MEMORANDUM

To: Wardens and Superintendents

From: A. David Robinson  
Chief of Corrections Operations

Subject: COVID-19-Related Inmate Grievances & Reports of Possible Symptoms

Effective immediately, Wardens and Superintendents must ensure attention to two areas of inmate management as part of the Department’s COVID-19 response:

A. Prioritized Response to COVID-19 Grievances

The following categories of informal complaints, regular grievances, and emergency grievances must be handled on a priority basis.

Specifically, if a staff member receives a grievance on a COVID-19-related topic, as described below, an investigation and response to that grievance should be expedited and provided to the offender as soon as practicable.

Please note that the grievance process at your facility should not be suspended during the pendency of the COVID-19 pandemic, and you should continue accepting and processing all grievances to the best of your abilities. As always, please ensure that appropriate documentation is maintained with respect to the grievance investigation, as well as the timely and complete response.

COVID-19-related grievance topics include, but are not necessarily limited to, the following:

- Request for medical assessment or treatment related to COVID-19 symptoms
- Access to free soap and cleaning supplies, showers, and handwashing
- Access to appropriate personal protective items (i.e., a sneeze guard or surgical droplet mask), relative to the Risk Zone of an offender’s assigned area access
- Concerns over sanitation, as covered by the Department’s current Enhanced Sanitation Plan
- Concerns regarding possible exposure to COVID-19 from other offenders, activities, or facilities
- Concerns over routines in place at the inmate’s location due to modified lockdown or lockdown conditions because of COVID-19, as covered by the Department’s Pandemic Response Plan.
• Concerns about staff members not adhering to the requirements of the Pandemic Response Plan, such as complaints about staff members not wearing appropriate protective equipment, inadequate social distancing, mingling of offender groups, etc.

B. Proper Response to Offender Reports of Possible COVID-19 Symptoms

Responses to inmate complaints regarding COVID-19 symptoms must be made promptly by facility staff, medical staff, and their supervisors.

Please ensure that your staff members have been instructed that possible COVID-19 symptoms may include the following: headache, cough, shortness of breath, body aches, fatigue, chest tightness, fever, chills, muscle pain, sore throat, nausea, vomiting, diarrhea, or loss of sense of smell or taste.

Response to inmate complaints regarding COVID-19 symptoms should include, at minimum, the following:

• Staff receiving any complaint of symptoms from an offender should immediately take steps to ensure that the offender is screened for symptoms, involving supervisors if needed
• Staff should work with on-site medical staff to immediately assess the offender, in accordance with the COVID-19 Medical Guidelines
• Staff must ensure that offender complaints of COVID-19 symptoms, as well as any response to those complaints, are documented on a timely and accurate basis, to facilitate any reply to a subsequent informal complaint, regular grievance, or emergency grievance
• Medical staff must ensure that documentation of sick call or any other medical assessment related to COVID-19 symptoms is documented in the inmate’s medical record
• Wardens/Superintendents should work closely with the Unit’s Health Authority to ensure that appropriate sick call or other medical assessments related to COVID-19 are being conducted and documented on a timely basis, as covered by the Department’s COVID-19 Medical Guidelines

Unit Heads and Health Authorities should be in contact with their regional office as appropriate to ensure expedited and responsive handling of inmate concerns and complaints related to COVID-19.

cc: Harold W. Clarke, Director
    Joseph W. Walters, Deputy Director
    H. Scott Richeson, Deputy Director
    Regional Operations Chiefs
    Regional Administrators
    Steve Herrick, Health Services Director
    Medical Authorities
    Lisa Kinney, Communications Director
    Randall Mathena