) or an EPA-registered household disinfectant that is effective against the virus that causes COVID-19. Disinfecting agents should be utilized in accordance with recommended contact time (per the agents' instructions) and utilized after the surface has been cleaned.



**Personal Protective Equipment (PPE)** – protective clothing, helmets, goggles, masks, gloves or other garments or equipment designed to protect the wearer’s body from injury or infection.

## EXECUTION

Throughout the facility, signage has been posted to increase awareness and educate on appropriate hand washing/hand hygiene as well as the signs/symptoms of COVID-19. Signs notify that coughs and sneezes should be redirected into elbow or sleeve, hands shall be washed frequently with soap and water for at least 20 seconds, avoid touching face when possible and to clean surfaces frequently.

Cleaning and Disinfecting agents will be deployed to all areas of the facility (solution will be made with bleach or will be an EPA-registered disinfecting agent effective against the virus that causes COVID-19). To clean surface areas, the area shall be saturated with the agent and will remain on the surface for 5 minutes to air dry. Phones shall be cleaned in between uses.

Employees will be reminded that if they are sick, they should seek medical treatment and follow the recommendations of their provider.

Personal Protective Equipment (PPE) will be made available to inmates and staff. Staff will be required to wear a mask throughout their shift. Authorized PPE may include surgical/procedural masks, goggles, N95 masks, gowns, and protective disposable gloves.

Increased availability of fluids (i.e. water) shall be made available to housing units where individuals are symptomatic.

Inmates will be screened upon entry to the facility and heightened attention will be given to those on the intake housing units. Upon entry, new arrests/detainees will be provided with a mask for their first 14 days as a precautionary measure to determine if additional screening/assessments need to occur once booked and housed on an intake housing unit.

Continuous contact and communication will occur with Jail Administration, Medical Director, and Allegheny County Health Department. All recommendations will be followed to prevent an outbreak within the facility.

As treatment, testing, or vaccinations become available, a coordinated plan will be developed and executed to reduce further spread of illness.

Changes in operations will be ongoing as more information becomes available and as the risk level of Allegheny County shall change (increase).

If any staff member, regardless of their department, is concerned about an inmate or other staff member having symptoms of respiratory illness, these should be immediately reported to the ADON and/or Shift Commander. This will help ensure a more thorough surveillance of potential infection throughout the entire building. Our inmate population can be immediately seen by the healthcare department upon suspicion or presentation of symptoms. Reporting of another staff member to the Shift Commander and/or the ADON can help ensure



potentially infectious staff members are sent home; appropriate cleaning procedures and contact tracing can also be conducted. These actions and heightened awareness and communication is vital to the health and safety of every individual who works or lives within the institutional walls.

Consistent application of the following measures will assist in the reduction of disease transmission within a congregate setting of our facility. Frequent oversight from supervisory staff will be required to ensure compliance to the continuing of operations plan.

Though a fever is most commonly recognized at 100.4 degrees Fahrenheit, with guidance from the Allegheny County Health Department, in response to COVID-19, the Allegheny County Jail will recognize a fever at 99.0 degrees Fahrenheit.

## **EMPLOYEE SCREENING**

Effective, Saturday 3/28/20, all employees (county and contracted) will be required to participate in screening in the Employee Entrance Vestibule. All employees will be provided with a mask in the Employee Entrance Vestibule.

### **Screening Procedure**

Healthcare employees or a Contracted vendor will take the employee's temperature (temporal, tympanic, and oral thermometers available) while observing any visible symptoms and inquiring about the individual's recent travel, symptoms, and contact with others.

\*Minimum Questions asked:

1. Have you travelled outside of Pittsburgh within the past two (2) weeks?
2. Have you had any contact with anyone displaying symptoms of COVID-19?
3. Have you experienced any symptoms of COVID-19 (i.e. shortness of breath, cough, fever, loss of smell, loss of taste, myalgia, fatigue, nausea, diarrhea) since your last screening?

If an employee has a temperature that is at or above 99.0 degrees Fahrenheit, they will be required to wait and have their temperature taken again in 3-5 minutes. The determination of 99.0 degrees is to account for 0.5 degree of variability with the thermometer as the Health Department currently recommends for precautions to be taken at 99.5 degrees Fahrenheit.

\*These questions/symptoms are subject to change based on continued research in the expression of COVID-19. The form utilized at the employee entrance will be updated based on these changes.

While waiting for the second temperature, the employee will be asked additional questions to include:

1. Have you noticed a temperature before we took yours today?
2. Have you been around anyone who has displayed symptoms of shortness of breath, coughing, loss of smell/taste, temperature within the last 14 days?
3. Have you had any known contact with anyone diagnosed with COVID-19?
4. Have you recently been around anybody known to be diagnosed with the flu or a different respiratory condition?



If the second temperature reading is at or above 99.0 degrees Fahrenheit, the employee will not be permitted to work for that day. If the employee is hired by the County, the employee will be advised to contact UPMC Work Partners to open a leave of absence and site an Administrative Leave due to their positive screen. If the employee is not hired by the County, they will be directed to follow their employer's procedures.

If the employee provides affirmative responses to questions on the COVID-19 Employee Screening form, the employee will not be permitted to work until cleared by a healthcare provider. For example, if they are displaying a new onset of symptoms, unrelated to known chronic medical conditions (i.e. a cough), the employee will not be permitted to work.

The COVID-19 Employee Screening form will be completed, in its entirety, and submitted to supervisory staff. The supervisor will make adjustments to the schedule to reflect this employee's absence and will forward the form appropriately. This form will be submitted to Payroll to ensure that the documentation accounts for their date of missed work. The employee shall be directed to follow up with their healthcare provider to make a clinical determination regarding their eligibility to return to work or if they should remain quarantined at home for a designated time period.

If the employee does not develop symptoms, and no longer has a fever, they are permitted to return to work on their next scheduled day. If the employee does develop symptoms, they should make notification to HR/Administration and should be directed to reach out to their Healthcare Provider for testing. Testing can also be arranged through the Allegheny County Health Department.

## **NEW ARRESTS/ADMISSIONS TO ALLEGHENY COUNTY JAIL**

### **Healthcare Screening: Intake**

At time of medical clearance, vitals will be taken of every incoming new arrest/detainee. The individual will be provided with a mask at point of entry and will have the following information explained to them: *As an agency, we are following recommendations and guidance from the Centers for Disease Control and Prevention (CDC), PA Department of Health, and Allegheny County Health Department to exercise all precautions being admitted from the community because of disease spread. For the first 14 days of your stay, you will have your temperature taken and will be expected to wear a mask.*

All individuals will be screened with the following questions:

1. Does patient have fever? Yes or No
2. Does patient report any symptoms of upper or lower respiratory infection (i.e. shortness of breath, cough, fever, loss of smell, loss of taste, myalgia, fatigue, nausea, diarrhea)? Yes or No
3. Does patient report recent travel to, or contact with a person who has traveled to, a known affected area within the last 14 days? Yes or No
4. Does patient report contact with known laboratory confirmed case of COVID-19? Yes or No
5. Has the patient been confirmed by a laboratory as a positive/confirmed case of COVID-19? Yes or No
  - a. What date were they diagnosed?

Individuals who have a fever (based on vital signs and current recommendations of 99.0 degrees Fahrenheit) will be treated with precautionary measures and will be further assessed by a provider. This individual will be



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identified as quarantine status and placed in a holding cell, alone, as long as space permits, until an assessment by a provider. They will complete all typical intake processes under this status unless clinical indications indicate that this is not necessary. If it is determined that the individual shall be tested, they will be identified as isolation status as a suspected COVID-19 case and tested as soon as safe and feasible.

Individuals who respond that they have been confirmed as a positive case of COVID-19 will be placed in a holding cell under isolation procedures and will be maintained on that status throughout the typical intake processes. This information will be vetted by the Allegheny County Health Department to establish a date of diagnosis and to determine the number of days required for isolation and quarantine.

Any individuals responding affirmatively the questions 2, 3, or 4 will be placed in a holding cell, alone, under quarantine status, as long as space permits, until an assessment by a provider. They will complete all typical intake processes under these precautions unless clinical indications indicate that this is not necessary.

Clinical determinations will be made by an on-site provider, in accordance with CDC guidelines and recommendations from the Allegheny County Health Department.

Healthcare professionals shall probe for more information when someone provides an affirmative response to the travel questionnaire. Additional questions shall be asked to assist in the identification of risk:

1. Was recent travel foreign or domestic?
2. Was there travel by airplane, vehicle, or train?
3. Were they in close contact (defined as within 6 feet) of someone who was demonstrating respiratory symptoms?
4. Do they have a fever or atypical vital signs and how long have you had these symptoms?
5. Have they been around someone who was diagnosed with a respiratory infection, influenza, or any other known illness that is NOT COVID-19?
6. Have they been around someone diagnosed with COVID-19 and where were they tested/diagnosed?

The intake supervisor will be informed of the individual's identity and the need for additional precautions at this time. The intake supervisor shall make notification to the ID department and Pre-trial services to ensure that the staff will exercise additional and appropriate precautions.

The Healthcare On-Site Manager (Assistant Director of Nursing or Healthcare Director) shall be notified when there are individuals who could be presumptive cases or persons under investigation. The provider will complete an assessment of the individual and the individual will be isolated in a holding cell. If clinical symptoms indicate a necessity to pursue testing, the health department will be consulted to determine if testing should be completed by calling (██████████). The provider will review and complete the Human Infection with 2019 Novel Coronavirus Person Under Investigation (PUI) and Case Report Form. The provider will obtain the specimen as indicated by the PA Department of Health Coronavirus 2019 (COVID-19) Specimen Collection and Shipping Guidance form while wearing all approved PPE. The specimen shall be placed in a biohazard specimen bag and will be placed on ice until it is picked up for laboratory testing.

Individuals shall be encouraged to consume fluids and rest. Individuals who have medical conditions that may increase their risk of dehydration (i.e. detoxification) shall be provided with frequent offerings of beverages.



### Hospital Returns

Inmates returning to the Allegheny County Jail from a hospital, more than 24 hours from their release from the ACJ to the hospital, will be processed as new detainees for COVID-19 screening purposes consistent with this Policy. Inmates who are returning from a hospital less than 24 hours from their release from the ACJ to the hospital will be treated as directed by medical personnel at the hospital and at the ACJ. Any staff involved with transporting any inmate to or from the hospital is required to wear a mask.

### Housing in Intake

Intake holding cells have had soap dispensers added to allow for frequent hand washing of new arrests.

#### Female Holding Cells:



*\*Special precautions shall be taken with females who are pregnant. These individuals shall be prioritized through all screening processes to reduce/limit exposure.*

#### Male Holding Cells:



New arrests who are identified as medically vulnerable during the COVID-19 pandemic, will be quarantined from other individuals and expedited, as indicated, through the intake processes.

In order to mitigate risk and disease spread, healthcare and correctional staff will work to promptly process all individuals (per procedures) to reduce the requirement of shared spaces by large volumes of individuals. Due to a dramatic reduction in numbers, the Allegheny County Jail will comply with recommendations of social distancing and ensure that individuals are not unnecessarily congregating in areas as long as space allows.

Frequent cleaning of the cells and all surface areas (to include dayroom chairs in processing) will occur continuously in intake. Special attention will be given to phones, vending machines, and shared surfaces.

In the healthcare processing area, all surface areas will be disinfected between contact/use. Disinfecting agents will be utilized by inmate workers, correctional officers, and healthcare staff.



### **Transfers from the Intake Housing Unit(s): 4A, 4F, and 5F**

Unless indicated to the medical housing unit under an isolation or quarantine status, all new male admissions will be sent to 4A or 5F as part of typical classification procedures. Unless indicated to 5MD under an isolation or quarantine status, all new female admissions will be sent to 4F as part of typical classification procedures. Both intake housing units will be treated as quarantine units which will indicate mandatory mask wearing for any time out of cell. These units will have frequent monitoring from healthcare staff, to include temperature screenings.

Prior to transfer from the intake housing unit or new admission status, providers (mid-levels or physicians) will be designated to assess individuals before they are eligible to transfer. New admissions shall have reduced movement to meet their daily hygiene needs without having recreation in large groups. Temperature screenings and other applicable vital signs will be taken for all new admissions for a minimum of 14 days. The new admission will remain on the housing unit for 14 days continued monitoring. If space does not allow, the inmate will be classified and moved to an indicated housing unit and will remain on quarantine status and will be required to wear a mask during any time out of cell.

All new admission housing units will be expected to strictly enforce social distancing practices and the adherence of donned masks during all times outside of their cells. If a new admission is unwilling to comply with those expectations, for the safety of the institution, they will face disciplinary action and restricted time out of their cell.

Due to housing policies, individuals on intake housing units are not permitted to be "single celled" status. If the individual demonstrates any risk factors, they will be appropriately quarantined or isolated.

### **TREATMENT/ISOLATION**

Until further notice, individuals who are identified as isolation status will be transferred to 5B or 7D (for males). Isolation status individuals (confirmed or suspected COVID-19 cases) will be housed in the isolation cells in the rear of 5B or in a single cell on 7D. All staff (to include correctional officers) will adhere to the use of PPE to observe droplet precautions in the interaction and care of these individuals. All PPE utilized will be properly disposed on in biohazard waste bins that will be located on the housing units. Individuals will be designated as quarantine status when they are part of a contact study with someone who is on isolation status. These persons can quarantine on their designated housing unit as long as their medical status remains stable.

Males who are confirmed or suspected of COVID-19, housed on 7D, will be afforded the opportunity to routinely shower to ensure the maintenance of their personal hygiene. Confirmed or suspected cases will shower on days opposite those that may be on quarantine status.

Individuals who are on quarantine status will be able to have recreation independent of others. They will be expected to wear a mask every time they exit their cell and when any staff approach/enter their cell to participate in a healthcare encounter. Treatment and monitoring recommendations will be provided, in accordance with current clinical recommendations for COVID-19, as ordered by the treating provider on-site.

Meals will be ordered and delivered on disposable trays/drink containers and will be properly disposed of after use.



Individuals on quarantine status will be provided with disinfecting agents and detail inmates will be required to disinfect all areas utilized when they have spent time outside of their cell. Specific attention will be given to surface areas they contacted (i.e. phones and showers).

5B sally port will be reserved for emergent care or assessment. All other services will be directed elsewhere to reduce traffic or potential exposure. Inmates being transferred to 5B must be wearing a mask.

Females, formerly housed on 5B, will be housed on 5MD until further notice. Providers will conduct rounds, as clinically indicated, on those units to ensure a continuous provision of health care services.

Incarcerated individuals who can be managed on-site will be encouraged to rest and drink fluids. Individuals will remain locked in their cells and separated from the general population. Medicines will be provided, at the discretion of the healthcare providers, to address their symptoms (i.e. acetaminophen for fever reduction). Monitoring and treatment determinations will be made by the authorized healthcare providers.

If an individual is diagnosed with COVID-19, medication pass will be conducted at their cell door. Healthcare professionals and correctional staff should utilize precautions and wash hands after contact with individuals who are sick.

If the incarcerated individual's illness and symptoms are too severe, warranting a higher level of care, transfer will be coordinated with one of the local hospitals for admission. At time of transport, the inmate shall be provided with a surgical/procedure mask and transporting staff will be provided with N95 masks. All healthcare and correctional staff shall utilize disposable gloves and other indicated PPE.

## **SPECIMEN TESTING**

Current recommendations from the Health Department include, but are not limited to, a new onset of symptoms: temperature (99.0 degrees Fahrenheit or above, respiratory symptoms: cough, shortness of breath, sore throat, loss of taste/smell). Clinical assessment of the individual will take precedent and if there is concern, or indication to test, those symptoms will be reported to the Health Department.

The established COVID-19 Testing Work Flow shall be utilized. All recommendations for specimen testing, via the PA Department of Health (DOH) and Bureau of Laboratories (BOL) shall be followed for collection and shipping guidelines. Testing will only be conducted with the explicit permission and coordination with the Allegheny County Health Department.

Healthcare personnel collecting samples from potentially infectious patients should follow standard precautions and all pertinent biosafety guidelines.

When an inmate is a confirmed case, recommended contact studies will be completed to determine if there are any other individuals who should have quarantine or isolation measures completed to mitigate further disease spread. Contact studies will include interviews and CCTV camera review.

Positive inmate screens will be reported to Tom Greishaw with the PA Department of Corrections, excluding any identifiers, to provide incidence rates for each County Correctional Institution.



### **Discharging from Isolation/Quarantine Status**

In collaboration with the Allegheny County Health Department and referenced materials provided by the PA Department of Health and Allegheny Health Network, the following parameters will serve as a minimum guideline for release from isolation or quarantine status. It should be noted that these parameters mark a guideline, but the clinical presentation of the affected individual will remain the primary source for clinical decisions.

#### *Isolation – Confirmed Positive COVID-19 Cases*

Individuals who have been tested and have been diagnosed with COVID-19 will remain on Isolation status for a minimum of 10 days from initial symptom presentation. If they remain stable, they may be considered for transition to a Quarantine status which will allow for increased time out of cell. They will remain on quarantine status for 3 additional days and must be fever free without the use of antipyretics (i.e. Acetaminophen/Tylenol) with improvement in respiratory conditions.

#### *Quarantine Status – Known Exposure to a Positive COVID-19 Case*

Individuals who are identified within a contact study to have had a known exposure shall remain on quarantine status for a 14-day period since the date of their exposure. Continued monitoring, in accordance with clinical recommendations, will occur throughout that time period. If the individual remains asymptomatic, they will be eligible for discharge from a Quarantine status.

#### *Quarantine Status – Tested Negative COVID-19 Cases*

Individuals who have been tested for COVID-19 and have been found to be negative will remain on a quarantine status for the duration of 14 days. If the individual remains asymptomatic, they will be eligible for discharge from a Quarantine status.

Any individual who is “released from custody” of the jail and is on Isolation or Quarantine status will require significant discharge planning to mitigate the risk of disease spread in the community. This will be conducted on a case by case basis, including an interview with the individual to determine the following: where they will be living upon release, if they have medically vulnerable individuals within their household, how they will travel from the Allegheny County Jail to their designated location upon release.

## **CONTACT STUDY REVIEW**

### **Inmate**

When an inmate is a suspected case, healthcare staff and administration will quarantine the cell mate (if applicable) while pending treatment or diagnostic measures are ongoing. As of 4/12/20, the Allegheny County Health Department has indicated that contact individuals can be quarantined on their housing unit as long as they are appropriately medically monitored, and their clinical presentation remains stable.

When an inmate is confirmed as a positive case of COVID-19, the health department will notify the positive results upon receipt. Consultation will occur to ensure that all additional contact measures will be taken. Contact study measures can include, but not limited to: interviewing the patient to determine any known associates, housing review of all individuals that would have been in close contact of the individual, and CCTV



video review. The administrative staff will be prepared to provide a housing history to the health department, onset of symptoms, and date of testing, to collaborate on all measures to be taken. "Close contact," is currently defined as a sustained contact/encounter with an individual within 6 feet for more than 10 minutes.

Any area in which the inmate(s) were housed should be cleaned with the disinfecting agents for a focused clean on the cell of the inmate(s). All frequently touched surfaces should be cleaned/disinfected before individuals are permitted to return to out of cell time.

## HEALTHCARE OPERATIONS

### Healthcare Screening: Sick Call

Healthcare staff shall be educated on the signs/symptoms of COVID-19 to provide ongoing education to the patient population.

Providers (mid-levels and physicians) will increase their engagement on the intake housing units to work to mitigate any disease spread and determine if individuals are presenting increased symptoms on the intake housing units so additional measures can be implemented to reduce disease spread.

During, any non-emergent healthcare interaction, an augmented form will accompany the healthcare employee to assess for evidence of fever (e.g., sweating, clammy skin, chills), upper respiratory complaints (ruling out history of smoking, asthma, seasonal allergies, other conditions that cause respiratory conditions), loss of smell or taste, recent travel to an area impacted by COVID-19, and/or recent contact with someone who is known to have been diagnosed with COVID-19.

If, based on the assessment of the individual, the person is displaying symptoms, they shall be immediately quarantined for review by a provider. If the healthcare provider determines that testing is indicated, they will be placed on medical isolation until the results from testing have been received.

The Healthcare On-Site Manager (Assistant Director of Nursing or Healthcare Director) shall be notified when there are individuals who could be presumptive cases.

### Medication Pass

Medication pass will continue to be conducted on the general population housing units in the designated area (pantry). Inmates will be released per the institution's break in/break out procedures for administration of medications.

During medication pass, all inmates will be instructed to bring their own cups to medication line to eliminate or reduce the risk of transfer of property. If an individual is on isolation precautions, the nurse will administer medications at the cell in a prepared envelope of medications. Healthcare staff will utilize the appropriate PPE during the interaction.



### **Medication Delivery (Kane Pharmacy)**

Medication deliveries will be provided **■** times daily to ensure that there are timely releases of inmates from the facility. Medication delivery will be provided in labelled paper bags and must be transitioned from the Kane Delivery Drive to a Healthcare Staff member (Medication Room Technician or other authorized individual).

Medication returns, for destruction, will no longer be accepted. Medications will be destroyed, on-site, per policies and procedures of the institution. Controlled substances will be witnessed during destruction and all destruction will be documented accordingly.

### **Dental Services**

Following recommendations from the American Dental Association and the Allegheny County Health Department, non-emergent dental services and procedures will be delayed. Essential dental services will continue to be provided. The contracted dental provider will continue to follow all appropriate measures of infection control.

### **Clinic Services**

In order to reduce movement and communal settings for inmates from varying housing settings, the clinic will be closed except for necessary populations (e.g. pregnant females and radiology). Healthcare staff will be deployed to housing units to perform non-emergency healthcare requests, provider visits, or assist in other locations of the facility that have critical staffing needs.

## **PREVENTION AND EDUCATION**

On March 14, 2020, in order to increase awareness and education, the Allegheny County Jail posted literature on housing units, hallways, and employee office areas. Posters reinforced appropriate hand hygiene and were developed by the CDC or Allegheny County with direction from the CDC. Literature was also broadcasted on TV monitors in housing units and employee office areas. Symptom presentation, warning signs, prevention measures, and methods to disinfect have been communicated directly to all employees through e-mail.

On April 1, 2020, Townhall meeting information were distributed to all housing units to communicate additional COVID-19 information to inmates. Additionally, townhall meetings were conducted on housing units by supervisory staff to the inmate population.

## **NON-ESSENTIAL SERVICES**

With additional direction from community stakeholders, it has been determined that the most responsible decision to reduce the risk of community spread will be to temporarily suspend non-essential services in the facility and restrict the number of individuals entering/exiting the facility. Due to these recommendations, classes in the education department, Reentry, large gyms, and housing units shall be suspended.

Further action plans for respective departments of “non-essential” services are defined below.

### **Education Services/Inmate Programs**

In collaboration with the Allegheny Intermediate Unit (A.I.U.) leadership, contingency plans have been developed. A.I.U. Juvenile and Adult Education programs have developed education packets for weekly distribution to inmates to encourage ongoing learning and continued operations.



Education material for both Juvenile and Adult Education Programs will be stored in a Central Location (filing cabinet in room [REDACTED]; drawer will be designated for emergency only). Material will be in manila folders labeled with each individual inmate's name.

Distribution of educational materials will be done by the Inmate Programs Administrator, Correctional Officer, or designee. Distribution time will be determined based on the ACJ procedure of who would be permitted to enter the housing units.

Additional outreach is occurring with contracted service providers and volunteers (i.e. Batterer's Intervention Program, Creative Writing, Veteran's Pod, Father's Support Group, and AA/NA) to develop course material on paper. The inmate participate would have to turn completed work at a designated time to receive credit.

Petey Greene mentors are also currently suspended from providing services within the facility.

### **Religious Services**

Volunteers will be suspended until professional visits resume. Communal practice of religious services will be temporarily suspended. In collaboration with the Chaplaincy department, a reduced schedule will be developed to allow for staff to provide religious support while reducing or mitigating the risk of any potential for disease spread. Materials necessary for religious observation will be provided to allow for the continued opportunity for inmates to privately observe their religious practices.

Chaplaincy Programs will [REDACTED] their staff to be on-site and will continue to facilitate the following services: answering inmate requests for devotionals and scriptures, providing weekly devotional resources to the housing units, visiting inmates upon referrals, providing notice and support during death notifications or notifications of serious illness of their loved ones, responding to emergent needs for spiritual counseling, supplying reading glasses, and supplying leisure material (i.e. crossword puzzles, word searches, books).

Religious services will be pre-recorded and broadcasted over the Jail's television system during timed intervals. Correctional staff will permit individuals, on their housing unit, to participate in these services, as indicated.

### **HOPE/Pre-Release Program**

Volunteers (therapists, yoga instructors, Bible study leaders, etc.) will be suspended until professional visits resume. HOPE/Pre-Release permanent staff will also complete curriculum and resource development from remote/off-site locations to reduce introduction of disease on the housing unit.

### **Re-Entry Services**

Instructors, mentors, therapists, tutors, etc. will be suspended until professional visits resume. Contracted service providers (Parenting, Relationships, Thinking for Change, etc.) will develop and provide 1-2 week packets for distribution to the participating population.

### **Visitation**

Contact visits are suspended until further notice. Ongoing conversations will take place to establish next steps for contact visits that are currently under court order.



Beginning Monday, March 16, 2020 and for the following two weeks, all social visits (even non-contact) will be suspended until further notice.

Visiting (M) levels have had paper towel dispensers installed and will have appropriately diluted solution (bleach) available for ongoing cleaning to take place.

Attorney visits will continue, as indicated. Additional considerations will be made to determine the feasibility/sustainability of video conferencing for visits.

### **Commissary Services**

Staff employed by the Commissary vendor (TKC Holdings, Inc.) shall ensure that they are briefed in their organizations COVID-19 Emergency Action Plan and all updates to their plan will be communicated to the Administration of the Allegheny County Jail.

In accordance with the determinations made by TKC Holdings, Inc., Keefe employees assigned to ACJ will work a reduced schedule on-site. Staff will work in the warehouse to process/ship commissary and Securepak orders into the facility. Credits will still be processed by Keefe staff. Ongoing coordination and communication will occur with supervisors

Continued delivery of services will be permitted at the discretion of the Jail Administration. To observe recommendations for reduced contact and social distancing, contracted commissary employees will not count items with the inmate. Instead, the items will be packaged and provided in a bag to the inmate who will sign for receiving their order. Inmates who are unwilling to accept their order in this manner will not receive their items and will be credited for their order.

### **COURTS/TRANSFERS/LEGAL SERVICES/RELEASES**

Per order of President Judge Kimberly Clark, the Court of Common Pleas of Allegheny County, Fifth Judicial District, invoked an order consistent with the Supreme Court of Pennsylvania to outline emergency operations from March 17-April 14, 2020. The order outlines the operations of the courts throughout this time period and will be expressly supported and followed by the Allegheny County Jail.

Excluding emergent circumstances, all inmates will be screened prior to their transfer off-site with any transporting agency. A "COVID-19 Transfer/Release Screening Form" will be completed to include the Name, Inmate Number, Date of Birth, Date of Completion, Temperature reading 1, Temperature reading 2, Indication of Respiratory Symptoms, Indications for Precautions, and the name of the Healthcare professional that completes the screening. This form will be scanned into their Electronic Health Record and a copy will be provided to the transporting agency.

### **Reducing Movement**

When possible, individuals will remain on their housing units to receive services. If individuals within Allegheny County were to be diagnosed with COVID-19, determinations would be made to reduce movement in the facility to emergent movement.

### **Receiving Transfers from Other Facilities (County, State, and Federal)**

Transfers from all other facilities will cease unless authorized by the Warden. Transfers to other facilities will occur with screening measures.



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On April 10, 2020, Secretary of Corrections John E. Wetzel communicated a memorandum that all transfers from county facilities to PA DOC facilities will be suspended effective 4/11/20-4/25/20. These efforts were communicated to “defend in place” and to further mitigate the spread of COVID-19 in Pennsylvania. Following the issuance of this memorandum, many of the county correctional facilities followed this direction and have temporarily suspended transfers.

### **Court Movement**

Court movement will continue to follow all appropriate procedures. When possible, video conferencing will be utilized to limit the movement of individuals. If an individual is currently on precautionary/quarantine status, Pretrial services and the Judge will be notified to make determinations regarding their case. Sheriff's shall report any potential signs of illness during transports.

### **Video Arraignment**

Due to prolonged closures of courthouse transfers, the Video Arraignment complex has expanded capacity and schedules to meet the legal needs of the inmates. In collaboration with stakeholders within the criminal justice system, primarily the Office of the Public Defender, the Video Arraignment complex has been managing nearly [REDACTED] individuals daily. Additional computer stations ([REDACTED]) have been added with capacity to conference with legal counsel or the courts.

The video complex currently has [REDACTED] different video conferencing stations with [REDACTED] chairs capable of serving inmates. The chairs will be moved to comply with social distancing recommendations by spacing chairs apart by several feet. All inmates are expected to wear a mask when being transported to the video arraignment complex and must wear a mask while they are in the complex.

To support ongoing violation hearings, the hearing officer can video conference from the Manor Building and the Probation Officers can be contacted via phone.

### **Transfers to Alternative Housing Sites (Renewal, Inc. and The Program for Offenders)**

Beginning 3/13/20, transfers to alternative housing sites will cease to assist in their management of the population and decrease the incidence of disease spread. Each Alternative Housing provider will activate their continuing of operations plans and will provide those plans to the Administration at the Allegheny County Jail.

### **Permanent Releases from the Facility**

Allegheny County Criminal Justice Representatives (Office of the Public Defender, Pre-Trial Services, District Attorney's Office, etc.) shall continue to review the current incarcerated population to determine if any non-violent offenders are eligible for release.

Discharge and Release processes will continue to be sustained throughout this time period and will be reducing the hours of operation to sustain services between 8:30am-5:00pm Sunday-Saturday. Services will continue to include offering Narcan, providing resources/referrals, facilitating phone calls, and providing bus tickets. All inmates who are prescribed medications will leave with the appropriate amount of medications and scripts (when applicable). During the additional evening hours, the Intake Supervisory staff will be prepared to provide vouchers for public transportation use.



The Cashier's Office will also work with reduced hours. If individuals are released outside of hours, coordination will be made to ensure that they receive the money from their accounts in accordance with policy and procedure.

Individuals who will be permanently released from the facility and have been on quarantine precautions or have been a confirmed case of COVID-19 will be provided with necessary documentation regarding the measures that should be taken in the community upon their release. This information has been provided to our facility from the PA Department of Health.

### **Transfers within the Facility**

As of 4/8/20, transfers from housing units will not occur without explicit authorization. Emergent circumstances (i.e. transfer to an acute mental health unit or transfer to the medical housing unit) may indicate a need to transfer an individual. Other interfacility transfers (i.e. 2A → 2C) must be approved in advance of the transfer. No unnecessary movement shall be warranted.

### **Transfers to the Hospital**

Any urgent or emergent medical needs that exceed the level of care that can be provided on-site will be referred to an appropriate off-site treatment provider. Excluding emergent trips, a transfer screening will be completed to accompany the inmate. The receiving provider will also be notified, prior to receiving the inmate, of any risk factors or persons under investigation to appropriately prepare for the new admission.

In emergent transports, when 911 is called, the dispatcher must be informed if the patient has symptoms of COVID-19. This notification will allow the responders to ensure the utilization of the appropriate PPE for the transport and will also make additional notification to the receiving hospital.

In collaboration with our institutional medical partner, Allegheny Health Network (AHN) has requested that procedures be limited to emergent or planned medically urgent at all of their AHN sites. AHN has requested a cancellation or postponement of *elective and not medically urgent* procedures.

AHN has defined *elective and not medically urgent* to include: screening endoscopy, elective arthroplasty, neurologically-intact spine surgery, outpatient arthroscopy, delayed breast reconstruction, ostomy reversals, aesthetic surgery, reducible hernias, elective SVT ablations US guided thyroid biopsies, joint injections/arthrograms.

AHN has defined *planned medically urgent* to include: cancer surgery, interventional cardiac catheterization, fractures, acute infections, cholecystitis, appendicitis, CABGs, tendon/nerve injuries, tracheostomies, other procedures that will facilitate patient disposition.

AHN has defined *emergent* to include, but not limited to: open fractures, limb ischemia, intracranial hemorrhage, penetrating trauma, bowel perforation/ischemia, bleeding, neurologically-compromised spine surgery.

### **GENERAL POPULATION UNITS: SOCIAL DISTANCING**

All correctional officers assigned to housing units will be expected to reinforce recommendations of social distancing on housing units and ensure that all environmental cleaning occurs. Prior to allowing inmates out of their



cells, the Officer will announce expectations regarding social distancing and cleaning. In order to ensure that these units can be managed, a reduced number of inmates will be permitted out of their cell (not to exceed 10).

Individuals identified as “Medically Vulnerable” (as defined by the CDC in relation to COVID-19) will be housed in a single cell, on their current housing unit, to the extent feasible in accordance with indicated safety measures within the facility.

By current jail policy and procedure, juvenile offenders are housed in single cells.

## DIETARY

Staff employed by the Dietary vendor (TKC Holdings Inc.) shall ensure that they are briefed in their organizations COVID-19 Emergency Action Plan and all updates to their plan will be communicated to the Administration of the Allegheny County Jail.

Dietary vendor will ensure that frequent cleaning occurs throughout the kitchen area and will avoid contact with food. All inmate workers will continue to utilize appropriate protective measures. Dietary vendor will ensure compliance to all indicated measures to promote food safety.

To reduce exposure from the inmate population to staff, Trinity Take Out (TTO) will be discontinued until further notice.

Inmates who are on precautionary or isolation status will be provided their food in a disposable container.

Due to the proximity of contact and duration of time that inmates and TKC Holdings, Inc. (Trinity staff) are working, to fulfill dietary needs within the facility, inmates who are assigned the detail of “kitchen worker” will have their temperatures taken two times daily. If they have an elevated temperature, they will not be permitted to work and further determinations will be made based on their clinical presentations.

## ENVIRONMENTAL CLEANING

Disinfecting agents will be deployed to Employee Lounge/ODR, Control Booth, Shift Commander’s Office, Education Department, Chaplaincy Department, Discharge and Release Center, and other areas that employees frequently occupy. Employees shall be responsible for ensuring that they maintain cleaning within their designated areas.

Disinfecting agents will be EPA-registered disinfectants effective against COVID-19. Disinfecting agents will also include an appropriately diluted bleach and water solution, following instructions from the CDC.

All frequently touched surface areas and shared work spaces will require multiple cleanings throughout each shift.

Previously installed wall units for hand sanitizing will have the foaming hand sanitizer replaced with 60% alcohol based hand sanitizer to ensure that employees are able to utilize alcohol based hand sanitizer until they are able to reach a sink to cleanse their hands with soap and water.



## **ENVIRONMENTAL CLEANING: HOUSING UNITS**

Cleaning supplies will be routinely deployed to the housing units for cleaning of all shared areas and cells. Regular environmental cleaning is encouraged to reduce the risk of respiratory illness transmission, as several of these pathogens can live on surfaces for extended periods of time. EPA-approved disinfectants should kill enveloped viruses and have coverage for emerging viral pathogens.

The Correctional Officers assigned duties on the housing unit, or other designated areas, will ensure that inmates assigned cleaning duties will be responsible for the general housing areas, common areas, dayroom space, pod furniture, and other areas as designated. The inmates will be supervised while utilizing the disinfecting agents. Sweeping, mopping, cleaning, wiping, and collection of trash/garbage shall be designated by the Correctional officer.

### **Sinks**

All sinks in the Housing Unit Pantry will be cleaned after every meal serving. Sinks will not contain standing water when not being used for cleaning items and sinks will not be left running. If necessary, a work order will be submitted to correct any plumbing issues. Particular attention shall be given to the faucet handles and other areas that are "high volume" in touch.

### **Showers**

All shower stalls will be cleaned utilizing all designated cleaning agents after every general use. The Shower cleaning detail will be used during all lock ins and count times (once the count is cleared) when the showers are not in general use.

### **Housing Unit Floors**

The pod floors will be swept and mopped after every meal and once the pod is locked in after recreation period. The pantry floor will be swept and mopped after every meal period. The sally port floor will also be swept and mopped routinely due to the nature of a high traffic area.

### **Housing Unit Furniture**

All pod furniture, to include tables and chairs, will be cleaned at a minimum of once a shift and after every meal period. All table tops will be cleaned using disinfectant after every meal period, and the pod chairs will be wiped down with disinfectant being utilized on the arm area of the chair, ensure that the surface areas of tables are dry before use.

### **Law Library/Commissary Kiosk(s)**

Kiosks, stools, and tables will be cleaned after every use with disinfecting agents.

### **Inmate Phones**

Due to the proximity of phones to an inmate's mouth and the higher risk of disease spread, additional attention shall be given to the inmate phones for calls and non-contact visits. These shall be disinfected between every use.



### **Trash Receptacles**

All trash receptacles will be emptied per policy or as necessary. For example, receptacles shall not be more than half full at all times. Trash receptacles will be covered, when applicable. Trash receptacles shall not include any biohazardous waste materials.

### **Biohazardous Waste**

Biohazardous waste will be collected in the appropriately indicated waste bags and bins. These areas will be monitored by healthcare staff and will be emptied routinely. When emptied, the bags will be appropriately secured in the Biohazard room. If needed, the contracted company will be contacted to schedule more frequent pick ups for removal of waste.

### **Stairs and Second Tiers**

The second level tiers will be swept and mopped every shift and the stairs will be cleaned by wiping giving special attention to the area immediately under the first 4 steps. The railings of the stairs and second level tiers will be disinfected during count times by the Pod workers.

### **Supply Closet**

The supply closet will be cleaned at least once per shift, with all cleaning equipment being returned to the closet for accountability purposes in accordance with current policy when equipment is not in use. All paper towels or other cleaning impliments will be stored and issued from the supply closet by the Pod Officer as needed for cleaning purposes. All cleaning chemicals/agents will be accounted for and stored in the closet per policy.

### **Inmate Cells**

All inmates will be held accountable for their assigned cell. Inmates will be required to conduct cell cleaning with special attention to the following areas:

#### **Toilets**

All toilets will be clean and flushed, i.e. there should be no toilet paper, feces, or other items in the toilet bowl.

#### **Cell Sinks**

Sinks will be clean and free of standing water. Pod Officers will submit a work order as soon as possible, after verifying, for sinks that are not operable.

#### **Cell Floors**

Cell floors will be swept and mopped per institutional cell cleaning policy. There will be no blankets used as rugs (exception will be a prayer rug). All items will be neatly stored under the bunk in the inmate's individual storage container (bin). Footwear will be placed neatly under the bunk. When the bed is not in use, the issued blankets will be folded and placed on the mattress.

#### **Cell Walls**

Cell walls will be clean and free of pictures and clothes lines.

#### **Cell Table/Stool**

Table surfaces will be clean and any items on the table will be placed in a neat and orderly fashion.



### **Trash**

Any trash in the cell will be located by the cell door and will be taken by the inmate to one of the trash receptacles on the pod when able.

### **ENVIRONMENTAL CLEANING: GROUND LEVEL/INTAKE**

Intake workers will be tasked with the continuous cleaning of all commonly touched areas in our Intake Department to include, but not limited to: phones, door handles, walls, and counter tops. When a cell is vacant, an inmate worker will clean the cell (wiping down walls, bunks, sinks, inside/outside of doors, and toilets). At no time should the same rag be utilized to clean all areas simultaneously. This work is also to include the continuous sweeping and mopping of floors. As an extra precaution, inmate workers will be provided with Kaivac machines on the weekends for thorough cleaning of cells when vacated.

In addition to the holding cells, Intake, Processing, Pre-Arrestment, Supply, Laundry, Tool Room, and Kitchen shall be frequently monitored and cleaned.

### **Supply**

Correctional Officers assigned to supply/tool room will be responsible for disinfecting all utilized tools and frequently touched surface areas with the approved cleaning agent. The Officer(s) assigned will be responsible for the direct supervision of inmates who will also be engaging in cleaning (sweeping, mopping, disinfecting).

### **Kitchen**

The contracted dietary provider, inmate workers, and Correctional Officers will continue to follow all hygiene guidelines in accordance with policies and procedures as well as the Health Department for cleanliness and food preparation. All individuals who have contact with food will continue to wear the appropriate gloves/barriers/hairnets when handling food products and will frequently sanitize and clean their areas.

Inmate workers who are displaying symptoms of respiratory illness shall not be permitted to work and shall be evaluated by the healthcare department.

After 2000 hours, the final daily cleaning of the kitchen will be completed by remaining inmate kitchen workers. All surface areas will be cleaned with the disinfecting agent and all sinks/receptacles will be free of standing water.

Additional cleaning supplies will be deployed to accomplish these objectives and will be managed/controlled by the correctional officers and Intake supervisors.

### **ENVIRONMENTAL CLEANING: ELEVATORS**

Every hour central control will direct the elevators to ground level for cleaning. Kitchen/Ground floor officers will utilize inmate workers to clean the elevators with the disinfecting agents to include the following considerations: ensuring all cars are free of debris, sanitizing hand rails, sanitizing the elevator control panel, and ensuring that the floor is sprayed with the cleaning agent.



### **ENVIRONMENTAL CLEANING: EMPLOYEE ENTRANCE**

Nightly, the 1M cleaning crew shall conduct a thorough cleaning of the employee entrance, to include the employee entrance elevator and stairwell. Due to this being a high volume/traffic area, the employee entrance Sergeant shall ensure thorough cleaning of this area to include the entrance desk, doors, railings, lockers, bins, and any other applicable surface area.

### **ENVIRONMENTAL CLEANING: RESTRAINTS**

After the use of handcuffs, leg irons, waist chains, and/or restraint chairs, the tools will be thoroughly cleaned and sanitized with a disinfecting agent before they are utilized with another contact/inmate.

If therapeutic restraints are indicated, these must be sanitized before use with another contact/inmate.

Spit masks will be disposed after use.

### **INMATE PHONE CALLS**

With support from Global Tel\*Link (GTL), beginning Thursday, March 19 through April 14, 2020 every inmate who is eligible for phone calls (not currently on restrictions) will have access to 1 free minute phone call each day. No credit is given for unused phone calls. Each housing unit will have a sign posted to indicate the process for the phone calls

### **INMATE HYGIENE**

All inmates will be required to meet personal hygiene needs daily. All inmates will be required to shower at a minimum of 3 times per week. Soap will be issued to all inmates by the assigned Correctional Officer for frequent hand washing in cells. Correctional Officers will notify their respective Unit Managers of any issues at is relates to potential hygiene issues with any inmates assigned to their housing unit.

### **INMATE RECREATION**

To comply with recommendations to reduce groups larger than 10, considerations will be made for intake housing units to reduce the interaction between individuals who may require additional screening.

### **POPULATION MANAGEMENT**

With a reduced population, considerations will be made for the most appropriate management of the population. If housing units are temporarily closed, these units may be designated as units to house "sick" individuals in the future to ensure mitigation of disease spread.

### **SUPPLIES**

Every housing unit shall be appropriately supplied with bars of soap to increase hand washing and hand hygiene. Every housing unit will be provided with access to the disinfecting agent for environmental cleaning on all shifts as detailed in previous sections of this plan.

Ongoing assessments will be made to ensure that there is available PPE.



Each housing unit should report if the hand sanitizer station is emptied. High volume areas (i.e. outside of elevators, entrances) shall be routinely assessed to determine if hand sanitizer stations need refilled.

Rationing of necessary supplies will be evaluated on an ongoing basis to ensure that all inmates are provided with supplies related to basic hygiene needs.

#### **NOTIFICATION TO HEALTH DEPARTMENT**

If the Allegheny County Jail has a suspected case, the healthcare manager on duty will notify the Medical Director. The Medical Director or healthcare manager on duty will make notification to the Chief Deputy Warden of Healthcare Services. The PA Department of Health will be contacted (1-877-PA-HEALTH) and local contacts will be made for Department of Health employees via their notification protocols and procedures.

Additional notifications will be made through appropriate utilization of the chain of command.

#### **EMPLOYEE ILLNESS/STAFFING LEVELS**

Employees who are ill should seek treatment and follow the recommendations of their healthcare provider.

As a correctional agency, safe and secure operations will remain the primary focus. Because compromised staffing could be a threat to secure operations, staffing levels will be monitored continuously.



Staffing levels and assignments of staff will be assessed, each shift, daily. Staffing levels will determine operational tempo.

Administrative staff will brief all necessary individuals daily to include the status of operations. Shift Commanders and Healthcare Managers (Assistant Director's of Nursing) will review the following shifts schedules and prepare for any necessary changes.

#### **Non-Essential Employees**

The following departments will be evaluated to determine if there is an opportunity for fewer employees to report to the facility and conduct their work from home via remote access:

- Casework
- Alternative Housing
- Reentry Services
- HOPE/Chaplaincy
- Diversion
- Administrative Services
- Education/Inmate Programs



## Employee Quarantine

If, at the explicit direction of a qualified healthcare provider, an employee is under isolation or quarantine procedures because of potential exposure to COVID-19, the employee will send notification to Jail Administration. They will provide any relevant information necessary for follow up. The Allegheny County Health Department will be contacted by Jail Administrative staff to confirm and identify any additional steps (to include a possible review of recent work assignment and contact).

To support employees during this pandemic period, Allegheny County is encouraging employees who are sick to stay home instead of reporting to work. The county has issued a temporary 14-day quarantine/incubation paid leave policy and requires the following actions to be taken to ensure the employee is eligible without utilization of their earned benefit time.

Employees eligible for this leave of absence must qualify with one of the following criteria:

1. The employee has tested positive for COVID-19;
2. The employee has been directed by a health care provider to self-quarantine because s/he is awaiting test results; or
3. The employee has underlying health concerns that may be impacted by the virus, and is being advised by his/her health care provider to self-quarantine

Employees must follow their call off procedures and also contact UPMC WorkPartners to open a leave of absence under the county's temporary 14-day policy. Employees will be required to provide documentation to UPMC WorkPartners to certify their leave.

The temporary 14-day policy does not cover situations in which employees need to stay home to care for family members who are "at risk," have chosen to self-quarantine and were not directed by a medical provider, or for any other reason other than those listed above.

The supervisor that is receiving the call off notification will gather the following information:

1. Are you electing to quarantine because you...
  - a. Tested positive for COVID-19
  - b. Were medically directed to
  - c. Have a pre-existing condition and were medically directed to
2. What is the first date of your quarantine?
3. Can you provide a telephone number for an administrative staff person can contact you for follow up?

If the employee is quarantined for testing positive or awaiting test results, supervisory staff will need to confirm all work assignments for the previous 6 shifts. Priority screening will happen with all individuals who may have been in contact with the employee during their work assignments.

Employees who have been quarantined or tested will need to produce documentation that clears that to return to work.

Any employees who have been assigned work (i.e. healthcare staff) in high risk areas (i.e. New York City), will not be permitted to work in the facility until a 14 day period has elapsed and employee can demonstrate that they have been symptom free for those 14 days.



## EMPLOYEES: POSITIVE COVID-19 TESTING

### Reporting

Pennsylvania Emergency Management Agency (PEMA) is requesting that all First-Responder Agencies make notification regarding any employees that test positive for COVID-19. Names, specific medical information, and details should not be included. All reports shall be sent to Michael Spurr, Homeland Security/Law Enforcement Coordinator, via email [REDACTED] with Allegheny County Emergency Services.

### Contact Studies

When an employee has been confirmed, the Allegheny County Health Department will assist in providing direction based on the date of symptom presentation, the date the employee last worked, the capacity in which the employee worked, and the date that the employee was screened/tested positive. When the objective data has been gathered, the Allegheny County Health Department will provide direction for the designated dates that should be reviewed, utilizing CCTV footage, to establish employees that should be placed under isolation or quarantine procedures from these contact study reviews.

## ONGOING HEALTHCARE SERVICES AND STAFFING

All treatment and medical decisions within the facility are made under the guidance and supervision of the Medical Director or a designated medical professional. Healthcare providers will implement screening, assessment, monitoring, and treatment recommendations with the guidance from the CDC, PA Department of Health, and Allegheny County Health Department. However, the clinical presentation of the patient and the assessment of the treating provider will be ordered at the direction of a qualified healthcare professional.

### Healthcare Staffing

It is imperative that healthcare operations continue to ensure the safe maintenance of the inmate population. In the event that staffing levels no longer permit for the continued operations of healthcare staff, the following plan of action will be implemented.

#### Reduction of Services

Substance Use Counselors will discontinue group services on Level 4 and 5E. Staff will be redeployed to areas such as: non-emergency healthcare requests, mental health screening in intake, mental health units, case coordination/collaboration with community service providers such as JRS or CTT for discharge planning into the community.

Clinic staff will be redeployed to other areas of need (such as intake, 5B, or float positions).

Mental Health Specialists will provide support on segregated housing units, mental health units, intake, and non-emergency healthcare requests.

Nurses will ensure that medication passes are completed. Specialized nurses (i.e. detoxification nurse coordinator and staffing educator) will be tasked to fulfill other nursing functions to support the ongoing operations of necessary functions within the facility.



Healthcare managers, when applicable, will fulfill any necessary line staff roles to redeploy nurses to areas within the facility that indicate the highest need.

**\*Further pandemic staffing plans will be explicitly developed for each shift. Until further notice, staffing complications shall be immediately reported to the Duty Officer and Healthcare Duty Officer respectively.**



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**COMMAND**

**Allegheny County Jail Command Center – Warden’s Conference Room**

Facility Commander – Warden Orlando Harper [REDACTED]

Operation managers – Chief Deputy Warden David Zetwo [REDACTED] and Chief Deputy Warden Laura Williams [REDACTED]

Prison Managers: - Deputy Warden Jason Beasom [REDACTED] Major Adam Smith [REDACTED] Major Matthew Kohler [REDACTED] and Major Jack Vanchieri [REDACTED]

Medical Director – Dr. Donald Stechschulte, Jr. [REDACTED]

Shift Commander -as determined by shift assignment [REDACTED]

**Allegheny County Health Department**

Jennifer Fiddner [REDACTED] Dr. Kristen Mertz [REDACTED] Ronald Sugar [REDACTED] Tom Mangan [REDACTED]

**Allegheny County Sheriff’s Department (ACSD)**

Sheriff Liaisons – Lt. Tom Carter, [REDACTED] (Allegheny County Command Post) and Sgt. Tom Ninehouser, [REDACTED] (MCB – Jail Liaison)

**Allegheny County Emergency Medical Services**

Chief Matthew Brown [REDACTED] Assistant Chief Mark Pinchalk [REDACTED] EMS Coordinator Keith Morse [REDACTED]

**Poison Control Center**

Director, Amanda Korenoski [REDACTED]

cc: County Manager William McKain  
Deputy County Managers Stephen Pilarski and Barbara Parees



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