

COVID MONITORING

Patient Registry

Identification & Housing								
Current Institution	First Testing	CDCR#	Last Name	Age	Care Team	Housing Facility	Cell Bed	MH LOC
CIM	CIM							
CIM	CIM							CCCMS
CIM	CIM							
CIM	CIM							CCCMS
CIM	CIM							
CIM	CIM							
CIM	CIM							
CIM	CIM							
CIM	CIM							CCCMS

Institution(s): Multiple
Care Team(s): All
Housing/Facility: All

Report run: 4/8/2020 8:39:52 AM

California Correctional Health Care Services

Page 1



Institution(s): Multiple
Care Team(s): All
Housing/Facility: All

Report run: 4/8/2020 8:39:52 AM

California Correctional Health Care Services



COVID MONITORING

Patient Registry

Identification & Housing								
Current Institution	First Testing Institution	CDCR#	Last Name	Age	Care Team	Housing Facility	Cell Bed	мн гос
LAC	LAC							EOP
LAC	LAC							EOP
LAC	LAC							EOP
LAC	LAC							EOPMod
LAC	LAC							EOP
LAC	LAC							EOPMod
LAC	LAC							EOP
LAC	LAC							EOP
NKSP	NKSP							

Institution(s): Multiple
Care Team(s): All
Housing/Facility: All

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California Correctional Health Care Services

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Institution(s): Multiple
Care Team(s): All
Housing/Facility: All

Report run: 4/8/2020 8:39:52 AM

California Correctional Health Care Services



COVID MONITORING

Patient Registry

Identification & Housing								
Current Institution	First Testing Institution	CDCR#	Last Name	Age	Care Team	Housing Facility	Cell Bed	MH LOC
SATF	SATF							

Institution(s): Multiple

Care Team(s): All Housing/Facility: All

Report run: 4/8/2020 8:39:52 AM

California Correctional Health Care Services

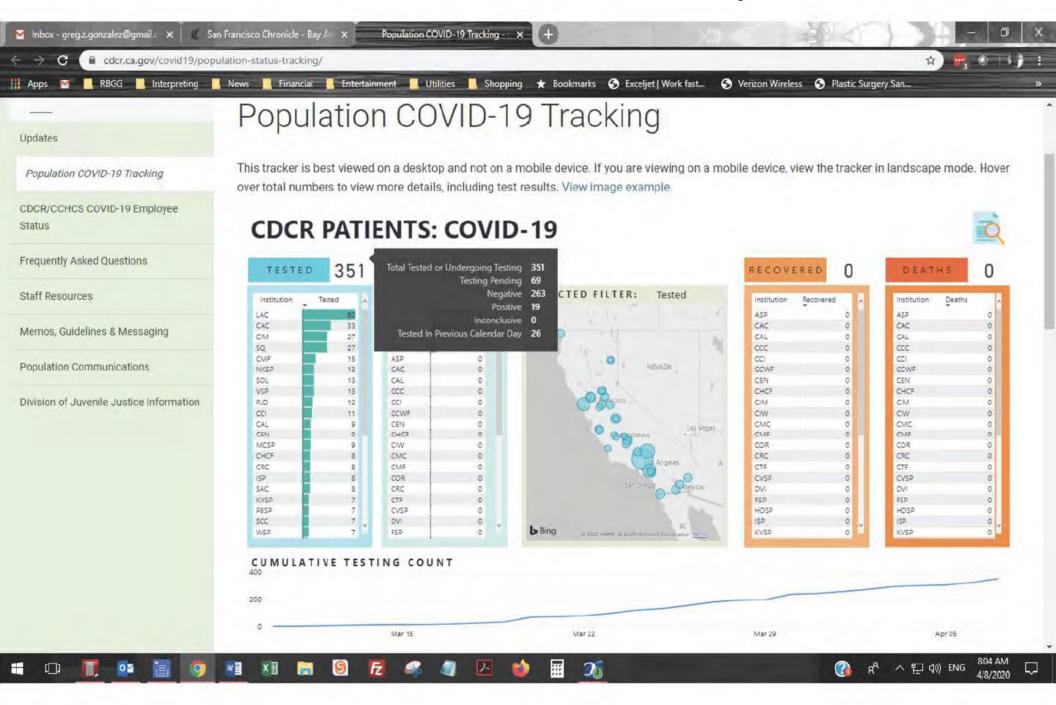
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Institution(s): Multiple
Care Team(s): All
Housing/Facility: All

Report run: 4/8/2020 8:39:52 AM

California Correctional Health Care Services



CDCR/CCHCS-COVID-191 Employee Status

Updated 5:55 p.m. Tuesday April 7, 2020 Staff information is self-reported

Locations	Staff Confirmed
Calipatria State Prison (CAL)	2
Central California Women's Facility (CCWF)	1
Centinela State Prison (CEN)	2
California Health Care Facility (CHCF)	4
California Institution for Men (C M)	18
California Institution for Women (CIW)	1
Folsom State Prison (FSP)	4
California State Prison, Los Angeles County (LAC)	4
North Kern State Prison (NKSP)	1
California State Prison, Sacramento (SAC)	5
Substance Abuse Treatment Facility and State Prison, Corcoran (SATF) *please note this is a separate facility from Corcoran State Prison*	2
San Quentin State Prison (SQ)	5
Salinas Valley State Prison (SVSP)	1
Valley State Prison (VSP)	1
Wasco State Prison (WSP)	4
Northern California Youth Correctional Center (NCYCC)	1
Richard A McGee Correctional Training Center—Galt	4
CDCR/CCHCS Worksite Location—Sacramento County	1
CDCR/CCHS Worksite Location—San Bernardino County	1
TOTAL	62

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State of California—Health and Human Services Agency

California Department of Public Health



AFL 20-32

State Public Health Officer & Directo

March 30, 2020

TO: Skilled Nursing Facilities

SUBJECT: Suspension of Regulatory Enforcement of Specified Skilled Nursing Facility Requirements

AUTHORITY: Proclamation of a State of Emergency and Executive Orders N-27-20 and N-39-20

All Facilities Letter (AFL) Summary

This AFL notifies skilled nursing facilities (SNFs) of a temporary waiver of specified regulatory requirements due to the state of emergency related to the COVID-19 outbreak.

Pursuant to the Governor's Executive Order N-39-20 (PDF) related to COVID-19 state of emergency, the Director of the California Department of Public Health (CDPH) may waive any of the licensing and staffing requirements of Chapter 2 and Chapter 2.4 of Division 2 of the Health and Safety Code and accompanying regulations with respect to any hospital or health facility identified in Health and Safety Code section 1250. CDPH is temporarily waiving specified SNF licensing and staffing requirements and suspending regulatory enforcement of the following requirements:

Licensure

1. Title 22 California Code of Regulations (CCR) sections 72201 and 72203 (a)

A SNF that has submitted an application to CDPH for any of the following may begin providing care prior to obtaining approval and licensure by CDPH:

- Initial licensure
- Change of service
- Increase bed capacity

Application fees for change of services and changes of beds shall be waived temporarily for the emergency COVID-19 response. Licensure fees for initial licensure may be submitted within 60 days of filing the application.

Staffing

2. Health and Safety Code (HSC) section 1276.65 (c)(1)(B) and (C)

- (B) Effective July 1, 2018, skilled nursing facilities, except those skilled nursing facilities that are a distinct part of a general acute care facility or a state-owned hospital or developmental center, shall have a minimum number of direct care services hours of 3.5 per patient day, except as set forth in Section 1276.9.
- (C) Skilled nursing facilities shall have a minimum of 2.4 hours per patient day for certified nurse assistants in order to meet the requirements in subparagraph (B).

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Castale 200 take California Mode of Regulations (CCR) Section 72329. 204/08/20 Page 14 of 108

(a) Each facility, except those skilled nursing facilities that are a distinct part of a general acute care facility or a state-owned hospital or developmental center, shall employ sufficient nursing staff to provide a minimum of 3.5 direct care service hours per patient day, except as set forth in Health and Safety Code section 1276.9. Skilled nursing facilities shall provide a minimum of 2.4 certified nurse assistant hours per patient day to meet the requirements of this subdivision.

Services

4. Title 22 CCR sections 72379-72389

A SNF shall have flexibility in providing an activities program, including suspension of activity program requirements in section 72381, to allow for Centers for Disease Control and Prevention (CDC) recommended infection control precautions to prevent the spread of COVID-19 in SNFs.

Space Conversion

5. Title 22 CCR section 72607 (a), (b) and (c)

- (a) A facility shall not have more patients or beds set up for use than the number for which it is licensed except in case of emergency when temporary permission may be granted by the Director or designee.
- (b) Patients shall not be housed in areas which have not been approved by the Department for patient housing and which have not been given a fire clearance by the State Fire Marshal except as provided in (a) above.
- (c) The number of licensed beds shown on a license shall not exceed the number of beds for which the facility meets applicable construction and operational requirements.

6. Title 22 CCR section 72603

- Spaces approved for specific uses at the time of licensure shall not be converted to other uses without the approval of the Department.
- Any additional beds added for temporary use, shall ensure patient privacy and shall be placed six feet apart
 in accordance with CDC guidance to prevent the spread of COVID-19. This includes beds temporarily set up in
 areas previously used for group activities including dining rooms or activity space.

This statewide waiver is approved under the following conditions:

- SNFs shall continue to comply with unusual occurrence reporting requirements specified in Title 22 CCR section 72541.
- SNFs shall continue to report all changes as required under Title 22 CCR section 72211, to
 CABLTC@cdph.ca.gov, however the 10-day reporting shall not apply. SNFs shall report all changes as soon as
 practical within 30 days of the change. When any temporary beds are no longer in use, SNFs shall report the
 lowering of patient capacity to CDPH.
- SNFs shall report any substantial staffing or supply shortages that jeopardize resident care or disrupt operations.
- SNFs shall continue to provide necessary care in accordance with residents' needs and make all reasonable efforts to act in the best interest of residents.
- SNFs shall not refuse to admit or readmit a resident based on their status as a suspected or confirmed COVID-19 case. SNFs shall institute appropriate precautions to prevent the spread of infection to health care personnel and other residents as specified in AFL-20-25.1
- SNFs shall follow their disaster response plan.
- SNFs shall follow infection control guidelines from the Centers for Medicare and Medicaid Services (CMS) and the CDC related to COVID-19.
- SNFs shall comply with directives from their local public health department, to the extent that there is no conflict with federal or state law or directives or CDPH AFLs.

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to skilled nursing services. CDPH encourages facilities to implement contingency plans to address staff absenteeism and the rapid influx of residents. CDPH will continue to promote quality healthcare and provide technical assistance and support compliance with core health and safety requirements, pursuant to Executive Order N-27-20 (PDF). CDPH is taking this unprecedented action due to the significant challenges California's health care system is facing as a result of the COVID-19 outbreak. As a result of this temporary waiver, SNFs do not need to submit individual program flexibility requests for the above specified requirements.

This waiver is in addition to the visitation waiver granted in AFL-20-22.

This waiver is valid until June 30, 2020, and may be extended based on any updated Executive Orders, or guidance from CMS or the CDC.

CDPH will continue to investigate and conduct enforcement activities for allegations of the most serious violations impacting health and safety, pursuant to Executive Order N-27-20 (PDF).

For capacity tracking purposes during COVID-19, SNFs shall submit an application when seeking initial licensure or changing beds or services listed on their license. This shall not require approval of the application before the SNF may provide care, although CDPH will reach out to provide technical assistance to ensure patient safety and the quality of care.

If you have any questions about this AFL, please contact your local district office.

Sincerely,

Original signed by Heidi W. Steinecker

Heidi W. Steinecker Deputy Director

Resources:

- Proclamation of a State of Emergency (PDF)
- Executive Order N-27-20 (PDF)
- Executive Order N-39-20 (PDF)
- AFL 20-22.1 Guidance for Limiting the Transmission of COVID-19 in Long-Term Care Facilities
- AFL 20-25.1 Preparing for Coronavirus Disease 2019 (COVID-19) in California Skilled Nursing Facilities

Center for Health Care Quality, MS 0512 . P.O. Box 997377 . Sacramento, CA 95899-7377

(916) 324-6630 . (916) 324-4820 FAX

Department Website (cdph.ca.gov)



Page Last Updated: March 31, 2020

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 17 of 108 EXECUTIVE DEPARTMENT STATE OF CALIFORNIA

EXECUTIVE ORDER N-43-20

WHEREAS on March 4, 2020, I proclaimed a State of Emergency to exist in California as a result of the threat of COVID-19; and

WHEREAS on March 30, 2020, I issued Executive Order N-39-20 to pave the way for a temporary expansion of the health care workforce ahead of an anticipated surge in the need for medical treatment, and related strain on the health care delivery system, caused by COVID-19; and

WHEREAS clinics, hospitals, and other health care facilities and health care providers must maximize the number of capable health care workers through the use of telehealth services to ensure that Californians impacted by COVID-19 are able to access medical treatment as necessary; and

WHEREAS it is imperative to reduce the spread of COVID-19 and protect health care workers, including through the use of telehealth services, where possible, for any reason (not limited to the diagnosis and treatment of COVID-19 or related conditions); and

WHEREAS health care facilities housing vulnerable populations, such as nursing homes and psychiatric facilities, require special measures to protect those populations from COVID-19 and ensure continuity of care; and

WHEREAS on March 17, 2020, the Office for Civil Rights in the U.S.
Department of Health and Human Services issued guidance ("Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency," available at https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html) announcing that the Office, in the exercise of its enforcement discretion, will not impose penalties for noncompliance with regulatory requirements imposed under the HIPAA Rules, as to covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency; and

WHEREAS even in an emergency situation, covered entities must continue to implement reasonable safeguards to protect patient information against intentional or unintentional impermissible uses and disclosures. Further, covered entities and their business associates must apply the administrative, physical, and technical safeguards of the HIPAA Security Rule to electronic protected health information; and

WHEREAS under the provisions of Government Code section 8571, I find that strict compliance with various statutes, regulations, and certain local ordinances specified or referenced herein would prevent, hinder, or delay appropriate actions to prevent and mitigate the effects of the COVID-19 pandemic.

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NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and the statutes of the State of California, and in particular, Government Code sections 8567 and 8571, do hereby issue the following Order to become effective immediately:

IT IS HEREBY ORDERED THAT:

- The requirements specified in Business and Professions Code section 2290.5(b), related to the responsibility of a health care provider to obtain verbal or written consent before the use of telehealth services and to document that consent, as well as any implementing regulations, are suspended.
- 2) The penalties specified in Civil Code section 56.35, as well as any cause of action arising out of section 56.35 (including, but not limited to, any cause of action arising out of the Unfair Competition Law that is predicated on section 56.35) are suspended as applied to inadvertent, unauthorized access or disclosure of health information during the good faith provision of telehealth services.
- 3) The administrative fines, civil penalties, and private right of action specified in Civil Code section 56.36, as well as any other cause of action arising out of section 56.36 (including, but not limited to, any cause of action arising out of the Unfair Competition Law that is predicated on section 56.36, as well as the authority to bring a civil action set forth in subdivision (f) of section 56.36) are suspended as applied to inadvertent, unauthorized access or disclosure of health information during the good faith provision of telehealth services.
- 4) The civil penalties for health care facilities and providers specified in Civil Code sections 1798.29 and 1798.82, related to the timely notification to patients of a breach of the security system, are suspended as applied to any breach resulting from inadvertent, unauthorized access or disclosure during the good faith provision of telehealth services. Any cause of action arising out of section 1798.29 or section 1798.82 (including, but not limited to, any cause of action arising out of the Unfair Competition Law that is predicated on section 1798.29 or section 1798.82) is likewise suspended as applied to inadvertent, unauthorized access or disclosure that occurs during the good faith provision of telehealth services.
- 5) The deadlines specified in Health and Safety Code section 1280.15, related to notification to the Department of Public Health and to patients of the unauthorized access or disclosure of health information, are extended from a period of 15 days to a period of 60 days when the unauthorized access or disclosure is related to the good faith provision of telehealth services. The administrative penalties specified in Health and Safety Code section 1280.15, related to unauthorized access or disclosure of health information, are suspended when the unauthorized access or disclosure occurs during the good faith provision of telehealth services as a result of the use of technology that does not fully comply with federal or state law. Any cause of action arising out of section 1280.15 (including, but not limited to, any cause of action

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- arising out of the Unfair Competition Law that is predicated on section 1280.15) is likewise suspended as applied to unauthorized access or disclosure that occurs during the good faith provision of telehealth services as a result of the use of technology that does not fully comply with federal or state law.
- 6) The administrative penalties for health care providers specified in Health and Safety Code section 1280.17, related to safeguards of health information, are suspended for health care providers as applied to any inadvertent, unauthorized access or disclosure of health information during the good faith provision of telehealth services as a result of the use of technology that does not fully comply with federal or state law. Any cause of action arising out of section 1280.17 (including, but not limited to, any cause of action arising out of the Unfair Competition Law that is predicated on section 1280.17) is likewise suspended as applied to inadvertent, unauthorized access or disclosure that occurs during the good faith provision of telehealth services as a result of the use of technology that does not fully comply with federal or state law.
- 7) The criminal penalties specified in Welfare and Institutions Code section 14100.2(h), related to persons who knowingly release or possess information about Medi-Cal beneficiaries, are suspended as applied to health care providers, health care facilities, and health care administrators for any inadvertent, unauthorized release of confidential information during the good faith provision of telehealth services. Any cause of action arising out of section 14100.2 (including, but not limited to, any cause of action arising out of the Unfair Competition Law that is predicated on section 14100.2) is likewise suspended as applied to health care providers, health care facilities, and health care administrators for any inadvertent, unauthorized release of confidential information during the good faith provision of telehealth services.
- 8) To the extent any provision of this Order suspends any penalty or other enforcement mechanism associated with the violation of any statute where such violation arises out of the good faith provision of telehealth services, such violation shall not constitute unprofessional conduct within the meaning of Article 10.5 of the Business and Professions Code or any other applicable law, or otherwise be cause for professional discipline.
- 9) Where the provision of telehealth services is conducted by a "covered health care provider" subject to the HIPAA Rules and described in the "Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency" ("Notification") issued by the Office for Civil Rights in the U.S. Department of Health and Human Services on March 17, 2020, that covered health care provider shall ensure that its delivery of telehealth services is consistent with that Notification. This paragraph does not impose any mandatory requirements beyond any mandatory requirements imposed by the Notification itself, except that where the Notification encourages particular measures to safeguard patient privacy, but does not require such measures, covered health care

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providers shall give due consideration to such measures and shall endeavor to adopt them to the extent possible.

10) For purposes of this Order, "telehealth services" includes the use of telehealth services to engage in the provision of behavioral or mental health services, in addition to the use of telehealth services to engage in the provision of medical, surgical, or other health care services. This paragraph should be construed to ensure that the provisions of this Order apply to the provision of behavioral or mental health services the same extent that those paragraphs apply to other forms of health care.

IT IS FURTHER ORDERED that as soon as hereafter possible, this Order be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this Order.

This Order is not intended to, and does not, create any rights or benefits, substantive or procedural, enforceable at law or in equity, against the State of California, its agencies, departments, entities, officers, employees, or any other person.

IN WITNESS WHEREOF I have hereunto set my hand and caused the Great Seal of the State of California to be affixed this 3rd day of April 2020.

AVIN NEWSOM

overnor of California

ATTEST:

ALEX PADILLA Secretary of State

From: Bentz, Melissa@CDCR < @cdcr.ca.gov> Sent: Monday, April 6, 2020 5:22 PM To: Kyle Lewis; Adriano Hrvatin; Nasstaran Tara Ruhparwar; Michael W. Bien; Lisa Ells; Jessica Winter; Cara Trapani; Amy Xu; Marc Shinn-Krantz; Donald Specter; Steve Fama; Christine Ciccotti @dsh.ca.gov); @DSH-S; Hendon, @DSH-S; @DSH-S; @DSH-S; @CDCR; @CDCR; @CDCR; @CDCR; @CDCR; Nick Weber; @CDCR; @CDCR; @CDCR; Elise Thorn; Lucas Hennes; Ed Swanson; @CDCR: @CDCR: 'Silberfeld, Roman M.'; @CDCR; Coleman Team - RBG Only; Angie Cooper; Braxton Medlin; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Joseph Sorah; Kahlil Johnson; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Michael Ryan; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Sofia Millham; Tim Rouqeux; William Trezvant; Zelia M. Tavares; @CDCR; @CDCR; Laura Ceballos; @CDCR Subject: Coleman -- COVID- 19 Task Force Meeting Attachments: Draft COVID-19 Temporary Emergency Transfer Guidelines 04.06.20 CLEAN.pdf; CDCR DRAFT COVID Temporary Emergency Transfer Guidelines- 4.6.2020- Redline.pdf

All,

Attached is a clean and redline draft of CDCR's COVID-19 Temporary Transfer Guidelines. Mental Health and experts from the Special Master's team met many times over the weekend to review and revise this document. We look forward to discussing the guidelines with everyone during our task force call tomorrow.

Respectfully,

Melissa C. Bentz

Attorney, Class Action Team

Office of Legal Affairs

California Department of Corrections and Rehabilitation

Email: @cdcr.ca.gov

Office Phone:

Cell Phone:

Fax:

ATTORNEY CLIENT COMMUNICATION AND/OR ATTORNEY WORK PRODUCT – DO NOT FORWARD COMMUNICATION WITHOUT THE EXPRESS PERMISSION OF THE AUTHOR.

CDCR COVID Temporary Transfer Guidelines & Workflow

In an attempt to limit the transmission of COVID-19, all non-emergency movement shall be immediately curtailed. When a patient requires emergency inpatient care to prevent serious harm to self or others or to address serious mental health decompensation, referrals to Mental Health Inpatient care shall continue, including place-in orders to Intermediate Care Program (ICF), Acute Psychiatric Program (APP), or Mental Health Crisis Bed (MHCB). The best option is to place the patient in an available bed in an ICF, APP, or MHCB within the same institution. The next best option is for the patient to be housed and treated in the same institution within a Temporary Mental Health Unit, as described in a separate document regarding treatment to be rendered in these units, titled COVID Emergency Mental Health Treatment Guidance. The third option is for Enhanced Level of Care Treatment modalities in cells designated for this, which may include the patient's own cell, as described in a separate document regarding treatment to be rendered in these units, titled COVID Emergency Mental Health Treatment Guidance. The fourth option, when patients are not psychiatrically safe in their current environment and for whom none of the prior options are available or protective, is to transfer the patient to another institution that has safer options, while also balancing the substantial risks of COVID in this pandemic. All transfer requests to other facilities will be reviewed as described below, and HCPOP will not act on the place-in order without approval from the Regional Mental Health Administrator or the IRU.

Referrals to a Different Facility

- I. <u>Institution Review</u>: Transfer out of the patient's current facility shall not proceed unless meeting the criteria below, as assessed by the treatment team:
 - 1. an imminent, life-threatening emergency necessitates transfer, or
 - 2. serious mental health decompensation necessitates transfer, and
 - the life-threatening condition or serious decompensation cannot be reasonably treated at the institution.
- II. When a transfer is not clinically necessary, alternate strategies for managing the patient within the institution must be implemented. A medical hold shall be placed by the primary care physician or psychiatric physician to prevent movement.
- III. If transfer to an MHCB is pursued, Regional Review is required: If the referral meets the criteria above, the primary clinician shall email and call the Regional Mental Health Administrator or designee. They shall include an explanation of why the criteria above have been met. The Regional Mental Health Administrator must then consult with the Regional Deputy Medical Executive. HCPOP will not transfer patients to a new facility without receiving approval from the Mental Health Administrator.
- IV. If transfer to an ICF or APP program is pursued, IRU Review is required: When a local treatment team requests an inpatient transfer to another facility at an Acute or Intermediate level of care, the request, describing the criteria in Section I above that have been met, shall be sent by email to the IRU inbox at CDCR DHCS DSH Referral Updates@CDCR (m_cdcrdchcsdmhreferupdate@cdcr.ca.gov).
 - 1. IRU shall hold referrals not meeting the above criteria as incomplete, and shall not move these referrals forward for endorsement by HCPOP.

- When the IRU approves an inpatient transfer to another facility, the approval shall be communicated by the IRU to HCPOP.
- V. For transfer to ICF, APP, or MHCB: The treatment team and reviewers shall also consider if the patient currently has symptoms consistent with COVID-19, has possible exposure to a COVID-19 case and is therefore in quarantine, is symptomatic in isolation (suspect case), or is a confirmed case in isolation. There must be medical clearance by a local medical physician or psychiatric physician in consultation with the institution public health or infection control nurse prior to the patient leaving a facility.
 - The clearance shall be clearly documented by the primary care physician or psychiatrist in a transfer note, to be included in the chart, addressing the factors included in Attachment A.
 - 2. The content of the note should also be orally communicated from the sending psychiatrist or other medical physician to the Chief or Senior psychiatrist at the receiving institution so appropriate measures can be taken prior to patient arrival.
- VI. <u>Acceptance Procedure</u>: Prior to acceptance of an inter-facility patient transfer into an ICF, APP, or MHCB, a psychiatrist shall review all inpatient referrals including the medical transfer note information and the risk factors noted above.
 - If there are substantial concerns regarding the patient's medical risk, or risk to other
 patients and staff at the facility given the referring information, a discussion must occur
 with the referring clinician and psychiatrist, to weigh the risks and determine a final
 outcome. If there is a disagreement between the referring and accepting institutions,
 Mental Health leadership at headquarters will assist in resolving the issue.
 - a. Any decision not to accept MHCB referrals shall be immediately communicated to HCPOP.
 - b. Any decision not to accept ICF or APP referrals made by the medical director due to infection control concerns shall be entered in the "MH Acute/ICF Disposition" order by selecting "More information needed" and notifying the IRU of the need for the patient to remain at the referring institution due to COVID-19 concerns.
- VII. <u>Transfer Procedure</u>: Prior to transfer, emergency medical services, custody transportation, and the receiving facility should all be informed of any precautions to be taken as per CDCR CCHCS HC DOM 3.1.9 Health Care Transfer. A facemask shall be maintained on the patient throughout transfer. If a patient refuses to wear a facemask, the patient shall be placed in an area of the van that relatively isolates the patient and officers should wear protective equipment when transporting the patient to and from the van in accordance with CDCR's Covid-19 Staff PPE Guide: https://www.cdcr.ca.gov/covid19/wp-content/uploads/sites/197/2020/03/PPE-GUIDE-POSTER4.pdf

Consideration may also be given to having the patient wear a spit mask for the escort to and from the van.

- 1. If a patient is already on isolation or quarantine, the isolation or quarantine should be maintained and completed at the new facility.
- VIII. HCPOP and the IRU will track all inpatient referrals and any exceptions to transfer timelines.

Discharges

ICF, APP, and MHCB discharges are to stay at their current facility whenever possible. If a patient must transfer to a different facility due to irreconcilable custodial issues (e.g. enemy concerns, staff separation alerts), clinical staff will complete COVID-19 clinical screening and document this screening utilizing the guidelines in Attachment A. Clinical staff will inform the Classification and Parole Representative if any personal protective equipment is needed during transfer and will inform the receiving Chief or Senior Psychiatrist regarding the patient's transfer and any treatment needs including those related to COVID 19 risks.



Attachment A

Medical Transfer Note

The following information shall be included in the transfer note in EHRS, and orally communicated to the receiving institution's Chief or Senior psychiatrist; if they are unavailable, it should be communicated to the Chief of Mental Health:

- 1. Title Note: Medical transfer note
- 2. Referring Institution
- 3. Receiving Institution
- 4. Does the patient have a new or worsening cough? [Y/N]
- 5. Does the patient have a fever (>100 F)? [Y/N]
- 6. Is the patient experiencing new or worsening shortness of breath? [Y/N]
- 7. Is the patient currently on isolation? [Y/N]
- 8. Is the patient currently on quarantine? [Y/N]
- 9. Is the patient known to be a contact of a confirmed COVID-19 case? [Y/N]
- 10. Include the patient's vitals for the last 14 days as available
- 11. Rationale for recommending transfer.

From: Weber, Nicholas@CDCR @cdcr.ca.gov> Sent: Tuesday, March 24, 2020 12:20 PM To: Steve Fama; Coleman Team - RBG Only; Donald Specter; Elise Thorn; Tyler Heath; Lucas Hennes; Adriano Hrvatin; Kyle Lewis; Melissa Bentz; @CDCR; @CDCR; @CDCR; @CDCR: @CDCR; Christine Ciccotti; @DSH-S; @DSH-S; Angie Cooper; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Steve Raffa; Tim Rougeux; @CDCR

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

Attachments: Non-Essential Movement Update.pdf

All,

Attached is as revision to the CDCR essential movement guidelines issued today.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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From: Weber, Nicholas@CDCR Sent: Saturday, March 21, 2020 3:02 PM To: Steven Fama < @prisonlaw.com>; Coleman Team - RBG Only < @rbgg.com>; Don Specter < @prisonlaw.com>; @doj.ca.gov; Tyler Heath < @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Adriano Hrvatin < @doj.ca.gov>; Kyle Lewis < @doj.ca.gov>; @CDCR @cdcr.ca.gov>; Hessick, Jerome@CDCR < @cdcr.ca.gov>; Neill, Jennifer@CDCR < @cdcr.ca.gov>; Toche, Diana@CDCR < @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR < @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S < @dsh.ca.gov>; Kent, Kristopher@DSH-S @pldolaw.com>; Brian Main < @dsh.ca.gov>; Angie Cooper < @gmail.com>; Cindy Radavsky < @gmail.com>; Henry Dlugacz @blhny.com>; James DeGroot < @gmail.com>; Jeffrey Metzner < @cuanschutz.edu>; Karen Rea < @gmail.com>; Kerry C. Hughes, M.D. @pldolaw.com>; Kristina Hector < @pldolaw.com>; L Hayes @aol.com>; Kerry Walsh < @pldolaw.com>; Lana Lopez < @msn.com>; L. McClendon-Hunt < @pldolaw.com>; Maria



Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is a clarification to Thursday's movement notice clarifying that access to and from PIP is permitted under current circumstances.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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```
From: Weber, Nicholas@CDCR
Sent: Saturday, March 21, 2020 12:48 PM
                  @prisonlaw.com>; Coleman Team - RBG Only <</pre>
To: Steven Fama <
                                                                                         @rbgg.com>; Don
                                            @doj.ca.gov; Tyler Heath <
                                                                                @doj.ca.gov>; Lucas Hennes
Specter <
                @prisonlaw.com>;
             @doj.ca.gov>; Adriano Hrvatin <
                                                          @doj.ca.gov>; Kyle Lewis <
                                                                                             @doj.ca.gov>;
Bentz, Melissa@CDCR <
                                   @cdcr.ca.gov>; Hessick, Jerome@CDCR <
                                                                                       @cdcr.ca.gov>; Neill,
Jennifer@CDCR <
                            @cdcr.ca.gov>; Toche, Diana@CDCR <</pre>
                                                                           @cdcr.ca.gov>; Bick, Joseph@CDCR
            @cdcr.ca.gov>; Daye, Eureka@CDCR <
                                                           @cdcr.ca.gov>; Christine Ciccotti
                @dsh.ca.gov>; Raddatz, Antonina@DSH-S <
                                                                          @dsh.ca.gov>; Kent, Kristopher@DSH-S
               @dsh.ca.gov>; Angie Cooper <
                                                   @pldolaw.com>; Brian Main <
                                                                                           @gmail.com>; Cindv
                   @gmail.com>; Henry Dlugacz <
                                                         @blhny.com>; James DeG
Radavsky <
                                                                                                  @ mail.com>;
                                                                          @gmail.com>; Kerry C. Hughes, M.D.
                                 @cuanschutz.edu>; Karen Rea <
Jeffrey Metzner
         @aol.com>; Kerry Walsh <
                                        @pldolaw.com>; Kristina Hect r <
                                                                              @pldolaw.com>; L Haves
         @msn.com>; L. McClendon-Hunt
                                                        @pldolaw.com>; Lana Lopez
                                                                                         @pldolaw.com>; Maria
              @drmariamasotta.com>; Matty Lopes <
Masotta <
                                                          @pldolaw.com>; Mohamedu Jones
        @pldolaw.com>;
                                @aol com; Patricia Williams <
                                                                     @gmail com>; Rachel Gribbin
                                           @pldolaw.com>; Rod Hickman <
        @pldolaw.com>; Regina Costa <
                                                                                    @gmail.com>; Steve Raffa
      @pldolaw.com>; Timothy Rougeux <</pre>
                                                 @hotmail.com>; Ponciano, Angela@CDCR
                @cdcr.ca.gov>
```

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 31 of 108 In advance of our call please find the CCHCS COVID-19 Interim Guidance for Health Care and Public Health Providers and a March 20, 2020, memo from CCHCS regarding COVID 19 Guidance Regarding Field Operations.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

For more information on the screener and who uses it please see the following website:

http://cssrs.columbia.edu/documents/screener-triage-emergency-departments/

Thanks.

From: Weber, Nicholas@CDCR

Sent: Friday, March 20, 2020 3:57 PM

To: Steven Fama @prisonlaw.com>; Coleman Team - RBG Only @rbgg.com>; Don

Specter @prisonlaw.com>; @doj.ca.gov; Tyler Heath @doj.ca.gov>; Lucas Hennes
@doj.ca.gov>; Adriano Hrvatin @doj.ca.gov>; Kyle Lewis @doj.ca.gov>;

Bentz, Melissa@CDCR @cdcr.ca.gov>; Hessick, Jerome@CDCR @cdcr.ca.gov>; Neill,

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L Document 6587
Toche, Diana@CDCR
Jennifer@CDCR
           @cdcr.ca.gov>; Daye, Eureka@CDCR
                                                          @cdcr.ca.gov>; Christine Ciccotti
                @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                                                                        @dsh.ca.gov>; Kent, Kristopher@DSH-S
               @dsh.ca.gov>; Angie Cooper
                                                  @pldolaw.com>; Brian Main
                                                                                         @gmail.com>; Cindy
                   @gmail.com>; Henry Dlugacz <
Radavsky
                                                        @blhny.com>; James DeGroot <
                                                                                                @gmail.com>;
                                 @cuanschutz.edu>; Karen Rea <
                                                                        @gmail.com>; Kerry C Hughes, M.D.
Jeffrey Metzner
         @aol.com>; Kerry Walsh
                                       @pldolaw.com>; Kristina Hector
                                                                             @pldolaw.com>; L Haves
         @msn.com>; L. McClendon-Hunt
                                                       @pldolaw.com>; Lana Lopez
                                                                                        @pldolaw com>; Maria
Masotta
              @drmariamasotta.com>; Matty Lopes
                                                         @pldolaw.com>; Mohamedu Jones
        @pldolaw.com>;
                                @aol.com; Patricia Williams
                                                                    @gmail.com>; Rachel Gribbin
        @pldolaw.com>; Regina Costa
                                           @pldolaw.com>; Rod Hickman
                                                                                  @gmail.com>: Steve Raffa
                                                @hotmail.com>; Ponciano, Angela@CDCR
      @pldolaw.com>; Timothy Rougeux
                                             @cdcr.ca.gov>
                @cdcr.ca.gov) <
```

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

Steve,

The screener is attached.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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```
From: Steven Fama <
                      @prisonlaw com>
Sent: Friday, March 20, 2020 3:45 PM
To: Weber, Nicholas@CDCR
                                         @cdcr.ca.gov>; Coleman Team - RBG Only <
       @rbgg.com>; Don Specter
                                         @prisonlaw.com>;
                                                                    @doj.ca.gov; Tyler Heath
            @doj.ca.gov>; Lucas Hennes
                                                   @doj.ca.gov>; Adriano Hrvatin
                                                                                               @doj.ca.gov>;
                    @doj.ca.gov>; Bentz, Melissa@CDCR
                                                                    @cdcr.ca.gov>; Hessick, Jerome@CDCR
Kyle Lewis
               @cdcr.ca.gov>; Neill, Jennifer@CDCR
                                                              @cdcr.ca.gov>; Toche, Diana@CDCR
            @cdcr.ca.gov>; Bick, Joseph@CDCR
                                                        @cdcr.ca.gov>; Daye, Eureka@CDCR
            @cdcr.ca.gov>; Christine Ciccotti
                                                           @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                 @dsh.ca.gov>; Kent, Kristopher@DSH-S
                                                                     @dsh.ca.gov>; Angie Cooper
                                              @gmail.com>; Cindy Radavsky
        @pldolaw.com>; Brian Main
                                                                                    @gmail com>; Henry
Dlugacz
                 @blhny.com>; James DeGroot
                                                         @gmail.com>; Jeffrey Metzner
                 @cuanschutz.edu>; Karen Rea
                                                         @gmail.com>; Kerry C. Hughes, M.D.
        @aol.com>; Kerry Walsh
                                       @pldolaw.com>; Kristina Hector
                                                                            @pldolaw.com>; L Hayes
        @msn.com>; L. McClendon-Hunt
                                                       @pldolaw.com>; Lana Lopez
                                                                                       @pldolaw.com>; Maria
              @drmariamasotta.com>; Matty Lopes
                                                         @pldolaw.com>; Mohamedu Jones
Masotta
                                                                    @gmail com>; Rachel Gribbin
        @pldolaw.com>;
                               @aol.com; Patricia Williams
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Case 2:90-cv-00520-KJM-DB Document 6587-1. Filed 04/08/20 Page 33 of 108 @pldolaw.com/>; Regina Costa @pldolaw.com/>; Rod Hickman @pldolaw.com/>; Timothy Rougeux @hotmail.com/>
```

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

Thanks Nick. Can you please forward the "Columbia Screener" referenced in the draft plan for possible CDCR use for suicide assessments, so we can be on the sam page as to what is being referenced?

Steve



Subject: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is a draft CDCR Emergency COVID 19 Plan for the provision of mental health care. Please note that the attached is a working document. The document reflects CDCR's treatment goals given the information currently available. CDCR will adjust the document to reflect unanticipated changes in COVID 19 restrictions or prison operations. CDCR remains committed to ensuring patients with mental illnesses have prompt access to care even in these changing circumstances. CDCR looks forward to a productive conversation tomorrow at the first task force meeting.

Thanks.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 34 of 108 Sacramento, CA 95811-7243

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Weber, Nicholas@CDCR

From: Ferguson, David@CDCR

Sent: Tuesday, March 24, 2020 11:19 AM

To: CDCR Institutions DAI CSU C and PRs; CDCR Institutions DAI - Assistant C&PR's

CC: CDCR Institutions DAI Pop Management; Transportation Statewide Scheduling@CDCR;

CDCR Institutions DAI Associate Directors; CDCR Institutions Wardens; CDCR DAI Northern Transportation Hub; CDCR DAI-TUExtraditions; Moss, Joseph@CDCR; Seibel,

Kimberly@CDCR; Barretto, Jennifer@CDCR; Herrera, John@CDCR; Gibson,

Charles@CDCR; Gipson, Connie@CDCR; Fouch, Adam@CDCR; CDCR DOC COVID-19; CDCR DAI_CentralTransportationHub_Mailbox-M; CDCR DAI Southern Transportation Hub; CDCR Institutions DAI CSU Chief & Captains; CDCR Institutions CDW; Bentz, Melissa@CDCR; Weber, Nicholas@CDCR; Powell, Jay@CDCR; Daye, Eureka@CDCR; Ponciano, Angela@CDCR; Navarro, Guadalupe@CDCR; Moak, Brian@CDCR;

Engellenner, Leithen@CDCR

Subject: RE: Immediate Cancellation of All Non-Essential Inmate Movement

Sent on Behalf of Assistant Deputy Director (A) J. W. Moss

MOVEMENT UPDATE 3/34/2020- 1100 Hours

C&PRs and Assistant C&PRs,

Please note: <u>ALL non-essential</u> inmate movement has been <u>cancelled</u>. The updated list of approved essential movement is effective Wednesday, March 25, 2020:

- Out to Medical (emergencies)
- HCPOP (medical bed placements, excludes SOP in GP beds)
- All RC Transfers
- Restricted Housing Movement (should be managed within the institution when possible)
 - o From GP Housing to ASU / ASU-EOP HUB / STRH / LTRH / SHU / PSU
 - From ASU / ASU-EOP HUB / STRH / LTRH / SHU / PSU to GP / EOP Housing
 - NDS-200 transfers are approved.
- MH LOC Transfers
 - Admits/Discharges MHCB, PIP
 - GP to EOP Housing
 - MCCF LOC changes requiring HUB placements
 - o Desert Institutions Mental Health (CCCMS/EOP) from the desert
- DPP/DDP from a <u>non-designated institution</u> to a designated institution <u>to prevent</u> <u>morbidity/mortality</u> (pending discussions with plaintiffs)
- Inmates may be moved to an MSF within the same prison
- MCRP, CCTRP, and ACP community placements suspended through April 6, 2020
- Out to Courts (confirmed with court prior to move and screened clearance by medical)
- Removal of Modified Community Correctional Facility inmates due to deactivation efforts or medical cases requiring HUB placements
- Parole Transfers (PT) for mandated parole agent pick-ups
- Request from outside law enforcement agencies for holds, warrants, or extraditions (HOL) (confirmed with agency prior to move and screened clearance by medical)

- Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 36 of 108 Returns from escapes (ESC)
- Transfers of inmates from non-RC prisons to the camp pipeline institutions are <u>suspended until</u> further notice.
- Transfers of inmates Fire Camps are <u>suspended until further notice</u>.
- <u>Inmate transfers previously initiated under the approved guidelines, that are currently on</u> layover, may be moved to their final destination.

Moves to Department of State Hospital beds at Atascadero State Hospital, Coalinga State Hospital, and Patton State Hospital are suspended until further notice.

Bed moves within each institution are still permitted to the degree necessary to ensure safety of staff and inmates, and to assign inmates to the least restrictive housing available based upon their individual case factors. If you have questions concerning this direction, please contact lnstitutionsDAIPopManagement@cdcr.ca.gov.

J. W. Moss
Assistant Deputy Director (A)
Division of Adult Institutions
Office:
Cellphone:

From: Ferguson, David@CDCR

Sent: Saturday, March 21, 2020 2:49 PM

To: CDCR Institutions DAI CSU C and PRs <InstitutionsDAICSUCandPRs@cdcr.ca.gov>; CDCR Institutions DAI - Assistant C&PR's <InstitutionsDAI-AssistantCandPRs@cdcr.ca.gov>

Cc: CDCR Institutions DAI Pop Management <InstitutionsDAIPopManagement@cdcr.ca.gov>; Transportation Statewide Scheduling@CDCR <TransStatewideSched@cdcr.ca.gov>; CDCR Institutions DAI Associate Directors

<InstitutionsDAIAssociateDirectors@cdcr.ca.gov>; CDCR Institutions Wardens <InstitutionsWardens@cdcr.ca.gov>;

CDCR DAI Northern Transportation Hub <NoTransportationHub@cdcr.ca.gov>; CDCR DAI-TUExtraditions <DAI-

TUExtraditions@cdcr.ca.gov>; Moss, Joseph@CDCR <Joseph.Moss@cdcr.ca.gov>; Seibel, Kimberly@CDCR

- <Kimberly.Seibel@cdcr.ca.gov>; Barretto, Jennifer@CDCR <Jennifer.Barretto@cdcr.ca.gov>; Herrera, John@CDCR
- <John.Herrera@cdcr.ca.gov>; Gibson, Charles@CDCR <Charles.Gibson@cdcr.ca.gov>; Gipson, Connie@CDCR
- <Connie.Gipson@cdcr.ca.gov>; Fouch, Adam@CDCR <Adam.Fouch@cdcr.ca.gov>; CDCR DOC COVID-19
- <DOCCOVID19@cdcr.ca.gov>; CDCR DAI_CentralTransportationHub_Mailbox-M
- <DAI_CentralTransportationHub_Mailbox-M@cdcr.ca.gov>; CDCR DAI Southern Transportation Hub
- <SoTransportationHub@cdcr.ca.gov>; CDCR Institutions DAI CSU Chief & Captains

<CDCRInstitutionsDAICSUChiefCaptains@cdcr.ca.gov>; CDCR Institutions CDW <CDCRInstitutionsCDW@cdcr.ca.gov>; Bentz, Melissa@CDCR <Melissa.Bentz@cdcr.ca.gov>; Weber, Nicholas@CDCR <Nicholas.Weber@cdcr.ca.gov>; Powell, Jay@CDCR <Jay.Powell@cdcr.ca.gov>; Daye, Eureka@CDCR <Eureka.Daye@cdcr.ca.gov>; Ponciano, Angela@CDCR <Angela.Ponciano@cdcr.ca.gov>

Subject: RE: Immediate Cancellation of All Non-Essential Inmate Movement

Good afternoon,

Over the last few days, the Population Management Unit (PMU) has received some questions concerning the below direction to cancel all non-essential inmate movement. In order to address these issues we are providing an update concerning the types of movement considered essential. As this information changes or when more becomes available, PMU will update institutional staff via email.

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 37 of 108

The below list is considered essential in addition to the movement already outlined in the previous email.

- To and from PIP (PIP)
- Parole Transfers (PT)
- Institutional Hearing Programs (IHP) for INS Detainers
- Request from outside law enforcement agencies for holds, warrants, or extraditions (HOL)
- Returns from escapes (ESC)
- COCCI transfers within 2 weeks of their 60 day time limit

All other transfers will need a review to ensure their appropriateness. If questions about individual movements arise, please email them to lnstitutionsDAIPopManagement@cdcr.ca.gov. When submitting these types of movement on your Bus Seat Request (BSR), please use the identifier listed in parenthesis (ex; (PIP)) above in the comments section.

If you have questions concerning this direction, please contact InstitutionsDAIPopManagement@cdcr.ca.gov.

David Ferguson

Cell:

Captain
Population Management Unit
Office:

From: Ferguson, David@CDCR

Sent: Thursday, March 19, 2020 3:11 PM

To: CDCR Institutions DAI CSU C and PRs < <a href="mailto:linstitutions-notations-no

CDCR DAI Northern Transportation Hub < NoTransportationHub@cdcr.ca.gov>; CDCR DAI-TUExtraditions < DAI-TUExtraditions

TUExtraditions@cdcr.ca.gov>; Moss, Joseph@CDCR <Joseph.Moss@cdcr.ca.gov>; Seibel, Kimberly@CDCR

<Kimberly.Seibel@cdcr.ca.gov>; Barretto, Jennifer@CDCR <Jennifer.Barretto@cdcr.ca.gov>; Herrera, John@CDCR

<John.Herrera@cdcr.ca.gov>; Gibson, Charles@CDCR <Charles.Gibson@cdcr.ca.gov>; Gipson, Connie@CDCR

<Connie.Gipson@cdcr.ca.gov>; Fouch, Adam@CDCR <Adam.Fouch@cdcr.ca.gov>; CDCR DOC COVID-19

<DOCCOVID19@cdcr.ca.gov>

Subject: Immediate Cancellation of All Non-Essential Inmate Movement

Sent on Behalf of Assistant Deputy Director (A) J. W. Moss

C&PRs and Assistant C&PRs,

Please note: ALL non-essential inmate transfers have been <u>cancelled</u>, <u>effective</u> <u>immediately</u>. Listed below are the types of movement considered essential:

- All RC Transfers
- Restrictive Housing Movement
 - From GP Housing to ASU/ASU EOP HUB/STRH/LTRH/SHU/PSU

Case 2:00 as to 108 as the control of the control o

- MHCB Movement
 - Admits/Discharges MHCB
- MH LOC Transfers
 - GP Housing to EOP Housing
 - Desert Institutions Mental Health (CCCMS/EOP) from the desert
- All Transfers to Fire Camp Pipelines
- MCRP, CCTRP, and ACP
- HCPOP (due to medical bed placements)
- Out to Courts (please confirm with court prior to move)
- Out to Medical (emergencies)
- DPP/DDP from a non-designated institution to a designated institution movement
- Removal of Modified Community Correctional Facility inmates due to deactivation efforts
- Transfers to MSF Facilities

Bed moves within each institution are still permitted to the degree necessary to ensure safety of staff and inmates, and to assign inmates to the least restrictive housing available based upon their individual case factors. If you have questions concerning this direction, please contact lnstitutionsDAIPopManagement@cdcr.ca.gov.

Thank you,

J. W. Moss
Assistant Deputy Director (A)
Division of Adult Institutions
Office:
Cellphone:

From: Melissa Bentz

Sent: Thursday, April 02, 2020 5:47 PM

To: Lisa Ells; Steve Fama; Coleman Team - RBG Only; Donald Specter; Angie Cooper;

Braxton Medlin; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Joseph Sorah; Kahlil Johnson; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Tim Rougeux; Zelia M.

Tavares

Cc: Nick Weber; Elise Thorn; Tyler Heath; Lucas Hennes; Adriano Hrvatin; Kyle Lewis; Neill,

Jennifer@CDCR; Toche, Diana@CDCR; Bick, Joseph@CDCR; Daye, Eureka@CDCR; Christine Ciccotti; Raddatz, Antonina@DSH-S; Kent, Kristopher@DSH-S; Ponciano, Angela@CDCR; Golding, Michael@CDCR; Flores, Marcie@CDCR; Barney-Knox, Barbara@CDCR; Laura Ceballos; Mehta, Amar@CDCR; Fouch, Adam@CDCR; Stafford,

Carrie@CDCR

Subject: Coleman: DAI Memos re: COVID 19

Attachments: Restricted Housing, Reception Centers, Psychiatric Inpatient Program Phone Calls

4.1.20.pdf; COVID19 Electronic Appliance Program for Restricted Housing Inmate 4.1.20.pdf; Programming Opportunities for inmate participating in Mental Health Services Delivery Systems in Restricted Housing 4.1.20.pdf; Emerg. tx of dorm housing

inmates.pdf

Good afternoon,

Attached are several memos released by DAI yesterday to increase yard and appliances in segregation units and increase phone calls in Reception Centers, PIPs, and segregation units. I have also attached DAI's memo regarding the emergency transfer of inmates housed in dorms, which was provided to the field today.

Respectfully,

Melissa C. Bentz

Attorney, Class Action Team

Office of Legal Affairs

California Department of Corrections and Rehabilitation

Email: @cdcr.ca.gov

Office Phone:

Cell Phone: Fax:

ATTORNEY CLIENT COMMUNICATION AND/OR ATTORNEY WORK PRODUCT – DO NOT FORWARD COMMUNICATION WITHOUT THE EXPRESS PERMISSION OF THE AUTHOR.

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 42 of 108

Memorandum

Date: April 1, 2020

To: Associate Directors, Division of Adult Institutions

Wardens

Chief Executive Officers Chiefs of Mental Health Chief Psychiatrists

Senior Psychiatrists, Supervisors

Subject:

RESTRICTED HOUSING, RECEPTION CENTERS, PSYCHIATRIC INPATIENT PROGRAM PHONE CALLS

This memorandum is in response to the Coronavirus (COVID-19) and current allowable phone call privileges for inmates housed in restricted housing, Reception Centers (RCs), and Psychiatric In-Patient Programs (PIPs). The Division of Adult Institutions (DAI) recognizes the need for inmates to be able to maintain communication with family and friends and is taking proactive measures in an effort to assist inmates with increased communication.

This memorandum is to provide direction in regards to providing inmates housed in restricted housing, RCs, and PIPs the ability to make phone calls above their current privilege group. Wardens are directed to implement these additional phone call privileges. Institutions will utilize the current inmate phone equipment that already exists. Precautions are to be taken for both staff and inmate safety to include procedures to limit risk of exposure and transmittal of illness from inmate to inmate as phone calls are provided.

General strategies for providing all restricted housing, RC and PIP inmates' phone calls will need to be tailored by each respective institution based on physical plant design along with taking the following recommendations into consideration:

- All Non-Disciplinary Segregation (NDS) inmates will be allowed to make a phone call once a week (currently NDS A inmates are permitted one phone call a week, and NDS B inmates are permitted one phone call a month)
- All other inmates in restricted housing units will be allowed to make a phone call once every two weeks (currently no phone calls are permitted)
- C status inmate will remain on phone restrictions until C status has been completed or removed
- RC inmates will be provided one phone call a week (currently one phone call within first seven days of arrival and one phone call per month afterwards)
- PIP inmates will be allowed to make one phone call a week unless restricted by the Interdisciplinary Treatment Team with clinical justification documented in the health record

Associate Directors, Division of Adult Institutions
Wardens, Chief Executive Officers, Executive Directors
Chiefs of Mental health
Page 2

As a result of COVID-19, the Office of Correctional Education, the Division of Rehabilitative Programs (DRP) classes, and Visiting have been temporarily closed. Correctional staff assigned to the Office of Correctional Education, DRP, or visiting positions as an example may be redirected to help facilitate the phone calls in the RCs, restricted housing units, and PIPs.

This policy memorandum will remain in effect until this COVID-19 crisis is no longer in effect or rescinded.

This situation remains fluid and ever changing, thank you for your patience and cooperation. If you have any questions, please contact Justin Penney, Special Assistant to Deputy Director, Facility Operations, DAI, at property or account of October 2000 October 2000

CONNIE GIPSON

Director

Division of Adult Institutions

EUREKA C. DAYE, Ph.D., MPH/NA,

Deputy Director (A)

Statewide Mental Health Program

cc: Kimberly Seibel
Patrice Davis
Justin Penney
Angela Ponciano
Michael Golding
Travis Williams

Laura Ceballos Mental Health Regional Administrators

Regional Health Care Executives

State of California

Department of Corrections and Rehabilitation

Memorandum

Date: April 1, 2020

To: Associate Directors, Division of Adult Institutions

Wardens

Chief Executive Officer Chiefs of Mental Health Chiefs of Psychiatry

Subject: COVID- 19 ELECTRONIC APPLIANCE PROGRAM FOR RESTRICTED HOUSING INMATES

The purpose of this memorandum is to announce the implementation of the Electronic Appliance Loaner Program in all restricted housing areas. Restricted housing shall encompass those inmates confined to quarters who are not permitted normal release, therefore require a greater degree of supervision than normal. This program has been developed in order to enhance the Department's in-cell activities in response to the COVID-19 pandemic. This program implementation shall remain in effect during the duration of the pandemic. Upon resolution, the memorandum dated January 22, 2014, titled, *Multi-Powered Radio Loaner Program in Administrative Segregation Units*, and memorandum dated August 4, 2017, titled *Electronic Tablet Loaner Program in Administrative Segregation and Short-term Restricted Housing*, shall reconvene.

The electronic appliance loaner program shall be implemented within all restricted housing units. Upon placement into restricted housing, all offenders shall be offered an electronic appliance as described below. Staff shall also ensure all appliances have been disinfected prior to any issuance or redistribution from one inmate to another. The process will be as follows:

- Initial Intake
 - During the initial 72-hour intake period, a loaner crank radio shall be issued if available.
- After Intake, the following may be provided:
 - o Television
 - If the assigned cell has power capabilities and a television service provider, a television may be issued.
 - If the offender has a television in their personal property, it shall be retrieved and provided to the inmate.
 - If the inmate does not have an electronic appliance in their personal property, a loaner television shall be issued first.
 - In the event the cell does not have power capabilities, or there
 are not sufficient loaner televisions, staff shall issue the inmate a
 crank radio as outlined below.

Associate Directors, Division of Adul Postitutions 6587-1 Filed 04/08/20 Page 46 of 108 Wardens
Chief Executive Officers
Chiefs of Mental Health
Electronic Appliance Program for Restricted Housing Inmates
Page 2

o Radios

- If the assigned cell has power capabilities and the offender has a corded radio in their personal property, it shall be retrieved and provided to the inmate.
- If the assigned cell does not have power capabilities, a loaner crank radio shall be issued.
- Should radios not be available, a wait list by date of placement shall be established and issued by arrival date order.

Expectations

- Inmates will be allowed to keep the appliance until they are released from restricted housing, or issued an entertainment appliance from their personal property.
- All property restrictions relative to entertainment appliances within restricted housing shall be suspended during this program.
- Each institution shall ensure each loaner electronic appliance is issued a state property tag for accountability.
- The restricted housing supervisor shall be responsible to ensure the assigned property officer and inmate complete a CDCR 128-B, Electronic Appliance Loaner Program Agreement form upon issuance.
- The assigned property officer will track issuance of the appliance on a distribution log, and will ensure the appliance is in proper working order. Upon release from restricted housing, the inmate shall relinquish the loaner electronic appliance.
- o If the electronic appliance has been altered or destroyed, the restricted housing supervisor shall determine if it was intentional or unintentional. In the event it has been determined to be intentional, staff shall utilize progressive discipline per California Code of Regulations Section 3312. In addition, the inmate will be charged the full replacement cost.
- Those institutions authorized to use the Electronic Tablet Loaner Program in their restricted housing units shall continue to offer tablets as a viable electronic appliance.

Wardens are directed to implement these procedures immediately. Provide proof of practice to your respective Mission Associate Director within 1 week of the date of this memoradum. In addition to this directive, Wardens are encouraged to collaborate with Mental Health managers and provide innovative methods to assist in combating boredom and encouraging mental stimulation within their restricted housing settings.

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Wardens

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Electronic Appliance Program for Restricted Housing Inmates

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If you have any questions, contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, at a contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Compliance Team, and the contact Lourdes White, Captain, Mental Health Complex White, Captain, Mental Health

CONNIE GIPSON

Director

Division of Adult Institutions

Lourdes White

Original Signed by: JOSEPH BICK, M.D. Director Health Care Services

Attachments

cc: Kimberly Seibel
Jennifer Barretto
Eureka C. Daye, Ph.D., MPH, MA, CCHP
Mental Health Regional Administrators
Regional Healthcare Executives
Michael Golding
Angela Ponciano
Adam Fouch
Joe Moss
Travis Williams
Dawn Lorey

State of California

Department of Corrections and Rehabilitation

Memorandum

Date: April 1, 2020

To: Associate Directors, Division of Adult Institutions

Wardens

Chief Executive Officers Chiefs of Mental Health Chief Psychiatrists

Senior Psychiatrists, Supervisors

Subject: COVID-19 PROGRAMMING OPPORTUNITIES FOR INMATES PARTICIPATING IN THE MENTAL HEALTH SERVICES DELIVERY SYSTEM IN RESTRICTED HOUSING

The purpose of this memorandum is to announce the implementation of third watch programming opportunities within restricted housing in response to the current Coronavirus (COVID-19) disease. This program implementation shall remain intact during the duration of the pandemic. At the resolution, all programming will reconvene to their original format.

In the event mental health groups and clinical one-to-ones are unable to occur in the restricted housing units, wardens will ensure evening (PM) yard is provided to inmates in the mental health services delivery system. For those units designated to quarantine status, all movement will be in accordance with current departmental expectation. This direction has been developed in order to maximize out-of-cell time and enhance the Department's suicide prevention efforts during this pandemic. The attached listing identifies those institutions and their respective restricted housing units already staffed to provide PM yard. Due to the direction to increase evening programming opportunity within every mental health restricted housing program, the wardens without staffing for PM yard will have the authority to approve overtime on an as needed basis. All overtime detail code for this program will be coded as "MHYD" to accurately capture expenditures and a weekly report of incurred overtime will be reported to the respective Associate Director.

Wardens are encouraged to collaborate with Mental Health managers and provide innovative methods to assist in combating boredom and encouraging mental stimulation within their restricted housing settings. Wardens shall also ensure precautions are taken for both staff and inmate safety to include procedures to limit risk of exposure and transmittal of illness (social distancing) from inmate to inmate.

If you have any questions, contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact Lourdes White, Captain, Mental Health Compliance Team, via email at contact-ca.gov or via phone at contact-ca.gov or via phone

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COVID-19 Programming Opportunities for Inmates Participating in the Mental Health Services

Delivery System in Restricted Housing

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CONNIE GIPSON

Director

Division of Adult Institutions

EUREKA C. DAYE, Ph.D., MPH, MA, CCHI

Deputy Director (A)

Statewide Mental Health Program

Attachment

Cc: Kimberly Seibel

Jennifer Barretto

Joseph Bick, MD

Angela Poniciano

Adam Fouch

Joe Moss

Michael Golding

Travis Williams

Laura Ceballos

Lourdes White

Mental Health Regional Administrators

Regional Healthcare Executives

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Mental Health Restricted Housing Third Watch Yard

INST	Housing Designation
COR	ASU-STRH
HDSP	ASU-STRH
KVSP	ASU-STRH
PBSP	ASU-STRH
LAC	ASU-STRH
CMC	EOP ASU
PVSP	STRH
SATF	STRH
SVSP	STRH
SAC	STRH

Memorandum

Date:

April 2, 2020

To:

Associate Directors, Division of Adult Institutions

Wardens

Subject:

COVID-19 EMERGENCY TRANSFERS FROM LEVEL II DORMITORIES

This memorandum outlines one of several processes taking place to address the statewide effort to mitigate higher occupancy in Level II dormitories. These emergency transfers of cohort populations are aimed at reducing COVID-19 impacts by utilizing existing vacant buildings, reducing site-specific population density, and improve overall social distancing.

Attached is an accelerated transfer schedule of movement from higher occupied dormitories to locations with vacant buildings that will be re-activated.

On April 1, 2020, coordinated conference calls were completed with local custodial and medical executive staff. Each institution was provided a data screened list and transfer schedule.

The following screening criteria was utilized for this emergency transfer in efforts to mitigate programming impacts to the extent possible:

- Inmate with case factors consistent with the receiving institutions setting.
- Inmates paroling after December 2020.
- Inmates <u>not</u> with impacting Armstrong or Clark Class Member designations
- Inmates <u>not</u> participants in the Mental Health Delivery System at Enhanced Outpatient or higher level of care.
- Inmates currently not assigned to critical work assignments or educational programs.
- Inmates Medical Classification Chrono does <u>not</u> reflect COCCI-l or High Risk Medical.
- Inmates not currently under a 14 quarantine period.
- Inmate without scheduled BPH hearings.

The following transfer process guidelines were discussed:

- All transfers will be endorsed using the SOMS Non-Committee Endorsement process facilitated by the Classification Service Unit and Population Management Unit.
- Inmates will be moved by identified cohort groups currently already living together in dormitories, as feasible as possible.
- Cohort dormitory populations will transfer together on same bus and be housed together upon arrival.
- All inmate transfers will be provided a mask during transport.
- Cohorts received at their new location will be quarantined for 14 days, with all building quarantined inmates able to program together.

Associate Directors, Division of Adult Institutions Wardens Page 2

- · All inmates will have their property sent with them the same day of transfer.
- All property should be issued the day of arrival, but no later than next day if late arrival.
- Transferred inmates will be allowed to take a set of State issued clothing.
- · Bus transports will not exceeded 19, per bus for social distancing.
- · No inmates will be sent from current quarantine dorms.
- All normal transfer screening will take place.
- Custodial staffing adjustment are being made by the Program Support Unit.
- Additional support resources needed will be assisted through the COVID-19 Departmental Operations Center.
- Messaging will be provided by staff at the sending and receiving institution prior to departing and upon arriving inmates.

The support of the Wardens and Health Care executives in ensuring their institution's assistance is greatly appreciated and necessary to guarantee a smooth transfer process.

Further coordination will occur with local bargaining units via the institutions and through the Office of Labor Relations, Office of Legal Affairs, and Plaintiffs overseeing class members.

If you have any questions, please contact Rosa Estrada, Correctional Counselor III, PMU, at or Angella DeBusk, Correctional Counselor III, PMU, at

DENNIS HALVERSON

Chief of Population Management Unit

Division of Adult Institutions

Attachment

Connie Gipson Kimberly Seibel Joseph Moss Adam Fouch

DATE	Bus	FROM	ТО	Transfer	NOTES
4/3/2020		CVSP	ISP	50	*CVSP to ISP to be transported locally - Total 300 inmates
4/4/2020		CVSP	ISP	50	mindes
4/5/2020		CVSP	ISP	50	
4/9/2020		CVSP	ISP	50	
4/10/2020		CVSP	ISP	50	
4/11/2020	-	CVSP	ISP	50	
4/7/2020	1	CVSP	CSPC	19	*CVSP to CSPC to be transported VIA Statewide
4/9/2020	1	CVSP	CSPC	19	Transportation Unit Total 57 Inmates
4/14/2020	1	CVSP	CSPC	19	
DATE	Bus	FROM	то	Transfer	NOTES
4/6/2020	1	CRC	CSPC	19	*CRC to CSPC to be transported VIA Statewide
4/6/2020		CRC	CSPC	19	Transportation Unit Total 361 Inmates
4/6/2020	2	CRC	CSPC	19	
	3		CSPC	19	
4/6/2020		CRC	77.77	19	
4/8/2020 4/8/2020	1	CRC	CSPC	19	
	2		CSPC	19	
4/8/2020	3	CRC	CSPC	19	
4/8/2020	4	CRC	CSPC	19	
4/10/2020	2	CRC	CSPC	19	
4/10/2020	3	CRC	CSPC	19	
4/10/2020	4	CRC	CSPC	19	
4/13/2020	1	CRC	CSPC	19	
4/13/2020	2	CRC	CSPC	19	
4/13/2020	3	CRC	CSPC	19	
4/13/2020	4	CRC	CSPC	19	
4/15/2020	1	CRC	CSPC	19	
4/15/2020	2	CRC	CSPC	19	
4/15/2020	3	CRC	CSPC	19	
DATE	Bus	FROM	то	Transfer	NOTES
4/3/2020		SATF	CSPC	50	SATE to CSPC to be transported locally - Total 10 Inmates
4/4/2020		SATF	CSPC	50	The state of the s

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From: Kyle Lewis

To: Matt Lopes; Kerry F. Walsh; Michael W. Bien; Lisa Ells; Donald Specter; Steve Fama

Cc: Adriano Hrvatin; Tyler Heath; Elise Thorn; Lucas Hennes; Nick Weber; Melissa Bentz @cdcr.ca.gov;

<u>@CDCR;</u> <u>@dsh.ca.gov;</u> <u>@DSH-S; Nina Raddatz</u>

Subject: Coleman -- Information concerning Coleman class members

Date: Tuesday, April 07, 2020 5:00:25 PM

Attachments: Attachment A- Mental Health Patients by Institution and Level of Care- 4....pdf

Attachment B- Mental Health Patients by Institution and Bed Type- 4.7.20....pdf
Attachment D- Pictures of Social Distancing Markings at CDCR Institutions.pdf
Attachment E- COVID-19 MANDATORY 14-DAY MODIFIED PROGRAM.PDF

DSH Coleman Census and COVID risk factors 4-6-20 v1.xlsx

Hello, All.

In the attached correspondence, Defendants provide information concerning *Coleman* class members to the Special Master and Plaintiffs as directed by the Court's April 6, 2020 order, subject to existing protective orders. (ECF No 6580 at 3.) Defendants are continuing to gather responsive information under the Court's tight time constraints, and will provide further information tomorrow.

Defendants propose that the parties meet and confer regarding this information tomorrow, April 8, 2020, at 3:00 p.m. PDT. Please let me know if you are available to meet at that time.

Regards,

Kyle

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Mental Health Patients by Institution and Mental Health Level of Care as of 4/7/2020

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Institution	CCCMS	EOP	MHCB	Inpatient	
ASH	1	8	0	231	
ASP	1087	0	0	0	
CAL	3	0	0	0	
CCC	1	0	0	0	
CCI	1436	4	0	0	
CCWF	1272	132	6	0	
CEN	2	0	0	0	
CHCF	640	602	29	519	
CIM	1124	33	8	13	
CIW	683	76	3	33	
CMC	722	587	27	17	
CMF	500	521	21	421	
COAL	0	1	0	48	
COR	998	277	10	10	
CRC	1450	0	0	0	
CTF	1420	3	0	0	
CVSP	4	0	0	0	
DVI	436	5	0	0	
FSP	570	0	0	0	
HDSP	1003	4	4	0	
ISP	1	0	0	0	
KVSP	971	110	4	8	
LAC	821	576	12	14	
MCSP	1421	714	5	6	
NKSP	830	48	3	2	
PAT	1	3	0	12	
PBSP	283	3	3	1	
PVSP	483	5	0	0	
RJD	1302	855	7	9	
SAC	515	769	28	14	
SATF	1870	580	6	9	
SCC	556	0	0	0	
SOL	694	1	2	2	
SQ	1004	291	0	29	
SVSP	865	321	0	233	
VSP	1090	331	0	0	
WSP	1185	62	1	3	

Mental Health Patients by Institution and Bed Type as of 4/7/2020

Institution	Mental Health LOC	BedType	
ASH	CCCMS	NULL	1
ASH	EOP	NULL	8
ASH	Inpatient	NULL	231
ASP	CCCMS	NULL	8
ASP	CCCMS	270 Cell	39
ASP	CCCMS	270 Dorm	788
ASP	CCCMS	Cell	5
ASP	CCCMS	Dorm	247
CAL	CCCMS	270 Cell	3
CCC	CCCMS	270 Cell	1
CCI	CCCMS	NULL	8
CCI	CCCMS	180 Cell	609
CCI	CCCMS	270 Cell	212
CCI	CCCMS	Cell	2
CCI	CCCMS	Dorm	605
CCI	EOP	180 Cell	2
CCI	EOP	Dorm	2
CCWF	CCCMS	NULL	19
CCWF	CCCMS	270 Cell	147
CCWF	CCCMS	Cell	17
CCWF	CCCMS	Dorm	1089
CCWF	EOP	NULL	3
CCWF	EOP	270 Cell	10
CCWF	EOP	Cell	3
CCWF	EOP	Dorm	116
CCWF	MHCB	Cell	5
CCWF	МНСВ	Dorm	1
CEN	CCCMS	270 Cell	2
CHCF	CCCMS	NULL	12
CHCF	CCCMS	Cell	320
CHCF	CCCMS	Dorm	308
CHCF	EOP	NULL	7
CHCF	EOP	Cell	570
CHCF	EOP	Dorm	25
CHCF	Inpatient	NULL	4
CHCF	Inpatient	Cell	515
CHCF	MHCB	Cell	29
CIM	CCCMS	NULL	19
CIM	CCCMS	Cell	352
CIM	CCCMS	Dorm	753
CIM	EOP	NULL	6
CIM	EOP	Cell	27
CIM	Inpatient	NULL	2
CIM	Inpatient	Cell	11
CIM	MHCB	NULL	1
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CMFMHCBDorm1COALEOPNULL1COALInpatientNULL48CORCCCMSNULL10CORCCCMS270 Cell588CORCCCMSCell400COREOPNULL2COREOP270 Cell252COREOPCell23CORInpatient270 Cell3CORInpatientCell7CORMHCBCell10CRCCCCMSNULL7CRCCCCMSDorm1440	CMF	Inpatient	Dorm	73
COALEOPNULL1COALInpatientNULL48CORCCCMSNULL10CORCCCMS270 Cell588CORCCCMSCell400COREOPNULL2COREOP270 Cell252COREOPCell23CORInpatient270 Cell3CORInpatientCell7CORMHCBCell10CRCCCCMSNULL7CRCCCCMSDorm1440	CMF	MHCB	Cell	20
COAL Inpatient NULL 48 COR CCCMS NULL 10 COR CCCMS 270 Cell 588 COR CCCMS Cell 400 COR EOP NULL 2 COR EOP 270 Cell 252 COR EOP Cell 23 COR Inpatient 270 Cell 3 COR Inpatient Cell 7 COR MHCB Cell 10 CRC CCCMS NULL 7 CRC CCCMS Dorm 1440	CMF	MHCB	Dorm	1
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CORInpatient270 Cell3CORInpatientCell7CORMHCBCell10CRCCCCMSNULL7CRCCCCMSDorm1440				
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CRC CCCMS Dorm 1440				
CRC CCCMS Room 3				
CTF CCCMS NULL 5				
CTE CCCMS Call 049	CTF	CCCMS	Cell	948
	CTF	CCCMS	Dorm	467
CTI CCCIVIS CEII 340	CTF	CCCMS		467

CTF	EOP	NULL	1
CTF	EOP	Cell	1
CTF	EOP	Dorm	1
CVSP	CCCMS	270 Cell	1
CVSP	CCCMS	270 Dorm	3
DVI	CCCMS	NULL	20
DVI	CCCMS	Cell	416
DVI	EOP	NULL	2
DVI	EOP	Cell	3
FSP	CCCMS	NULL	5
FSP	CCCMS	Cell	438
FSP	CCCMS	Dorm	127
HDSP	CCCMS	NULL	2
HDSP	CCCMS	180 Cell	175
HDSP	CCCMS	270 Cell	775
HDSP	CCCMS	Cell	51
HDSP	EOP	270 Cell	1
HDSP	EOP	Cell	3
HDSP	MHCB	Cell	4
ISP	CCCMS	270 Cell	1
KVSP	CCCMS	NULL	10
KVSP	CCCMS	180 Cell	849
KVSP	CCCMS	Cell	112
KVSP	EOP	180 Cell	95
KVSP	EOP	Cell	15
KVSP	Inpatient	180 Cell	2
KVSP	Inpatient	Cell	6
KVSP	MHCB	Cell	4
LAC	CCCMS	NULL	10
LAC	CCCMS	270 Cell	717
LAC	CCCMS	Cell	94
LAC	EOP	NULL	7
LAC	EOP	270 Cell	569
LAC	Inpatient	NULL	1
LAC	Inpatient	270 Cell	10
LAC	Inpatient	Cell	3
LAC	MHCB	NULL	2
LAC	MHCB	270 Cell	1
LAC	MHCB	Cell	9
MCSP	CCCMS	NULL	11
MCSP	CCCMS	270 Cell	935
MCSP	CCCMS	Dorm	475
MCSP	EOP	NULL	3
MCSP	EOP	270 Cell	475
MCSP	EOP	Cell	1
MCSP	EOP	Dorm	235
MCSP	Inpatient	270 Cell	2

MCSP	Inpatient	Cell	4
MCSP	MHCB	Cell	5
NKSP	CCCMS	NULL	27
NKSP	CCCMS	270 Cell	151
NKSP	CCCMS	Cell	476
NKSP	CCCMS	Dorm	176
NKSP	EOP	270 Cell	1
NKSP	EOP	Cell	47
NKSP	Inpatient	Cell	2
NKSP	MHCB	Cell	3
PAT	CCCMS	NULL	1
PAT	EOP	NULL	3
PAT	Inpatient	NULL	12
PBSP	CCCMS	NULL	2
PBSP	CCCMS	180 Cell	132
PBSP	CCCMS	Cell	149
PBSP	EOP	180 Cell	1
PBSP	EOP	Cell	2
PBSP	Inpatient	Cell	1
PBSP	MHCB	Cell	3
PVSP	CCCMS	NULL	2
PVSP	CCCMS	270 Cell	462
PVSP	CCCMS	Cell	19
PVSP	EOP	270 Cell	5
RJD	CCCMS	NULL	11
RJD	CCCMS	270 Cell	1078
RJD	CCCMS	Cell	4
RJD	CCCMS	Dorm	209
RJD	EOP	NULL	5
RJD	EOP	270 Cell	599
RJD	EOP	Cell	6
RJD	EOP	Dorm	245
RJD	Inpatient	270 Cell	4
RJD	Inpatient	Cell	5
RJD	MHCB	270 Cell	1
RJD	MHCB	Cell	6
SAC	CCCMS	NULL	4
SAC	CCCMS	180 Cell	423
SAC	CCCMS	Cell	88
SAC	EOP	NULL	5
SAC	EOP	180 Cell	764
SAC	Inpatient	180 Cell	4
SAC	Inpatient	Cell	10
SAC	MHCB	180 Cell	18
SAC	MHCB	Cell	10
SATF	CCCMS	NULL	18
SATF	CCCMS	180 Cell	115

SATF	CCCMS	270 Cell	880
SATF	CCCMS	Cell	85
SATF	CCCMS	Dorm	772
SATF	EOP	NULL	3
SATF	EOP	270 Cell	7
SATF	EOP	Cell	16
SATF	EOP	Dorm	554
SATF	Inpatient	Cell	6
SATF	Inpatient	Dorm	3
SATF	MHCB	Cell	5
SATF	MHCB	Dorm	1
SCC	CCCMS	NULL	3
SCC	CCCMS	270 Cell	310
SCC	CCCMS	Dorm	243
SOL	CCCMS	NULL	9
SOL	CCCMS	270 Cell	287
SOL	CCCMS	270 Dorm	233
SOL	CCCMS	Cell	1
SOL	CCCMS	Dorm	164
SOL	EOP	Cell	1
SOL	Inpatient	Cell	2
SOL	MHCB	Cell	2
SQ	CCCMS	NULL	29
SQ	CCCMS	Cell	806
SQ	CCCMS	Dorm	169
SQ	EOP	NULL	3
SQ	EOP	Cell	106
SQ	EOP	Dorm	182
SQ	Inpatient	Cell	29
SVSP	CCCMS	NULL	10
SVSP	CCCMS	180 Cell	305
SVSP	CCCMS	270 Cell	466
SVSP	CCCMS	Cell	84
SVSP	EOP	NULL	2
SVSP	EOP	180 Cell	112
SVSP	EOP	270 Cell	185
SVSP	EOP	Cell	21
SVSP	EOP	Dorm	1
SVSP	Inpatient	NULL	2
SVSP	Inpatient	180 Cell	114
SVSP	Inpatient	270 Cell	1
SVSP	Inpatient	Cell	98
SVSP	Inpatient	Dorm	18
VSP	CCCMS	NULL 270 Coll	4
VSP	CCCMS	270 Cell	56 12
VSP	CCCMS	Cell	12
VSP	CCCMS	Dorm	1018

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VSP	EOP	NULL	4
VSP	EOP	270 Cell	12
VSP	EOP	Dorm	315
WSP	CCCMS	NULL	27
WSP	CCCMS	270 Cell	124
WSP	CCCMS	Cell	492
WSP	CCCMS	Dorm	542
WSP	EOP	NULL	2
WSP	EOP	Cell	60
WSP	Inpatient	NULL	1
WSP	Inpatient	Cell	2
WSP	MHCB	Cell	1

Memorandum

Date: April 7, 2020

To: Associate Director, Division of Adult Institutions

Wardens

Subject: COVID-19 MANDATORY 14-DAY MODIFIED PROGRAM

The California Department of Corrections and Rehabilitation's priority is to protect the health and well-being of our staff and the offender population as well as providing a safe environment. The purpose of the memorandum is to reduce staff and inmate exposure to the coronavirus (COVID-19) by increasing more restrictive measures.

Effective Wednesday, April 8, 2020, all institutions will implement a mandatory 14-day modified program. Each institution will be responsible for either creating or amending their current Program Status Report taking all of the following information into consideration:

- The entire institution will be affected, except for Restricted Housing Units, Correctional Treatment Centers, and Psychiatric Inpatient Programs, etc.
- Movement will be via escort maintain increased social distancing unless security would dictate otherwise (i.e. Administrative Segregation Unit placement).
 Movement will be in such a fashion as to not mix inmates from one housing unit with another housing unit.
- Feeding Cell feeding or one housing unit at a time, maintaining social distancing and disinfecting tables between each use
- Ducats priority only includes mental health groups and individual clinical contacts
- Visiting none
- Family visiting none
- Legal visits urgent/emergency, via telephone or video conference where available.
 Board of Parole Hearings will continue with attorney contacts as required
- Workers critical and porters
- Showers maintain distancing and disinfect between each use
- Health care services conduct rounds in housing units
- Medication(s) distribution cell front or at podium
- Law Library PLU or paging option while maintaining social distancing in library
- Dayroom numbers need to be reduced to allow for increased social distancing which may result in no dayroom activities if unable to maintain social distancing numbers to accommodate showers and phones
- Recreation One housing unit/dorm at a time
- Canteen is permitted if unable to accommodate during scheduled yard time facilitate delivery method

- · Packages are permitted
- Phone calls are permitted disinfect between each use
- Religious programs shall be cell front or deliver materials to housing unit/dorm/cells
- · Educational materials to be provided either cell front or to dorm
- Request for Health Care Services Forms, CDCR-Form 7362, will be distributed and picked up in the housing units by staff

During this time, I would like to see our Community Resource Managers and Education Department facilitate the delivery of increased games, program materials, reading books, or other items to the housing units. Housing unit/dorm officers and supervisors are expected to conduct additional rounds and spot checks of inmates in an effort to reduce self-harm and/or suicide attempts.

All institutions will be required to provide a copy of their Program Status Report, Part-A, to their respective Associate Director each day for this 14-day period. Institutions are expected to brief staff and inmate advisory committees on this directive as this modified program is currently only slated to be in effect for 14-days, through April 21, 2020.

During the past couple of weeks there have been some best practices coming forward that I would like to see implemented or considered such as placing markers on the ground in six foot intervals as a reminder for staff and inmates to maintain social distancing, and the placement of acrylic glass (e.g. Plexiglas) at staff entrances as a barrier between the screener and the person entering the prison.

Thank you for you continued efforts in managing this COVID-19 event. If you have any additional questions, please contact your respective Associate Director.

CONNIE GIPSON

Director

Division of Adult Institutions

cc: Kimberly Seibel Patrice Davis Justin Penney

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State of Ca fornia

State of Ca Bronia DIVISION OF HOSPITAL STRATEGIC PLANNING AND IMPLEMENTATION

1600 Ninth Street, Room 140 Sacramento, CA 95814



Coleman Census by Unit 4/7/2020

					Risk Factors				
Hospital	Unit	Unit Category	Number of Patients	Level of Care	65 and Older	HIV	Asthma	Other Health Conditions as Defined by the CDC	Square Footage
	1	Medical Unit	4	Intermediate	-				Single person rooms of 80 Sq. Ft.
	12	PC Standard Admissions	1	Intermediate	-				Single person rooms of 58 Sq. Ft.
	13	PC Standard Admissions	26	Intermediate	-				Single person rooms of 58 Sq. Ft.
	24	Multi-Commitment Treatment	24	Intermediate	2				4-person dorm rooms ranging from 378 to 392 Sq. Ft.
Atascadero	30	CDCR Permanent Housing	45	Intermediate	1				3-person dorm rooms ranging from 251 to 345 Sq. Ft. 4-person dorm rooms ranging from 324 to 350 Sq. Ft.
71035044515	32	CDCR Permanent Housing	44	Intermediate	2				3-person dorm rooms ranging from 251 to 345 Sq. Ft. 4-person dorm rooms ranging from 324 to 350 Sq. Ft.
	33	CDCR Permanent Housing	46	Intermediate	10				2-person dorm room of 180 Sq. Ft. 4-person dorm rooms ranging from 324 to 350 Sq. Ft.
	34	CDCR Permanent Housing	44	Intermediate	2				2-person dorm room of 180 Sq. Ft. 3-person dorm rooms ranging from 251 to 345 Sq. Ft. 4-person dorm rooms ranging from 324 to 350 Sq. Ft.
		TOTAL	234		17				
Coalinga	121	CDCR Permanent Housing	48	Intermediate	2	-	1	14	Single person rooms of 135 Sq. Ft. 4-person dorm rooms ranging from 340 to 349 Sq. Ft.
		TOTAL	48		2				
Patton	33	Multi-Commitment Treatment/ CDCR Permanent Housing	14	Intermediate	-				2-person dorm room ranging from 183 to 195 Sq. Ft. 3-person dorm room of 227 Sq. Ft. 4-person dorm rooms ranging from 277 to 385 Sq. Ft.
		TOTAL	14		-				
		Total All	296		19				

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From: Kyle Lewis To: Matt Lopes; Kerry F. Walsh; Michael W. Bien; Lisa Ells; Donald Specter; Steve Fama Cc: Adriano Hrvatin; Tyler Heath; Elise Thorn; Lucas Hennes; Nick Weber; Melissa Bentz; @cdcr.ca.gov"; @CDCR": " @DSH-"Nina Raddatz" Subject: RE: Coleman -- Information concerning Coleman class members Date: Tuesday, April 07, 2020 5:16:02 PM Attachments: Letter to OSM-Ps- 4.7.2020.pdf Attachment D- COVID-19 MANDATORY 14-DAY MODIFIED PROGRAM.PDF Attachment E- Coleman Class Members with at least one COVID-19 Risk Fact....pdf All, Due to size limitations associated with email, I was not able to deliver all information and materials in one message. Attached are the correspondence and Attachments D and E. Regards, Kyle Kyle A. Lewis Office of the Attorney General Department of Justice, State of California 455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102 Telephone: Facsimile: E-mail: @doj.ca.gov From: Kyle Lewis **Sent:** Tuesday, April 07, 2020 5:00 PM To: Lopes Matthew @pldolaw.com>; Walsh Kerry F. @pldolaw.com>; Michael W. @rbgg.com>; 'Lisa Ells @rbgg.com)' @prisonlaw.com' @rbgg.com>; @prisonlaw.com>; 'Steve Fama' @prisonlaw.com> @doj.ca.gov>; Tyler Heath **Cc:** Adriano Hrvatin @doj.ca.gov>; Elise @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Weber,

Subject: Coleman -- Information concerning Coleman class members

@dsh.ca.gov>; Nina Raddatz

@cdcr.ca.gov>;

@cdcr.ca.gov>;

Hello, All.

Nicholas@CDCR

In the attached correspondence, Defendants provide information concerning Coleman class members to the Special Master and Plaintiffs as directed by the Court's April 6, 2020 order, subject to existing protective orders. (ECF No 6580 at 3.) Defendants are continuing to gather responsive

@cdcr.ca.gov>; 'Bentz, Melissa@CDCR'

@cdcr.ca.gov; Stafford, Carrie@CDCR

@dsh.ca.gov; Kent, Kristopher@DSH-S

@dsh.ca.gov>

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information under the Court's tight time constraints, and will provide further information tomorrow.

Defendants propose that the parties meet and confer regarding this information tomorrow, April 8, 2020, at 3:00 p.m. PDT. Please let me know if you are available to meet at that time.

Regards, Kyle

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Exhibit 20

OFFICE OF LEGAL AFFAIRS

Jennifer Neill General Counsel P.O. Box 942883 Sacramento, CA 94283-0001



April 7, 2020

Special Master Matthew A. Lopes, Jr. Pannone Lopes Devereaux & O'Gara LLC Northwoods Office Park, Suite 215N 1301 Atwood Avenue Johnston, RI 02919

Coleman Plaintiffs' Counsel Rosen Bien Galvan & Grunfeld LLP 101 Mission Street, Sixth Floor San Francisco, CA 94105

VIA EMAIL ONLY

Dear Special Master Lopes and Coleman Plaintiffs' Counsel:

I write in response to the Court's April 6, 2020 Order, ECF No. 6580, which requires that Defendants provide certain information to the Special Master and Plaintiffs' counsel. Please find responsive information below:

1. The Number of *Coleman* Class Members by Institution and Mental Health Level of Care and a Description of the Housing Space for Each Level of Care at Each Institution

Please see Attachments A and B. Attachment B includes information regarding the bed types at each institution. Below is a description of each bed type:

- Null This is used to define DSH beds. This bed type is also found for patients endorsed to an institution, but who are not currently physically located at that institution. For example, the patient may be out to court or out to medical.
- 180 Cell Celled housing within a 180 design building. Comprised of two wings; each wing is partitioned into three self-contained pods. Each pod has its own dayroom and control room.
- 270 Cell Celled housing within a 270 design building. Comprised of three connected sections with one dayroom and one control room.
- 270 Dorm A 270 design housing unit with open or closed pods, typically housing six eight persons per pod. Comprised of three connected sections and one dayroom and one
 control room.
- Cell Closed cell housing with either a single bed or a double bunk bed.

- Dorm Open style housing with either single beds or multiple bunk beds. One dayroom area.
- Room Only three beds at CRC have this designation. These rooms are used as the Outpatient Housing Unit.
- 2. Information to Allow Calculation of the Physical Distancing Currently Possible for Each Set of Class Members at Each Institution and Level of Care

Defendants are in the process of gathering this information. However, given the time constraints provided in by the Court's order, CDCR is unable to produce responsive information within the allotted time. Defendants will produce this information as soon as it is available.

3. Information Regarding the Physical Distancing Currently Being Achieved

Defendants are committed to keeping staff and inmates safe during this global pandemic and have taken numerous steps to prevent the spread of COVID-19, in line with recommendations from the Center of Disease Control (CDC) and the California Department of Public Health. Defendants have provided extensive information regarding steps that they have proactively taken to limit the spread of COVID-19 within the institutions. *See* ECF Nos. 6553-1, 6553-2, and 6553-3. The referenced filings address the steps taken by Defendants up to March 31, 2020. Since that time, Defendants have continued to assess the situation in the institutions and have implemented directives in an effort to further limit the spread of COVID-19.

One of the first directives from the California Department of Corrections and Rehabilitation (CDCR) to the institutions was to implement social distancing. The CDC defines social distancing as "keeping space between yourself and other people outside of your home." (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html). Thus, CDCR's initial focus has been ensuring appropriate distancing of inmates who do not live in the same cell or housing unit. Institutions implemented this directive by placing markings on the floor in communal areas marking six feet between each space. These markings were placed in the housing units near kiosks and telephones, as well as on the yard for medication pass. Pictures of these markings at various institutions are provided in Attachment C.

In the recent weeks, inmate transfers have been sharply reduced to only allow essential movement in and out of the institutions. This has occurred with coordination between the Division of Adult Institutions, the Statewide Mental Health Program, and California Correctional Health Care Services (CCHCS). Those transfer that are required are conducted in a manner so that social distancing can be achieved for both staff and inmates.

On March 31, 2020, CDCR announced an expedited release plan to improve the institutions' capacity to respond to the threat posed by COVID-19 by accelerating the release of eligible inmates who have 60 days or less to serve on their sentences and are not currently serving time for a violent crime as defined by law, a person required to register under Penal Code 290, or domestic violence. In total, CDCR anticipates releasing 3,496 inmates under this accelerated release plan. Of those who will be released through the accelerated release program, approximately 930 were in the Mental Health Services Delivery System as of April 2, 2020. On April 3, 2020, CDCR began releasing inmates under this plan. As of the end of day on April 6,

2020, a total of 601 inmates have been released from institutions across the system. CDCR anticipates that all releases will be completed by April 13, 2020.

On April 1, 2020, the DAI issued a directive to transfer just over 800 inmates from several Level II dormitories to locations with vacant buildings within the system. These transfer are occurring according to the schedule provided in the memo and are anticipated to be complete by April 15, 2020. In addition, DAI is in the process of developing plans to transfer inmates from other dormitories to vacant cells around the state. Beginning on April 8, 2020, CDCR will transfer 43 inmates from Folsom Women's Facility to the Female Community ReEntry Facility. In addition, CDCR is developing a plan to transfer 226 inmates from California State Prison, Solano to Deuel Vocational Institution. The start for those transfers is still to be determined. CDCR is also developing a plan to transfer some inmates from the dorms at San Quentin State Prison to vacant cells at California State Prison, Corcoran, but the number of inmates that will transfer and the start date for transfers is still to be determined.

On April 7, 2020, DAI issued a memorandum implementing a mandatory 14 day statewide modified program. Attachment D. The memorandum provides direction regarding how movement will occur within the institution to maximize social distancing, preventing inmates in different housing units from mixing, reducing yard and dayroom capacity to facilitate further social distancing, and detailing what phone calls, canteen, education, and other programs will be provided to inmates and how. Implementation of this temporary modified program will reduce staff and inmate exposure to COVID-19.

4. A List Identifying By Name and Housing Location All *Coleman* Class Members with At Least One COVID-19 Risk Factor

Please see Attachment E.

5. Defendants' Plan to Achieve a Defined Level of Social Distancing for Any *Coleman* Class Member Currently Residing in Housing Space that Does Not Allow Six Feet of Physical Distancing Between Inmates

As discussed above, Defendants have taken numerous steps to promote social distancing within the institutions. The focus has been to prevent inmates from coming in close physical proximity to people outside of their housing unit by staggering meal schedules, limiting the number of inmates in common areas at the same time, and other similar measures. In addition to those steps, Defendants continue to look at other ways to prevent the spread of COVID-19. For example, CDCR is currently assessing whether there is additional space within the institutions that may be used to house inmates, such as gymnasiums. However, those spaces must first be approved by the State Fire Marshal to be used as housing. Further, additional cots must be purchased and the staffing needs for each location must be assessed so that DAI can ensure that safety and security can be maintained and the inmates' essential needs, such as feeding, escorts, medication, and any mental health or medical needs, can be met. At this time, nineteen potential sites have been

¹ CDCR anticipates transferring 300 inmates from Chuckawalla Valley State Prison (CVSP) to Ironwood State Prison (ISP), 57 inmate from CVSP to California State Prison, Corcoran (COR), 361 inmates from California Rehabilitation Center (CRC), and 100 inmates from the Substance Abuse Treatment Facility and State Prison, Corcoran to COR.

identified and about 600 bunks are being procured. CDCR is working as expeditiously as possible to work through all necessary parts of this process to determine if, when, and how these spaces can be used.

6. Conclusion

As this global pandemic continues to evolve, CDCR will continue to respond as necessary to keep staff and inmates safe during this time. CDCR will provide the Special Master and Plaintiffs' counsel with information regarding other directives that are implemented to promote social distancing and prevent the spread of COVID-19 throughout the system. CDCR will also work with the Special Master and Plaintiffs through the COVID Task Force calls to determine how best to ensure Mental Health treatment continues throughout the system.

Respectfully,

/s/ Melissa C. Bentz.

Melissa C. Bentz Attorney Office of Legal Affairs California Department of Corrections and Rehabilitation

Exhibit 21

From: Weber, Nicholas@CDCR < @cdcr.ca.gov>

Sent: Friday, March 27, 2020 10:02 AM

To: Lisa Ells; Steve Fama; Coleman Team - RBG Only; Donald Specter; Elise Thorn; Tyler

Heath; Lucas Hennes; Adriano Hrvatin; Kyle Lewis; Melissa Bentz; Hessick,

Jerome@CDCR; Neill, Jennifer@CDCR; Toche, Diana@CDCR; Bick, Joseph@CDCR; Daye, Eureka@CDCR; Christine Ciccotti; Raddatz, Antonina@DSH-S; Kent, Kristopher@DSH-S; Angie Cooper; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Steve Raffa; Tim Rougeux; Ponciano, Angela@CDCR RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care [IWOV-

DMS.FID6429]

Hi Lisa,

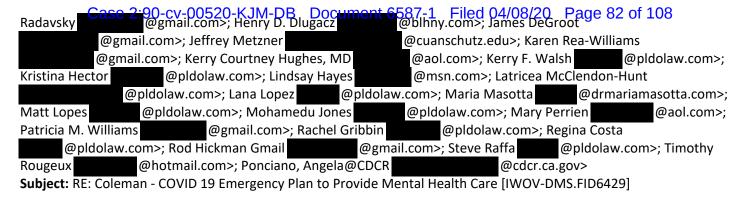
Subject:

This is correct, SAC has temporarily stopped external transfers to MHCB, ICF, and Acute levels of care due to COVID concerns at SAC. I apologize, I was under the impression that the Special Master and Plaintiffs had been informed already. We continue to monitor inpatient and MHCB bed need and will work diligently to ensure prompt access to those levels of care.

Nick Weber **Attorney** Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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From: Lisa Ells @rbgg.com> **Sent:** Friday, March 27, 2020 9:54 AM To: Weber, Nicholas@CDCR @cdcr.ca.gov>; Steve Fama @prisonlaw.com>; Coleman Team -**RBG Only** @rbgg.com>; Donald Specter @prisonlaw.com>; Elise Thorn @doj.ca.gov>; Tyler Heath @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Adriano @doj.ca.gov>; Kyle Lewis @doj.ca.gov>; Bentz, Melissa@CDCR Hrvatin @cdcr.ca.gov>; Hessick, Jerome@CDCR @cdcr.ca.gov>; Neill, Jennifer@CDCR @cdcr.ca.gov>; Toche, Diana@CDCR @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S @dsh.ca.gov>; Kent, Kristopher@DSH-S @dsh.ca.gov>; Angie Cooper @pldolaw.com>; Brian Main @gmail.com>; Cindy



All,

We were surprised to read in Christine's email from yesterday afternoon that all transfers to ICF PIPs from SAC have been suspended as of Wednesday, as it was not disclosed on our call yesterday. Please confirm that this is accurate and provide us with more details. Please also clarify whether Acute transfers from SAC have also been cut off.

If Defendants have restricted access to higher levels of care for class members at any institutions, it is important that we and the Special Master be informed promptly.

Thank you.



Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

The memo circulated earlier has been reissued and revised. The current version is attached. The final bullet on page two was revised to read:

Patients in isolation and/or quarantine will not attend groups but shall be provided with therapeutic treatment packets, workbooks, and other in cell activities and shall receive daily rounding by at least one of

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 83 of 108 the following designated staff to include: CNA, Psychologist, LVN, Recreational Therapists, PTs, RNs, or Social Workers.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is the final memo and COVID 19 Emergency Plan.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 84 of 108

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```
From: Weber, Nicholas@CDCR
Sent: Tuesday, March 24, 2020 2:13 PM
To: Steven Fama
                      @prisonlaw.com>; Coleman Team - RBG Only
                                                                                       @rbgg.com>; Don
Specter
               @prisonlaw.com>;
                                         @doj.ca.gov; Tyler Heath
                                                                              @doj.ca.gov>; Lucas Hennes
                                                                                           @doj.ca.gov>;
             @doj.ca.gov>; Adriano Hrvatin
                                                         @doj.ca.gov>; Kyle Lewis
Bentz, Melissa@CDCR
                                  @cdcr.ca.gov>; Hessick, Jerome@CDCR
                                                                                     @cdcr.ca.gov>; Neill,
Jennifer@CDCR
                           @cdcr.ca.gov>; Toche, Diana@CDCR
                                                                         @cdcr.ca.gov>; Bick, Joseph@CDCR
                                                         @cdcr.ca.gov>; Christine Ciccotti
           @cdcr.ca.gov>; Daye, Eureka@CDCR
                @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                                                                        @dsh.ca.gov>; Kent, Kristopher@DSH-S
               @dsh.ca.gov>; Angie Cooper
                                                  @pldolaw.com>; Brian Main
                                                                                        @gmail.com>; Cindy
                   @gmail.com>; Henry Dlugacz
                                                       @blhny.com>; James DeGroot
Radavsky
                                                                                               @gmail.com>;
                                @cuanschutz.edu>; Karen Rea
                                                                        @gmail.com>; Kerry C. Hughes, M.D.
Jeffrey Metzner
        @aol.com>; Kerry Walsh
                                       @pldolaw.com>; Kristina Hector
                                                                            @pldolaw.com>; L Hayes
        @msn.com>; L. McClendon-Hunt
                                                       @pldolaw.com>; Lana Lopez
                                                                                        @pldolaw.com>; Maria
              @drmariamasotta.com>; Matty Lopes
                                                         @pldolaw.com>; Mohamedu Jones
Masotta
                               @aol.com; Patricia Williams
                                                                   @gmail.com>; Rachel Gribbin
                                           @pldo w.com>; R d Hi kman
        @pldolaw.com>; Regina Costa
                                                                                  @gmail.com>; Steve Raffa
                                                @hotmail.com>; Ponciano, Angela@CDCR
      @pldolaw.com>; Timothy Rougeux
                @cdcr.ca.gov>
Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care
```

CCHCS's COVID status tracker can be found here:

https://www.cdcr.ca.gov/covid19/cdcr-cchcs-covid-19-status/

```
From: Weber, Nicholas@CDCR
Sent: Tuesday, March 24, 2020 12:20 PM
To: Steven Fama
                                          @prisonlaw.com>; Coleman Team - RBG Only
                                                                                                                                                                         @rbgg.com>; Don
Specter
                               @prisonlaw.com>;
                                                                                     @doj.ca.gov; Tyler Heath
                                                                                                                                                         @doj.ca.gov>; Lucas Hennes
                                                                                                               @doj.ca.gov>; Kyle Lewis
                          @doj.ca.gov>; Adriano Hrvatin
                                                                                                                                                                                 @doj.ca.gov>;
Bentz, Melissa@CDCR
                                                                  @cdcr.ca.gov>; Hessick, Jerome@CDCR
                                                                                                                                                                       @cdcr.ca.gov>; Neill,
                                                                                                                                               @cdcr.ca.gov>; Bick, Joseph@CDCR
Jennifer@CDCR
                                                      @cdcr.ca.gov>; Toche, Diana@CDCR
                       @cdcr.ca.gov>; Daye, Eureka@CDCR
                                                                                                                @cdcr.ca.gov>; Christine Ciccotti
                                @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                                                                                                                                            @dsh.ca.gov>; Kent, Kristopher@DSH-S
                              @dsh.ca.gov>; Angie Cooper
                                                                                                 @pldolaw.com>; Brian Main
                                                                                                                                                                             @gmail.com>; Cindy
                                                                                                            @blhny.com>; James DeGroot
Radavsky
                                     @gmail.com>; Henry Dlugacz
                                                                                                                                                                                           @gmail.com>;
Jeffrey Metzner
                                                               @cuanschutz.edu>; Karen Rea
                                                                                                                                           @gmail.com>; Kerry C. Hughes, M.D.
                 @aol.com>; Kerry Walsh
                                                                            @pldolaw.com>; Kristina Hector
                                                                                                                                                     @pldolaw.com>; L Hayes
                 @msn.com>; L. McClendon-Hunt
                                                                                                           @pldolaw.com>; Lana Lopez
                                                                                                                                                                           @pldolaw.com>; Maria
                            @drmariamasotta.com>; Matty Lopes
                                                                                                                @pldolaw.com>; Mohamedu Jones
Masotta
                                                    Olimbia
Oli
               @pldolaw com>;
                                                                                                                                    @gmail.com>; Rachel Gribbin
```

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Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 85 of 108 @pldolaw.com>; Regina Costa @pldolaw.com>; Rod Hickman @gmail.com>; Steve Raffa @pldolaw.com>; Timothy Rougeux @hotmail.com>; Ponciano, Ange @CDCR @cdcr.ca.gov>
```

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is as revision to the CDCR essential movement guidelines issued today.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is a clarification to Thursday's movement notice clarifying that access to and from PIP is permitted under current circumstances.

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 86 of 108

Attorney
Department of Corrections & Rehabilitation
1515 S Street, Suite 314S
Sacramento, CA 95811-7243

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From: Weber. Nicholas@CDCR Sent: Saturday, March 21, 2020 12:48 PM To: Steven Fama @prisonlaw.com>; Coleman Team - RBG Only Don Specter @prisonlaw.com>; @doj.ca.gov; Tyler Heath @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Kyle Lewis @doj.ca.gov>; Adriano Hrvatin @doj.ca.gov>; Bentz, Melissa@CDCR @cdcr.ca.gov>; Hessick, Jerome@CDCR @cdcr.ca.gov>; Neill, Jennifer@CDCR @cdcr.ca.gov>; Toche, Diana@CDCR @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S @dsh.ca.gov>; Kent, Kristopher@DSH-S @dsh.ca.gov>; Angie Cooper @pldolaw.com>; Brian Main @gmail.com>; Cindy @gmail.com>; Henry Dlugacz @blhny.com>; James DeGroot @gmail.com>; Radavsky @cuanschutz.edu>; Karen Rea @gm il Jeffrey Metzner >; Kerry C. Hughes, M.D. @pldolaw.com>; Kristina Hector @pldolaw.com>; L Hayes @aol.com>; Kerry Walsh @msn.com>; L. McClendon-Hunt @pldolaw.com>; Lana Lopez @pldolaw com>; Maria Masotta @drmariamasotta.com>; Matty Lopes @pldolaw.com>; Moh medu Jones @aol.com; Patricia Williams < @gmail.com>; Rachel Gribbin @pldolaw.com>; @pldolaw.com>; Regina Costa @pldolaw.com>; Rod Hickman @gmail.com>; Steve Raffa @pldolaw.com>; Timothy Rougeux @hotmail.com>; Ponciano, Angela@CDCR @cdcr.ca.gov>

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

In advance of our call please find the CCHCS COVID-19 Interim Guidance for Health Care and Public Health Providers and a March 20, 2020, memo from CCHCS regarding COVID 19 Guidance Regarding Field Operations.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Case 2:90-cv-00520-KJM-DB. Document 6587-1. Filed 04/08/20. Page 87 of 108 Privacy Act. If you are not the intended recipient, please contact the sender and destroy all copies of the communication.



Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

For more information on the screener and who uses it please see the following website:

http://cssrs.columbia.edu/documents/screener-triage-emergency-departments/

Thanks.

```
From: Weber, Nicholas@CDCR
Sent: Friday, March 20, 2020 3:57 PM
To: Steven Fama
                      @prisonlaw.com>; Coleman Team - RBG Only
                                                                                      @rbgg.com>; Don
Specter
                @prisonlaw.com>;
                                           @doj.ca.gov; Tyler Heath <
                                                                              @doj.ca.gov>; Lucas Hennes
             @doj.ca.gov>; Adriano Hrvatin
                                                         @doj.ca.gov>; Kyle Lewis
                                                                                          @doj.ca.gov>;
Bentz, Melissa@CDCR
                                  @cdcr.ca.gov>; Hessick, Jerome@CDCR
                                                                                     @cdcr.ca.gov>; Neill,
                           @cdcr.ca.gov>; Toche, Diana@CDCR
Jennifer@CDCR
                                                                         @cdcr.ca.gov>; Bick, Joseph@CDCR
                                                         @cdcr.ca.gov>; Christine Ciccotti
           @cdcr.ca.gov>; Daye, Eureka@CDCR
                @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                                                                         dsh.ca.gov>; Kent, Kristopher@DSH-S
               @dsh.ca.gov>; Angie Cooper
                                                 @pldolaw.com>; Brian Main
                                                                                        @gmail.com>; Cindy
                   @gmail.com>; Henry Dlugacz
                                                       @blhny.com>; James DeGroot
                                                                                               @gmail.com>;
Radavsky
                                @cuanschutz.edu>; Karen Rea
                                                                       @gmail.com>; Kerry C. Hughes, M.D.
Jeffrey Metzner
        @aol.com>; Kerry Walsh
                                      @pldolaw.com>; Kristina Hector
                                                                           r@pldolaw.com>; L Hayes
        @msn.com>; L. McClendon-Hunt
                                                      @pldolaw.com>; Lana Lopez
                                                                                       @pldolaw.com>; Maria
                                                         @pldolaw.com>; Mohamedu Jones
              @drmariamasotta.com>; Matty Lopes
Masotta
                               @aol.com; Patricia Williams
                                                                   @gmail.com>; Rachel Gribbin
       s@pldolaw.com>;
        @pldolaw.com>; Regina Costa
                                          @pldolaw.com>; Rod Hickman
                                                                                 @gmail.com>; Steve Raffa
      @pldolaw.com>; Timothy Rougeux
                                               @hotmail.com>; Ponciano, Angela@CDCR
                                             @cdcr.ca.gov>
               @cdcr.ca.gov)
```

Steve.

The screener is attached.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Thanks Nick. Can you please forward the "Columbia Screener" referenced in the draft plan for possible CDCR use for suicide assessments, so we can be on the sam page as to what is being referenced?

Steve

From: Weber, Nicholas@CDCR [mailto @cdcr.ca.gov]

Sent: Friday, March 20, 2020 3:22 PM



Subject: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care

All,

Attached is a draft CDCR Emergency COVID 19 Plan for the provision of mental health care. Please note that the attached is a working document. The document reflects CDCR's treatment goals given the information currently available. CDCR will adjust the document to reflect unanticipated changes in COVID 19 restrictions or prison operations. CDCR remains committed to ensuring patients with mental illnesses have prompt access to care even in these changing circumstances. CDCR looks forward to a productive conversation tomorrow at the first task force meeting.

Thanks.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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Exhibit 22

DIVISION OF HEALTH CARE SERVICES STATEWIDE MENTAL HEALTH PROGRAM P.O. Box 588500 Elk Grove, California 95758 COMMECTIONS AND ITS CONTROL OF CAMPOINT

March 16, 2020

Matthew A. Lopes, Jr. Esquire Office of the Special Master Pannone Lopes Devereaux & O'Gara LLC Northwoods Office Park 1301 Atwood Avenue, Suite 215 N Johnston, RI 02919

via: Elise Owens Thorn, Esquire
Deputy Attorney General
Department of Justice
1300 I Street, Suite 125
P.O. Box 944255
Sacramento, CA 94244-2550

RE: COLEMAN MONTHLY REPORT OF INFORMATION REQUESTED AND RESPONSE TO JANUARY 19, 1999, COURT ORDER REGARDING STAFF VACANCIES

Dear Mr. Lopes:

Enclosed is the *Coleman* Monthly Report reflective of January, 2020, data (or as otherwise noted). The following is the list of enclosures:

- 1. California Department of Corrections and Rehabilitation (CDCR) Staffing Report.
 - a. Mental Health Executive Summary.
 - b. Mental Health Institution Vacancy by Classification.
 - c. Mental Health Institution Vacancies Summary by Classification,
 - d. Mental Health Month to Month Registry Usage.
 - e. Mental Health Six-Month Vacancy Summary.
 - f. Mental Health Program Institution Vacancies Summary by Classification.
 - g, Statewide Mental Health Program Compliance Summary Report.
 - h. Enhanced Outpatient Program Administrative Segregation Unit (EOP ASU) Case Manager Positions and Vacancies.
 - i. Mental Health Hiring Progress Report.
 - j. Mental Health Statewide Hire Tracking Summary Clinical Positions Only.
 - k. Mental Health Telepsych Allocated and Filled Positions Report.
 - 1. Psychiatric Inpatient Program (PIP) Staffing Data.
 - m. Department of State Hospitals (DSH) Staffing Data.
- 2. Reception Center Monthly Reports.
 - a. Reception Center Mental Health Screening Report.
 - b. Reception Center Transfer Timelines Report.

- 4. EOP Inmates Waiting Transfers to PSU.
- 5. EOP ASU Hub Trends.
- 6. Population and Census Reports.
 - a. Health Care Placement Oversight Program (HCPOP) Information Report, Summary of Mental Health Population by Institution and Level of Care (H-1).
 - b. MHSDS Management Information Summary (MIS).
 - c. Weekly EOP/Outpatient Psychiatric Program Report.
- 7. Mental Health Crisis Bed (MHCB) Reports.
 - a. MHCB Referrals report.
 - b. MHCB Stays report.
 - c. MHCB Wait List.
- 8. DSH and Inpatient Program Referral Reports.
 - a. Referrals for Transfer to Inpatient Programs Report.
 - b. DSH Monthly Report of CDCR Patients in DSH Hospitals, Summary of PC 2684s Report.
- 9. Milestone Credits Report.
- 10. Work Assignments Report.
- 11. Out of Level Housing Report.

If you have any questions, please contact me at (916) 691-0296.

Sincerely,

EUREKA C. DAYE, Ph.D, MPH, MA, CCHP

Deputy Director (A), Statewide Mental Health Program California Department of Corrections and Rehabilitation

Enclosures

ce: Mohamedu F., Jones, Esq., Coleman Deputy Special Master

Kerry F. Walsh, Esq., Coleman Deputy Special Master

Jeffrey L. Metzner, M.D., Coleman Expert-

Kerry C. Hughes, M.D., Coleman Expert

Case 2:90Acy-00520-KIM-DB Document 6587-1 Filed 04/08/20 Page 93 of 108 Page 3

Mary Perrien, Ph.D., Coleman Expert
Henry A. Dlugacz, Esq., Coleman Expert
Patricia Williams, Esq., Coleman Monitor
Nicholas Weber, Esq, Office of Legal Affairs, CDCR
Melissa Bentz, Esq., Office of Legal Affairs, CDCR
Michael Bien, Esq., Rosen, Bien and Galvan
Donald Specter, Esq., Prison Law Office
Steve Fama, Esq., Prison Law Office

Angela Ponciano, Associate Director, Statewide Mental Health Program, DHCS

Laura Ceballos, Ph.D., Mental Health Administrator, Inpatient Facilities and Quality Improvement, Statewide Mental Health Program, DHCS

Steven Cartwright, Psy.D. Chief Psychologist, Quality Management, Statewide Mental Health Program, DHCS

Teresa Owens, Health Program Specialist I, Quality Management, Statewide Mental Health Program, DHCS

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 94 of 108 summary of Mental Health Population by Institution and Level of Care (H1)

CONFIDENTIA

Data Refreshed:	1/27/20	6:10 AM																							
												Men	ital Health Sumi	nary by Level of	Care										
	Correctional Clinical Case Management System (CCCMS Operational Capacity Population % Occupied Vacant Be				MS)		En	hanced Outpati	ent Program (E	OP)			1	Mental Health (risis Bed (MHCE	3)		Intermediate C	are Facility (ICF))		Acute Psychiatr	ic Program (APP)	
		Population	% Occupied	Vacant	Beds	EOP O	Operational Cap		Population	% Occupied	Vaca	nt Beds	Design Capacity	Population	% Occupied	Vacant Beds	Design Capacity	Population	% Occupied	Vacant Beds	Design Capacity	Population	% Occupied	Vacant Beds	Total Mental Health
Institution	Capacity					Gene al Population (GP)	Administrative Segregation Unit (ASU)	Psychat c Se vices Unit (PSU)																	Population
ASP	1,100	1,043	95 %		57				1			-1													1,044
CAL	,																								
ccc		2			-2																				2
CCI	1,850	1,574	85 %		76				2			-2													1,576
CEN																									
CHCF	550	654	119 %	•	-104	375	50		571	134%		-146	78	48		30	331	375	113 %	-44	203	161	79 %	42	
CIM	1,050	1,128	107 %	•	-78				40		1	-40		15	44 %	19		3		-3		4		-4	1,190
CMC	750	714	95 %		36	552	100		564	87 %		88		34	68 %	16		16		-16		4		-4	1,332
CMF	600	491	82 %		109	391	58		521		-	-72		33	66 %	17	248	249	100 %	-1	218	169	78 %	49	1,463
COR	1,000	1,010	101 %		-10	366	100		324	70 %	-	142		21	88 %	3		3		-3		5		-5	1,363
CRC	1,150	1,486	129 %		-336				5		⊢	-5		1		-1									1,492
CTF	1,500	1,390	93 %		110				1		⊢	-1													1,391
CVSP		4	2/		-4 66		<u> </u>		18		-	-18		—											4
DVI	500	434	87 %	-	78				18		-	-18		1		-1									453
FOL HDSP	500 1,050	422 969	84 % 92 %		/8 R1				1		-	-1	10	_	80 %										423 977
ISP	1,050	969	92 70		0						\vdash		10	8	80 76	-									9//
KVSP	900	944	105 %		-44	96			112	117 %		-16	12	11	92 %	1 1	1	-		-1					1,068
LAC	1,000	808	81 %		192	600			516			184			92 %	11 1		7		-7		3		1 3	1,345
MCSP	1,350	1,388	103 %		-38	774	50		703			121		4	50 %	4		6		I -6		2		-2	2,103
NKSP	1,000	863	86 %		137				77			-77		3	30 %	7						5		-5	948
PBSP	300	283	94 %		17				2		\vdash	-2				10								_	285
PVSP	700	456	65 %		44				3			-3	6			- 6									459
RJD	1,500	1,315	88 %		185	894	63		784	82 %		173	14	12	86 %	2		2		-2		3		-3	2,116
SAC	500	528	106 %		-28	642	64	172	751	86 %		27	44	15	34 %	29		12		-12		3		-3	1,309
SATF	2,000	1,929	96 %		71	660			528	80 %		132	20	16	80 %	4	l .					4		-4	2,477
SCC	400	551	138 %		-151				1			-1													552
SOL	1,000	698	70 %		302				1			-1		4	44 %	5						3		-3	706
SQ	1,250	1,007	81%		243	200			275			-75		2		-2				-1		1	10 %	9	1,316
SVSP	850	880	104 %	_	-30	396			276			120				10			94 %	14		1		-1	1,389
VSP	1,350	1,060	79 %		290	372			362			10		2		-2		2		-2					1,426
WSP	1,300	1,157	89 %		143				48		_	-48		5	83 %	1									1,210
DSH-ASH		1			-1				2		⊢	-2					256		93 %	17		4		-4	246
DSH-CSH											_						50		94 %	3					47
Male Subtotal	27,000	25,189	93%		1,811	6,318	585	172		92%		586				161			106%	-64	431	372	86%	59	
CCWF	1,350	1,286	95 %		64	120	10		115		-	15			58 %	5		4		-4					1,412
CIW	750	687	92 %		63	75	10	10	65	68 %	-	30		10	34 %	19	45	27	60 %	18		3		1 -3	792
FWF	150	170	113 %		-20				2		\vdash	-2							0/						172
DSH-PSH	2.750	1	0.58/		-1			40	3	en#/		-3		47	440/		30			18					16 2,392
Female Subtotal	2,250	2,144	95%		106	195	20					40								32		3		-3	
Grand Total	29,250	27,333	93%		1,917	6,513	605	182	6,674	91%		626	448	263	59%	185	1,236	1,268	103%	-32	431	375	87%	56	35,913

NOTES:

1. This report provides operational capacities, population, and vacant beds detail by mental health level of care and institution. Level of care is based on Current Mental Health level of care, a summary of patients by SOMS housing program and institution is provided. Data Source is HCODS, as of the "Data Refreshed" time stamp.

2. Definitions

- Operational Capacity indicates the number of beds available in the program based on factors such as treatment space and staffing, as determined by CCHCS headquarters.
- Design Capacity indicates the total number of beds available in the program Determined by Facility Planning, Construction, & Management.
- Population total census per SOMS as of the "Data Refreshed" time stamp shown on the report.
- % Occupied ([Population] / [Operational Capacity]) x 100.
- Vacant Beds the number of beds available after subtracting the Population from the Operational Capacity.
- The "PIP" column in the "Psychiatry Inpatient Program (PIP) Housing" refers to programs that have the ability to provide multiple levels of care.

3. PIP capacities

- SQ PIP is for male condemned patients only, and has a total capacity of 40 beds reflected under ICF capacity. It is noted that these are flex beds that can accomodate ICF, APP, and MHCB level of care.
- CIW PIP has a total capacity of 45 beds reflected under ICF capacity. It is noted that these are flex beds that can accomodate ICF and APP level of care.
- DSH-PSH has a total capacity of 30 beds reflected under ICF capacity. It is noted that these are flex beds that can accomodate ICF and APP level of care.

4. Housing Groups

*GP Housing Group census includes patients in the following housing programs Camp Program Beds, Debrief Processing Unit, Family Visiting, Fire House, General Population, Institution Hearing Program, Minimum Security Facility, Non-Designated Program Facility, Protective Housing Unit, Restricted Custody General Population, Sensitive Needs Yard, SNY Fire House, SNY MSF, Transitional Housing Unit, Unknown, Varied Use and Work Crew.

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 95 of 108 SUMMARY OF MENTAL HEALTH POPULATION BY INSTITUTION AND LEVEL OF CARE

Data Refreshed:	1/27/2	0 6:10 AM																
			(Correctiona	l Clinical	Case Mana	gement S	system (CC	CCMS) Lev	el of Ca	re Popula	ition by Ho	ousing Pr	ogram				
					Psychiatric II	npatient Program	(PIP) Housing	Specialized	d Medical Beds	Housing			Segi	egated Housi	ng			
Institution	RC Reception Center	GP* General Population	EOP Enhanced Outpatient Program	MHCB Mental Health Crisis Bed	Acute	Intermediate	PIP	CTC/SNF Correctional Treatment Center/Skilled Nursing Facility	Hospice	OHU Outpatient Housing Unit	ASU Administrative Segregation Unit	Condemned	LTRH Long Term Restricted Housing Unit	NDS Non-Disciplinary Segregation	PSU Psychiatric Services Unit	SHU Security Housing Unit	STRH Short Term Restricted Housing Unit	Total CCCMS Population
ASP		1,042								1								1,043
CAL																		
CCC		2																2
CCI		1,544									30							1,574
CEN																		
CHCF		229	5					162		254	4							654
CIM	78									11	36							1,128
CMC		702						5			7							714
CMF		447	_					14	6	20	4							491
COR		704	3	S				9		4	3		185				102	
CRC		1,482								4	_							1,486
CTF		1,379								9								1,390
CVSP	250	3								_	1							4
DVI	260									/	41							434
FOL HDSP		412						7			10						47	422 969
ISP		915						/									47	969
KVSP		849	1					5									89	944
LAC		700	14	•				3			1						90	
MCSP		1,362	8					3			18						90	1,388
NKSP	681							4			10							863
PBSP	001	211						1									71	
PVSP		437						_									19	
RJD		1,276	1					4			34						- 13	1,315
SAC		351	28								1		49		15		84	
SATF		1,833	5					6			_		-				85	
SCC		542								3	6							551
SOL		687									11							698
SQ	195							2			10							1,007
SVSP		803	3	1				4			1						69	
VSP		1,041								12	7							1,060
WSP	1,022	116						5			14							1,157
DSH-ASH		1																1
DSH-CSH												-						
Male Subtotal	2,236		68	0	0	0	0		6	325				0	15	0	656	
CCWF	253							15			64	15						1,286
CIW		643						2		5	11					26		687
FWF		170																170
DSH-PSH		1																1
Female Subtotal	253		0	4	0	4				•				·	0			_,
Grand Total	2,489	22,793	68	0	0	0	0	248	6	330	325	143	234	0	15	26	656	27,333

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 96 of 108 SUMMARY OF MENTAL HEALTH POPULATION BY INSTITUTION AND LEVEL OF CARE

Data Refreshed:	1/27/20	6:10 AM																
			•	Enh				(EOP) Leve			n by Hou	ising Prog	ram					
					Psychiatric In	patient Program	n (PIP) Housing	Specialize	d Medical Beds	Housing			Segr	egated Housi	ing			
Institution	RC Reception Center	GP* General Population	EOP Enhanced Outpatient Program	MHCB Mental Health Crisis Bed	Acute	Intermediate	PIP	CTC/SNF Correctional Treatment Center/Skilled Nursing Facility	Hospice	OHU Outpatient Housing Unit	ASU Administrative Segregation Unit	Condemned	LTRH Long Term Restricted Housing Unit	NDS Non-Disciplinary Segregation	PSU Psychiatric Services Unit	SHU Security Housing Unit	STRH Short Term Restricted Housing Unit	Total EOP Population
ASP		1																1
CAL																		
ccc																		
CCI		2																2
CEN																		
CHCF			405	3		1		41		83	38							571
CIM	39			1														40
СМС		1	513					1			49							564
CMF			429	9	9	8		11	1	9	45							521
COR		1	267					13		5	38							324
CRC		5																5
CTF		1																1
CVSP																		
DVI	17										1							18
FOL		1																1
HDSP																		
ISP																		
KVSP		1	92	1				1									17	112
LAC		1	470								45							516
MCSP		1	659								43							703
NKSP	75										2							77
PBSP																	2	2
PVSP		3																3
RJD		1	739					5			39							784
SAC			542					1			64		2	7	134		1	751
SATF		6	512					7									3	
scc		1																1
SOL		1																1
sq	26	12	171	İ	1			1			6	58			Ì		Ì	275
SVSP		8				6											14	
VSP		3	356								3							362
WSP	43							1			4							48
DSH-ASH		İ		İ		2						İ			Ì		Ì	2
DSH-CSH																		
Male Subtotal	200	50	5,403	14	10	17	0	82	1	97	377	58	2	7	134	0	37	6,489
CCWF		36						3			7							115
CIW			58								3				4			65
FWF		2																2
DSH-PSH		1	1				1											3
Female Subtotal	0	39	128	0	0	0	1	3	0	0	10	0	0	0	4	0	0	185
Grand Total	200				_	17	1	85	1	97			_	7	138	_		

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 97 of 108 SUMMARY OF MENTAL HEALTH POPULATION BY INSTITUTION AND LEVEL OF CARE

Data Refreshed:	1/27/20	6:10 AM																
				N	lental Hea	Ith Crisis B	ed (MHC	B) Level of Ca	re Popula	ation by	/ Housing	g Progran	n					
			500			patient Program		Specialized Me					Segrega	ated Housin	ng			
Institution	RC Reception Center	GP* General Population	EOP Enhanced Outpatient Program	MHCB Mental Health Crisis Bed	Acute	Intermediate	PIP	CTC/SNF Correctional Treatment Center/Skilled Nursing Facility	Hospice	OHU Outpatient Housing Unit	ASU Administrative Segregation Unit	Condemned	LTRH Long Term Restricted Housing	NDS Non-Disciplinary Segregation	PSU Psychiatric Services Unit	SHU Security Housing Unit	STRH Short Term Restricted	Total MHCB Population
ASP													Onic				riousing office	
CAL																		
ccc																		
CCI																		
CEN																		
CHCF				46	1		-	1										48
CIM		1		14														15 34
CMC			1	34							4							33
CMF		3	1	31 18							1							21
CRC		1		18			+											1
CTF		1																1
CVSP																		
DVI										1								1
FOL										_								_
HDSP				7				1										8
ISP																		
KVSP				11														11
LAC			1	8													2	11
MCSP				4														4
NKSP				3														3
PBSP																		
PVSP																		
RJD				9				1			2							12
SAC				9										6				15
SATF		1		15														16
SCC				<u> </u>			-											_
SOL				4			1											4
SQ					2													2
SVSP		2																2
VSP WSP				5														5
DSH-ASH				3												 		3
DSH-CSH																		
Male Subtotal	0	8	2	218	3	0	0	3	0	1	3	0	0	6	0	0	2	246
CCWF		1		6				,		-								7
CIW				10														10
FWF				1														
DSH-PSH																1		
Female Subtotal	0	1	0	16	0	0	0	0	0	0	0	0	0	0	0	0	0	
Grand Total	0	9	2	234	3	0	0	3	0	1	3	0	0	6	0	0	2	263

SUMMARY OF MENTAL HEALTH POPULATION BY INSTITUTION AND LEVEL OF CARE

Data Refreshed:	1/27/20	6:10 AM																
				li	ntermedia	ate Care Fa	cility (ICF)	Level of C	are Popu	lation by	y Housir	ng Progran	n					
					Psychiatric In	patient Progran	n (PIP) Housing	Specialized	Medical Beds	Housing			Seg	regated Hous	sing			
Institution	RC Reception Center	GP* General Population	EOP Enhanced Outpatient Program	MHCB Mental Health Crisis Bed	Acute	Intermediate	PIP	CTC/SNF Correctional Treatment Center/Skilled Nursing Fac lity	Hospice	OHU Outpatient Housing Unit	ASU Administrative Segregation Unit	Condemned	LTRH Long Term Restricted Housing Unit	NDS Non-Disciplinary Segregation	PSU Psychiatric Services Unit	SHU Security Housing Unit	STRH Short Term Restricted Housing Unit	Total ICF Population
ASP																		
CAL																		
ссс																		
CCI																		
CEN																		
CHCF				2	58	312		3										375
CIM				3														3
СМС			3	11							2							16
CMF			2	3	28	216												249
COR		1	1	1														3
CRC																		
CTF																		
CVSP																		
DVI																		
FOL																		
HDSP																		
ISP																		
KVSP			1															1
LAC			3								4							7
MCSP			4	2														6
NKSP																		
PBSP																		
PVSP																		
RJD			2															2
SAC			1								1				10			12
SATF																		
scc																		
SOL																		
SQ					2		29											31
SVSP			2			230												232
VSP		1	1															2
WSP																		
DSH-ASH		4	55	36	80	59		3		2								239
DSH-CSH			14	9	19	5												47
Male Subtotal	0	6	89	67	187	822	29	6	0	2	7	0	0	0	10	0	0	1,225
CCWF		1	2	1														4
CIW							27											27
FWF																		
DSH-PSH		5	1	1			5											12
Female Subtoal	0						32											
Grand Total	0	12	92	69	187	822	61	6	0	2	7	0	0	0	10	0	0	1,268

SUMMARY OF MENTAL HEALTH POPULATION BY INSTITUTION AND LEVEL OF CARE

Data Refreshed:	1/27/20	6:10 AM	Acute Psychiatric Program (APP) Level of Care Population by Housing Program															
				Į.) Level of (Care Pop	ulation	by Hou	sing Progr	ram					
					Psychiatric Inp	oatient Program	(PIP) Housing	Specialized N	ledical Beds I	lousing			Seg	gregated Hou	sing			
Institution	RC Reception Center	GP* General Population	EOP Enhanced Outpatient Program	MHCB Mental Health Crisis Bed	Acute	Intermediate	PIP	CTC/SNF Correctional Treatment Center/Skilled Nursing Facility	Hospice	OHU Outpatient Housing Unit	ASU Administrative Segregation Unit	Condemned	LTRH Long Term Restricted Housing Unit	NDS Non-Disciplinary Segregation	PSU Psychiatric Services Unit	SHU Security Housing Unit	STRH Short Term Restricted Housing Unit	Total APP Population
ASP																		
CAL																		
ccc																		
CCI																		
CEN																		
CHCF				17	139	2		3										161
CIM				4														4
СМС				4														4
CMF				6		1												169
COR				4				1										5
CRC																		
CTF																		
CVSP																		
DVI																		
FOL																		
HDSP																		
ISP																		
KVSP				2														2
LAC MCSP			1	3														3
NKSP			1	5														
PBSP				3														3
PVSP																		
RJD				3														3
SAC				3														3
SATF				4														4
scc				7														-
SOL				3														3
sQ					1													1
SVSP						1												1
VSP						_												
WSP																		
DSH-ASH					2	2											İ	4
DSH-CSH												İ					1	
Male Subtotal	0	0	1	57	304	6	0	4	0	0	0	0	0	0	0	0	0	372
CCWF																		
CIW				1			2											3
FWF																		
DSH-PSH																		
Female Subtotal	0	0	0	1	0	0	2	0	0	0	0	0	0	0	0	0		
Grand Total	0	0	1	58	304	6	2	4	0	0	0	0	0	0	0	0	0	375

Exhibit 23

Greg Gonzalez

From: Nick Weber

Sent: Saturday, March 28, 2020 11:54 AM

To: Lisa Ells; Steve Fama; Coleman Team - RBG Only; Donald Specter; Elise Thorn; Tyler

Heath; Lucas Hennes; Adriano Hrvatin; Kyle Lewis; Melissa Bentz; Hessick,

Jerome@CDCR; Neill, Jennifer@CDCR; Toche, Diana@CDCR; Bick, Joseph@CDCR; Daye, Eureka@CDCR; Christine Ciccotti; Raddatz, Antonina@DSH-S; Kent, Kristopher@DSH-S; Angie Cooper; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Steve Raffa; Tim Rougeux; Ponciano, Angela@CDCR

RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care [IWOV-

DMS.FID6429]

Attachments: CensusAndPendingListRpt_3-27-20.pdf; Capacity SAC EOP HUB-PSU 3-27-20.pdf; PSU

RosterSAC EOP HUB-PSU 3-27-20.pdf; ASU Roster SAC EOP HUB-PSU 3-27-20.pdf; SAC

PIP Referrals.pdf; SAC MHCB Referrals.pdf

Lisa,

Subject:

Attached, please find CDCR's Inpatient capacity, census, and waitlist report. This is a point in time report generated on March 27, 2020, which is also provided to the court on a monthly basis. At the time of the report, Defendants operated 1,665 inpatient beds, of which 1,534 were in full. The total pending list included 197 patients, 131 of which were pending bed availability and endorsement.

Headquarters IRU data from later on March 27, 2020, indicated that CDCR had 137 patients on the pending bed availability and endorsement list. That list included 35 acute and 102 ICF referrals. Not counting a handful of exceptions (medical hold, out to court), CDCR expects to make timeframes on all admissions due through the weekend. The next acute admission is due Thursday, April 2, 2020. The next ICF admission is also due April 2, 2020.

SAC Segregation

Plaintiffs requested roster data of all MHSDS inmates in SAC's PSU and ASU EOP Hub, and those units respective census versus capacity. That data is attached. 59 of 75 ASU EOP beds (A5) are occupied. 143 of 172 PSU beds (A1, A2, B7) are occupied.

Additionally, Plaintiffs requested current yard time, out of cell time, showers, and MH treatment occurring on those units. As of Friday, March 27, 2020, ASU EOP and PSU units were offering 10 hours of yard per week, 3 showers per week, medication pass, psych tech rounds, and entertainment appliances. STRH units were offering the same but were also offering a total of 18.5 hours out of cell time per week. LTRH units were offering the same but were also offering an additional 3.5 hours of day-room per week.

SAC is currently not running mental health groups in any unit. Individual contacts are occurring cell with staff utilizing PPEs. Clinicians have discretion when to request a confidential session which will be conducted in the dining room. Mental Health staff are delivering in cell activities to all MHSDS inmates and conducting additional cell-front checks. SAC's current model allows every patient to have a weekly cell-front contact and two contacts with a recreational therapist.

SAC Inpatient/MHCB

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Plaintiffs requested a list of all inmates at SAC referred to MHCB or PIP care. Those lists are attached. (Please note Mr. Lydon T27685 is referred to acute on day 32. His referral is delayed due to medical issues unrelated to COVID 19.)

SAC continues to admit patients to its MHCB internally. Current SAC MHCB's capacity is 33 beds with a census of 23, including the unlicensed MHCBU. Eleven other MHCBs at SAC are offline and will be reactivated on April 10, 2020. SAC is not accepting MHCB patients referred from other institutions. MHCB patients are being treated in the MHCB, or MHCBU. While in alternative housing they are being held in the NDS building. Patients currently referred to a PIP are currently held the MHCB (10), the CTC (1), EOP (2), NDS (2), PSU (2), and ASU (1). CDCR can provide no date when external transfers will resume.

At this time, no other institutions are operating with complete restrictions transfer. Some units at CHCF are on quarantine which will be reassessed by April 3, 2020.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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From: Lisa Ells <LElls@rbgg.com> Sent: Friday, March 27, 2020 2:28 PM To: Weber, Nicholas@CDCR @cdcr.ca.gov>; Steve Fama @prisonlaw.com>; Coleman Team -@rbgg.com>; Donald Specter @prisonlaw.com>; Elise Thorn **RBG Only** @doj.ca.gov>; Tyler Heath @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Adriano Hrvatin @doj.ca.gov>; Kyle Lewis @doj.ca.gov>; Bentz, Melissa@CDCR @cdcr.ca.gov>; Hessick, Jerome@CDCR @cdcr.ca.gov>; Neill, Jennifer@CDCR @cdcr.ca.gov>; Toche, Diana@CDCR @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S @dsh.ca.gov>; Kent, Kristopher@DSH-S @dsh.ca.gov>; Angie Cooper @pldolaw.com>; Brian Main @gmail.com>; Cindy Radavsky @gmail.com>; Henry D. Dlugacz @blhny.com>; James DeGroot @gmail.com>; Jeffrey Metzner @cuanschutz.edu>; Karen Rea-Williams @gmail.com>; Kerry Courtney Hughes, MD @aol.com>; Kerry F. Walsh @pldolaw.com>; Kristina Hector @pldolaw.com>; Lindsay Hayes @msn.com>; Latricea McClendon-Hunt @pldolaw.com>; Lana Lopez @pldolaw.com>; Maria Masotta @drmariamasotta.com>; Matt Lopes @pldolaw.com>; Mohamedu Jones @pldolaw.com>; Mary Perrien @aol.com>: Patricia M. Williams @gmail.com>; Rachel Gribbin @pldolaw.com>; Regina Costa @pldolaw.com>; Rod Hickman Gmail @gmail.com>; Steve Raffa @pldolaw.com>; Timothy @hotmail.com>; Ponciano, Angela@CDCR Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care [IWOV-DMS.FID6429]

Case 2:90-cv-00520-KJM-DB Document 6587-1 Filed 04/08/20 Page 103 of 108 CAUTION: This email originated from outside of CDCR/CCHCS. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Nick,

We are very concerned that access to higher levels of care at SAC has been shut off. As you know, all nine of the suicides at SAC last year were by class members, eight of nine were EOPs, and six of those eight EOP suicides were in segregation units (5 in the PSU and 1 in the EOP ASU). This is an exceedingly dangerous situation for our class members on many levels right now.

We need more information on the situation at SAC, and in particular in the segregation units. Please provide us rosters of all class members in the PSU and EOP ASU units and tell us how full those units are relative to capacity. Please also tell us how much yard, out of cell, showers, and mental health treatment is occurring in those units and any alternative measures SAC staff have taken to help people cope such as providing entertainment devices or worksheets.

Please also provide us with a list of everyone at SAC who has been referred for MHCB or inpatient care, or whose transfer was put on hold, since transfers to those levels of care were shut off on Wednesday. Is SAC continuing to admit class members to their own crisis beds on site? What is the current capacity and census of SAC's MHCB, including the unlicensed 20 bed unit? We assume to the extent that transfers into the SAC crisis beds are still occurring that they are limited to internal transfers only, but please confirm.

Please also provide us with information on where class members referred for MHCB and inpatient care are being held. If people are being held in alt housing, please tell us where that alt housing is located and if any overflow alt housing is being used.

We would also appreciate knowing what treatment or other special steps are being taken at SAC to ensure that the patients awaiting these higher levels of care remain safe and any decompensation minimized to the extent possible while their access to inpatient care is delayed. When do Defendants expect to resume transfers from SAC to inpatient levels of care at this point?

Finally, has CDCR taken any similar steps at other institutions to limit transfers to higher levels of care due to COVID 19? Please let us know.

We look forward to talking with you further about this situation tomorrow, including following up on aspects of the discussion at the status conference today. Lisa

From: Weber, Nicholas@CDCR @cdcr.ca.gov> **Sent:** Friday, March 27, 2020 10:02 AM To: Lisa Ells @rbgg com>; Steve Fama @prisonlaw.com>; Coleman Team - RBG Only @rbgg.com>; Donald Specter @prisonlaw.com>; Elise Thorn @doj.ca.gov>; Tyler Heath @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Adriano Hrvatin @doj.ca.gov>; @doj.ca.gov>; Melissa Bentz @cdcr.ca.gov>; Hessick, Jerome@CDCR Kyle Lewis @cdcr.ca.gov>; Neill, Jennifer@CDCR @cdcr.ca.gov>; Toche, Diana@CDCR @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S @dsh.ca.gov>; Kent, Kristopher@DSH-S @dsh.ca.gov>; Angie Cooper @gmail.com>; Cindy Radavsky @pldolaw.com>; Brian Main @gmail com>; Henry D. Dlugacz @blhny.com>; James DeGroot @gmail.com>; Jeffrey Metzner @cuanschutz.edu>; Karen Rea-Williams @gmail.com>; Kerry Courtney Hughes, MD @aol.com>; Kerry F. Walsh @pldolaw com>; Kristina Hector @pldolaw com>; Lindsay Hayes

Case 2:90-cV-D0520-KJM-DB Locument 6587-1 Filed 04/08/20 Page 102-01 108 @pldolaw.com>; Latricea McClendon-Hunt @pldolaw.com>; Latricea McClendon-Hunt @pldolaw.com>; Latricea McClendon-Hunt @pldolaw.com>; Matt Lopes @pldolaw.com>; Mohamedu Jones @pldolaw.com>; Mary Perrien @aol.com>; Patricia M. Williams @gmail.com>; Rachel @pldolaw.com>; Regina Costa @pldolaw.com>; Rod Hickman Gmail @gmail.com>; Steve Raffa @pldolaw.com>; Tim Rougeux @hotmail.com>; Ponciano, Angela@CDCR @cdcr.ca.gov>

Subject: RE: Coleman - COVID 19 Emergency Plan to Provide Mental Health Care [IWOV-DMS.FID6429]

Hi Lisa,

This is correct, SAC has temporarily stopped external transfers to MHCB, ICF, and Acute levels of care due to COVID concerns at SAC. I apologize, I was under the impression that the Special Master and Plaintiffs had been informed already. We continue to monitor inpatient and MHCB bed need and will work diligently to ensure prompt access to those levels of care.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

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```
From: Lisa Ells
                  @ bgg m>
Sent: Friday, March 27, 2020 9:54 AM
To: Weber, Nicholas@CDCR
                                         @cdcr.ca.gov>; Steve Fama
                                                                         @prisonlaw.com>; Coleman Team -
RBG Only
                                                                    @prisonlaw.com>; Elise Thorn
                                @rbgg.com>; Donald Specter
                                               @doj.ca.gov>; Lucas Hennes
                                                                                       @doj.ca.gov>; Adriano
           @doj.ca.gov>; Tyler Heath
Hrvatin
                       @doj.ca.gov>; Kyle Lewis
                                                         @doj.ca.gov>; Bentz, Melissa@CDCR
                                                                 @cdcr.ca.gov>; Neill, Jennifer@CDCR
             @cdcr.ca.gov>; Hessick, Jerome@CDCR
             @cdcr.ca.gov>; Toche, Diana@CDCR
                                                           @cdcr.ca.gov>; Bick, Joseph@CDCR
           @cdcr.ca.gov>; Daye, Eureka@CDCR
                                                         @cdcr.ca.gov>; Christine Ciccotti
                @dsh.ca.gov>; Raddatz, Antonina@DSH-S
                                                                        @dsh.ca.gov>; Kent, Kristopher@DSH-S
               @dsh.ca.gov>; Angie Cooper
                                                  @pldolaw.com>; Brian Main
                                                                                        @gmail.com>; Cindy
Radavsky
                   @gmail.com>; Henry D. Dlugacz
                                                         @blhny.com>; James DeGroot
            @gmail.com>; Jeffrey Metzner
                                                          @cuanschutz.edu>; Karen Rea-Williams
           @gmail.com>; Kerry Courtney Hughes, MD
                                                           @aol.com>; Kerry F. Walsh
                                                                                           @pldolaw.com>;
Kristina Hector
                      @pldolaw.com>; Lindsay Hayes
                                                            @msn.com>; Latricea McClendon-Hunt
                @pldolaw.com>; Lana Lopez
                                                @pldolaw.com>; Maria Masotta
                                                                                     @drmariamasotta.com>;
                  @pldolaw.com>; Mohamedu Jones
                                                           @pldolaw.com>; Mary Perrien
Matt Lopes
Patricia M. Willi ms
                            @gmail.com>; Rachel Gribbin
                                                                @pldolaw.com>; Regina Costa
                                                   @gmail.com>; Steve Raffa
      @pldolaw.com>; Rod Hickman Gmail
                                                                                  @pldolaw com>; Timothy
                  @h tmail m>; Ponciano, Angela@CDCR
                                                                         @cdcr.ca.gov>
Rougeux
Subject: RE: Col man - COVID 19 Emergency Plan to Provide Mental Health Care [IWOV-DMS.FID6429]
```

All,

We were surprised to read in Christine's email from yesterday afternoon that all transfers to ICF PIPs from SAC have been suspended as of Wednesday, as it was not disclosed on our call yesterday. Please confirm that this is accurate and provide us with more details. Please also clarify whether Acute transfers from SAC have also been cut off.

If Defendants have restricted access to higher levels of care for class members at any institutions, it is important that we and the Special Master be informed promptly.

Thank you.



All,

The memo circulated earlier has been reissued and revised. The current version is attached. The final bullet on page two was revised to read:

Patients in isolation and/or quarantine will not attend groups but shall be provided with therapeutic treatment packets, workbooks, and other in cell activities and shall receive daily rounding by at least one of the following designated staff to include: CNA, Psychologist, LVN, Recreational Therapists, PTs, RNs, or Social Workers.

Nick Weber Attorney Department of Corrections & Rehabilitation 1515 S Street, Suite 314S Sacramento, CA 95811-7243

Exhibit 24

From: Nick Weber

Sent: Tuesday, March 31, 2020 1:50 PM

To: Lisa Ells; Steve Fama; Coleman Team - RBG Only; Donald Specter; Elise Thorn; Tyler

Heath; Lucas Hennes; Adriano Hrvatin; Kyle Lewis; Melissa Bentz; Hessick,

Jerome@CDCR; Neill, Jennifer@CDCR; Toche, Diana@CDCR; Bick, Joseph@CDCR; Daye, Eureka@CDCR; Christine Ciccotti; Raddatz, Antonina@DSH-S; Kent, Kristopher@DSH-S; Angie Cooper; Brian Main; Cindy Radavsky; Henry D. Dlugacz; James DeGroot; Jeffrey Metzner; Karen Rea-Williams; Kerry Courtney Hughes, MD; Kerry F. Walsh; Kristina Hector; Lindsay Hayes; Latricea McClendon-Hunt; Lana Lopez; Maria Masotta; Matt Lopes; Mohamedu Jones; Mary Perrien; Patricia M. Williams; Rachel Gribbin; Regina Costa; Rod Hickman Gmail; Steve Raffa; Tim Rougeux; Ponciano, Angela@CDCR

RE: Coleman - Inpatient Census and Waitlist Report/Out of ULD LRH

Lisa,

Subject:

Below is a table showing those at SAC with a current referral to a PIP. The table reflects two additional class members over timeframes () than I reported earlier, as the table below was generated today.

CDCR#	LAST NAME- FIRST INITIAL	АРР/ІСБ	Total Days since MHUM HQ Approval Sent
		ICF	35
		ICF	34
		ICF	32
		ICF	33
		ICF	26
		ICF	19
		ICF	14
		APP	13
		ICF	13
		ICF	13
		APP	11
		APP	11
		APP	7
		APP	6
		APP	6
		ICF	4

Case 2:90-cv-00!	20-KJM-I ICF	DB Docu	ment 6587-1	Filed 04/08/20	Page 108 of 108
	APP	4			

From: Lisa Ells <LElls@rbgg.com> Sent: Tuesday, March 31, 2020 1:14 PM @cdcr.ca.gov>; Steve Fama <sfama@prisonlaw.com>; Coleman Team -To: Weber, Nicholas@CDCR **RBG Only** @rbgg.com>; Donald Specter @prisonlaw.com>; Elise Thorn @doj.ca.gov>; Lucas Hennes @doj.ca.gov>; Tyler Heath @doj.ca.gov>; Adriano Hrvatin @doj.ca.gov>; Kyle Lewis @doj.ca.gov>; Bentz, Melissa@CDCR @cdcr.ca.gov>; Hessick, Jerome@CDCR @cdcr.ca.gov>; Neill, Jennifer@CDCR @cdcr.ca.gov>; Toche, Diana@CDCR @cdcr.ca.gov>; Bick, Joseph@CDCR @cdcr.ca.gov>; Daye, Eureka@CDCR @cdcr.ca.gov>; Christine Ciccotti @dsh.ca.gov>; Raddatz, Antonina@DSH-S @dsh.ca.gov>; Kent, Kristopher@DSH-S @dsh.ca.gov>; Angie Cooper @gmail.com>; Cindv @pldolaw.com>; Brian Main Radavsky @gmail.com>; Henry D. Dlugacz @blhny.com>; James DeGroot @gmail.com>; Jeffrey Metzner @cuanschutz.edu>; Karen Rea-Williams @gmail.com>; Kerry Courtney Hughes, MD @aol.com>; Kerry F. Walsh <kwalsh@pldolaw.com>; Kristina Hector @pldolaw.com>; Lindsay Hayes @msn.com>; Latricea McClendon-Hunt @pldolaw.com>; Lana Lopez @pldolaw.com>; Maria Masotta @drmariamasotta.com>; Matt Lopes @pldolaw.com>; Mohamedu Jones @pldolaw.com>; Mary Perrien @aol.com>; Patricia M. Williams @gmail.com>; Rachel Gribbin @pldolaw.com>; Regina Costa @gmail.com>; Steve Raffa @pldolaw.com>; Rod Hickman Gmail @pldolaw.com>; Timothy Rougeux @hotmail.com>; Ponciano, Angela@CDCR o@cdcr.ca.gov> Subject: RE: Coleman - Inpatient Census and Waitlist Report/Out of ULD LRH

CAUTION: This email originated from outside of CDCR/CCHCS. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Thanks Nick. Which MHCB is Mr. in currently?

We'd appreciate the updated SAC pending inpatient referral list (like the one you sent last week) when you can generate it. Thanks.

```
From: Weber, Nicholas@CDCR
                                            @cdcr.ca.gov>
Sent: Tuesday, March 31, 2020 12:54 PM
               @rbgg.com>; Steve Fama
To: Lisa Ells
                                              @prisonlaw.com>; Coleman Team - RBG Only
        @rbgg.com>; Donald Specter
                                            @prisonlaw.com>; Elise Thorn
                                                                                    @doj.ca.gov>; Tyler Heath
            @doj.ca.gov>; Lucas Hennes
                                                    @doj.ca.gov>; Adriano Hrvatin
                                                                                                @doj.ca.gov>;
Kyle Lewis
                                                             @cdcr.ca.gov>; Hessick, Jerome@CDCR
                    @doj.ca.gov>; Melissa Bentz
               @cdcr.ca.gov>; Neill, Jennifer@CDCR
                                                               @cdcr.ca.gov>; Toche, Diana@CDCR
            @cdcr.ca.gov>; Bick, Joseph@CDCR
                                                         @cdcr.ca.gov>; Daye, Eureka@CDCR
            @cdcr.ca.gov>; Christine Ciccotti
                                                             dsh.ca.gov>; Raddatz, Antonina@DSH-S
                 @dsh.ca.gov>; Kent, Kristopher@DSH-S
                                                                     @dsh.ca.gov>; Angie Cooper
                                               @gmail.com>; Cindy Radavsky <
        @pldolaw.com>; Brian Main
                                                                                     @gmail.com>; Henry D.
Dlugacz
                @blhny.com>; James DeGroot
                                                         @gmail.com>; Jeffrey Metzner
                 @cuanschutz.edu>; Ka en Rea Williams <
                                                                  @gmail.com>; Kerry Courtney Hughes, MD
        @aol.com>; Kerry F. Walsh
                                         @pld | w _m>; Kristina Hector
                                                                               @pldolaw com>; Lindsay Hayes
         @msn.com>; Latricea McClendo Hunt <
                                                             @pldolaw.com>; Lana Lopez
                                                                                              @pldolaw com>;
                    @drmariamasotta com>; Matt Lopes <
                                                              @pldolaw.com>; Mohamedu Jones
Maria Masotta
```