CORONAVIRUS CRISIS AT
ELKTON: PART V.
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by
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July 1st: More testing (our third round) same as was the case on June 22nd, but this time only one section, the quarantine section, was tested. Rumor had it that there were fewer nurses on hand this time, and that would continue to be the case at the FSL. I viewed this to be a follow-up round of testing to the second round in June. I had thought this until all the rest of us were called to test.

July 2nd: Around ten people were called and moved to isolation. We had rec. A staff member told my cube mate that staff were not being made to test themselves for Coronavirus. Staff were not being tested!

July 3rd: Around eight to ten more people were moved to isolation. To me, this was a contradiction of the staff's actions from June 25th. I had realized -- an assumption, really, because we still hadn't been given any more explanation for their actions but from that confusing memo from June 19th -- that this must be the BOP's attempt at contact tracing. Another ludicrous move on their
part, if we agree that the virus had been here since February or March. And don't forget all of the rearranging done since then, too. Four months, weeks of what I view as unorganized planning, and we were back to day one, March 27th, essentially. And that memo, as confusing as it was, when re-read to try and add clarity to these recent moves, amounted to even less sense.

Where to begin? We were told that, as of June 25th, that there were now three types of areas: Isolation (the old quarantine), Quarantine (the new quarantine), and General Population. But Answers 1 and 2 of the June 19th memo do not clearly depict these types, imply, maybe, but not outright stated. And the 14-day count would get somewhat convoluted as testing -- from missing test kits that added delay to wide window waiting period on results -- continued, trying to be seven days apart but stretched beyond a reliable schedule. And we would only know of our results based on if we were made to move or not. And then there was the concept of contact tracing I had begun to suspect as part of their plans. It seemed you could test negative but still be in (or moved to) quarantine/isolation because you lived near someone who had tested positive. The memo fails to address those who have been to quarantine multiple times, currently or previously.

I believe the May round of testing (the first round) was just to sample the population. Then they saw that nearly half of the initial tests were positive and stopped. It would be nearly two months before the next round of testing began.

July 4th: A few -- maybe two -- were taken to isolation. No recs. was a beautiful day, saw a few fireworks that night.

July 5th: No rec.
July 7th: We did have rec. Rumor was that more testing was conducted on those in isolation.

And around this time, the 6th or 7th of July, the counts had changed. During "normal operations," on weekends, a standing count at 4:00 p.m. and 9:30 p.m. -- just like through the week -- are conducted. But on weekends, too, a 10:00 a.m. count is done. During this lockdown, starting on March 28th, they had conducted a 10:00 a.m. count every day. Then, around the 6th or 7th, that stopped and Monday through Friday they conducted a census count at 9:00 a.m. and 1:00 p.m. -- no standing required. It was so out of the norm for the past several weeks that I had hardly noticed it at first. And it may seem like a minor change but it was a step back towards normalcy.

July 8th: An early (8:30 a.m.) round of testing (the fourth) began. This time we did not leave the housing unit and go to Health Services but, instead, were told to line up by a small TV room within our section as two nurses administered the tests. (There is near a hundred people in each section, remember.) The medical team worked their way through each section.

And we started to receive longer rec times.

July 9th: They tested those who had not received a test the day before because their assigned kits were missing from the pile. A few are released from isolation to quarantine.

And once again, extra emphasis was made that we wear our masks when outside the unit -- again, too, no worry or fuss over wearing masks where it is most crowded: the unit. Why all the excitement? The warden was back, standing outside at mainline (the line for
lunch) not making any attempt to speak to us or inform us as to staff's plans.

And we had rec.

July 10th: A few were sent to isolation, I believe, Rec--

Yes.

July 11th: Maybe more were moved to isolation. Rumor was that if you were being released to halfway house, you would be put in quarantine — a separate quarantine area — and had to test negative two times in a row before you would be released.

July 12th: No rec.

July 13th: An hour of rec. I knew that some guys had been in isolation — even way back when it was called quarantine — for three weeks, coming on a full month, and felt that surely, some would be released soon.

July 14th: Round number five of testing, Rec.

July 16th: Five to six were moved to isolation, Rec. And some time on the 13th or 14th of July, pill line and insulin line were starting to be conducted not a medical but at the selly parts of the housing unit, Stairwell times.

July 18th and 19th: No rec. No rec on weekends was becoming the trend.
July 20th: Five were moved to the Visitation room or to isolation. Some expected our section to become normal again.

July 21st: Five were moved to quarantine -- moved from isolation to quarantine. Several more moved to general population.

July 22nd and 23rd: We had rec.

July 24th: One guy was scheduled for release that day, but for some reason was kept in a separate isolation -- probably he was to go to a halfway house, though I had heard people say he had gotten compassionate release. Anyway, his absence messed up the staff's 4:00 p.m. count, repeatedly. It took nearly an hour and an extra pair of staff to clear the count -- and the guy was brought back to the section so as to try and correct the count, we had rec.

July 25th: I felt that there were similarities in the way the U.S. government and the BOP were (poorly) handling the collective crisis of COVID-19; not enough action/preparation early on, the closings/ openings mirroring our rearrangements of housing assignments. And I would later come to believe the truth in what was being said on the news -- that leadership from the top was important and that we had been receiving poor leadership. Possibly the BOP's slow response in February and March was an echo of the President's slow approach. And if so, I can see officials and agencies using the Executive branch's poor action as an excuse to cover their own failings. And there were the test kits. What deals with what companies were being made? After reading an article in TME
magazine about Maryland's actions to acquire kits, I thought they
might not have to have been the month of the first
round of testing. That, perhaps, March or April could have been the
start of testing here at Elkton. Was it business or incompetency
or a surving of both that allowed late action and several to die?

July 28th: Perhaps the most important day next to March
27th. Can you hear the trumpets, cheers and echo of applause? I
can't either. That's because there is little to celebrate. The whole of
the FSL was declared general population. Seven guys, though, were
still testing positive and moved to the Chapel. It was a chaotic mess
as four sections -- well over three hundred people -- helped to sort
ourselves back to our original housing assignments. Only two dollies and
two carts were available to help in the transitioning of property
and lockers across halls and up and down stairs.

Several times since the 25th of June, with each forced
move, tension between some prisoners flared. Constantly being reassigned
temporary housing and living with new people and arguing over seniority,
I am surprised a fight never broke out. A handful of people, though,
were taken to the SHU for refusing to either live in their assigned
cubicle or refusing to let someone live with them. At the FEC, I
could imagine fights and arguments breaking out easily. It gets stressful,
not being kept up to date, having to move on short notice, interacting
with new people, etc. Not to mention being swabbed constantly. That
for four solid months. And it is a bit odd hearing about shortages of
test kits, yet, suddenly, there are enough for us to be tested weekly,
plus some.

I would like to believe things could have been different,
been a little less stressful and more informative and organized.
Perhaps -- just maybe -- back in March, had staff come in earlier and, through guaranteeing us that those sick would not be moved to the SHU, that they took the time to survey each of us, asking what symptoms we had or had had, logging the information down and maintaining a layout of our housing, there would be a more concise record of this event. That there would be more trust. Fewer hospitalizations and deaths. Maybe even preventing the virus's spread throughout Elkton. But in March, overcrowding conditions and absence of hand soap and masks and a lack of informative information concerning the virus and no posted plan -- none of that was here until it was too late to be proactive and implement preventative measures.

July 29th: As the month closes I am left with one particular worry. On July 26th, Trust Fund posted a memo: "Masks are mandatory on the compound and while shopping in the commissary. Failure to wear a mask will forfeit your shopping for the week."

I understand the importance of wearing a mask. It is to prevent the spread of your sickness to others -- though the FSH is a (mostly) recovered compound, but I doubt Health Services as any true grasp on who has had the virus, who has never had it and who is recovered. My beef with the memo is that second sentence. Because of a health concern they are happy to restrict commissary for seven days, thus restricting access to medication and hygiene items. It's also an unclear statement. Each prisoner has an assigned shopping day -- they'd be losing a day and then would have to wait a week to shop again. Of course, I am assuming the statement speaks on an individual basis, though it could be viewed as a group punishment -- Elkton Louis group punishments.
seen as the best way to produce results — thus not preventing a single person but a whole section.

Why restrict fever reducers, cough syrup, etc.? And with the flu season coming, a possible second wave of COVID-19. I doubt, strongly, that medical will willingly hand out over-the-counter medications, for fear or otherwise, as a substitute source to commissary. They stated they would not issue new or replacement masks, even though policy and one into sheet they posted in March/April imply otherwise. No access to sanitary wipes or hand sanitizer? Really?

And this all brings up another concern: how will the BOP handle the flu season? If someone has a fever, will they be moved to the SHU, as was the standard practice pre-coronavirus lockdown?

Will they have a way to differentiate between influenza and COVID-19? Fuzzy is in seeing what benefit there is after these long months.

Earlier I mentioned the absence of key items and steps back in March. That is an all too common thing about Elkton’s staff’s reluctance to address an issue or take preventative action. I have witnessed on many occasions medical staff dismiss or ignore health concerns of prisoners — this pre-coronavirus too, which is why March played out the way it did, like waking in the middle of the night, home on fire, and only then trying to formulate a plan.

I don’t believe Elkton or BOP have learned one single lesson from this crisis, and as seeing that our country is not out of the woods yet, further harm through poor planning can still happen within the BOP. Only legislative changes by Congress can remedy this deplorable state the BOP has created.
On July 22nd the warden posted a new memo. It did help to clarify the confusing June memo, though, again, clarification coming too late to be of much help. The memo says:

"We continue to work our way towards a virus recovered compound and we are making substantial progress. We now have thirteen general population units and three isolation units."

I believe he is speaking of both the FSL and FCZ.

"Testing has slowed down, if you are now in a GP unit and scheduled testing is complete. There are a couple of scenarios that could change this (occurrence of symptoms, CDC/BOP guidance changes, upcoming release, a close contact test positive before releasing, etc.) but you are considered clear. If you are in isolation or quarantine, you will continue to test until you meet the current guidance for recovery."

That would be testing negative twice -- and in a row, presumably.

"We are beginning to move everyone back to their original units when positive. If you are nearing release, you will be moved to the tent that is placed on the recreation pad on the compound for a release quarantine period (which is different than an exposure quarantine) for a period of at least 14 days."

The tent must be at the FCZ, for ours has long since been removed. And "release quarantine" individuals are being kept at the FSL, in a tiny psychology room.

"As you are aware, we have been able to provide some recreation time each day during the week. We will continue to do this until the BOP provides further guidance. Programming and visiting is still suspended at this time. Although we are recovering locally, the virus is still heavily impacting the west/
Southwest areas of the country."

A federal prison has become even more so a warehouse, with nothing productive to do.

"we cannot let our guard down or get complacent. All of the provided guidance and restrictions continue to be in place until further notice. Better your face cover is mandatory inside and out, hand washing, covering your cough/sneeze, maintaining distance from one another, telling someone that you aren’t feeling well, and maintain a high level of sanitation in your living area is extremely important."

I would like to believe that about not letting our guard down but I don’t see the BOP, or Elkon, maintaining all aspects of safety guidance in “virus recovered compound[s].”

"we are very close, let’s finish this!"

There is no “finishing” this-- don’t let your guard down, remember? see what I mean? They’re itching to have the crisis officially stamped as OVER and, too, to have the attention off their backs. Going back to “normal operations” is not a good thing if you are carrying along the old attitude—quarantine measures and item supplies, too.

For July I only have two questions:

What have we learned?

Where will we go from here?

--- end part II ---