

Case No. S261827

IN THE SUPREME COURT OF THE STATE OF CALIFORNIA

NATIONAL ASSOCIATION OF CRIMINAL DEFENSE
LAWYERS, CALIFORNIA ATTORNEYS FOR
CRIMINAL JUSTICE, and YOUTH JUSTICE COALITION,

Petitioners,

v.

GAVIN NEWSOM,
California Governor, in His Official Capacity
and XAVIER BECERRA,
California Attorney General, in His Official Capacity

Respondents.

**PETITIONERS NATIONAL ASSOCIATION OF CRIMINAL
DEFENSE LAWYERS, CALIFORNIA ATTORNEYS FOR
CRIMINAL JUSTICE, AND YOUTH JUSTICE COALITION'S
APPENDIX OF EXHIBITS VOLUME 4 OF 4 - PAGES 649 - 785**

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PROOF OF SERVICE

At the time of service, I was over 18 years of age and **not a party to this action**. I am employed in the County of Los Angeles, State of California. My business address is 350 South Grand Avenue, Fiftieth Floor, Los Angeles, CA 90071-3426.

On April 24, 2020, I served true copies of the following document(s) described as

**PETITIONERS NATIONAL ASSOCIATION OF CRIMINAL DEFENSE
LAWYERS, CALIFORNIA ATTORNEYS FOR CRIMINAL JUSTICE,
AND YOUTH JUSTICE COALITION'S APPENDIX OF EXHIBITS
VOLUME 4 OF 4 - PAGES 649 - 785**

on the interested parties in this action as follows:

SEE ATTACHED SERVICE LIST

BY ELECTRONIC SERVICE: I electronically filed the document(s) with the Clerk of the Court by using the TrueFiling system. Participants in the case who are registered TrueFiling users will be served by the TrueFiling system. Participants in the case who are not registered TrueFiling users will be served by email as listed in the service list.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on April 24, 2020, at Los Angeles, California.



Anna Velasquez

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1 **DECLARATION OF PATRICIA LEE**

2 I, Patricia Lee, hereby declare:

3 1. I make this declaration based on my own personal knowledge and information
4 derived from my position as the Deputy Public Defender for the San Francisco Public Defender’s
5 Office. If called to testify I could and would do so competently as follows:

6 2. I am licensed to practice law in the state of California. I have been a Deputy
7 Public Defender in San Francisco for nearly 30 years. I am the managing attorney for the
8 Juvenile Division of the San Francisco Public Defender’s Office. I am the Chairperson of the San
9 Francisco Board of Supervisors Committee to Close Juvenile Hall, and also serve on the Mayor’s
10 Blue Ribbon Committee to Reform the Juvenile Justice System.

11 3. As the managing attorney for the Juvenile Division of the San Francisco Public
12 Defender’s Office, my responsibilities include direct supervision of attorneys, social workers,
13 investigators, paralegals, clerical, and community programming in the Bayview and Western
14 Addition of San Francisco. I also provide training opportunities for our attorneys to ensure that
15 they are MCLE compliant to be appointed to represent youth in juvenile court.

16 4. During the health emergency, fundamental educational and rehabilitative
17 programs in juvenile detention facilities have completely halted, despite rehabilitation being the
18 central goal of the juvenile justice system.¹ For example, community-based organizations, which
19 typically provide our young persons with positive programming, social-emotional services, and

20 _____
21 ¹ Many counties have not significantly reduced spending on juvenile detention, despite data
22 reflecting a dramatic reduction in violent crime by young people in California over the last 20
23 years. Further, over the past eight years, the annual cost of incarcerating a youth in juvenile hall
24 in California has doubled to an average of \$284,700. *Jill Tucker and Joaquin Palomino,*
25 *“Vanishing Violence: Juvenile hall costs skyrocket,”* San Francisco Chronicle (April 26, 2019),
26 <https://www.sfchronicle.com/news/article/Vanishing-Violence-Cost-of-locking-up-a-youth-in-13793488.php>. When adding indirect expenditures, such as administrative and maintenance
27 costs, San Francisco probation officials determined that the city’s annual price to incarcerate a
28 youth last year was \$374,000, which is significantly higher than the overall state average. *Id.* These are high costs not only for California, but for our youth, who currently lack access to the
rehabilitative programming they are due.

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1 mentorship, are currently barred both from visiting facilities and video- or tele-communicating
2 with youth. The loss of this channel of support, compounded with the inability to receive family
3 visits, is not only devastating and traumatic for our youth, but reinforces feelings of mistrust and
4 loneliness, likely evaporating any progress made prior to the emergency.

5 5. Detained youth with existing mental health issues have been hit particularly hard
6 by the isolating effects of the emergency. As programming ceases and the juvenile hall attempts
7 to comply with social distancing guidelines, young people are spending longer periods in
8 isolation.

9 6. It has been brought to my attention that youth who may be ill are quarantined in
10 their cells until their symptoms subside. This has created panic amongst the youth and their
11 families fearing their children will be infected with the COVID-19 virus. During the “Shelter in
12 Place” order, a detained girl was the only female held in detention for nine days in the girl’s unit.
13 Without any educational or community based programming, and the lack of social contact with
14 any peers, her detention during those nine days was solitary confinement by default.

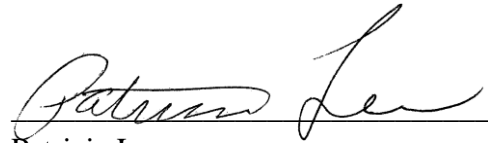
15 7. On April 2, 2020, Governor Newsom announced that schools would be closing,
16 likely for the remainder of the school year, but that our children’s educations would continue
17 through alternatives, like distance learning plans. Many youth across the state now receive
18 education via online instruction or comprehensive school packets provided to students at home.
19 However, this shift has revealed a critical gap – for all students to continue to receive meaningful
20 instruction, internet and Wi-Fi access is essential.²

21 8. At present, there are many young people in the halls who lack access to internet,
22 laptops, and other basic technology that would allow them to continue their educations. As a
23 result of the shift to distance learning, significant challenges have also presented themselves for
24 students who rely on interventions, accommodations, and specialized instruction to support their

25
26 ² See Sydney Johnson, “Thousands of California students still without laptops and Wi-Fi for
27 distance learning,” EdSource (April 7, 2020), [https://edsource.org/2020/thousands-of-california-
28 students-still-without-laptops-and-wi-fi-for-distance-learning/628395](https://edsource.org/2020/thousands-of-california-students-still-without-laptops-and-wi-fi-for-distance-learning/628395) (discussing the cruciality
of internet access for all students and quoting the State Superintendent’s position that “every
student should have access to the internet”).

1 learning needs. Youth are not receiving their individualized accommodations required through
2 their Individual Education Plans in detention and those with mental health disabilities are
3 deteriorating in custody.

4 I declare under penalty of perjury of the laws of the State of California and the United
5 States that the foregoing is true and correct. Executed this 22nd day of April, 2020 in San
6 Francisco, California.

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9 Patricia Lee
10 Managing Attorney, Juvenile Unit
11 San Francisco Public Defenders Office

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1 **DECLARATION OF LEANDREW LEWIS**

2 I, Leandrew Lewis, certify under penalty of perjury that the following statement is true
3 and correct pursuant to 28 U.S.C. § 1746.

4 1. My name is Leandrew Lewis. I am 28 years old and incarcerated in the
5 North County Correctional Facility in Los Angeles County.

6 2. I am diabetic, and I have had high blood pressure for years. I also suffer
7 from bronchitis whenever I get a cold. When that happens, I have trouble breathing
8 unless I use an inhaler.

9 3. I have been incarcerated awaiting trial since November 13, 2019. The
10 reason I am incarcerated is because my family and I are too poor to afford the bail
11 amount in my case.

12 4. I have been trying to defend my innocence, and my attorney and I are ready
13 to go to trial. The trial was scheduled for today, April 13. But I was not taken to court,
14 and when my lawyer went to court in Antelope Valley today the judge said the trial date
15 had been moved to June 11. I am worried they will keep delaying my trial and I will be
16 stuck here. I want to take my case to trial and prove my innocence, but I am terrified I
17 will get infected with the coronavirus while I wait for that in jail.

18 5. It is impossible for me to protect myself from being infected with the
19 coronavirus while in jail. I am currently confined in a dorm along with 60 or so other
20 people, packed too close to keep distance from each other. On or around the week of
21 April 13, 2020, for reasons that were not explained to us, the deputies moved the 30 or
22 people in my previous dorm, including me, into another dorm that already had about 30
23 other people living there. We are now all housed in a dorm that has about 66 beds. This
24 new dorm is almost filled to capacity. The movement may have been related to the fact
25 that almost all the dorms near me have stickers on the front that say “no movement in or
26 out”, which I think means that that the dorms are in quarantine for COVID-19.

27 6. I sleep on the bottom bunk, below two other inmates. The bunks are
28 separated only by a couple feet from each other. The bunks are so close that if I reach an

1 arm out on either side of the bunk, I can immediately touch the next person. We spend
2 our time within arm's reach of each other.

3 7. We were provided brown cloth masks on or around April 16, 2020 and told
4 by the deputy to wear it only when leaving the dorm. Deputies have not provided hand
5 sanitizers or masks. People are regularly coughing and sneezing in the dorm within a few
6 feet of me, including the people in the beds that surround me.

7 8. Everyone in the dorm shares showers and urinals. There is no professional
8 cleaning of the shared showers. There is a mop bucket near the showers that has some
9 kind of soap in it, but the showers are not cleaned between uses.

10 9. The jail collects our laundry about once a month or so. Until that happens,
11 we have to keep using the same uniforms, sheets, and the single towel we are given. All
12 these items come in close contact with other people, but I am unable to keep them clean.
13 The last time I received clean laundry was the end of March or so.

14 10. I do not know have much information about coronavirus because the jail has
15 not been telling us much anything. Every day or so, the jail plays recorded video that
16 mentions coronavirus and says there are no positive cases in the facility. It is the same
17 recorded video they keep playing.

18 11. I try to watch out for people who are sick and avoid them best I can. I don't
19 want to get sick and I am trying to protect myself. But the truth is I'm not able to keep
20 distant from others here in the jail.

21 12. At least three times in the past few weeks, I have seen people who have a
22 cough or cold symptoms in my dorm go out with a medical pass to obtain medical
23 treatment, and then they did not return. They might be infected with coronavirus, but I
24 do not know because no one tells us. They don't let us know anything.

25 ///

26 ///

27 ///

1 13. If I was released from jail, I could stay with my family. I would stay with
2 my mom, and my sister and other family could pick me up or arrange for someone to do
3 that. If I wasn't in jail, I would be able to quarantine. But in here, I know I am at risk of
4 getting sick, and I am very afraid.

5
6 I declare under penalty of perjury under the laws of the State of California and the
7 United States of America that the foregoing is true and correct. Executed this 18th day of
8 April 2020, in Los Angeles, California.

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11 
12 Leandrew Lewis

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Daniel Macallair
Center on Juvenile and Criminal Justice
424 Guerrero Street, Suite A
San Francisco, CA 94110

DECLARATION OF DANIEL MACALLAIR

I, Daniel Macallair, hereby declare:

1. I am the Executive Director of the Center on Juvenile and Criminal Justice, a nonprofit direct service and policy organization based in San Francisco, CA.
2. I serve as a Practitioner-in-Residence in the Department of Criminal Justice Studies at San Francisco State University, teaching courses on juvenile and adult corrections policy.
3. With over thirty years of experience in the juvenile justice field, I have conducted extensive research on conditions of confinement and implemented model community corrections programs across the country.
4. I make this declaration based on my expertise and personal experience.
5. The COVID-19 pandemic is exacerbating shortcomings in youth detention and confinement, including deficits in rehabilitation, healthcare, safety, and other conditions of confinement.¹
6. Youth in juvenile facilities are exposed to traumatizing conditions² and rely on contact with family, socializing with peers, school, and programming to support their well-being.
7. However, precautionary measures to slow the spread of COVID-19 include halting family visits, in-person schooling, and rehabilitative programs.
8. Decreased programming and limits on contact with loved ones hinder the foundational elements for rehabilitation, a primary goal of the juvenile justice system.
9. Epidemiologists warn that juvenile facilities are likely to experience dangerous COVID-19 outbreaks and recent research indicates that the virus may pose a greater risk of severe illness to young people than scientists once thought.^{3,4,5}

¹ Washburn, M. & Menart (2020). A Blueprint for Reform: Moving Beyond California's Failed Youth Correctional System. At: http://www.cjcb.org/uploads/cjcb/documents/blueprint_for_reform.pdf.

² Abram, K.M., Teplin, L.A., Longworth, S.L., McClelland, G.M., & Dulcan, M.K. (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. *Archives of General Psychiatry*, 61(4), 403-410.

³ Miller, L. (2020). Youth in detention should be released to reduce coronavirus risk, advocates say. At: <https://www.latimes.com/california/story/2020-03-17/fearing-harmful-effects-of-virus-juvenile-justice-attorneys-push-for-clients-release>.

⁴ Dong, Y., et al. (2020). Epidemiological Characteristics of 2143 Pediatric Patients With 2019 Coronavirus Disease in China. At: <https://pediatrics.aappublications.org/content/pediatrics/early/2020/03/16/peds.2020-0702.full.pdf>.

⁵ Belluck, P. Younger adults make up big portion of coronavirus hospitalizations in the U.S. At: <https://www.nytimes.com/2020/03/18/health/coronavirus-young-people.html>.

10. Immediate action is required to safeguard youth in juvenile facilities—including county juvenile halls, camps, and ranches, as well as the state’s Division of Juvenile Justice (DJJ)—which are unable to ensure youth’s safety during the COVID-19 pandemic.
11. It is critical that youth in state-run DJJ facilities be included in protective actions for all youth in California’s juvenile facilities.
12. Youth in DJJ facilities are highly susceptible to contagious illnesses given the facilities’ structural deficiencies. Large populations exceeding 150 youth⁶ are being held in decaying and unsanitary buildings.⁷
13. Youth in DJJ facilities have daily physical contact with one another, particularly in dangerous open dormitory units,⁸ and are subjected to substandard conditions within their living units, including communal bathroom areas.
14. California must act now to slow the spread of COVID-19 and protect youth from the harm of isolation and violence, which may worsen amid the current crisis.
15. We must ensure the health and safety of youth currently in all juvenile facilities by (1) indefinitely halting all new admissions, and (2) releasing all youth to return home or to transition into non-congregate residential placements, with particular expediency for youth who are medically vulnerable or already nearing their anticipated release date.

I declare that the above information is true and correct to the best of my knowledge. Executed this 23rd day of April, 2020.

Daniel Macallair



Executive Director, Center on Juvenile and Criminal Justice

⁶ National standards set a maximum population of 150 youth in juvenile facilities. See: American Correctional Association (ACA). (2003). Standards for Juvenile Correctional Facilities.

⁷ Washburn, M. & Menart (2019). Unmet Promises: Continued Violence and Neglect in California’s Division of Juvenile Justice. At: http://www.cjck.org/uploads/cjck/documents/unmet_promises_continued_violence_and_neglect_in_california_division_of_juvenile_justice.pdf

⁸ Office of Juvenile Justice and Delinquency Prevention (OJJDP). (1994). Conditions of Confinement: Juvenile Detention and Corrections Facilities. At: <https://www.ncjrs.gov/pdffiles1/ojjdp/1FrontMat.pdf>.

DECLARATION OF FERNANDO A. MALDONADO

I, Fernando A. Maldonado, hereby declare:

1. I make this declaration based on my own personal knowledge and if called to testify I could and would do so competently as follows:

2. I am 30 years old.

3. I am currently housed at the Theo Lacy Facility (“Theo Lacy”), which is part of the Orange County Jail in Orange, California.

4. I have been in Orange County Sheriff’s Department (“OCSD”) custody since about January 31, 2020.

5. I am in custody for a technical probation violation for failure to appear for a probation meeting.

6. My sentence was 180 days, which means I will likely serve 90 days in custody.

7. My release date is April 29, 2020.

8. I am currently housed in a two-person cell with another individual. The cell we share is about six by ten feet. It contains two beds (bunk bed style), a toilet, sink and drinking fountain combination, a table and two stools.

9. It is not possible for me and my cellmate to maintain six feet distance from each other when we are in our cell, which is for most of the day, about 21 hours.

10. Our cell is so cramped we often take turns being out of our bed. We call it floor time. During my floor time, he stays on his bed, and I stay on mine during his floor time to avoid getting in each other’s way. Even then it is impossible for us to be six feet away from each other.

11. I have the top bunk and he has the bottom bunk. When we sleep, we are about two to three feet away from each other. Our bunks are so close that we can reach other’s bunk when we lay down.

12. We eat our three meals a day in our cell.

13. As of April 17, there are about 19 people in our housing sector, including me and my cellmate. Our housing sector is made up of 16 two-person cells. Eight cells on the top tier and

1 eight cells on the bottom tier. Seven two-person cells are occupied by two people, five two-
2 person cells are occupied by an individual person, and four two-person cells are empty.

3 14. On average, I share a dayroom and two showers with 18 other people who are housed in
4 the same housing sector. Custody staff runs dayroom four cells at a time, which means between
5 four to eight people at once. However, the dayroom, including showers and telephones are used
6 by up to 19 people each day. This concerns me because there is limited access to cleaning
7 supplies throughout the day.

8 15. I am not able to maintain six feet distance from other people when I am on the
9 telephone. We have four telephones available in our sector. The telephones are about two feet
10 away from each other. I try to wipe down the phone before I use it to be careful about the spread
11 of germs and possibly COVID-19.

12 16. Custody staff provides us with a single bar of soap per week. The soap runs out within
13 three days. When I run out, I ask other people in custody for supplies or rinse my hands and
14 shower with only water.

15 17. Custody staff provided us with torn sheets to use as face coverings. I wash it every night
16 to maintain cleanliness, sometimes with only water.

17 18. I do not have access to hand sanitizer.

18 19. I do not have access to gloves.

19 20. I have Hepatitis C. I contracted it about five years ago while in the custody of the
20 California Department of Corrections and Rehabilitation (“CDCR”).

21 21. I have a history of childhood asthma. I had moderate asthma from the ages of 5 to 16.

22 22. I have a 17-year history of smoking cannabis. I started smoking when I was 13 years
23 old. I also started using vape pens about 8 or 9 years ago to smoke cannabis.

24 23. As of today, I have 12 days remaining on my sentence. I do not understand why I have
25 not been released early.

26 24. I declare under penalty of perjury of the laws of the State of California and the United
27 States that the foregoing is true and correct to the best of my knowledge and belief.
28

1 25. Because of the coronavirus, and my confinement, I was not able to sign this declaration
2 in person. The declaration was read to me, over the phone, by Jacob Reisberg on April 17, 2020.
3 I understood and verified its contents in full, and authorized Jacob Reisberg to sign the
4 declaration on my behalf. Executed on April 17, 2020 in Los Angeles, California.

5
6 _____/s/ Jacob Reisberg_____

7 Signed by Jacob Reisberg on behalf of
8 Fernando A. Maldonado
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1 **DECLARATION OF KIM MCGILL**

2 I, Kim McGill, hereby declare:

3 1. I make this declaration based on my own personal knowledge and information
4 derived from the Youth Justice Coalition (YJC), its membership, and resources. If called to
5 testify I could and would do so competently as follows:

6 2. I am an Organizer at YJC and also one of 62 co-founders. I have worked at YJC
7 since its inception seventeen years ago.

8 3. YJC is a petitioner in this litigation.

9 4. YJC is a non-profit corporation organized and existing under the laws of the State
10 of California. YJC was founded in 2003 with the mission of building a movement led by system-
11 involved youth, families, and currently and formerly incarcerated people to challenge race,
12 gender, and class inequality in Los Angeles County’s and California’s juvenile and criminal
13 court and custody systems.

14 5. YJC brings together incarcerated and formerly incarcerated youth and adults,
15 family members, and the larger community to build leadership, improve conditions of
16 confinement in California, dismantle harmful law enforcement policies and practices, and
17 challenge LA’s and California’s addiction to incarceration. We use direct action organizing,
18 public policy development, advocacy, public education, and media messaging to bring about
19 change at the municipal, county, state, and, occasionally, at the national level.

20 6. YJC operates a community center and high school in South Central Los Angeles
21 that is a free alternative to incarceration and a re-entry resource for people who are under
22 probation supervision, who have to meet court-ordered conditions and/or programs, or who are
23 returning home from juvenile halls, camps, jails, and youth and adult prisons. YJC’s High
24 School, in operation for over eight years, serves as an experiential organizing training program
25 that also provides comprehensive, full-day, educational programs for youth aged 15-24 who have
26 been pushed out of other schools, or are returning to the community from juvenile halls, camps,
27 jails, and prisons.

28 7. To prevent and reduce the impact of system contact, YJC holds bi-monthly free

1 legal clinics and provides participatory defense/court support to hundreds of people and their
2 families each year in juvenile court, criminal court, traffic court, civil court, and immigration
3 court. We also train more than 2,000 youth, parents, teachers, and community members yearly
4 on what to do when stopped or contacted by law enforcement or Immigration, Customs, and
5 Enforcement (ICE).

6 8. YJC has fought and led, alongside diverse coalitions, to dismantle deeply rooted
7 systemic racism, oppression, discrimination, and mass-incarceration, including school push-out
8 and over-criminalization of youth, especially youth of color. YJC envisions a society where,
9 among other things, all youth receive their human rights to youth development, transformative
10 justice, and a comprehensive and holistic system of supports, including a quality education that
11 prepares everyone for college and/or a career.

12 9. YJC engages in statewide and local coalition building to (a) end the “war on
13 gangs,” or, more accurately, a war on youth and communities of color, (b) work with loved ones
14 that have been killed by law enforcement, (c) end gang databases, gang injunctions, gang
15 enhancements, and crimmigration, and (d) challenge the forced merging of the yards by the
16 California Department of Corrections and Rehabilitation (CDCR).

17 10. YJC is deeply involved in statewide legislation to further the mission and policy
18 focuses referenced above. This includes advocacy in Sacramento, with legislators, and with
19 agency heads like CDCR Secretary Ralph Diaz. YJC is also a key partner in statewide coalitions
20 like the Alliance for Boys and Men of Color and the California Alliance for Youth and
21 Community Justice and in national coalitions like All of Us or None, the Alliance for
22 Educational Justice, the National Juvenile Justice Network, the Community Justice Network for
23 Youth, the Campaign for the Fair Sentencing of Youth, and the National Dignity in Schools
24 Campaign to secure a transformative justice model for youth.

25 11. I have extensive personal, organizing and advocacy experience in what is referred
26 to as the juvenile “justice” system. Like other YJC members, staff, and teachers, I, and members
27 of my family, have first-hand experience with arrest, court, detention and incarceration. This
28 work is essential for my own survival and progress, that of our families, our members, and our

1 community.

2 12. YJC is a membership organization with more than 23,000 system-involved youth,
3 families, formerly incarcerated people, and allied organizations throughout California. In
4 addition, YJC has more than 4,000 members inside the state's prison system.

5 13. The COVID-19 crisis has generated substantial concerns for our members given
6 the effect on their health and safety, as well as their due process rights, consistent with their state
7 and federal constitutional rights. Mass incarceration, including mass incarceration of people of
8 color, has also generated profound concerns about the disparate impact of the COVID-19 crisis.
9 The over-criminalization and pushout of youth of color from schools and into the juvenile and
10 criminal system has ensured that these same youth are now most at risk for exposure to the virus
11 and are also being denied access to the resources, preventive measures, and treatment needed to
12 survive it. Thus, addressing the immediate needs and rights of youth in carceral facilities during
13 this national pandemic is at the core of our mission.

14 14. The COVID-19 virus directly affects YJC members, including by placing
15 members, their families, and communities at heightened risk of infection when they are detained
16 in juvenile halls, camps, out-of-home placements, or juvenile prisons, all facilities where social
17 distancing is difficult or impossible to implement, where medical care was already often sorely
18 inadequate, where rehabilitative programs and education have come to a devastating halt, and
19 where full day lockdown and isolation exacerbate the unacceptable trauma already inflicted on
20 youth. YJC is engaging in a community effort and movement to release youth and create human
21 policies that address and dismantle the failed response by officials to protect the health, due
22 process rights and the lives of young people in their facilities. YJC is helping members advocate
23 for members' health and safety in the context of COVID-19.

24 15. Contacted early on by people who were locked up and the families of people
25 inside, YJC has also created and disseminated best practices in the context of COVID-19,
26 compiling resources related to COVID-19 advocacy, including information, letters, declarations,
27 documents, and other court papers related to COVID-19. YJC has mobilized our membership of
28 youth and families along with organizations to organize and advocate for the release of youth

1 from juvenile facilities, with the aim of helping youth, including medically vulnerable youth, get
2 out of halls, camps, and other juvenile facilities, while also improving conditions in juvenile
3 facilities where the risk from COVID-19 is high. YJC's advocacy includes reaching out to and
4 seeking prompt and effective solutions from statewide leaders like Governor Gavin Newsom, his
5 staff, California's senators and assemblymembers, Senate and Assembly committee chairs, to
6 local leaders, including the Los Angeles Board of Supervisors, the Los Angeles County Office of
7 Education, the Los Angeles County Probation Chief, Deputy Chiefs and Sheriff, District
8 Attorney Jackie Lacey, and many more.

9 16. In addition, YJC is mobilizing communities, coordinating public forums, car
10 rallies, social media, and outreach to mainstream media to push state and county officials to
11 address COVID-19's devastating impact on youth in juvenile facilities. Over 100 participants
12 attended each of the first two public forums on March 25th and April 8th. In each online event,
13 state and local officials were invited to address the community's critical concerns about the
14 impact of COVID-19 on youth in juvenile facilities, as well as to share their office's efforts to
15 protect and release young people.

16 17. YJC members include current and formerly detained or incarcerated youth and
17 adults throughout California who:

- 18 • Fit within the Center for Disease Control's definition of people medically vulnerable
19 to COVID-19, because
 - 20 ○ they suffer from underlying health conditions (such as chronic lung disease,
21 asthma, HIV, immunocompromised, severe obesity, and diabetes) that place
22 them at heightened risk of severe illness from COVID-19.
- 23 • Are serving terms in juvenile facilities.
- 24 • Are being detained in juvenile facilities because they had been released on probation,
25 but have been picked up on technical violations of their conditions (for example,
26 conduct that violates the conditions of probation but would not otherwise constitute a
27 criminal offense, such as a failure to report, failure to appear for or failure to pass a
28 required drug test, failure to complete community service in an allotted time, failure

1 to attend school or counseling, or failure to maintain a certain GPA).

2 18. Through my work with YJC, I regularly learn about our members' concerns and
3 questions. In addition, I co-coordinate the YJC's free legal clinic twice a month and provide
4 participatory defense to families and defendants, attending court with people an average of 8
5 times a month. As such, I receive dozens of calls, texts, and letters each week from youth and
6 adults who are detained or incarcerated, as well as from family members.

7 19. In my role at YJC, it is clear that there is an incredible public need to address the
8 conditions in juvenile facilities to ensure that COVID-19 does not continue to spread and put
9 young people's health and lives at dire risk.

10 20. My own experience confirms what experts have stated – that juvenile facilities are
11 not designed, constructed, or managed in ways that readily allow social distancing or other
12 protective measures, and that even juvenile facilities that take some precautions do not or cannot
13 follow protections regularly.

14 21. For example, during the week of March 9th, I received numerous panicked
15 communications from parents whose children were in Probation custody at juvenile halls and
16 camps. They had received little to no information about the COVID-19 virus from Probation, and
17 were deeply concerned about the health and safety of their children. At least one parent
18 expressed great concern because of her past experience with Probation, who failed to handle a
19 wildfire evacuation crisis at Sylmar (Barry J. Nidorf) Juvenile Hall in a timely and humane
20 manner. In that instance, and again under the COVID-19 pandemic, according to families, youth
21 with asthma and other respiratory illnesses did not receive masks, preventive care, or treatment,
22 even when they exhibited difficulty breathing.

23 22. Over the years, I have seen diseases that had been mostly eradicated or were
24 easily treated in the general population sweep through county and state carceral facilities with
25 devastating and deadly consequences, including staph infections, tuberculosis, HIV, hepatitis,
26 and Valley Fever.

27 23. I began to lodge complaints related to COVID-19 concerns and have had
28 conversations with officials regularly, including the Inspector General's Office.

1 24. During the week of March 9th, the calls I received from people in jails, prisons,
2 and juvenile halls and camps and prisons also started to include questions about COVID-19 and
3 complaints that the Probation Department, Sheriff's Department, county officials, and the
4 California Department of Corrections and Rehabilitation were not sharing any information about
5 the virus, how it is contracted, or how best to protect oneself in a carceral setting, and facilities
6 were not giving people greater access to hygiene, hand sanitizer, disinfectant and cleaning
7 supplies. Call after call revealed the same experience – that people were only learning about
8 COVID-19 from calls with family and friends or from the TV news.

9 25. Many of the youth in halls and camps are being locked up without programming
10 and are there for 707a charges, or probation violations.

11 26. In the midst of the most dangerous pandemic experienced in more than 100 years,
12 California's most vulnerable youth have been abandoned by the very public agencies responsible
13 for their care. They are denied visits. They receive few phone calls home. Many are locked up
14 for hours in an unhygienic cell. They are denied education. And yet, they are grouped together to
15 eat and shower. They share communal spaces. In many facilities, youth sleep in large and
16 crowded dorms. They are deprived of hand sanitizer, soaps and regular access to water. Caging
17 people at all times is inhumane. Caging people during a pandemic is deadly. Young people have
18 a human right to programs that are rooted in comprehensive youth development, trauma
19 informed, and focus on healing and transformative justice. Instead, California youth, in conflict
20 with the law, are trapped in systems that exacerbate trauma and harm.

21 27. As described above, throughout the COVID-19 crisis, YJC has communicated
22 with family members whose loved ones are locked up, and we have been on phone calls with
23 people in custody. These events and conversations raise consistent concerns as to the inability of
24 county officials to quickly assess and release people, or to uphold the health, safety, and due
25 process rights of youth and adults in custody or in court.

26 28. The mother of a son who is detained at Barry J. Nidorf (Sylmar) Juvenile Hall has
27 communicated to me that her son has only received one call a week using the payphones.
28 Recently, in his unit, the payphone was broken, so he could not get in contact with his mother.

1 Court hearings are being cancelled and postponed. Parents and guardians are panicked each time
2 they call that a young person could be infected.

3 29. One parent reported that, at the Barry J. Nidorf facility's unit for youth transferred
4 to adult court known as "the compound," young people are being locked in their cells for hours
5 each afternoon. They are getting some educational packets, but her son has little to occupy his
6 time and his mind.

7 30. Parents are sharing that youth are "going crazy" and "have nothing to do." Youth
8 complain that they have "no puzzles, no books, no notepaper, no coloring books or crayons."
9 Until very recently, youth have had no masks. Even in the few circumstances we have heard that
10 a mask was provided, this has not happened in all of the juvenile facilities, nor have any youth
11 that we know received more than one mask during this entire period. They may occasionally get
12 hand sanitizer only if they ask staff and staff chooses to provide it, and then only a few drops in
13 their hand. They have to ask to use the bathroom and are often ignored. So regularly washing
14 hands is not possible. When cells are locked, sometimes people pee on their floor or into a sheet
15 out of desperation.

16 31. At Eastlake Juvenile Hall, parents and youth were afraid. They were seeing the
17 news of staff testing positive at Sylmar and 21 youth being under quarantine. Now at least two
18 staff have tested positive and more than 40 youth have been quarantined at Sylmar. Families
19 were not getting updates from Probation. But what they know, they get from the news or rumors
20 shared with them from their children inside. We heard from parents that youth had been moved
21 from Sylmar to Eastlake (Central Juvenile Hall), causing some panic among the youth and staff
22 at Eastlake given the COVID-19 outbreak at Sylmar.

23 32. A parent whose son is at Camp Kilpatrick was concerned that her son, who was
24 serving the minimum camp term of 5-7 months, has been at the facility since January. This was
25 his first conviction, and she wonders why he hasn't been released. At probation camps, social
26 distancing is impossible in the small dorm-like facilities. The youth had no access to online
27 learning, despite the fact that the facility has computers with Internet for all the youth. The youth
28 there had no masks or access to sanitizer.

1 33. Although still in court pre-disposition or pre-sentencing, youth who turn 18 are
2 being transferred from juvenile hall to county jail. One youth recently transferred to Wayside –
3 Pitchess Detention Center, North Facility – and is in a dorm with 96 people. There is no social
4 distancing. A YJC member detained in that same dorm called to say that there is nothing you can
5 use to clean phones, tables, bathrooms, chess pieces, playing cards, and other items that are
6 touched hundreds of times each day without any disinfecting. They do not get disinfectant or
7 additional cleaning supplies. He reported, “You can get Clorox wipes and cough drops if
8 someone from outside buys you a package. But those are small quantities and only last for a few
9 days. We take the cleaning solution that comes into the dorm each morning for us to mop the
10 floors, add water to it, and distribute it to everyone in bottles. That’s how we stretch cleaning
11 supplies. For the first time yesterday, the staff came in with masks on. We have no masks. The
12 deputies told us, 'Don't panic. We are doing this for your protection.' A lot of people are sick here
13 - coughing, sneezing, runny noses - but no one is getting removed or tested that I see. If you ask
14 for medical help, you don't get a real check-up. Also, people are scared to say they are sick,
15 because they are afraid they will be sent to the hole. Some people are being released with court
16 dates. But, I still see a lot of people here with low charges - like an 18-year-old who is here on
17 vandalism charges.”

18 34. In response to the calls directly from jails and prisons, parents’ calls and texts
19 about juvenile halls and camps, my experiences reaching out to officials to support people in
20 custody, going with people to court, and the rising numbers of infections both in LA’s court and
21 detention systems, and in facilities throughout California, YJC took a number of actions to try to
22 change local and statewide policies and practices.

23 35. YJC has engaged in a comprehensive state-wide advocacy effort to (a) demand
24 release of all youth detained on status offenses, misdemeanors, low-level felonies, probation
25 violations, and bench warrants, (b) stop new detentions for these offenses and transfers to
26 juvenile halls, camps, and out-of-home placements, (c) petition the court to review all other cases
27 for release, (d) end the collection of all system fees and fines to avoid violations for nonpayment
28 and to recognize the challenge in paying any fees with the stay at home requirement, (e) ensure

1 access to quality education for youth in custody, (f) end transfers to ICE, (g) end transfers from
2 juvenile halls to jails, and (h) ensure free phone calls, stamps, masks and disinfectant for all.

3 36. YJC has also engaged in a media campaign to attract local and statewide attention
4 to this matter. YJC organized press conferences, issued letters to officials, mobilized hundreds of
5 messages to officials through social media, organized a car rally that included hundreds of cars
6 surrounding the DA's office and largest superior court in Los Angeles County, all in order to
7 raise attention and demand the release of youth from juvenile halls, camps and county jails.

8 37. Frustrated by the courts', the District Attorney's, the Probation Department's,
9 state legislators', and the governor's unresponsiveness and failure to address the dire impact
10 COVID-19 has had on youth, I proposed an online community forum with officials to create
11 public updates, ensure greater transparency and accountability, and enable dialogue between
12 officials and the media, community organizations, organizers, advocates, formerly detained and
13 incarcerated people, and families. I worked with other YJC members as well as with Public
14 Counsel, the ACLU of Southern California, and Loyola Law School and coordinated two online
15 forums as described earlier – each attended by more than 100 people.

16 38. Despite these state and county efforts, the governor, the courts, the county
17 prosecutors and other officials, and the probation departments, have not released a reasonable
18 number of people from juvenile halls and camps, not taken the steps necessary to uphold the
19 health, safety, access to education and access to family through free phone calls and stamps; and
20 not upheld the due process rights of young people.

21 39. It is unconscionable that the richest state in the nation and the 5th richest economy
22 in the world is not protecting its young people and their families during the most significant
23 health emergency of our time.

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I declare under penalty of perjury of the laws of the State of California and the United States that the foregoing is true and correct. Executed this 17th day of April, 2020 in Los Angeles, California.



Kim McGill
Organizer
Youth Justice Coalition

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1 **DECLARATION OF ROBERT MILLER**

2 I, Robert Miller, hereby declare:

3 1. I make this declaration based on my own personal knowledge and if called to testify I
4 could and would do so competently as follows:

5 2. I have been in custody in the Yuba County Jail since January 24, 2020.

6 3. I am 30 years old.

7 4. I have a serious lung condition called spontaneous pneumothorax, which is collapsing of
8 the lung. I also have been experiencing chest and back pain since I have been in jail. On one
9 occasion, two or three weeks ago, I had symptoms of spontaneous pneumothorax including
10 difficulty breathing, chest and back pains, and high blood pressure. Jail medical staff were so
11 concerned about these symptoms and the results of an EKG test that I was taken from the jail to
12 a local emergency room. At the ER they ran tests including x-rays and an ultrasound. I was
13 treated and released at the ER after about 4 to 5 hours, but was told to return if my symptoms
14 persisted. Subsequent to this ER visit, I have continued to suffer similar symptoms, including
15 chest and back pain, but the jail medical staff has been dismissive of my complaints. Before I
16 was transferred to the ER an officer came within inches of me, in order to place shackles on me.
17 Neither of us was wearing a mask.

18 5. On April 3, 2020, I was convicted following a plea of no contest to charges of domestic
19 violence and driving a vehicle in violation of Vehicle Code § 10851(a). It is my understanding
20 that my scheduled release date is currently July 18, 2020.

21 6. In custody I am housed in a double cell about the size of a parking space. I had a cell
22 partner until April 9, 2020, when he was released. It is possible that another person could be
23 housed in my cell again.

24 7. Up until last week, when I had a cell partner, we shared a toilet and sink in our cell.
25 There is not six feet of free space in the cell and it is impossible for me to stay six feet away
26 from my cell partner, should another one be assigned while I am confined here.

27 8. I share a dayroom and showers with about 30 people on average who are housed in the
28 same housing area, D-pod.

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1 9. On some occasions, when our cells are locked down, we eat meals in our cells. At other
2 times, currently about twice a week, I eat meals with 4 to 5 other people in a common area of D-
3 pod. At these times, there is not six feet of space between us. We are given six hours of time
4 outside our cells when we are allowed in the common area of D-pod, with about 15 or 16 other
5 people. There is no realistic possibility of physical distancing of at least six feet during this out-
6 of-cell time.

7 10. I do not have access to gloves.

8 11. Other than Windex, I do not have access to cleaning supplies, including disinfectant.

9 12. I do not have access to hand sanitizer.

10 13. The only reason I have sufficient soap to wash my hands regularly is because I purchase
11 it with my own funds from the jail commissary. One bar of Dove soap costs \$2.50.

12 14. Although we have requested face coverings, I am not provided with a mask or other face
13 covering.

14 15. I have not received instruction from custody staff about how we can protect ourselves
15 from COVID-19.

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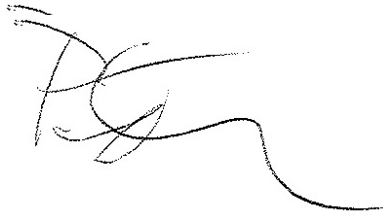
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16. I am concerned about my health and the risks COVID-19 pose to my life. I know that COVID-19 can cause severe respiratory problems and even death for people like me who have pulmonary conditions.

17. I declare under penalty of perjury of the laws of the State of California and the United States that the foregoing is true and correct to the best of my knowledge and belief.

Because of the coronavirus, and my confinement, I was not able to sign this declaration in person. The declaration was read to me, over the telephone, by my attorney, Carter White, with Peter Eliasberg on the phone with us on April 15, 2020. I understood and verified its contents in full, and authorized Peter Eliasberg to sign the declaration on my behalf.

Executed on April 15, 2020, in Marysville, California.



Signed by Peter Eliasberg, SBN 189110
on behalf of Robert Miller

Document received by the CA Supreme Court.

DECLARATION OF DAVID MUHAMMAD

I, David Muhammad, declare as follows:

1. I am the Executive Director of the National Institute for Criminal Justice Reform, based in Oakland, California. NICJR works to reduce incarceration and violence, improve the outcomes of system-involved youth and adults, and increase the capacity and expertise of the organizations that serve these individuals. NICJR provides technical assistance, consulting, research, organizational development, and advocacy in the fields of juvenile and criminal justice, youth development, and violence prevention. NICJR is currently working in several jurisdictions across the country and in California on violence reduction and criminal justice reform initiatives.
2. I am the former Chief Probation Officer of Alameda County, California, and the former Deputy Commissioner of the New York City Department of Probation. As a former leader of a youth justice agency, I am part of the Steering Committee for Youth Correctional Leaders for Justice (YCLJ). The Steering Committee serves as a resource to the youth corrections field, engaging in an array of technical assistance, guidance, research and policy activities in order to advance reform. Earlier this month, YCLJ issued *Recommendations for Youth Justice Systems During the COVID-19 Emergency* signed on to by 32 current and former youth correctional administrators throughout the country recommending measures youth justice systems could take to avoid the inadvertent spread of the coronavirus into and out from youth correctional facilities.¹
3. COVID-19 is a serious, highly contagious disease that is particularly likely to spread in juvenile detention and correctional settings. According to the most recently available information, hundreds of COVID-19 cases have been confirmed among incarcerated individuals and facility staff members in adult and juvenile correctional settings across the United States.² Incarcerated individuals have reported confirmed cases of COVID or COVID-like symptoms in 48 states, and deaths at 26 facilities across the country.³
4. Worldwide, catastrophic COVID-19 outbreaks have already occurred. Data released on February 29 showed that almost half (233 out of 565) of new infection cases out of Wuhan, China were inmates in the city's prison system.⁴ Iran released 54,000 prisoners to address the pandemic.⁵ The spread of the disease on cruise ships, churches, nursing

¹ Retrieved on 4/15/20 from <https://yclj.org/covid19statement>.

² Timothy Williams et al., 'Jails Are Petri Dishes': Inmates Freed as the Virus Spreads Behind Bars, New York Times (March 30, 2020), available at: <https://nyti.ms/2Jmnf4z>.

³ COVID Behind Bars, last visited 4/15/20, https://www.google.com/maps/d/u/0/viewer?mid=1cAMo2yrrmxupUZ_IJVBuuZO4UizfVxm8&ll=40.09352283139395%2C-86.87937406451238&z=4.

⁴ ZI Yang, *Cracks in the System: COVID-19 in Chinese Prisons*, The Diplomat (March 9, 2020).

⁵ BBC News, *Coronavirus: Iran temporarily frees 54,000 prisoners to combat spread* <https://www.bbc.com/news/world-middle-east-51723398> (March 3, 2020).

homes and in malls further highlights the dangers of keeping multiple people enclosed in a confined space.

5. As Alameda County Probation Chief, I oversaw the county's juvenile detention facility and its juvenile camp, Camp Sweeney. During my career, I have visited juvenile detention facilities in 12 California counties and six state correctional juvenile facilities. I have been a consultant with five of those jurisdictions.
6. California's juvenile custodial facilities include facilities operated by the state and the individual counties. California's Department of Corrections and Rehabilitation (CDCR), Division of Juvenile Justice (DJJ) operates three correctional facilities and a conservation camp, and in December 2018 had 661 youth in its custody.⁶ Most of California's counties operate local juvenile facilities, which include juvenile halls and camp/ranch facilities.⁷ In December 2019, the combined average monthly population for these facilities was 3,621 youth, with an average monthly juvenile hall population of 2,416 youth and an average monthly camp/ranch population of 1,202 youth.⁸ These county facilities are subject to the minimum standards set by the California Board of State and Community Corrections (BSCC).⁹
7. Youth in California's juvenile justice facilities, including local detention or treatment facilities, such as juvenile halls, camps, or ranches, state facilities, and private facilities, live, eat, learn, and spend almost all of their time in close contact with each other. These facilities are, in many respects, designed for exactly the opposite of the physical distancing measures required by this pandemic. A myriad of living arrangements can be found in youth justice facilities, from single cells or rooms to double celling or bunking to large dorm-type sleeping arrangements, with a dozen or more youth sleeping in one large room in close quarters. Facilities generally include shared bathroom and showering facilities, dining facilities, and day rooms. Programs and education, necessary for rehabilitation and the safe and secure operation of such facilities, almost always occur in groups and in spaces that rarely allow for distancing. Of course, in facilities in which youth sleep in dormitory settings, they are almost constantly congregated with one another.
8. Youth justice facilities generally do not have the capacity to ensure the hygiene and sanitizing necessary to protect from the spread of COVID-19. In many cases, youth do not even have regular access to soap and water that would allow them to wash hands when they sneeze, cough, prepare to eat, touch an object, or go from one room to another. Youth typically do not have access to hand sanitizer. Ventilation is often inadequate. And

⁶ California Department of Corrections and Rehabilitation, Office of Research, *Characteristics of the Division of Juvenile Justice Population 1* (Dec. 2018).

⁷ See Welf. & Inst. Code §§ 850, 852, 881.

⁸ Board of State and Community Corrections, *Juvenile Detention Profile Trends 2-4* (March 11, 2020), available at <https://www.bscc.ca.gov/wp-content/uploads/JDPS-Trends-1Q2002-3Q2019.pdf>.

⁹ Welf. & Inst. Code §§ 210, 210.1.

the facilities are not staffed sufficiently to ensure that all surfaces will be regularly cleaned and disinfected.

9. Youth justice facilities typically lack the medical staffing, and often the physical capacity, to hold young people in a safe medical quarantine. Relying on nearby hospitals risks overwhelming local, often rural, health systems; failure to properly treat infected youth risks facility-wide exposure.
10. Youth in the justice system tend to be less healthy than their peers. They have more gaps in Medicaid enrollment and higher rates of asthma and other medical vulnerabilities¹⁰ that can increase the severity of COVID-19.¹¹
11. Failing to properly address the justice system's role in the spread of and exposure to COVID-19 will disparately impact Black, Latino, and Indigenous youth. Research consistently shows racial disparities in rates of incarceration. For example, in 2017, Black and native youth were incarcerated at 5.8 and 2.5 times the rate of white youth.¹² In 2015, Latino youth were 1.7 times more likely to be incarcerated than white youth.¹³ Research has shown that these disparities reflect differential treatment from our justice system rather than differing youth behaviors.¹⁴
12. In California, youth of color face a much higher likelihood of institutional placement as compared to white youth, even when controlling for type of offense.¹⁵ As compared to white youth, African-American youth are 7.5 times more likely to be ordered to institutional placement, and Latino youth are 2.5 more likely.¹⁶ The disproportionate representation of African-American youth in California's juvenile facilities raises additional concerns about the dangers presented by COVID-19. Preliminary data has

¹⁰ Matthew C. Aalsma et al., Preventive Care Use Among Justice-Involved and Non-Justice-Involved Youth, *Pediatrics* (Nov. 2017).

¹¹ Centers for Disease Control, *What to Know About Asthma and COVID-19*, https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/asthma.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fasthma.html.

¹² Sickmund, Melissa, T. J. Sladky, W. Kang, and Charles Puzzanchera, *Easy Access to the Census of Juveniles in Residential Placement*, Bureau of Justice Statistics. Washington, DC: U.S. Department of Justice (2019), available at https://www.ojdp.gov/ojstatbb/ezacjrp/asp/State_Facility_Operation.asp?state=59&topic=State_Facility_Operation&year=2017&percent=rate; Puzzanchera, Charles, Sladky, A., and Kang, W., "Easy Access to Juvenile Populations: 1990-2018." Office of Juvenile Justice and Delinquency Prevention. Washington, DC: U.S. Department of Justice (2019), available at https://www.ojdp.gov/ojstatbb/ezapop/asp/profile_selection.asp

¹³ The Sentencing Project, *Still Increase in Disparities in Juvenile Justice*, 2017 available at <https://www.sentencingproject.org/news/still-increase-racial-disparities-juvenile-justice/>.

¹⁴ Pope, Carl E., Rick Lovell, and Heidi M. Hsia. *Disproportionate Minority Confinement: A Review of the Research Literature from 1989 Through 2001*. Juvenile Justice Clearinghouse/National Criminal Justice Reference Service. Rockville, MD: Office of Juvenile Justice and Delinquency Prevention (2002), available at <https://www.ncjrs.gov/App/Publications/abstract.aspx?ID=198428>.

¹⁵ Wong, A. & Ridolfi, L., *Unlocking opportunity: How race, ethnicity and place affect the use of institutional placements in California* 4 (January 2018), available at <https://www.burnsinstitute.org/wp-content/uploads/2018/01/Unlocking-Opportunity.pdf>.

¹⁶ *Id.*

shown that black people have been disproportionately affected by the virus, and according to one analysis made up 42% of deaths despite constituting approximately 21% percent of the population covered by the analysis.¹⁷

13. Youth correctional facilities require high levels of staffing and are generally staffed in shifts, with program, educational, health/mental health, and custody staff frequently rotating through these facilities three times a day, seven days a week. Like youth, these staff will have a very difficult time maintaining physical distance from the youth, risking carrying the virus into, or out from, the facility from their home communities. Some California juvenile facilities face significant understaffing.
14. Once they, their families and youth in the facilities begin to fall ill or test positive, staff will likely begin calling in sick, either because they or their family members are ill, or because they fear contracting the virus in a closed setting. Staff will not only be required to quarantine themselves in the event of exposure, but the exposure or contagion of family members may also impede them from continuing to work. This could also exacerbate staff turnover and make staff recruitment more difficult. This, in turn, can thin already stretched staffing complements and endanger remaining youth and staff.
15. Combined, these staff disruptions will inevitably lead to diminished programming for youth, including education or special education, individual or group counseling and other rehabilitative programs. Reduced programming will likely lead to increased depression and frustration of residents. It may also lead to behavior problems in the facility, resulting in decreased safety for both youth and staff.
16. Facilities attempting to comply with physical distancing recommendations to prevent the spread of COVID-19 will, therefore, likely rely instead on isolation of individual youth.¹⁸ Already, in Los Angeles, two facility staff members have tested positive for COVID-19, resulting in forty-three youth being quarantined within the juvenile hall.¹⁹
17. Across California, juvenile facilities have eliminated in-person visitation. For state facilities, DJJ has suspended in-person visitation indefinitely, and to date has made video visitation available in only one of its four facilities.²⁰ For county facilities, the BSCC

¹⁷ Kat Stafford et al., Outcry over racial data grows as virus slams black Americans, Associated Press (April 8, 2020), available at <https://apnews.com/71d952faad4a2a5d14441534f7230c7c>.

¹⁸ Erica L. Green, 'Pacing and Praying': Jailed Youths Seek Release as Virus Spreads, New York Times (April 14, 2020), available at: <https://www.nytimes.com/2020/04/14/us/politics/coronavirus-juvenile-detention.html>.

¹⁹ Leila Miller et al., Second Sylmar juvenile hall employee gets coronavirus; more youths under quarantine, Los Angeles Times (April 6, 2020), available at: <https://www.latimes.com/california/story/2020-04-06/coronavirus-sylmar-juvenile-hall-employee-tests-positive>.

²⁰ California Department of Corrections and Rehabilitation, Division of Juvenile Justice website, <https://www.cdcr.ca.gov/juvenile-justice/>, last visited 4/15/20. ("As part of CDCR's COVID-19 prevention efforts, normal visiting will be canceled statewide until further notice. DJJ values visitation as an essential part of rehabilitation, but at this time the Division must make difficult decisions in order to protect the health and wellness of all who live in, work in, and visit our facilities."); California Department of Corrections and Rehabilitation, Division of Juvenile Justice website, <https://www.cdcr.ca.gov/juvenile-justice/visiting-your-loved-one-with-skype->

issued a memo advising that a suspension of in-person visitation might be warranted where six feet of social distancing could not be maintained.²¹ Following this memo, the BSCC has granted requests from counties across the state to suspend compliance with certain of its juvenile facilities regulations. Limited information about these suspensions has been made available on the BSCC's website, Juvenile Suspension of Standards Dashboard. To date, of the forty-five counties with juvenile facilities, forty have been granted suspension of their compliance with the BSCC's visitation regulations, with five counties moving visitation into "no contact" rooms, and at least thirty-five counties replacing visitation with phone calls or other remote-only contact.²² For example, in Monterey County, youth are being granted 5-minute phone calls to their families each day.²³

18. Many counties have also sought suspension of state regulations regarding rehabilitative programming offered within their facilities. Twenty-eight counties have indicated that their educational programs now rely on packet-based learning.²⁴ Nineteen counties have indicated that facility staff are now providing all programming and/or that outside service providers are no longer able to offer services within the facility.²⁵
19. Withdrawing visitation, reducing or eliminating programs, reducing staffing, and increasing isolation will likely exacerbate facility tension, mental illness and histories of trauma. This, in turn, can dramatically increase the risk of self-harm and is associated with risks lasting into adulthood, including poorer overall general health and increased incidence of suicide.²⁶
20. Eliminating visitation and programming also defeats the rehabilitative purpose of the facilities. Under state law, a commitment to a juvenile facility is permitted to the extent that it is consistent with the rehabilitative purpose of the juvenile court.²⁷ While visitation, education, and other programming are suspended during the pandemic, the rehabilitative goals of a commitment to a juvenile facility cannot be met.
21. Given the physical and staffing constraints of youth justice facilities, the only appropriate way for states to respond to the COVID-19 pandemic is to close intake to detention and

[for-business/](#), last visited 4/15/20. ("Video visiting using Skype for Business is available today, March 26, at Pine Grove Youth Conservation Camp. It may be available at other facilities soon. Below are directions for visiting your loved one through Skype for Business.")

²¹ Memo to Chief Probation Officers and Juvenile Facility Managers from Linda Penner, Chair of the Board of State and Community Corrections, Re: Juvenile Facilities & Coronavirus COVID-19 (March 13, 2020), available at: <http://www.bscc.ca.gov/news/covid-19-and-bscc-juvenile-visitation-guidance/>.

²² Board of State and Community Corrections, Juvenile Suspension of Standards Dashboard, last visited 4/15/20, available at: <https://app.smartsheet.com/b/publish?EQBCT=ba9b83f39b4a46dd9ea8d8a889c56039>.

²³ *Id.*

²⁴ *Id.*

²⁵ *Id.*

²⁶ Casiano, H, Katz, LY, Globerman, D, Sareen, J. (2013). Suicide and deliberate self-injurious behavior in juvenile correctional facilities: A review. *Journal of Canadian Child and Adolescent Psychiatry*, 22(2), 118–124.

²⁷ Welf. & Inst. Code § 202(b).

placement facilities for all but the most serious offending youth and release as many youth as safely possible back to their homes. Yet, BSCC estimates that since April 5, 2020, there have been only 126 youth releases related to COVID-19 statewide.²⁸ Twenty-four counties have not released any youth in response to the pandemic in that same time period.²⁹ The current response to the pandemic in the state's juvenile facilities is insufficient to protect the health and well-being of detained youth.

22. Youth systems should quickly develop and implement individualized transition and aftercare plans to support released youth; and policymakers should augment resources for community programming and access to health care to assure safety and stability for released youth. Families must be provided the access to necessary financial resources to meet the basic needs of their child including adequate housing, food, access to educational supports, and health care.
23. Shifting youth from placement to home is possible, practical, and can be done safely. In New York City and Washington D.C., the vast majority of youth were safely moved out of incarceration and into community programs while ensuring public safety.³⁰ This is true throughout the country; in the overwhelming majority of states, youth incarceration has declined by double-digits. Nationally, from 1997-2017, there has been a 59 percent decline in youth incarceration during which time youth crime has continued to plummet nationally by 71 percent. Because youth incarceration actually worsens youth behavior, prioritizing community-based solutions whenever possible is not only medically-appropriate, but also better for community safety.³¹ Also here in California, San Francisco County reduced its juvenile detention population from an average of 40 youth down to 14 during this pandemic.
24. Additionally, county probation departments across the state are well-positioned to provide release planning services, which have always been within their authority and duty both for pre-adjudicated and post-adjudicated youth.³² Working together with juvenile court partners, families, and service providers, probation departments can ensure that youth are safe and appropriately supported upon release.
25. For those youth who cannot be safely released back to the community, every effort must be made to ensure that youth and staff inside facilities stay safe and healthy. To that end,

²⁸ *Supplemental Juvenile Detention Profile Survey (JDPS)*, Board of State and Community Corrections, <https://app.smartsheet.com/b/publish?EQBCT=e61336ff506a4ca8810eccc0a6909a32>.

²⁹ *Id.*

³⁰ Center for Children's Law and Policy, *Implementing New York's Close to Home Initiative: A New Model for Youth Justice* (2018) available at <http://www.cclp.org/wp-content/uploads/2018/02/Close-to-Home-Implementation-Report-Final.pdf>; Liz Ryan and Marc Schinder, *Notorious to Notable: the Crucial Role of the Philanthropic Community in Transforming the Juvenile Justice System in Washington, D.C.*, <https://www.yumpu.com/en/document/read/41029454/notorious-to-notable>.

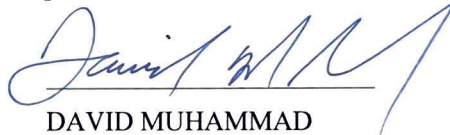
³¹ Anna Aizer, Joseph J. Doyle, Jr., *Juvenile Incarceration, Human Capital, and Future Crime: Evidence from Randomly Assigned Judges*, *The Quarterly Journal of Economics*, Volume 130, Issue 2, May 2015, Pages 759–803, <https://doi.org/10.1093/qje/qjv003>.

³² *See* Welf. & Inst. Code § 628.1, 730(b).

facilities must fully comply with all guidance currently being issued by public health officials, including maintaining social distance, increased handwashing, and frequent disinfecting and sanitization of common areas. Additionally, facilities must support youth during this unprecedented time by providing access to technology to facilitate communications with their families and loved ones, as well as distance learning and other activities aimed at supporting rehabilitation. Youth should have regular access to health and mental health care while in custody during this pandemic period to ensure they can get needed medications and support in a timely manner. Finally, under no circumstances should the current pandemic justify the use of punitive measures, such as room confinement or isolation. These measures cannot be accomplished within California's juvenile facilities without significant population reductions, which can be achieved by effectuating releases and ceasing intakes for youth falling in certain categories.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 23, 2020 at _____, California.



DAVID MUHAMMAD

1 **Declaration of Stephen A. Munkelt**

2 I, Stephen A. Munkelt, hereby declare:

3 1. I make this declaration based on my own personal knowledge and information
4 derived from CACJ membership resources and if called to testify I could and would do so
5 competently as follows:

6 2. I am a criminal defense attorney in Nevada City, California and am the Executive
7 Director of the California Attorneys for Criminal Justice (“CACJ”), a membership organization
8 of criminal defense attorneys practicing in California. With over 1,300 members, CACJ is the
9 nation’s largest statewide organization of criminal defense lawyers and allied professionals.
10 CACJ is a California affiliate of the National Association of Criminal Defense Lawyers, but the
11 two organizations are distinct, with different membership, different officers, and different
12 governing bodies.

13 3. CACJ identifies three specific purposes of the organization: (1) to defend the
14 rights of persons as guaranteed by the United States Constitution, the Constitution of the State of
15 California and other applicable law; (2) to preserve due process and equal protection of the law
16 for the benefit of all persons; to enhance the ability of its members to discharge their professional
17 responsibilities through educational programs, publications and mutual assistance; and (3) to
18 protect and foster the independence of the criminal defense lawyer and to improve the quality of
19 the administration of criminal law. CACJ routinely engages in advocacy to advance justice,
20 fairness, and constitutional protections in the juvenile and adult criminal systems in the courts
21 and the Legislature.

22 4. Our members are incredibly concerned about the current coronavirus pandemic
23 and its effect on our clients, not only for their rights in the criminal court process and the effects
24 on our ability to advocate on their behalf, but also for their health and safety given the direct
25 risks of infection and difficulty getting appropriate medical treatment in most jails. The
26 coronavirus directly affects CACJ members and their clients, including by placing members’
27 clients at heightened risk of infection. CACJ has established a COVID-19 resource center on its
28 website with information and recommendations on the crisis and the response from the Judicial

1 Council, courts, and other government officials.

2 5. Our members represent young people across the state of California who are
3 detained in juvenile halls and camps and within the Division of Juvenile Justice (DJJ) facilities.
4 We are deeply concerned about the health and safety of incarcerated young people as we receive
5 information about inadequate conditions in the juvenile facilities, including a lack of consistent
6 hygiene standards, a failure to meet 6-foot social distancing rules, little to no testing, and limited
7 and irregular access to masks, gloves, and hand sanitizer. Further, our members are increasingly
8 concerned about the mental well-being of their detained juvenile clients, many of whom already
9 suffer from anxiety, depression, and other mental health issues, as they receive reports of
10 increased isolation for extended periods of time throughout the day.

11 6. CACJ has approximately 1,300 attorney members who practice in California.
12 CACJ members handle juvenile and criminal cases in every county in California.

13 7. CACJ members have clients or former clients incarcerated or detained in county
14 jails and juvenile facilities in California who:


- 15 • Fit within the Center for Disease Control’s definition of people medically vulnerable
16 to COVID-19,¹ because
 - 17 ○ they are age 65 or older, or
 - 18 ○ they suffer from underlying health conditions (such as chronic lung disease,
19 asthma, HIV, serious heart conditions, immunocompromised, severe obesity,
20 diabetes, chronic kidney disease undergoing dialysis, liver disease) that place
21 them at heightened risk of severe illness from COVID-19;
- 22 • Are being detained in jail pre-trial because, although a bail has been set pursuant to
23 the statewide Emergency Bail Schedule promulgated on April 6, 2020, the client
24 cannot afford bail;
- 25 • Are serving sentences in county jails and have fewer than 120 days left to serve;

26
27 ¹ See generally, *Coronavirus Disease 2019 (COVID-19) – People Who Are At Higher Risk*,
28 Centers for Disease Control and Prevention, <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html> (last visited April 13, 2020).

- 1 • Are being detained in county jails because they had been released on probation or
2 parole, but have been picked up on technical violations of their conditions (e.g.,
3 conduct that violates the conditions of parole or probation but would not otherwise
4 constitute a criminal offense, such as a failure to report, failure to complete a required
5 drug test, failure to complete community service in an allotted time, failure to attend
6 school or counseling, missing a restitution payment, or failure to maintain
7 employment) and the bail on the underlying conviction is above \$0, and they are
8 unable to post bail;
- 9 • Are being detained in juvenile halls, juvenile camps and ranches, and the Division of
10 Juvenile Justice facilities;
- 11 • Are being detained in county and state custody subject to Immigration and Customs
12 Enforcement (“ICE”) detainers (Form I-247A) requesting that state and local officials
13 notify ICE when the individual is due for release from custody and permit ICE to take
14 custody of the individual at the point they are released from criminal custody. Many
15 individuals are due for release now or soon, at which point they will be subject to
16 transfers to ICE custody and incarceration in ICE detention facilities in California.

17 8. CACJ members have sought and are seeking release of their individual clients to
18 reduce the risk of infection while in custody, and to reduce jail populations in order to create the
19 possibility of social distancing and other protective measures for those remaining in custody as
20 well as juvenile facility and jail staff. These individual efforts cannot be completed quickly
21 enough to protect the health of our clients or to contribute significantly to the mitigation of the
22 first wave of virus infections.

23 I declare under penalty of perjury under the laws of the State of California and the United
24 States that the foregoing is true and correct. Executed this 17th day of April, 2020 in Nevada
25 City, California.

26 
27 _____
28 Stephen A. Munkelt

Declaration of Joshua Neal

1. I, Joshua Neal, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.
2. I am thirty years old.
3. I am currently incarcerated at Santa Rita Jail. I have been in custody since January 6, 2020. I am serving my sentence, and I am scheduled to be released from custody on June 2, 2020.
4. When I was a child, I was diagnosed with asthma. I still currently suffer from symptoms and sometimes have difficulty breathing. I also suffer from back problems.
5. I was previously diagnosed with bi-polar disorder, depression, and post-traumatic stress disorder. I am currently taking medication for my mental health issues. I am currently housed in the behavioral health unit of the jail.
6. I am currently housed in Housing Unit 9F, Cell 3. When I first arrived at this pod, it had only recently been released from quarantine. I do not know what steps were taken to sanitize this pod before I arrived. There are approximately sixteen people housed in this unit. Currently, there are at least three cells in my unit with two inmates. For about two weeks, I was housed in a cell with another person. My cellmate was only recently released on April 14, 2020. The cell next to me is directly adjacent to my cell. It is currently occupied. Deputies are supposed to facilitate cell cleaning every day, but that does not happen every day. Inmates come out for pod time at the same time. When we exit our pods, we are two to three feet away from the inmate next to us. During pod time, there are no restrictions on keeping inmates away from each other. Some inmates sit at the same tables. Some still talk to one another while within six feet from one another.

Deputies sometimes come into our housing unit from other housing units without wearing face masks or gloves. Approximately three days ago, a sergeant and two deputies came into our housing unit without face masks or gloves. They were not socially distancing from each other. They told us that they did not have to wear masks or gloves. There are no restrictions on where people can move within the pods during pod time. I have seen inmates coughing and sneezing in the unit. I have not seen a response from deputies to inmates coughing or sneezing.

7. We are not allowed to go to the yard as a group and are generally restricted to eating in our cells. Phones can be used during pod time, but phones are not wiped down. Railings are not wiped down either.
8. Jail staff has advised us to wash our hands and stay six feet away from other people, but they have not provided us with any other educational information about how to prevent COVID-19 infection. Almost all of the information we receive about the COVID-19 pandemic is from the news. We did not know there were positive cases of COVID-19 at Santa Rita Jail until we heard it on the news. New people are constantly being brought into our housing unit, and we have no idea if they have been tested for exposure to COVID-19 or not.
9. There was a period of four to five days where we received disinfectant wipes at lunchtime. We would only receive them once per day. About two to three weeks ago, that practice stopped, and we no longer receive disinfectant wipes. We were given face masks about one week ago. We have not been given any gloves. We get soap about once every other week. We were not given soap this week or last week.

10. It is difficult to access medical care while incarcerated. Inmates are generally required to put in a “sick call” and may not hear anything unless our request is seen as urgent. In the past, if an inmate had money on his or her books, \$5 was deducted for every medical visit to a doctor or nurse. I am uncertain if this practice still continues.
11. Being incarcerated during the COVID-19 pandemic has been extremely stressful for me and has increased my anxiety tremendously. As mentioned above, I have previously been diagnosed with bi-polar disorder, depression, and post-traumatic stress disorder. Remaining in custody has sent me into various bouts of depression. I have also been having nightmares. My sister and her daughters are living out of their car, and I am extremely anxious about their safety. I feel completely helpless since I am incarcerated and cannot assist them. I have tried to talk to mental health clinicians but have had difficulty receiving help. Around March 21, 2020, I told a deputy that I was struggling and needed to talk to someone from mental health right away. They told me that I had to fill out a message request. I asked again later and was told I had to fill out a sick call. I asked for help a third time, and after receiving no response, I filed a grievance. I finally spoke to someone from the mental health unit yesterday.
12. I recently put in a message request to booking to see if I qualify for early release since I have less than sixty days to serve on my sentence. I was told that the situation changes every day. I asked about my status again recently and was told not to keep asking. I have not received any other advice or information.
13. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct to the best of my knowledge.

14. Because of the coronavirus and my confinement, I was not able to sign this declaration in person. The declaration was read to me, over video call, by Michael Wu, an attorney at the Alameda County Public Defender’s Office, on April 17, 2020. I understood and verified its contents in full, and authorized Michael Wu to sign the declaration on my behalf.”

This declaration is executed at Alameda County, California, this 17th day of April 2020.



Michael L. Wu (SBN: 287367)
for
Joshua Neal (PFN: BGX484)

Document received by the CA Supreme Court.

1 I, ADAM NELSON, declare:

2 1. I was an inmate in Santa Rita Jail, the County Jail for Alameda County. I was
3 released on April 13, 2020.

4 2. I was booked into Santa Rita on December 9, 2019 and housed in Housing
5 Unit 31, one of the units where one or more inmates had tested positive for covid-19. Housing
6 Unit 31 is a dormitory style unit, where the cells are filled with up to 28 bunk beds. There are
7 three cells on the top tier and three cells on the bottom tier. The bunk beds are at most 3 feet
8 apart, so there is no possibility of maintaining social distancing. When full, each housing unit
9 has close to 200 inmates. When I left, the jail had removed some inmates, but we still had
10 between 15-20 men in each cell. Many of the bunk beds only had one occupant, but a few still
11 had two.

12 3. The sanitation in Santa Rita Jail is very poor. Prior to the corona virus
13 outbreak, cells were not cleaned. The jail says they are supposed to provide cleaning materials
14 once a week so inmates can clean our bathrooms and cells. But in my experience, in February,
15 we were provided cleaning materials twice. And the cleaning supplies consisted of a bucket of
16 brown soapy water, and a dirty mop and broom which all the cells were required to use. The
17 mop was the mop used for the bathroom, and so many of the men did not want to use that mop
18 for the cell. The lack of sanitation, particularly of the bathroom was a major complaint of all the
19 inmates. You had twenty-eight men sharing the bathroom, and the bathroom was only cleaned
20 once a month because the jail refused to provide inmates with appropriate clean cleaning
21 supplies and tools.

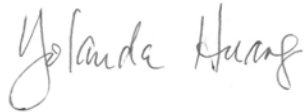
22 4. Only after the coronavirus arrived, the jail started to clean the common areas
23 more often. The common areas are used by all six (6) cells, so hundreds of men. The cleaning
24 involved only spraying the tables, the water fountain, and the telephones with some type of
25 bleach spray, but these items were never wiped clean, with clean paper towels or rags, so the dirt
26 was still on all of these items. And only after the coronavirus arrived did the jail start to make
27 cleaning supplies available more often, approximately once every three (3) days. However, the
28 cleaning supplies remained dirty brown soapy water and the dirty broom and mop.

1 5. Before the coronavirus, the jail did not provide soap. Inmates were required to
2 buy soap, so hand washing was rare. After the corona virus, the jail made public statements that
3 they were now providing inmates with soap and hand sanitizer. During the period of time I was
4 in Santa Rita, I received one bar of soap and twice received two (2) small packets of single use
5 hand sanitizer.

6 I declare under penalty of perjury of the laws of the State of California and the
7 United States that the foregoing is true and correct to the best of my knowledge and belief on
8 April 19, 2020, in Livermore, California.

9 Due to the shelter at home requirements, I am unable to meet and sign this
10 declaration. I have reviewed an electronic copy and authorize Yolanda Huang to sign this
11 declaration for me and use it for any purpose.

12
13
14
15 Executed on 4/19/2020 in Berkeley, California.

16 

17
18
19 Signed by YOLANDA HUANG, SBN104543
20 Law Offices of Yolanda Huang
21 on behalf of ADAM NELSON

1 **DECLARATION OF MANOHAR RAJU**

2 I, Manohar Raju, hereby declare:

3 1. I make this declaration based on my own personal knowledge and information
4 derived from my position as San Francisco Public Defender. If called to testify I could and
5 would do so competently as follows:

6 2. I am an attorney licensed to practice law in the State of California. I have been a
7 public defender for approximately nineteen years and have served as San Francisco Public
8 Defender since 2019.

9 3. As the San Francisco Public Defender, I oversee the juvenile unit of six attorneys
10 who are certified to represent youth in juvenile court. Our office works to uphold a reputation not
11 only as a formidable group of lawyers but also as a catalyst for criminal justice reform. As part
12 of the legal team, we provide a model of holistic representation including six social workers, an
13 education attorney, paralegals, and investigators dedicated to defending youth in the juvenile
14 justice system. A material role of our juvenile defenders is to represent youth who are detained in
15 juvenile hall and to secure their release from detention to home or alternative non-secure
16 placements. In this unprecedented COVID-19 crisis, our effort to secure the release of detained
17 youth is paramount to protect their health and safety.

18 4. Children represented by my office remain in detention at San Francisco's juvenile
19 hall. I am deeply concerned about these children being detained in the midst of the
20 unprecedented public health crisis. In light of the health emergency and the Governor's order to
21 shelter in place, all children currently detained in San Francisco Juvenile Hall should be released
22 immediately.

23 5. With the pandemic present within the San Francisco community there is a high
24 possibility that staff will transmit the virus to children in their custody, or that newly detained
25 children will transmit it to staff and other young people. In late March, for example, my office
26 learned that a child who was recently brought to juvenile hall was exhibiting flu-like symptoms
27 and was quarantined in his room for three days. We learned this from a young client who was
28 terrified of being exposed himself. While the young person exhibiting symptoms ultimately

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1 tested negative for COVID-19, my office was fielding anxious calls from families begging us to
2 seek the release of their children because of their fear of exposure.

3 6. Although older adults are more susceptible to becoming severely ill from
4 COVID-19, according to the Center for Disease Control and various news sources, some
5 children and infants have also become sick, requiring various degrees of medical attention. The
6 American Academy of Pediatrics, in its journal *Pediatrics*, released a study out of China which
7 showed there have been severe cases of COVID-19 in youth of all ages. We also know that
8 young people can transmit it to vulnerable populations without themselves showing any
9 symptoms.

10 7. We are not only concerned about the physical health of children detained in
11 juvenile halls, but also their mental health. Stress and mental health effects of the pandemic are
12 particularly acute for young people and children, and for those who are detained or have a loved
13 one who is.

14 8. Family separation is always a serious issue. Right now, it is an especially
15 important one and we are increasingly concerned that family separation will have long-lasting
16 and disastrous effects. This is of course most concerning for children.

17 9. In my capacity as a public defender, I believe that the only sure way to protect the
18 safety and health of incarcerated youth is to: (1) Release all youth from juvenile hall. All
19 children should be returned home or immediately released to non-congregate residential homes;
20 and (2) Halt all new admissions to detention to mitigate the harm from the COVID-19 pandemic.

21
22 I declare under penalty of perjury under the laws of the State of California and the United
23 States that the foregoing is true and correct. Executed this 22nd day of April, 2020.

24
25 

26 Manohar Raju
27 San Francisco Public Defender
28

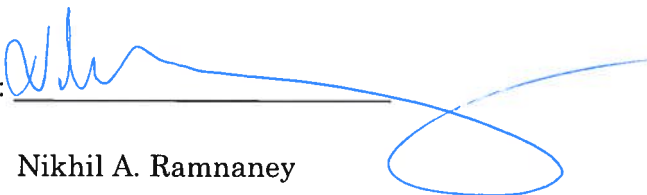
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Declaration of Nikhil A. Ramnaney

I, Nikhil A. Ramnaney, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.

1. I am the attorney of record for Allen Ray Smith Sr.
2. Allen Ray Smith Sr. is 61 years old.
3. Allen Ray Smith Sr. has been in custody for an alleged violation of Penal Code sections 245(a)(1); 422(a) and 597(b) in Los Angeles County Jail since December 4, 2019.
4. Allen Ray Smith Sr. was diagnosed with diabetes, diabetic neuropathy, high blood pressure, congestive heart failure, and lung disease.
5. Allen Ray Smith Sr. resides in an open dormitory with nine other men. The dormitory has five bunk beds. Mr. Smith has a bottom bunk bed. There are 2 toilets and two sinks in the dormitory. Mr. Smith is unable to stay six feet away
6. The meals provided to Mr. Smith come on a cart. There are two sitting tables that sit four persons each. It is impossible to appropriately social distance at the tables.
7. Mr. Smith does not have access to hand sanitizer.
8. Mr. Smith has not been given any information by jail officials about how he can protect himself from COVID-19.
9. On March 16, 2020, I moved for my Mr. Smith's release in the Los Angeles Superior Court, because his health conditions make him very vulnerable if he catches COVID-19.
10. On March 24, 2020, the court denied the request for release.

DATED: April 15, 2020, at Long Beach, California.

By: 
Nikhil A. Ramnaney

Document received by the CA Supreme Court.

DECLARATION OF SARA ROSS

I, Sara Ross, declare:

1. I am an attorney licensed to practice law in the State of California. I have been a lawyer for the Orange County Public Defender’s Office for the past fifteen years.
2. I am an Assistant Public Defender currently assigned to supervise our Writs and Appeals Department. As part of my responsibilities, I appear in court, litigate matters, and assist other lawyers with any legal issues that arise in the course of their litigation.
3. I have been involved in litigating shackling issues since the Orange County Sheriff’s Department changed its shackling policy in October 2019.
4. Towards the end of October 2019, the Sheriff’s Department changed its shackling policy. At that time, the Sheriff’s Department began to implement a policy wherein inmates brought to the courthouse are shackled for up to 10-14 hours a day.
5. I have personal knowledge of the shackling, as I appear in court regularly and have observed the inmates when they are shackled. I have also talked to around 30-40 inmates who are shackled.
6. The shackles consist of metal belly chains wrapped around our clients’ waists, metal handcuffs attached to the belly chains by short chains, and a padlock to lock the chains up in the back. Our clients are severely limited in their ability to move their arms, restricting them from accomplishing basic tasks such as feeding themselves or cleaning themselves after using the bathroom.
7. Orange County courts have been partially closed since the middle of March 2020 due to the COVID-19 pandemic. However, some courtrooms have remained open for urgent matters and certain hearings, including last day preliminary hearings.

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8. Although Orange County has developed certain remote hearing capabilities, many inmates are still brought in person from jail to the courthouse for these hearings. I estimate there are 5-10 in-person preliminary hearings a day and 10 plea hearings a day.
9. When inmates arrive at the courthouse, they are held together in holding cells where many people are kept together in a single cell, and where it would be impossible for them to maintain anything close to six feet of distance from each other.
10. Inmates from different housing units in the same jail, and from different jail facilities in the Orange County jail system are kept together in the same holding cells.
11. I have heard from about 5-7 clients that there is no extra cleaning or disinfecting occurring.
12. Some of the inmates are wearing masks in court, but not all. Most of the court deputies are not wearing masks.
13. Inmates in the holding cells share toilets and sinks with each other.
14. Inmates who are transported to court during this partial closure are shackled in the same manner as described above. Inmates also stand or sit within a few feet of one another when they are present in court. In addition, inmates are shackled while they are inside the courtroom.

I declare under penalty of perjury that all of the above is true and correct to the best of my knowledge. Executed in Santa Ana, California, this 22nd day of April, 2020.

Sara Ross
SARA ROSS
Assistant Public Defender

Document received by the CA Supreme Court.

1 Declaration of Mark Saatjian

2 I, Mark Saatjian, am an attorney in the Office of the Santa Barbara County Public Defender. The
3 Public Defender represents Christian Menth.

4 I spoke with Mr. Menth on April 17, 2020, at 2:20 p.m. He is a prisoner in the Santa Barbara
5 County jail. He called me from a phone in East 4.

6 Mr. Menth was arrested on March 28. At booking, some of the people were not wearing
7 masks. He was approximately two feet away from the people who booked him in. Many of these
8 people were not wearing masks. They checked his temperature with an infrared thermometer. He was
9 asked questions about how he was feeling.

10 After booking, Mr. Menth was housed in Inmate Reception Center (IRC) isolation for 14
11 days. Mr. Menth was placed in a cell in the IRC 400 with one other person. The cell has a window to
12 the day room. The day room is not being used. The cell contains two single beds, one table, one sink,
13 and one toilet. The toilet has an approximately five-minute delay before it flushes. Sometimes the
14 button to flush would not work at all. Approximately April 4, the toilet of another cell in the IRC 400s
15 was stopped up. Mr. Menth witnessed a C.O. remove the prisoners housed in that cell to use the toilet
16 on the yard. Otherwise, no one went onto the yard.

17 The Sheriff's staff never gave Christian Menth or his cellmate any cleaning products, rags,
18 sponges to clean their cell. When Christian arrived in the cell, his cellmate had already been there for
19 about seven days. There were dust bunnies under the bunks. His cellmate used a plastic sandwich bag
20 to sweep the dust bunnies toward the door, and then he and his cellmate picked them up and threw them
21 away with their lunch trash. Mr. Menth and his cellmate asked for a broom but never received one.

22 Mr. Menth and his cellmate would use a sock to clean their sink and toilet. They would wet the
23 sock and rub the sock with the hotel-sized bar of soap that they received in the hygiene kit. They would
24 then wipe down the toilet. They were never given cleaner or sanitizer. They had no gloves. Two days
25 before leaving IRC isolation, Mr. Menth was given a mask.

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Mr. Menth's cellmate left when Menth was seven days into his own isolation. Mr. Menth remained alone for the last week. He observed that others in the IRC 400 received new cellmates after one had left. He and his cellmate reflected on the absurdity of this procedure.

Through the window of their cell, Mr. Menth observed trustees wiping down the day room repeatedly, but the day room was never used. No one was allowed in the day room except when they were being brought to a cell or removed from a cell.

The phone in Mr. Menth's cell did not work. He was not allowed make calls from another phone. He was not allowed to make a call when he was arrested. Mr. Menth went two weeks without access to a phone.

He was locked down for 24 hours for two weeks. He only left the cell for court. Showers were supposed to be available every other day; however, showers were not offered. Mr. Menth went the first five days in custody with no shower.

Signed this 20th day of April, 2020, in the city of Santa Barbara.


Mark Saatjian, Declarant

Document received by the CA Supreme Court.

1 **Declaration of Mark Saatjian**

2 I, Mark Saatjian, am an attorney in the Office of the Santa Barbara County Public Defender. In
3 this capacity, I represent Isael Elenes.

4 On April 17, 2020, Mr. Elenes called me from the Santa Barbara County Jail. He described the
5 following circumstances:

6 Mr. Elenes is currently housed in East 4. He was moved there with other general population
7 prisoners approximately two weeks ago.

8 When he arrived at East 4, the cells were filthy. There was dust on the bunks, on the table
9 surfaces, and the toilet and sink were not clean. The prisoners had to clean the cells without protective
10 equipment.

11 East 4 consists of a day room, and two cells. Each cell has one toilet and one sink. Nine men are
12 housed in each cell. Eight sleep on two-person bunks, and one has a single bed. Three of the two-
13 person bunks are against the walls of the cell and one stands in the middle of the cell. The single bed is
14 also in the middle of the cell, making it difficult to walk around the cell. The cell itself measures 20 feet
15 by 20 feet approximately.

16 The second cell is identical. One toilet for nine men and one sink.

17 There is one shower for 18 men, and there is one phone.

18 In the dayroom, bolted to the floor, are tables with benches. The tables resemble picnic benches
19 and seat four on each side.

20 Mr. Elenes reports that he has had flu-like symptoms and has been coughing. While I was on the
21 phone, I heard someone sneeze loudly in the background. Mr. Elenes told me no one was wearing a
22 mask while inside East 4.

23 He said that he has been sick off and on over the last few weeks. He told me there are always at
24 least four to five people who are sick. People who are sick seem to get better and then get sick
25 again. The people who are sick are coughing and say they have a fever. The living space is cramped
26 and it is impossible to stay six feet from the people who are sick. You hear them coughing in the night
27
28

1 throughout the cell.

2 Mr. Elenes's celly has had these symptoms and put in multiple kites to medical. Medical's
3 response has been, drink water.

4 People who do not purchase soap through their commissary receive one bar of soap per
5 week. This soap is the size of a small motel-sized bar and comes wrapped in plastic. Mr. Elenes told
6 me that it is not possible to make this soap last a week if you are washing yourself regularly. There is no
7 liquid soap or hand sanitizer.
8

9 Many of the custody deputies wear masks. Even on April 17, some deputies did not have a mask
10 on. When asked why they don't wear a mask, some say they've already had the virus. Mr. Elenes told
11 me this scares him. He asked me if there were studies about whether people could continue to spread
12 the virus if they had had it. He questioned whether the jail staff that does not wear masks really knows
13 that they have immunity and that they cannot pass on the virus.

14 Signed this 20th day of April, 2020, in the city of Santa Barbara.

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18 Mark Saatjian, Declarant
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1 **Declaration of Martín Sabelli**

2 I, Martín Sabelli, hereby declare:

3 1. I make this declaration based on my own personal knowledge and information
4 based on communications with numerous NACDL members licensed to practice in California
5 and information maintained by NACDL. If called to testify I could and would do so competently
6 as follows:

7 2. I am a criminal defense attorney in San Francisco with approximately 27 years'
8 experience in a full range of criminal cases and am First Vice President of the National
9 Association of Criminal Defense Lawyers ("NACDL"), a membership organization comprised
10 largely of practicing criminal defense attorneys. NACDL is a petitioner in this litigation.

11 3. NACDL's mission is to serve as a leader, alongside diverse coalitions, in
12 identifying and reforming flaws and inequities in the criminal justice system, and redressing
13 systemic racism, and ensuring that its members and others in the criminal defense bar are fully
14 equipped to serve all accused persons at the highest level. NACDL envisions a society where all
15 individuals receive fair, rational, and humane treatment within the criminal justice system.
16 NACDL's policy priorities include issues related to incarceration that affect members' clients,
17 including pretrial release and sentencing.

18 4. The pandemic has generated substantial concerns by our members given the effect
19 on the health and welfare of our clients and our ability to advocate fully on their behalf
20 consistent with the Right to Effective Assistance of Counsel and Due Process and our ethical
21 obligations. Mass incarceration, including mass incarceration of people of color, has also
22 generated profound concerns regarding the disparate impact of the COVID-19 crisis affecting the
23 Right to Equal Protection Under Law.

24 5. COVID-19 directly affects NACDL members and their clients, including both
25 adults and juveniles, in numerous ways. For example, COVID-19 affects members and clients by
26 placing clients at heightened risk of infection when they are detained or incarcerated in jails,
27 prisons, juvenile halls and camps, and the Division of Juvenile Justice facilities where social
28 distancing is difficult or impossible to implement and medical care is often sorely inadequate.

1 NACDL is helping members advocate for their clients' health and safety in the context of
2 COVID-19 by training its members regarding best practices in the context of COVID-19,
3 compiling resources related to COVID-19 advocacy (including information, pleadings, motions,
4 orders and other court papers related to COVID-19), and advocacy undertaken by NACDL, and
5 joining with other organizations to launch an emergency release initiative designed to match
6 qualified individuals in federal prisons who are applying for compassionate release with free
7 legal counsel, with the aim of helping medically vulnerable people get out of prisons where their
8 risk from COVID-19 is high. Members and other juvenile practitioners are concerned about the
9 mental well-being of their detained juvenile clients especially where many already suffer from
10 anxiety, depression, and other mental health issues and are reporting increased isolation for
11 extended periods due, in part, to activities canceled as a result of COVID-19.

12 6. NACDL has approximately 795 members in California throughout the entire State
13 of California as well as members in other states who practice in California. NACDL members
14 handle criminal cases, including juvenile cases, in every county in California.

15 7. NACDL members have clients or former clients incarcerated or detained in
16 county jails and juvenile facilities in California who:

- 17 • Fit within the Center for Disease Control's definition of people medically vulnerable
18 to COVID-19,¹ because:
 - 19 ○ they are age 65 or older; or
 - 20 ○ they suffer from underlying health conditions (such as chronic lung disease,
21 asthma, HIV, serious heart conditions, immunocompromised, severe obesity,
22 diabetes, chronic kidney disease undergoing dialysis, liver disease) that place
23 them at heightened risk of severe illness from COVID-19;
- 24 • Are being detained in jail pre-trial because, although a bail has been set pursuant to
25 the statewide Emergency Bail Schedule promulgated on April 6, 2020, the client
26

27 ¹ See generally, *Coronavirus Disease 2019 (COVID-19) – People Who Are At Higher Risk*,
28 Centers for Disease Control and Prevention, <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html> (last visited April 13, 2020).

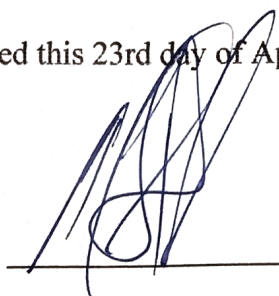
1 cannot afford bail;

- 2 • Are serving sentences in county jails and have fewer than 120 days left to serve;
- 3 • Are being detained in county jails because they had been released on probation or
- 4 parole, but have been picked up on technical violations of their conditions (e.g.,
- 5 conduct that violates the conditions of parole or probation but would not otherwise
- 6 constitute a criminal offense, such as a failure to report, failure to appear for a
- 7 required drug test, failure to complete community service in an allotted time, failure
- 8 to attend school or counseling, missing a restitution payment, or failure to maintain
- 9 employment) and the bail on the underlying conviction is above \$0, and they are
- 10 unable to post bail.
- 11 • Are being detained in juvenile halls, juvenile camps and ranches, and Division of
- 12 Juvenile Justice facilities;
- 13 • Are being detained in county and state custody subject to Immigration and Customs
- 14 Enforcement (“ICE”) detainers (Form I-247A) requesting that state and local officials
- 15 notify ICE when the individual is due for release from custody and permit ICE to take
- 16 custody of the individual at the point they are released from criminal custody. Many
- 17 individuals are due for release now or soon, at which point they will be subject to
- 18 transfers to ICE custody and incarceration in ICE detention facilities in California.

19 8. My own experience confirms what experts in this case have stated: that jails and
20 juvenile facilities are not designed, constructed, or managed in ways that readily allow social
21 distancing or other protective measures unless populations are substantially reduced, and that
22 even facilities that take some precautions do not or cannot follow protections regularly. For
23 example, a client I “met” with last weekend via a video conference reported that although the jail
24 has provided a remote video conference capacity for attorney-client conferencing, the practices
25 associated with that capacity create substantial risk of exposure. Specifically, my client was
26 transported from his cell to the video conference room by a deputy who handcuffed him (with a
27 metal handcuff which I understand to be a surface on which the virus can survive for substantial
28 periods of time) to another inmate from a different cell for approximately 5-7 minutes. My client

1 was then placed in a small video conferencing room with minimal ventilation which he reports
2 had just been vacated by a third inmate. I have been informed that he was also handcuffed to
3 another inmate on the return to his cell.

4 I declare under penalty of perjury of the laws of the State of California and the United
5 States that the foregoing is true and correct. Executed this 23rd day of April 2020 in San
6 Francisco, California.



Martín A. Sabelli

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Declaration of ALLISON HARDGROVE

I, ALLISON HARDGROVE, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.

1. I am the attorney of record for JOSE SARAVIA.
2. JOSE SARAVIA is 63 years old.
3. JOSE SARAVIA has been in custody for alleged violations of PC 422 at the North County Correctional Facility since October 17, 2019.
4. JOSE SARAVIA was diagnosed with ASTHMA, which makes him extremely vulnerable to COVID-19.
5. At the jail, Mr. Saravia is housed in a large room with approximately 28 other men. There are four toilets that all of the men are required to share. There is not six feet of free space in the housing location and it is impossible for Mr. Saravia to stay six feet away from the other men.
6. At the jail, Mr. Saravia eats meals with the other members of his unit – about thirty men.
7. Mr. Saravia does not have access to hand sanitizer.
8. Mr. Saravia only has access to soap if he purchases it with his own funds. He has very limited funds.
9. Mr. Saravia has been given very limited information by jail officials about how he can protect himself from COVID-19.
10. On March 20, 2020, his attorney moved for his release in the Los Angeles Superior Court, because his health conditions make him very vulnerable if he catches COVID-19.
11. On March 20, 2020, the court denied the request for release.
12. Once again, on April 16, 2020, his attorney moved for his release in the Los Angeles Superior Court.
13. On April 16, 2020, the court once again denied the request for release.

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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated this 16th Day of April, 2020



ALLISON HARDGROVE

Attorney for Mr. Saravia

Document received by the CA Supreme Court.

1 FAY ARFA, A LAW CORPORATION
2 Fay Arfa, Attorney - State Bar No. 100143
3 10100 Santa Monica Blvd., #300
4 Los Angeles, CA 90067
5 Tel.: (310) 841-6805
6 Fax: (310) 841-0817
7 info@bestdefender.com

8 Attorney for Defendant
9 RANDAL LETCHER SCOTT

10 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
11
12 **FOR THE COUNTY ORANGE**

13 **THE PEOPLE OF CALIFORNIA,**) No. 17WF1545
14)
15 Plaintiff,) **DECLARATION OF**
16) **RANDAL SCOTT SIGNED**
17 v.) **BY ATTORNEY FAY**
18) **ARFA ON HIS BEHALF**
19 **RANDAL LETCHER SCOTT,**)
20)
21 Defendant.)
22)

23 I, Randall Scott, declare:

- 24 1. I am an inmate at the Orange County Jail, Theo Lacy Facility, 50
25 The City Drive South, Orange, Ca. 92868.
- 26 2. I am 60 years old (DOB: 1-31-60) and my inmate number is
27 3099429.
28

- 1 3. Although I am facing criminal charges, my trial date is in limbo
2 because of the COVID-19 pandemic. I do not have a trial date.
3
- 4 4. I am very afraid of contracting the COVID-19 because of the
5 conditions in the jail.
6
- 7 5. I am currently housed in a 32 man module that contains 16 cells.
8 Each cell, including mine, contains two men.
9
- 10 6. I live with my cell mate in a six foot wide and 11 foot long cell.
11
- 12 7. We sleep in bunk beds that extend three feet into the six foot
13 width of the cell. The bunk beds extend seven feet along the 11-
14 foot length of the cell.
- 15 8. Because the bed extends three feet into the width of the cell, we
16 are cramped in the cell. We only have a three-foot wide space to
17 walk around.
18
- 19 9. We have no space along the length of the 11-foot cell because a
20 toilet sits on one side of the bed and a table stands on the other
21 side of the bed.
22
- 23 10. I and my cell mate cannot social distance six feet from each other
24 because of the cramped conditions.
25
- 26 11. I and my cell mate are together constantly and eat our three
27 meals together in the same cell.
28

- 1 12. We have no decent air quality. For example, I had a black, wet
2 sock. I put the sock near the air vent to dry out. When I next saw
3 the sock, it had turned white.
4
- 5 13. After I wash my face with the water in my cell, the dust makes my
6 face look brown.
7
- 8 14. Several people in my facility have been coughing; two staff
9 members contracted the COVID-19.
10
- 11 15. When someone on the kitchen staff had COVID-19 symptoms, the
12 jail staff quarantined the kitchen staff. The jail staff sought 30
13 new men to work in the kitchen.
14
- 15 16. A captain gave us face masks cut from a bed sheet. The captain
16 told us to wear the face masks when we leave our room to walk
17 out amongst the staff, but told us that, when we were amongst
18 ourselves, "I don't give a shit."
19
- 20 17. When an inmate had a swollen throat and trouble breathing, it
21 took three days to get him into medical for an examination.
22
- 23 18. The jail staff quarantined his cell and told the other inmates to go
24 into the man's cell, without wearing gloves, and clean it.
25
- 26 19. The jail feeds us chemically engineered soy bologna, loaded with
27 preservatives, for lunch six days a week. We also eat chemically
28

- 1 engineered “chicken or meat” made from a yellow colored soy.
2
3 20. In July 2019, I developed a pea-sized lump on my neck. By
4 September 2019, the lump grew to size of a marble. I notified
5 Medical in October and saw a nursing assistant who could not
6 help me.
7
8 21. After the lump grew bigger and bigger, a nursing assistant
9 referred me to a nurse practitioner. In February 2020, I saw a
10 nurse practitioner who told me I had a lump in my lymph nodes.
11
12 22. The nurse took five vials of blood. Medical was supposed to send
13 me to a hospital for ultrasound and a biopsy. However, after one
14 and half months, because of the COVID-19 pandemic, I have not
15 been able to leave to go to the hospital even though I am
16 scheduled for an ultrasound and a biopsy.
17
18 23. My family has a history of cancer. My grandmother and
19 grandfather both died of cancer.
20
21
22 24. I and the other inmates are deathly afraid of contracting COVID-
23 19 and we desperately need help.
24

25 I declare under penalty of perjury of the laws of the State of
26 California and the United States that the foregoing is true and correct
27 to the best of my knowledge and belief.
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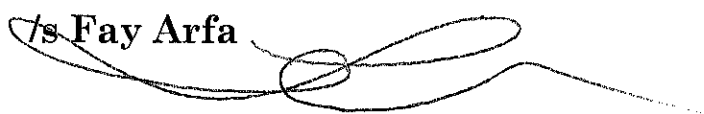
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Because of the COVID-19 and my confinement, I could not sign this declaration in person. My attorney read the declaration to me, over the telephone on April 18, 2020.

On April 18, 2020, I understood and verified its contents in full, and authorized Attorney Fay Arfa to sign the declaration on my behalf.

Executed on April 18, 2020 in Los Angeles, California.

Respectfully submitted,

/s Fay Arfa 

Signed by Fay Arfa, SBN 100143, on behalf of
Inmate Randal Letcher Scott

Document received by the CA Supreme Court.

1 **Declaration of Avantika Shastri**

2 I, Avantika Shastri, hereby declare:

3 1. I make this declaration based on my own personal knowledge, and if called to testify, I
4 could and would do so competently as follows:

5 2. I am an Immigration Defense Attorney at the Office of the Public Defender, County of
6 Alameda, where I specialize in those issues that arise from the intersection of criminal and immigration
7 law. My practice focuses on ensuring that our noncitizen clients receive accurate advice and
8 affirmatively seek to mitigate immigration consequences of criminal charges and pleas by training and
9 consulting with the criminal defense attorneys in our office. I have been practicing immigration law,
10 and removal defense in particular, since 2004.

11 3. The Alameda County Sheriff’s Office (“ACSO”) receives and responds to notification
12 requests (Forms I-247A) from Immigration and Customs Enforcement. When it receives a notification
13 request from ICE, it enters that information into an online database that our office may reference to
14 determine if a Form I -247A has been issued for our client. Under the Truth Act, the ACSO is required
15 to notify our office if it shares a client’s release information with ICE. The ACSO releases individuals
16 in its custody to ICE if ICE is present when the individual is released. The ACSO is also required to
17 report its cooperation with ICE in annual Truth Act forums. Recordings of prior reports are available on
18 the website of the Alameda County Board of Supervisors.

19 4. My office monitors whether the ACSO transfers our clients to ICE custody when they
20 are due for release and performs legal analysis in each case under Gov’t Code § 7282.5 to determine
21 whether such transfers are permitted by California law.

22 5. On March 24, 2020, after the Alameda County Health Officer issued a shelter in place
23 order for the county, our office sent a letter to the ACSO requesting a moratorium on responding to ICE
24 notification requests for the duration of the shelter in place order. Attached hereto as Exhibit A is a true
25 and correct copy of the letter. The Sheriff’s Office confirmed receipt of the letter but has not otherwise
26 responded to that moratorium request.
27

28 6. Since the COVID-19 pandemic started, I am aware that the ACSO has released at least

1 one of our clients to ICE custody from Santa Rita Jail. This individual completed his criminal sentence
2 at the beginning of April, and was immediately detained upon his release by ICE. Upon making
3 inquiries after our client was arrested, I spoke to an official at the ICE Enforcement and Removal Office
4 in San Francisco who informed me that our client was not subject to mandatory detention under the
5 immigration statute, but that ICE intended to hold him without bond in ICE's discretion. He currently
6 remains in custody at the Mesa Verde Detention Center in Bakersfield, California. Attached hereto as
7 Exhibit B is a true and correct copy of a screenshot of the ICE online inmate locator which shows that
8 this client remains detained in Mesa Verde. I have redacted his name and alien registration number to
9 protect his privacy.
10

11 7. Our office also has at least one other client who is presently completing his sentence in
12 ACSO custody. He has an ICE notification request (Form I-247A) and is at risk of imminent transfer to
13 ICE during this pandemic. This client has lived in the United States for 20 years and has strong family
14 ties in the United States.
15

16
17 I declare under penalty of perjury of the laws of the State of California and the United States that the
18 foregoing is true and correct. Executed this 21st day of April, 2020, in Richmond, California.
19

20 s/Avantika Shastri

21 Avantika Shastri
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1 TRACY M. MACUGA (SBN 163424)
PUBLIC DEFENDER
2 MATTHEW J. SPEREDELOZZI (SBN 256190)
Deputy Public Defender
3 County of Santa Barbara
1100 Anacapa Street
4 Santa Barbara, CA 93101
5 Telephone: (805) 568-3465
Facsimile: (805) 568-3564
6 Email: msperedelozzi@publicdefendersb.org

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9
10 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
11 **COUNTY OF SANTA BARBARA**
12 **SUPERIOR COURT APPELLATE DIVISION**

13 INMATES AT THE SANTA BARBARA)
14 COUNTY JAIL)
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Petitioner,

v.

Respondent,

Real Party
in Interest,

Declaration of counsel regarding
information obtained from inmate/client
Jovanny Cipres.

Document received by the CA Supreme Court.

1 I, Matthew J. Sperdelozzi, declare as follows.

- 2 1. I am an attorney duly licensed to practice law by the State Bar of California.
- 3 2. I am a certified as a specialist in criminal law by the State Bar of California, Board
4 of Legal Specialization.
- 5 3. I am employed by the Law Office of the Public Defender, County Santa Barbara as a
6 Deputy Public Defender.
- 7 4. I am currently assigned to represent inmate Jovanny Cipres in felony case number
8 19CR09268.
- 9 5. I spoke with Mr. Cipres on April 17, 2020 who gave me current conditions inside the
10 Santa Barbara County Jail, even after population reduction related to the judicial
11 counsel emergency bail schedule.
- 12 6. Mr. Cipres told me that he is living in East 24 within the Santa Barbara County
13 Jail.
- 14 7. They are still living in dorm-style housing. There are currently around 20-25
15 inmates in his dorm.
- 16 8. They are living in extremely close quarters. For example, when lying in bed, if he
17 stretches his arms out, he could touch the person's lying in the next bed over.
- 18 9. The men are sharing one shower and four toilets. Jail staff do not clean the toilets.
19 Instead, the inmates are given limited cleaning supplies and it is their
20 responsibility to clean up. Not all inmates are clean. Mr. Cipres reports that he
21 tries to clean the toilets and showers before he uses them, but does not believe he
22 has adequate cleaning supplies for proper cleaning.
- 23 10. Many of the COs (Deputies) are not wearing gloves or masks, which is a concern for
24 him.
- 25 11. The jail is bringing people in from IRC where they have been quarantined for
26 fourteen days. In the past two weeks, six new inmates have been brought to his
27 area from IRC. The latest person was brought in two days prior to today.
- 28

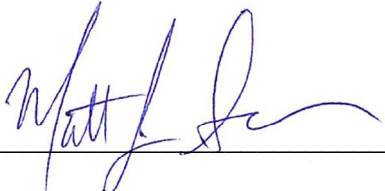
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12. Mr. Cipres made clear that under the current circumstances within the jail, he does not feel safe and he does not feel as if the jail is taking adequate precautions to protect a possible outbreak of COVID-19 within the jail.

13. Mr. Cipres consented to us using this information for his benefit and for the benefit of others within the jail. I explained to him that I would put this information in a declaration that may be used in court and he consented to its use in that way.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: April 17, 2020

By: 
MATTHEW J. SPEREDELOZZI
Deputy Public Defender

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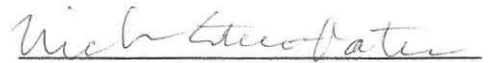
Declaration of Nick Stewart-Oaten

I, Nick Stewart-Oaten, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.

1. I am a Deputy Public Defender assigned to the Appellate Branch of the Los Angeles Public Defender's Office.
2. In that capacity, I have been involved in countywide meetings with different criminal court agencies regarding the implementation of the Judicial Council's Emergency Rules, adopted April 6, 2020.
3. Rule 4 of the Emergency Rules established a zero bail schedule for many misdemeanor and felony offenses and required courts to apply that zero bail schedule to eligible defendants by April 13, 2020. The goal of zero bail order was to reduce overcrowding in jails in an effort to curb the spread of the COVID 19 virus.
4. A preliminary review by the Los Angeles Sheriff's Department identified approximately 1600 incarcerated defendants who appear to qualify for zero bail. The Sheriff's list was not exhaustive and my office has identified additional incarcerated defendants who appear to qualify for relief under the Rule 4.
5. The courts, prosecution, and defense in LA County are cooperating in an effort to identify and release incarcerated persons who qualify for relief under Rule 4.
6. However, because of the numerous exceptions established by Rule 4, it can be difficult to determine whether an individual defendant qualifies for zero bail. Under Rule 4, for example, a defendant charged with grand theft qualifies for zero bail, while a defendant charged with grand theft with a gang enhancement does not.
7. Because these disqualifying enhancements are generally not reflected in the sheriff's records, the Los Angeles District Attorney has been required to

individually examine each case prior to agreeing to release. While the District Attorney is acting in good faith, this process is time consuming. After a week of vetting, only 222 of the more than 1600 potentially eligible defendants covered by Rule 4 have been cleared for release. At the current rate, it will take approximately two months for all eligible defendants to be reviewed and released.

8. Many of the defendants who appear eligible for release in LA County have serious health issues such as diabetes, asthma, cancer, or HIV that render them particularly vulnerable to the coronavirus. The vast overcrowding in LA County jail generally prevents these defendants from complying with necessary health measures such as social distancing or even regular handwashing. As such, the delay in releasing these defendants poses a significant health risk to these men and women.



Nick Stewart-Oaten

Declaration of Cassandra Stubbs on Behalf of Jeff Nunes

1. I, Cassandra Stubbs, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.
2. I am an attorney with the American Civil Liberties Union. I am licensed to practice law and am based in North Carolina. I am also licensed to practice law in California, where I have been a member of the bar since 2002.
3. On April 20, 2020, I spoke to Jeff Nunes who is currently incarcerated at the Tulare County jail.
4. Mr. Nunes has been in custody since February 10, 2020. He is serving his sentence and is scheduled to be released on June 22, 2020.
5. Mr. Nunes is assigned to the work dorm. He is in a two-person cell, with a cell mate. They sleep in bunk beds. The cell opens into a common day room, shared by the 13 double cells on the top and 13 double cells on the bottom. The men are allowed to be in the day room with the other cells on their floor. In other words, the 26 men in the top cells are allowed access together and the 26 men in the bottom cells are allowed access.
6. There is no social distancing in Mr. Nunes's day. He is in close quarters in his cell with his bunk mate and close quarters with the other 25 men in the day room. They sit 5 or 6 at a circular table where they are close enough to touch other. They use common phones in the day room.
7. In the morning, they receive their meals from one of the food worker inmates who pushes a sack through their cell. The sack has cereal for his breakfast and lunch. He eats breakfast in his cell. For dinner, he receives a hot tray at 4:00 p.m., delivered by another detainee. They sometimes eat dinner in the day room, and sometimes in their cells.

8. At 7:00 a.m. he goes to his job in the farm. Before they leave for work, the men must line up to receive their medication and to have their temperatures taken. There is no separation between the men when in lines.
9. Mr. Nunes works on the farm. He collects eggs with another inmate. They ride shoulder to shoulder in a cart. On Saturday April 18, 2020, Mr. Nunes's coworker became sick. He had a slight temperature when they left for work, but as the day went on he became too sick to work and returned to the module. His temperature had risen over 101 degrees and they moved him to three separate quarantine cells before moving him to the jail hospital. The coworker was scheduled to be released and Mr. Nunes doesn't know whether he had COVID-19 or whether he was released.
10. After his coworker was sick, Mr. Nunes returned to his cell and cellmate. He was not tested for COVID-19 or quarantined.
11. Mr. Nunes has asked for a mask but does not have one.
12. The other detainees in the work dorm work in the kitchen, where they prepare the food, deliver the food around the jail facilities, or work as processors. The processors work 12 hour shifts. Their work includes cleaning cells, and working with the new admissions to the jail, people right off the street.
13. Mr. Nunes is married and if released he would be able to go home and self-isolate in his home.
14. I prepared this declaration after talking with Mr. Nunes on April 20, 2020. I read it to him over the phone on April 21, 2020 and he affirmed the accuracy.
15. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct to the best of my knowledge.

This declaration is executed at Durham, North Carolina, this 21st day of April 2020.

/s Cassandra Stubbs
Cassandra Stubbs

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DECLARATION OF COUNSEL

I, ERICA SUTHERLAND, hereby declare under penalty of perjury:

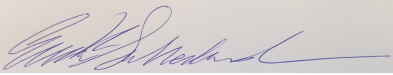
1. I am an attorney licensed to practice law in the State of California and am employed by the Santa Barbara Office of the Public Defender.
2. I represent Nolberto Jose Ramos Corral on file 20CR01209.
3. Mr. Corral is diabetic and suffers from high blood pressure and high cholesterol.
4. Mr. Corral has been incarcerated pre-trial in the Santa Barbara Jail since February 4, 2020.
5. Mr. Corral is housed in Basement Dorm-2.
6. On April 20, 2020, Mr. Corral told me that there are over 60 men in his dorm. People are afraid of sleeping on top bunk beds and prefer to sleep on the ground. It is impossible to stay 6 feet away from others. He stated that inmates have been transferred from IRC and they arrive without masks. There are multiple people in his unit who are coughing.
7. Mr. Corral stated that while speaking to me, he could see there was no soap at any of the three sinks near him. When there is soap available, it is bar soap and everyone touches the same bar. He stated there is never soap in the showers. He stated that the bathroom sinks are unsanitary and filled with bits of food. He expressed frustration that when they ran out of toilet paper and he asked the guards to bring a roll, the guards did not bring any for hours. He was forced to choose between using the restroom without toilet paper or waiting in serious discomfort for hours.
8. Mr. Corral stated that he is particularly fearful of contracting Covid-19 because he is diabetic. He routinely begs other inmates to stay away from him. He purchased a rag and disinfectant from the canteen which he uses to clean his cot and the floor around it. He uses his second jail-issues shirt as a second cleaning rag. He sprays disinfectant on his hands several times a day. He described the dorm as “very nasty” and is distressed by the lack of hygiene.
9. Mr. Corral described unsanitary and unacceptable housing in Dorm 2. I believe Mr. Corral’s health is endangered by his incarceration in the Santa Barbara County Jail.

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Dated: April 20, 2020

TRACY M. MACUGA, PUBLIC DEFENDER

By: 
Erica Sutherland
Deputy Public Defender
Attorney for Defendant

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DECLARATION OF IRMA VARGAS

I, Irma Vargas, hereby state that the facts set forth below are true and correct to the best of my knowledge, information, and belief.

1. I am the attorney of record for Ameal Sims.
2. Mr. Ameal Sims is 65 years old.
3. Mr. Ameal Sims has been in custody for an alleged violation of Penal Code Sections 220(b) and 459 at the Los Angeles County Jail since January 29, 2020.
4. Mr. Ameal Sims was diagnosed with Chronic Obstructive Pulmonary Disease (COPD). He also has high blood pressure has also suffered two strokes in the past three years. Mr. Sims’s COPD combined with his serious heart conditions puts him at an exceptionally high risk for severe illness if he contracts COVID-19 while incarcerated.
5. Mr. Ameal Sims lives in a single cell. He has daily interaction with custody officials during his meal and recreational times. To date he has only been given one disposable mask. The one disposable mask he owns has had to be reused for over four days. He has not received any notice that more masks will be distributed.
6. Mr. Ameal Sims receives all his meals inside of his cell. Breakfast and dinner are left outside of his door. Dinner, however, is delivered inside his cell. The custody official delivering his dinner has not worn gloves to date.
7. Mr. Ameal Sims does not have access to hand sanitizer. He is given soap three times a week. The soap he receives is not a full bar of soap but can best be described as soap scraps. Mr. Sims is approximately 6 feet 4 inches tall and has a skin condition that makes his skin peel. The scraps of soap he receives are not enough to treat his skin condition, rinse his entire body and have leftover for regular handwashing throughout the day. He has had to go several days without any soap because he was unable to secure enough soap scraps to last him until the next soap distribution.
8. None of the inmates Mr. Sims has interacted with have access to gloves. He showers in a communal shower and interacts with other incarcerated individuals when he can shower. He is also around other incarcerated individuals and custody officials when in the attorney room and when he has to go to the medical unit.

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1 9. Mr. Ameal Sims has not been given any information by jail officials about how I can
2 protect myself from COVID-19.

3 10. On April 1, 2020, attorney and fellow Deputy Public Defender Jennifer Hawkins
4 asked for Mr. Sims's release given his numerous medical conditions and extreme
5 vulnerability if he contracts COVID-19. The request was denied, and bail was not
6 lowered. On April 9th, 2020, I requested his release in front of Judge Korn in
7 Department 32. The request was denied but bail was lowered to \$500,000.
8

9 Dated this 14th day of April, 2020.

10 Respectfully submitted,

11
12 RICARDO D. GARCIA,
13 PUBLIC DEFENDER
14 OF LOS ANGELES COUNTY, CALIFORNIA

15
16
17 By:  _____

18 Deputy Public Defender
19 Attorney for Defendant
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DECLARATION OF BENITO VENEGAS

I, Benito Venegas, hereby declare and say:

1. I make this declaration of my own free will. I have personal knowledge of the facts set forth herein and if called as a witness, could and would testify competently thereto:

2. I am currently incarcerated in Men’s Central Jail (“MCJ”) in Los Angeles, California. I have been incarcerated at MCJ for the last two years, awaiting trial on felony charges.

3. I am a 27-year old Hispanic man with asthma and other health conditions that make me vulnerable to COVID-19. When I was 17 years old, I was diagnosed with epilepsy. I have since had seizures on average about twice a month for the last ten years. Last week, I experienced two seizures on the same day. My seizures generally cause me to fall to the ground involuntarily. I have had seizures in the shower, where I fall to the ground involuntarily and scrape myself on the shower floor. The showers are used by over eighty people daily and are not cleaned thoroughly. The shower floor is visibly dirty even after it is cleaned. Since I have been in jail, I have developed irritation on my skin which I believe may be due to contact that I have made with unhygienic surfaces when experiencing seizures.

4. I am housed in the “School Dorm” which is an 87-person dorm. We are almost at full capacity; at last count on April 14, I believe there were only four open bunks. The dorm has restrooms, showers, telephone booths, communal tables, a workout area with pullup bars, vending machines and triple bunk beds. The triple bunk beds are less than 3 feet apart from one another. We all usually eat our meals at our bunks or at the communal tables. The prisoners with whom I share this space touch all of the same common surfaces. Since early March, the guards canceled yard time, and since then we have been in our dorm all day. We all leave for our court appearances, medical visits, attorney visits, and other mandatory transports from time to time and come back to the dorm.

1 5. It is difficult, if not impossible, to keep six feet of distance with the other
2 prisoners in my dorm. It is a small dorm, filled with more than eighty people, and very
3 crowded. We share all of the common spaces in the cell, including the exercise area
4 consisting of pull-up bars, the showers, the restrooms, and the tables where we sit, each,
5 watch television, and play cards. We also sleep in very close proximity to each other. For
6 instance, there is an older man (I estimate about 80 years old) who sleeps in a bunk right
7 beside my bunk. He is less than six feet away from me. At night, I can hear him coughing
8 loudly.

9 6. We are given our food through a slot in the doorway by trustees, some of
10 whom wear masks but others do not. The ones who wear masks only started to wear them
11 about two weeks ago. The trustees are sometimes conversing with us or with each other
12 when they give us food, and I have personally seen at least one trustee coughing or
13 sneezing when handling the food. We all line up to get food, and in lining up, it is
14 impossible, given the size of the dorm and how many people there are, to stay six feet
15 apart from one another.

16 7. When I see my dorm mates cough in my presence, I typically cover my
17 mouth or my nose with my jail uniform. This has happened a lot in my dorm. I am afraid
18 of retaliation by deputies if I say I need medication or treatment for potential COVID-19
19 symptoms.

20 8. Before April 10, 2020, no one in the jail had given me anything to protect
21 myself against COVID-19. I had not received any masks, hand sanitizer, or gloves. Early
22 in the morning on April 10, deputies came into the dorm, turned on all the lights, and
23 gave one mask to each person. No other information was provided about the masks.

24 9. We do not have soap dispensers or hand sanitizer inside the dorm. We have
25 limited access to gloves; I don't get any gloves unless it's an emergency and I ask the
26 guards for them. But the guards have not given all of us gloves.

27 10. Before we were given the masks, the only people who had masks were the
28 deputies and some (but not all) trustees. It concerns me that people outside our dorm

1 come in and out of the dorm multiple times a day to conduct checks and to drop off our
2 meals, and they are not always wearing masks.

3 11. Each person is provided a free soap once when they enter, but I have used
4 mine up already. I typically buy one through the commissary about once a week.

5 12. About once a week, trustees from a different dorm typically come and
6 “clean” my cell. They are not always wearing masks.

7 13. I have a family outside, and if released, I will have support to help me get
8 the medical care I need.

9
10 I declare under penalty of perjury under the laws of the State of California and the
11 United States of America that the foregoing is true and correct. Executed this 14th day of
12 April 2020, in Los Angeles, California.

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16 Benito Venegas

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DECLARATION OF DYLAN VERNER-CRIST

I, Dylan Verner-Crist, declare:

1. I have personal knowledge of the facts set forth herein, and if called as a witness I could competently so testify.

2. I am an investigator with the American Civil Liberties Union (“ACLU”) of Northern California.

3. On April 13, 2020, Stanislaus County Deputy District Attorney John Goold held a press conference that was recorded by the Modesto Bee in an article of the same date. On April 20, 2020, I transcribed Mr. Goold’s statement from the Modesto Bee’s website. In his press statement, Mr. Goold stated that, in the opinion of the Stanislaus County District Attorney’s Office, “even though bail has been set for zero dollars for a wide variety of cases [by the emergency bail schedule], judges still retain discretion to set bail in excess of the bail schedule and set it higher than zero dollars.” *See* Apr. 13, 2020 Stanislaus County District Attorney’s Office Statement, *available at*

<https://www.modbee.com/news/local/crime/article241979576.html>, at 00:25-00:36.

During this press conference, Mr. Goold also explained that the Stanislaus County District Attorney’s Office has been “reviewing and filing oppositions to several cases, and several defendants trying to ask the court to not set it at zero dollars and keep those people in custody or at least subject to when they post bail.” *Id.*, 00:37-00:52.

4. On April 16, 2020, San Bernardino County District Attorney Jason Anderson released a press statement that was posted on the San Bernardino County District Attorney’s Facebook page. I transcribed his press statement, which is available at <https://www.facebook.com/notes/san-bernardino-county-district-attorney/jail-inmates-released-due-to-covid-19/10158352896679540/>, on Monday, April 20, 2020. In his press statement, Mr. Anderson stated that his office and the San Bernardino Sheriff’s are “doing everything we can to ensure that, despite some of these orders that are coming down from the Judicial Council, that we will object when people get released, that we

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will want to have hearings when people get released, that we want to ensure that inmates who don't deserve to get released, don't get released and create a public safety problem in our county..." Apr. 16, 2020 Statement of Jason Anderson, *available at* <https://www.facebook.com/notes/san-bernardino-county-district-attorney/jail-inmates-released-due-to-covid-19/10158352896679540/>, at 4:31-4:53. He also stated that, in his opinion, "[p]eople who are in custody, they made a choice at the same time to commit crimes against other people and there's a price to be paid for that also. And perhaps that price ought to be that the virus finds you where you were when it came into our community, which was in custody, and that's why I have a hard time saying we need to let people out of custody when the virus comes in..." *Id.*, 03:36-3:56.

5. On April 2, 2020, Riverside County Sheriff Chad Bianco held a live press conference that he posted on the Riverside County Sheriff's Facebook page. I transcribed portions of his press conference, which is available at <https://www.facebook.com/RiversideCountySheriff/videos/200294147931381/>, on Monday, April 20, 2020. During the press conference, Sheriff Bianco stated: "[W]e are getting a lot of demands and requests for inmates getting released because they're afraid of them contracting [COVID-19]. If you don't want to get this virus while you're in custody, don't break the law. That's really all I can tell you. You can't get any more plain than that. Don't break the law, you won't be in jail, and you won't have to worry about it, you can stay home with your family." April 2, 2020 Riverside County Sheriff Press Conference, *available at* <https://www.facebook.com/RiversideCountySheriff/videos/200294147931381/>, at 18:20-18:40.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that this declaration is executed at Berkeley, California this 22nd day of April, 2020.

/s/ Dylan Verner-Crist
Dylan Verner-Crist

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1
2 **DECLARATION OF CHRISTINE VOSS**

3 I, Christine Voss, am an attorney licensed to practice law in the state of California under
4 Bar No.176584. I am employed as a Senior Deputy Public Defender for the Santa Barbara
5 Public Defender’s Office. In that capacity I am assigned to individuals who are housed in the
6 Santa Barbara County Jail. I have spoken to individuals at the Santa Barbara County Jail that
7 relayed information to me about the conditions at the jail since the outbreak of the novel
8 Coronavirus pandemic.

9 I am informed from multiple sources over a total of 15 years working in the Santa
10 Barbara criminal justice system that the jail is divided into multiple housing areas that have
11 varying degrees of security and interaction between inmates and staff. I have been informed
12 and believe that the Minimum-Security Facility (MSF also known as “the farm”) is a dorm
13 setting. This section of the jail is divided into separated “barracks.” The C-Barracks houses
14 individuals who are working in the jail in various jobs including the kitchen, laundry room, and
15 cleaning throughout the jail.

16 I have been informed that the C-Barracks house approximately 90 inmates in triple
17 decker bunk beds. These beds are spaced less than 6 feet apart in two rows. The two rows
18 are separated by approximately 6 feet, less than an average grocery store aisle, creating a
19 path that is the primary route for the 90 inmates to move throughout the housing area. This
20 area was full as of April 6, 2020 with every bed filled. On April 14, 2020, after several inmates
21 were released from the jail based on an emergency order resetting bail at \$0, the C-Barracks
22 have reduced their population by approximately 5 inmates.

23 I am informed that the MSF also houses inmates that are segregated as a result of the
24 nature of their charges or background in the D-Barracks. These barracks mirror the
25 appearance of the C-Barracks but the inmates do not have as much access to various parts of
26 the jail. However, in order to communicate with their lawyers or probation staff they are moved
27 across the jail campus to the main jail to utilize the main jail court video system. When they
28 need to seek medical care, they are also moved across the campus to the medical unit in the

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1 main jail. As a result, they are touching surfaces that have been touched by inmates from
2 other units in the jail and interacting with staff from other areas of the jail.

3 I am informed that the beds in the barracks are constructed of metal frames and are
4 touched by not only bunkmates, but others in the dorm. The inmates use the frames to hang
5 their towels and other bedding on when not in use. These bed frames are not cleaned and the
6 inmates are not provided cleaning supplies to clean them. As people pass through and
7 congregate in this pathway they routinely touch each other's beds and linens.

8 I am informed by multiple sources that the barracks share a community bathroom at the
9 back of the housing unit. There is a swinging door to get into and out of the bathroom that
10 people need to touch to push and pull open by hand to gain access to the bathroom. There
11 are approximately 19 toilets, 9 shower heads, 7 urinals and 15 sinks. The toilets, urinals and
12 sinks are positioned immediately next to each other with less than 1 foot of space separating
13 them. There are no walls or barriers separating these fixtures. Inmates literally use the
14 bathroom facilities, wash their hands, shave and brush their teeth standing shoulder to
15 shoulder.

16 I am informed by multiple sources that there is no soap provided in this bathroom.
17 Each inmate may have their own bar of soap that is to be used for all of their hygiene
18 purposes – hands, showering, hair washing, and cleaning their clothes if needed in between
19 the once weekly linen exchanges. I am informed that the jail distributes 1 business card sized
20 soap per week to inmates for this purpose although since the COVID-19 outbreak inmates
21 have occasionally received an additional bar. I am informed that inmates are inconsistent
22 about their hygiene. Some inmates do not wash their hands regularly or even after using the
23 bathroom facilities. There is no way to limit contact with these inmates because they all share
24 the same living space.

25 I am informed that individuals housed in the C-Barracks are assigned jobs that require
26 daily violations of the recommendations by the CDC, WHO, and our local government leaders.
27 I am informed that twice a day inmates with jobs in jail are lined up approximately one foot
28 apart, they are searched by hand before and after they attend to their jobs held throughout the

1 jail. Although the correctional officers wear gloves to protect their own hands, they do not
2 change gloves in between touching each inmate, spreading cells or other contaminants from
3 person to person without knowing who may be positive and merely asymptomatic and
4 obviously breaching the six-foot social distancing guidelines. Inmates with jobs move about
5 the jail, from the laundry room and the kitchen to other housing units within the jail. I am
6 informed that inmates are assigned to distribute commissary and food every day, coming
7 within inches of other inmates and exchanging items.

8 Gloves are not distributed throughout the jail although occasionally they are provided
9 for certain tasks upon request and when available. I am informed that on approximately April
10 10, 2020 masks began to be distributed to inmates in the jail. Inmates are provided one mask
11 but they are only instructed to wear them for transportation to court or to other areas of the jail.
12 They are not worn in the housing units and are not worn consistently as individuals are moving
13 throughout the jail. I am informed that correctional officers and staff are not wearing masks
14 while engaging with inmates in the housing units, during searches, in the kitchen, laundry
15 room, and other areas of the jail.

16 I am informed that with the number of people in the MSF housing units it is impossible
17 to socially distance. Further, although floors are cleaned more regularly than prior to the
18 COVID-19 pandemic, there are many items in the housing units that are not being cleaned
19 including broom and mop handles, bed frames, tables and chairs in the day room, door
20 handles, door jambs, inmate property storage boxes, etc. The bathroom fixtures are cleaned
21 twice a day but there are not any cleaning supplies provided to clean surfaces in between
22 inmate use.

23 I am informed that despite still having two full barracks at the MSF, the jail has
24 substantially reduced the population in one of the barracks in the MSF. These barracks can
25 hold approximately 90 inmates and mirrors the C and D Barracks, however there are less than
26 a dozen inmates currently housed in that particular housing unit. None-the-less, the jail has
27 assigned these inmates to share bunk beds and utilize the bunk beds that are immediately
28 adjacent to each other despite the ability to spread out and socially distance.

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I am informed and believe that inmates in the MSF do not have a means to protect themselves or others in the same manner that those of us in the community are able to protect ourselves. These conditions did not present a significant issue prior to COVID-19 but based on the medical information widely available to the general public, they place inmates at a high risk for contagion and even death during this deadly pandemic in light of the fact that if an outbreak occurs in these housing units it will be nearly impossible to control or limit exposure under these circumstances.

I declare under penalty of perjury that the foregoing is true and correct and those items stated on information and belief are true and correct to the best of my knowledge.

DATED: April 14, 2020



Christine Voss
Senior Deputy Public Defender

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1 I, LEONARD WAKEFIELD, declare:

2 1. I am currently an inmate in Santa Rita Jail, the County Jail for Alameda
3 County. I have been in Santa Rita since January 19, 2020.

4 2. I had been housed in Unit 7E, and in the 7 Unit, there had been a number of
5 individuals who had not been feeling well and removed. We do not know what happened to
6 then, but we all assumed it was the corona virus.

7 3. Since March 5, 2020, I started not feeling well. I was having body pains, I
8 had no energy and could hardly get up. I was having a hard time breathing. I asked to see the
9 doctor. I asked to be tested for the corona virus. The deputy took me to the doctor, who said I
10 was fine. The doctor did not get me tested for corona. I felt so weak and felt so bad that I could
11 not get out of my bed. The mornings were the worst. I could not get up to eat breakfast.
12 Lunches they put in my room. And generally, I dragged myself out for dinner. For five weeks,
13 I basically laid down and did nothing. I couldn't call my wife. I couldn't even get up to call my
14 attorney.

15 4. On April 14, 2020, the jail handed out electronic tablets. With the tablet in my
16 cell, I phoned Attorney Yolanda Huang. I called her and asked for help. I told her that I
17 believed I needed to be tested for the corona virus, and that I had been so sick, I could not get out
18 of bed and could not get up to go get my breakfast food try.

19 5. Later that day, the jail did in fact come and swab my nose and the jail told me
20 that the jail was going to move me to Housing Unit 8C, where everyone who had tested positive
21 would be moved. I didn't want to move to 8C because the cells are dirty. The only thing the jail
22 is doing is moving us around. The deputy didn't care.

23 6. The deputy told me I had no choice. He was dressed like an astronaut, in a
24 white space suit. He immediately slapped hand cuffs on me, and twisted my arm, and dragged
25 me to Housing Unit 8C. This despite the fact that I am feeling so poorly. When I arrived at
26 Housing Unit 8C, the first cell they put me in was so filthy, with garbage and dirt all over the cell
27 that I told them if they forced me to be in that cell, they would have to put me on suicide watch.
28 Then they put me in a cell that at least had the garbage removed.

1 7. During this entire time, the nurses and doctors have done nothing to help me
2 except to come and take my vitals. When I tell them that my body hurts, and that I am having a
3 hard time breathing, all they give me is Tylenol. I can't even get a cup of anything hot to drink.
4 No tea, no coffee. The only hot water I have access to is from the tap in my cell, which is just
5 lukewarm.

6 8. In Unit 8C, the shower does not work, there's hardly any water and no water
7 pressure. Someone in a white astronaut suit opens my cell door and puts my food tray on the
8 floor, like I am a dog. My cell has not been cleaned. I have received no soap, and no hand
9 wipes.

10 9. On April 17, 2020, the jail informed me that I had tested positive for corona
11 virus.

12 10. In HU 8, we are all given one hour a day out of our cell. Otherwise, we are
13 locked up and alone 23 hours a day. During that one hour, we have the opportunity to get up and
14 use the phone. This corona virus comes in waves. Sometimes, I feel so bad and seem so
15 feverish, it is all I can do, to just lie down and endure. Other times, I feel better and can sit up.
16 During the times I can sit up, I look out the glass of my door to see what is going on. What I see
17 is that one person at a time is having POD time. I also see that inmates have no gloves, and are
18 touching the tables and phone, and that the phone is not sanitized between each inmate, and the
19 POD is not wiped down at all.

20 11. The food we are getting is almost inedible. It is served on plastic, reused
21 trays, and often the trays are dirty in which old food, that has not been washed off is underneath
22 the "new food" on top. Feeling bad, it is hard to eat anyway and even harder to eat the awful
23 stuff the Jail calls food.

24 12. The Jail is providing me with no medical treatment and nothing to make me
25 more comfortable.

26 I declare under penalty of perjury of the laws of the State of California and the
27 United States that the foregoing is true and correct to the best of my knowledge and belief.
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1 Because of the coronavirus, and my confinement, there are no legal visits
2 permitted and I was not able to sign this declaration in person. All information in this declaration
3 was relayed to Yolanda Huang on 4/14/20, 4.17/2020 and 4/18/2020. On April 18, 2020, Ms.
4 Huang read this declaration to me over the phone. I understood and verified its contents in full,
5 and authorized Yolanda Huang to sign the declaration on my behalf.

6 Executed on 4/18/2020 in Oakland, California.

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10 By: Yolanda Huang, SBA104543
11 Law Office of Yolanda Huang
12 on behalf of Leonard Wakefield

Document received by the CA Supreme Court.

1 **DECLARATION OF SEAN SEABURN WELLS**

2 I, Sean Seaburn Wells, hereby declare:

3 1. I make this declaration based on my own personal knowledge and if called to testify I
4 could and would do so competently as follows:

5 2. I am 49 years old.

6 3. I am currently housed at the Theo Lacy Facility (“Theo Lacy”), which is part of the
7 Orange County Jail in Orange, California.

8 4. I have been in Orange County Sheriff’s Department (“OCSD”) custody since December
9 2019.

10 5. I was charged with one count of California Penal Code 496 (receiving stolen property).

11 6. I accepted a plea bargain in January 2020 and was sentenced to a four-year divided
12 sentence; one year in custody and three years on AB 109 post-community supervision.

13 7. My release date is June 7, 2020.

14 8. I am currently housed in a two-person cell with another individual. The cell we share is
15 about eight by six feet. It contains two bunks, a toilet, washbasin, drinking fountain, table and
16 two stools.

17 9. It is impossible for my cellmate and I to maintain six feet distance from each other when
18 we are confined in our cell, which is about 21 hours a day.

19 10. My cellmate and I eat three meals a day in our shared cell on a table approximately 18
20 inches from each other. Our knees touch when we sit on the bolt down stools.

21 11. My cellmate sleeps on the top bunk and I sleep on the bottom bunk. At most we are
22 about three feet away from each other. When we lay on our bunks, I can reach up and touch my
23 cellmate.

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1 12. On April 9, my cellmate was transported to the North Justice Center in Fullerton,
2 California for a court hearing. He returned to our shared cell about eight hours later. He told me
3 he came into close contact with about 20 other people during the day. I am concerned that he
4 may have been exposed to the virus. I feel scared and nervous sharing a small cell with him.

5 13. As of April 14, my cell mate and I share a dayroom and two showers with 16 other
6 people on average who are housed in the same housing sector. The sector consists of 16 two-
7 person cells. Eight cells make up the bottom tier, and an additional eight make up the top tier.
8 Currently, three two-person cells are occupied by two people, one of them by me and my
9 cellmate; 12 two-person cells are occupied by one person; and one two-person cell is vacant.

10 14. Custody staff typically run dayroom with four cells at a time. Right now, that can
11 include between four to eight people at a time. However, the common space we share is used by
12 up to a total of 18 people daily.

13 15. During dayroom, we can use the showers and telephones. Our housing sector includes
14 two showers and four telephones. It is impossible to maintain six feet distance from others when
15 using the telephones because they are about two feet apart from each other.

16 16. It is an unwritten rule that people in custody are responsible for cleaning the dayroom
17 and showers. The first group out to dayroom is tasked with cleaning. Cleaning supplies are only
18 provided to the first group, which means everyone else in the sector is unable to wipe the tables,
19 stools, and telephones, or sweep and mop and clean the showers after other groups use the
20 dayroom.

21 17. Both showers have some degree of mold growing on them.

22 18. Custody staff does not provide us with gloves or hand sanitizer.

23 19. I wash my hands as much as possible but do not have access to enough soap. Custody
24 staff provide us with a single hotel size bar of soap per week. My bar of soap runs out within a
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1 day if I use it to shower and wash my hands. People who do not have money on their books are
2 unable to purchase additional hygiene supplies and wind up having to shower with only water. I
3 have had to do this at least once before. It is a common experience for other people in my
4 housing sector.

5 20. It is impossible to maintain six feet distance from medical and custody staff. On April
6 13, I saw medical staff and sat about two feet away from them. A deputy stood immediately
7 outside the room. The door was open.

8 21. Meal distribution and pill call happen three times a day. Deputies, medical staff and
9 incarcerated workers distribute medication and meals through a tray slot on a glass door. The
10 tray slot is about three feet from the ground. When meals and medication are distributed,
11 deputies, medical staff and in custody workers are about a foot and a half away from us.
12

13 22. Although separated by a glass door, medical staff hand me and other people our
14 medication through the slot on the door. They hand us our pills in a plastic envelope/zip bag.
15 We open the plastic envelope/zip bag, retrieve our pills and return the envelope/zip bag to
16 medical staff. It is common for our hands to touch.
17

18 23. Although custody and medical staff are now wearing masks and gloves, they do not
19 change them throughout the day despite interacting with many people in custody, other staff,
20 and likely people outside of jail.
21

22 24. About a week and a half ago, custody staff gave us square-shaped pieces of torn sheets
23 to use as mouth/face coverings. Deputies made an announcement that the coverings are now
24 part of mandatory jail uniform. We have been using the same covering since then and are
25 expected to wash them on our own with the same bar of soap which is already insufficient.
26

27 25. I am under a lot of stress. I am concerned about the possibility of custody and medical
28 staff bringing in the virus from the outside. I am concerned that medical staff who deal with

1 many other incarcerated individuals, particularly people who are sick, do not change their
2 gloves. I am afraid that they could be carriers of the virus. I am afraid of more people testing
3 positive for COVID-19 in OC jails. I am afraid about contracting the virus while in custody.

4 26. I am worried about my family and their wellbeing. If I were to be released, I would be
5 able to return to work immediately. I am a truck driver and considered an essential worker. I do
6 not want to lose my job. My family needs my paycheck now more than ever.

7 27. In March 2013, I was hit by a vehicle. I sustained several injuries, including a broken
8 right leg. I underwent surgery and my leg was pinned with titanium rods and screws.

9 28. Following the accident, my doctor prescribed Percocet, Oxycodone and Norco to me for
10 about three months. During that time, I became addicted to opioids.

11 29. I began opioid addiction treatment about a year ago while in the community. I have
12 continued my treatment while in OCSD custody. I take Subutex once a day.

13 30. I have a history of childhood asthma. I had moderate asthma from the age of 5 to 17.
14 During that time, I took oral steroids about once a week to help keep my bronchial tubes opens
15 and calm airway inflammation and swelling allowing me to breathe better. I would also use an
16 Albuterol inhaler for rescue purposes. I experienced the worst asthma attacks between the ages
17 of 5 to 7.

18 31. I have a 32-year history of smoking tobacco and cannabis. I started when I was in high
19 school.

20 32. About six months ago, I was hospitalized with pneumonia for about three days.

21 33. I filled out two inmate message slips requesting that OCSD review my case for early
22 release. The first on March 30, 2020 and the second on April 8, 2020. I received a response to
23 my first message noting my release date. The response to my second message detailed that I
24 would be screened for 30 days and notified if I qualified for early release.
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DECLARATION OF BRENDON D. WOODS

1 BRENDON D. WOODS
Public Defender
2 Juvenile Branch Office
2500 Fairmont Dr., Ste. C3041
3 San Leandro, California 94578-1006
(510) 272-6622

4 Brendon D. Woods
5 Attorney at Law
California State Bar No. 189910
6

7
8 SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA
9 IN SESSION AS A JUVENILE COURT

10 **DECLARATION OF BRENDON D. WOODS**

11 I, Brendon D. Woods, hereby declare as follows:

- 12 1. I am Brendon D. Woods, the Public Defender of Alameda County.
- 13 2. I have worked for the public defender's office for twenty-four years and was a trial attorney
14 for fourteen years before becoming the Public Defender.
- 15 3. As the Alameda County Public Defender, I oversee the juvenile unit of six attorneys who
16 are qualified to represent youth in Juvenile court delinquency proceedings. A material role
17 of our juvenile defenders is to represent youth who are detained in juvenile hall and to
18 secure their release home or to non-secure alternative placements. During this
19 unprecedented crisis and due to the resulting partial shutdown of the juvenile courts, our
20 efforts to secure the release of incarcerated children is of paramount importance.
- 21 4. Children who are incarcerated within the juvenile hall rely upon programming, visits, and
22 structure to cope with their lack of freedom and the emotional toll of removal from their
23 homes.
24

DECLARATION OF BRENDON D. WOODS

- 1 5. Children who are incarcerated often rely upon positive re-enforcement in the form of
2 accolades such as “Student of the Week” awards and other recognitions from the juvenile
3 hall staff as part of the standard programming.
- 4 6. Children incarcerated in juvenile hall rely on visits from their parents to cope with the
5 anxiety and depression that accompanies removal from their homes.
- 6 7. Parent visits, which occur once or twice a week, provide an opportunity for incarcerated
7 children to re-connect with their families, experience physical affection, and to tell and
8 demonstrate for their parents how they are trying to grow and improve as people.
- 9 8. During parent visits, parents show their incarcerated children new pictures of their younger
10 siblings, parents and children laugh together, play games, hold hands, and generally enjoy
11 each-other’s company.
- 12 9. The visitation room is a unique setting where teenagers and their parents can have time to
13 truly focus on each other and have the difficult conversations that are often vital to a child’s
14 rehabilitation, recovery, and growth.
- 15 10. Youth in Alameda County Juvenile Hall usually have access to various volunteers
16 providing additional programing in areas like education, yoga, and physical activity,
17 mentoring, personal growth and responsibility, and other areas. These volunteers come to
18 juvenile hall, providing direct access and often one-on-one contact with the children.
- 19 20 11. Prior to the COVID-19 pandemic, children in the juvenile hall attended school in
21 classrooms taught by experienced and qualified teachers. Classes were taught Monday
22 through Friday and followed a schedule similar to most public schools.
- 23 24 12. Because of COVID-19, in-person school has been suspended in the juvenile hall. The
25 youth’s education currently consists only of work “packets” that are distributed to the
26 children and completed independently.
- 27

DECLARATION OF BRENDON D. WOODS

1 13. In-person religious groups and religious one-on-one meetings were suspended.

2 14. All in person visits with family are currently suspended.

3
4 15. Most of the community groups from whom the incarcerated youth receive programming
5 suspended their services during the shelter-in-place. Those that continue to provide
6 services conduct them remotely through videoconferencing.

7 16. Though the incarcerated youth have their own rooms, they necessarily spend a majority of
8 their time in common areas where social distancing is a challenge. This difficulty is
9 increased by the fact that many of the incarcerated youth know very little about the severity
10 of the COVID-19 pandemic. They are not allowed to watch news programming in the
11 juvenile hall.

12 17. At the same time that they are unable to have in-person contact with their families, mentors,
13 and chaplains, many incarcerated youth are learning about family members who may be
14 struggling financially due to COVID-19 related job losses and layoffs. As a result, some
15 of the youth are experiencing additional stress and anxiety.

16 18. Because of COVID-19 restrictions, many of the rehabilitative benefits that may have
17 existed before from youth programs within the juvenile hall are no longer available.

18 19. It is harder for youth to be away from their families with all the uncertainty regarding
19 COVID-19 health issues.

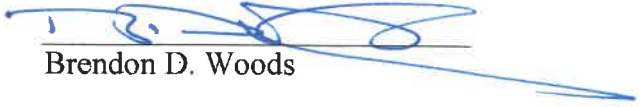
20 20. A disproportionate number of incarcerated youth have family members who are dealing
21 with health issues that put them at increased risk from COVID-19, such as hypertension,
22 diabetes, asthma, and heart problems. Similarly, many of our juvenile clients live with
23 grandparents and other older family members. For those youth who are aware of the
24 severity of the pandemic, their stress increases from not being able to be with their family
25 members.
26

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DECLARATION OF BRENDON D. WOODS

1 I declare that the above information is true and accurate, to the best of my knowledge.

2 Executed this 23rd day of April, 2020, in Oakland, California.

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6 Brendon D. Woods

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1 **DECLARATION OF DENEAL YOUNG**

2 I, DeNeal Young, hereby declare and say:

3 1. I make this declaration of my own free will. I have personal knowledge of
4 the facts set forth herein and if called as a witness, could and would testify competently
5 thereto.

6 2. I am currently incarcerated in Men’s Central Jail (“MCJ”) in Los Angeles,
7 California. I have been incarcerated at MCJ since November 26, 2019, awaiting a
8 resentencing hearing. Prior to being transferred to MCJ, I was incarcerated at a state
9 prison in Solano County.

10 3. My resentencing hearing date was scheduled for March 19, 2020, and has
11 now been delayed indefinitely due to COVID-19.

12 4. I am a 49-year old Black man confined in a wheelchair due to blood clots in
13 my legs. I have multiple underlying health conditions. I suffer from severe obesity.
14 Doctors in prison and in MCJ have told me that I have an undiagnosed heart condition. In
15 or around February of this year, the medical staff at MCJ performed an ultrasound in my
16 legs. This coincided with chest pains that I started having in February. On April 7, I
17 received the results of the ultrasound which revealed roughly 45% obstruction of blood
18 flow in one leg and 35% obstruction of blood flow in the other leg. The doctor informed
19 me that this puts me at risk of heart attack, pulmonary embolism, and stroke. Due to the
20 rapid progression of the obstruction, I have lost my ability to walk and am currently in a
21 wheelchair. I was told that I needed to be “sent out” to the county hospital immediately
22 for an emergency surgery. However, the doctor at MCJ has since told me that they cannot
23 send me out and they don’t know when they will be able to send me out due to COVID
24 19 restrictions. They state, “Everything has to go through Trump.” With each day that
25 passes, I am afraid that if I contract COVID-19 in the jail, my compromised medical
26 condition would put me at a higher risk of complications from the illness.

27 5. I am housed in a 3-man cell in the Medical unit of MCJ. There are three
28 bunks and a toilet. There is roughly one foot between each bed. There is very little

1 privacy or personal space; we use the bathroom in each other's presence and touch all of
2 the same surfaces. It is impossible for me to keep six feet apart from my cell mates. I get
3 my medications 3x/day when the nurse comes to the door. The nurse is always
4 accompanied by a deputy. They open the door and I walk to the doorway where they
5 hand me my medication. They are always less than 6 feet away. It's a different deputy all
6 three times a day and a different nurse at least two times a day. I get my food 3x/day
7 when a deputy and a trustee comes to the door. It is a different trustee each time of day
8 and a different deputy each time of day. I also encounter deputies when I go to the
9 shower 3x/week (Sun, Tues, Thurs). I have been to the doctor four times since I have
10 been incarcerated here at MCJ. The deputies bring me to the doctor by walking me down
11 a hallway about 50-feet from my cell. I have to wait in line behind eight people on
12 average. We are all sitting on the bench (and I am next to the bench in my wheelchair). It
13 is not possible to have six feet of distance on the bench. We are usually waiting for about
14 an hour and a half to see the doctor.

15 6. I want to do everything I can to protect myself against COVID-19 but the
16 guards and nurses have not given me adequate protective gear to protect myself against
17 COVID-19. No one had the jail has provided me with any written information about the
18 virus, and I do not see any signs around my cell or at the jail about how to protect myself
19 against contracting it or spreading it if I have it. The only information I get is from
20 reading the newspaper or watching the news on TV.

21 7. On or around March 15, 2020, I was exposed to someone who was coughing
22 aggressively. The person was in front of the nurse's station, where I was waiting to get
23 my blood pressure taken. A few days later, my throat became scratchy and I also
24 developed a cough. On March 20, my temperature was taken by a nurse. I registered a
25 temperature of 99.5, which is higher than my regular body temperature and considered to
26 be a fever for me. Although I showed symptoms of COVID-19, I was not placed in a
27 separate cell, quarantined, or provided any medication. I was also not given a COVID-19
28 test.

1 8. I have personally heard of anyone in the jail who has been able to get a
2 COVID-19 test despite showing symptoms, but deputies have said to me that “inmates
3 upstairs have COVID-19.”

4 9. Since I have been in the medical unit, I have seen only one thorough
5 cleaning of my cell. Two times a week, trustees from a different dorm will come into my
6 cell and sweep or throw out the trash. I do not observe them using any cleaning products
7 when they clean the cell. Shared surfaces within my cell include our single phone, door,
8 sink, toilet, and walls. I clean the surfaces myself. I have to use my own soap, which I put
9 on a rag to clean the shared surfaces. The jail does not give me any disinfectant supplies
10 to clean these shared surfaces. No one cleans the shared surfaces between uses.

11 10. Each person is provided a small soap bar upon detention, which dissolves
12 quickly after a few uses. I was handed a bar of soap by a deputy when I was first
13 transferred to MCJ; I have never received a second bar of soap from the jail in my five
14 months residing at MCJ. Instead, I have to buy my own soap. To buy a bar of soap, I
15 have to pay upwards of \$1.45 for a bar of Irish Spring, \$2.11 for a bar of Dove, or \$5.00
16 for a bar of Neutrogena, which comes out of my commissary money for food and other
17 necessities.

18 11. I shower three times a week. The showers are shared with the entire module.
19 I have never observed anyone cleaning the shared showers. In fact, when I shower, I am
20 told to clean the shower myself, take out my trash, and wipe down the area that I use. I
21 have never been provided any special cleaning supplies to do this. I usually just take my
22 foot and wipe down the shower area before I can shower. I typically see the following in
23 the shower area that I have to drag out with my foot: clothes left over from a previous
24 shower, debris, trash, dirty diapers, hair, spit, and phlegm. I am in a wheelchair so this is
25 difficult for me to do. The showers are shared so the door, the faucet, the rails, the shower
26 walls are all common surfaces.

27 12. I have observed the deputies try to confiscate my cell mate’s CPAP machine,
28 but he has refused to give it up because he needs it to breathe while sleeping. I have heard

1 of other people in the medical ward whose CPAP machines were taken from them
2 because of COVID-19, but who are not told what else they can do about their breathing
3 problems.

4 13. When I wash my hands, I have to use my shirt to wipe my hands. I am not
5 provided any paper towels inside my cell to wipe my hands clean after washing them. I
6 get laundry once every Monday. Most of the time they don't have my size (5X top, 7X
7 pants).

8 14. On April 9, because news of COVID-19's rapid spread was causing me to
9 fear for my life, I submitted a grievance form asking for a mask and hand sanitizer. I also
10 requested a release so that I can get the medical care that I need in a timely manner. I
11 explained in the grievance, "This grievance is for me to receive a mask, gloves and hand
12 sanitizer and to be released from custody to go to the hospital to get medical care
13 attention and social distancing living conditions to stop the spread of COVID-19."

14 15. On April 10, at around 2am in the morning, guards came into my cell and
15 handed each of us a face mask. I was not given any directions about how to wear it or
16 when to wear it, or if we will be getting replacement face masks after we finish using the
17 ones they gave us.

18 16. On April 10, in the daytime, I was visited by a Senior Deputy. I asked him to
19 submit my grievance, and he agreed to do so. He told me that he reviewed my grievance
20 form and that that the deputies would not be giving our hand sanitizer or gloves. He also
21 said that my request to be released was a custody issue and he could not do anything
22 about that.

23 17. Before April 10, I repeatedly asked nurses, deputies and senior deputies for a
24 face mask and was told no. I heard in response, "You are safe because you are in here."
25 would sometimes receive the response, "We don't have no face masks." Jail staff, nurses,
26 trustees and other people physically enter my cell at least five times a day to pass out
27 food, medication, and to perform welfare checks. Before April 10, the only people who
28 had masks are some (but not all) of the deputies, trustees, and nurses. Not all of the

1 deputies wear masks. I have seen deputies cough and sneeze near my cell.

2 18. On April 15, I again submitted a grievance form stating my concern on
3 behalf of all prisoners at MCJ. The grievance states, ““This grievance is for myself and
4 all inmates in LA County Jails. The jails fail to maintain conditions necessary to prevent
5 COVID-19 by e.g., ignoring CDC guidance and not providing masks, sanitization
6 supplies, proper cleaning, soap/paper towels, social distancing, testing, and treatment.”
7 To date, I have not received a response.

8 19. If released, I will go to my aunt’s house in Paramount, CA. My aunt is
9 willing and able to come pick me up at MCJ. My aunt is a nurse and works at a hospital
10 in Marina Del Rey; hence, she is familiar with local hospitals in the Los Angeles area
11 where I might be able to timely secure the medical help I need. If released, I have many
12 more options than I have within the jail to find a medical provider to treat the blood clots
13 in my legs and perform urgent surgery as needed.

14
15 I declare under penalty of perjury under the laws of the State of California and the
16 United States of America that the foregoing is true and correct. Executed this 23rd day
17 April 2020, in Los Angeles, California.

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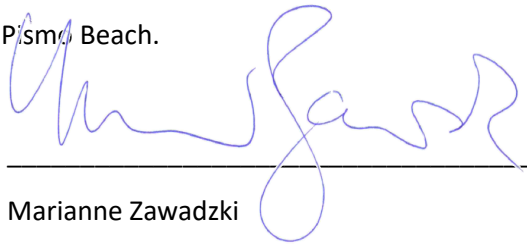
21 _____
DeNeal Young

DECLARATION OF COUNSEL

1. I, Marianne Zawadzki, am an attorney in the Office of the Santa Barbara County Public Defender. The Public Defender represents Ricky Pacheco.
2. I spoke with Mr. Pacheco on April 17, at about 12:00 pm. He called me from a phone in the jail in a room he was waiting in following his sentencing via Zoom video.
3. Mr. Pacheco was arrested on February 28. He was housed in the South Dorm. Mr. Pacheco estimates the dimensions of the South Dorm are approximately 30 feet by 30 feet. When Mr. Pacheco was first arrested there were about 40 men in the South Dorm and some had to sleep on the floor. Mr. Pacheco reported that now there are closer to 20 and there are enough beds. However, he estimates that each bunk bed is less than 5 feet apart.
4. Mr. Pacheco Reports that the only major change he has noticed in day to day jail operations in the last week or so is the doling out of medication in larger batches for self-administration, so that inmates are not regularly visiting jail medical for the administration of their medication.
5. Between 7 and 10 days ago Mr. Pacheco reported receiving a painte'rs mask. He was instructed to wear the mask anytime he left his housing unit, but not necessarily when he was in the housing unit. Mr. Pacheco reported that some of the correctional officers wear masks and some don't.
6. Mr. Pacheco reported that the South Dorm has 3 working sinks and that he was instructed at some point regarding handwashing and not touching his face.
7. Mr. Pacheco reported that the housing unit he is in receives unknown chemical cleaning agents for inmate use about once per day.
8. Mr. Pacheco's biggest concern was the inaccessibility of medical attention in the Jail. Mr. Pacheco reported that some medical kites get answered and some do not and that response time vary widely. Mr. Pacheco is diabetic and was working closely with doctors before his arrest to manage his diabetes, testing his blood sugar daily. Mr. Pacheco reported that the jail stopped testing him every day to determine if he needed insulin and recently just began administering him metformin.

9. Mr. Pacheco also has several black spots on his abdomen. Immediately prior to arrest his doctor expressed some urgency in getting the spots checked for cancer. Mr. Pacheco has expressed this to jail medical but has not been able to receive any diagnostic services in the jail.
10. Mr. Pacheco also reported he witnessed another inmate who appeared to have a stroke returned to the dorm with no outside medical attention. A second inmate became upset due to pain in a leg that had recently been operated on and was denied any medical attention for the pain. Mr. Pacheco witnessed the inmate with the post-op leg was placed in an isolation cell and written up.

Signed this 17th day of April, 2020 in the city of Pismo Beach.



Marianne Zawadzki

Declarant

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9
10 UNITED STATES DISTRICT COURT
11 NORTHERN DISTRICT OF CALIFORNIA
12 SAN FRANCISCO DIVISION

13 ANGEL DE JESUS ZEPEDA RIVAS,
14 BRENDA RUIZ TOVAR, LAWRENCE
MWAURA, LUCIANO GONZALO
15 MENDOZA JERONIMO, CORAIMA
YARITZA SANCHEZ NUÑEZ, JAVIER
16 ALFARO, DUNG TUAN DANG,

17 Petitioners-Plaintiffs,

18 v.

19 DAVID JENNINGS, Acting Director of the
San Francisco Field Office of U.S. Immigration
and Customs Enforcement; MATTHEW T.
20 ALBENCE, Deputy Director and Senior
Official Performing the Duties of the Director
21 of the U.S. Immigration and Customs
Enforcement; U.S. IMMIGRATION AND
22 CUSTOMS ENFORCEMENT; GEO GROUP,
INC.; NATHAN ALLEN, Warden of Mesa
23 Verde Detention Facility,

24 Respondents-Defendants.

CASE NO.

**DECLARATION OF ANGEL
ZEPEDA**

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Attorneys for Petitioners-Plaintiffs

*Motion for Admission *Pro Hac Vice* Forthcoming

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DECLARATION OF ANGEL DE JESUS ZEPEDA RIVAS

I, Angel de Jesus Zepeda Rivas, declare the following based on my personal knowledge:

1. I make this declaration from my personal knowledge and, if called to testify to these facts, could and would do so competently.

2. My full name is Angel de Jesus Zepeda Rivas. I was born in El Salvador and I am 32 years old. I have been in the United States since 2008. I have a two-year-old US citizen daughter. Her mother and I have been in a committed relationship for several years but are not married. I have a good work history. I worked for over two years for My Move.

3. I have been detained at Yuba County Jail in Marysville, CA since November 21, 2019, when ICE came to my house to detain me. I have not been given a bond by ICE, and the judge cannot grant me bond until I have been detained for 6 months.

4. I am in withholding only proceedings, as my prior removal in absentia prevents me from seeking asylum. I passed my reasonable fear interview, as the asylum officer found I have a reasonable fear of torture. From around 2002-2004, I endured sexual and physical abuse by Barrio 18 gang members who wanted me to sell drugs for them at my Christian school. They called me “*marica*,” a derogatory word meaning “faggot.” My friends and I refused, so they subjected us to sexual and physical abuse. We tried to tell the police, but the police did not help us. I fled to the United States. Because I didn’t report a change in my address properly, I was ordered removed in absentia. I was only 17 years old. I was deported from the United States in 2007. Upon returning to El Salvador, I was again threatened and beaten up. I was also assaulted by police. I have a head injury and still suffer headaches from one of the attacks. Afraid for my life, I returned to the United States in 2008.

5. I have no criminal convictions and to my knowledge have never been charged with a crime. In late summer 2018, I was arrested because I happened to be near the scene of a bar fight. I was released quickly and there were no charges brought against me.

6. I have type 2 diabetes. I was diagnosed around early 2019, prior to being detained at Yuba. I was taking medication and had my diabetes under control at the time I was detained. When I got to Yuba, I told the medical staff that I had diabetes and was taking medicine to control it. They told

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1 me they would keep me under medical review. For about five days after that, they took my blood from
2 my finger, and my blood sugar levels were okay. But I think that was because I had been taking
3 medication to control the diabetes for so long.

4 7. About two weeks after I was detained, my body started feeling really hot and I got
5 constant nose bleeds. Those were symptoms I'd experienced before I was diagnosed with diabetes. I
6 went to see medical staff, and I remember that they pricked my finger to test my blood sugar. I
7 remember it was high then, and they tested it for the next two days, and it started to come down. I could
8 see the number on the little machine that reads your blood sugar levels. They told me not to eat any
9 sweets, like the desserts they give for food or sell at the commissary. But I wasn't given any
10 medication.

11 8. From December and February, I would sometimes feel hot in my body and feel really
12 dizzy. In February, I remember that I saw medical staff and my blood sugar levels were high. They told
13 me I could exercise or take medicine. I remember my doctor outside of Yuba telling me that exercising
14 could help, so I decided to try exercising. They didn't give me any more information, just to have a
15 daily exercise routine. But they didn't give me a routine to follow. I tried to do exercise. I would run up
16 and down the stairs, and with some other detainees, we'd do pushups and sit ups. The most exercise
17 you can do is run up and down the stairs, because there isn't any other space. The space on the roof
18 where we go for "outside" time is very small, and there isn't enough room to run or really do exercise.
19 I was doing this exercise routine about three days a week until everyone in my pod got sick. Now, I can't
20 exercise because my feet are so swollen and painful. It is also really hard to do exercise when you feel
21 depressed.

22 9. Since February 28, 2020, I have submitted at least ten requests to see the doctor. I have
23 saved copies of many of these requests, but have thrown some away. On March 5, 2020, I asked to see
24 a doctor because I was feeling hot all through my body and feeling a tingling sensation and numbness,
25 all the way from my feet through my chest. Two or three days later, I saw the medic, they took my
26 blood pressure and I was sent back to my pod. On March 20, I requested again to see a medic because
27 the heat in my body and tingling hadn't gone away, and on top of that, I felt like I couldn't catch my
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1 breath and felt a stabbing sensation in my chest. I was really scared. A few days later, the medical staff
2 took my blood pressure again and sent me back to my Pod. I don't remember them telling me what my
3 blood pressure was at that time.

4 10. For the past two weeks or so, my feet have become so swollen that I am currently unable
5 to walk normally. This swelling starts at my knees all the way to my feet. I also continue to feel like my
6 body is hot, and like I have tingling and numbness all over my body. I requested to see the doctor again
7 on April 9th, and the medical staff said they would do an x-ray. I told them that I hadn't injured myself
8 and that these were symptoms of my diabetes. I believe they drew my blood then, and the day after I
9 saw medical staff, they told me I am pre-diabetic and gave me Metformin. But the pain and swelling in
10 my feet didn't go away, so I asked to see the doctor again on April 15th. Instead, they took me for x-
11 rays. I haven't gotten results from the x-rays.

12 11. Since I came to Yuba, I have also been diagnosed with hypertension. This was first
13 discovered about two weeks ago, when they took my blood pressure and it was over 160. Since then,
14 across a number of tests, it hasn't gone below 160. Medical staff have told me this means I have high
15 blood pressure. I remember a recent reading of my blood pressure was 163, and I am having trouble
16 breathing. Sometime around April 12th I began taking medication for hypertension. On the morning of
17 April 18, my blood pressure was taken again and it was 185. They took it again and it was 176. Medical
18 staff gave me a pill that they said would help bring my blood pressure down. They said it was related to
19 my swollen feet. Later in the afternoon, they took my blood pressure again, and it had gone up to 190.
20 I'm really scared. I was feeling a lot of pressure in my chest, and I'm worried I'm going to have a heart
21 attack. My feet are still swollen. I don't understand how, when I came to Yuba I had no symptoms and
22 I was feeling healthy, and now five months later, I have high blood pressure and so much pain.

23 12. When they take my blood pressure, I see them taking another person's blood pressure
24 right before me, and then they don't clean the cuff, and take my blood pressure. And that's directly on
25 my skin.

26 13. I also have allergies and take medication for that. At times, my allergies make it difficult
27 to breathe, cause me to sneeze, give me a very runny nose, cause a very thick mucus in my sinuses, or
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1 make me very congested. I have been taking allergy medication at Yuba since around the middle of
2 April, but it hasn't helped yet. I also suffer from recurring frequent headaches and sometimes
3 migraines, due to an injury from when I was physically assaulted in El Salvador. The headaches get
4 very bad at times and it's really difficult. I have been given ibuprofen and Tylenol at Yuba, but neither
5 help with the pain. All the noise here inside make it worse. I spend a lot of time lying down to try to
6 relax but the pain doesn't go away.

7 14. At Yuba County Jail, I am housed in C Pod. Before C Pod, I was in B Pod. They are set
8 up in the same way. There are about 37 people here, and it's really hard to get away from people and
9 find calm. It is impossible at any time during the day or night for me to be socially distant from other
10 people. The place is just too small for so many people.

11 15. When I arrived, this unit was full, with 50 people. There are two levels in C Pod. On the
12 first floor are all the bunk beds. The beds are less than a meter apart. Right now where I'm sleeping, I
13 am on the top bunk, and since I moved into a corner, there is one bunk bed that is empty next to me,
14 and then in the next bed there is someone else. But that is rare. All the lower bunks are taken and
15 almost everyone is sleeping with someone in the bed next to them. Although I'm on the top bunk and
16 there isn't someone in the bed next to me on the top bunk, there is someone on the bottom bunk below
17 me. He is about one meter away from me. There are 25 bunk beds in total, and all of the bottom bunks
18 are occupied because many people have injuries or pain that keeps them from getting in the top bunk.
19 So they are assigned a lower bunk.

20 16. On the second floor are the tables, where we eat and gather. The tables each seat 5 or 6
21 people each and are at most 1.5 meters apart. The tables are made of metal and are bolted to the floor.
22 The metal benches are also affixed to the floor and you cannot move them. Even without 50 people,
23 there aren't enough tables for us to be able to sit far enough apart. We are sitting right next to each
24 other, without much distance. Some people now eat in their beds. But every time I go to eat, I am
25 within two meters of other people.

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1 17. I know the distance between the tables and beds because we've measured it. There are
2 people in C Pod who have worked in construction, and so we've counted the distance between the
3 tables and the beds using our feet.

4 18. We get soap every two or three days. They are tiny bars of soap. It's not enough. They
5 give us a cleaning liquid to wash the bathrooms, which is really harsh and smells very strong of
6 chemicals. Since we don't have enough soap, we use that to wash our hands. When we use that on our
7 bare hands, it burns.

8 19. We have to do all the cleaning. Daily, we sweep, mop, and clean the bathrooms. The
9 showers are disgusting. Even if when we use the disinfectant, and clean them every day, they're still
10 dirty. But we don't get any protection to clean, not even gloves for the harsh chemicals.

11 20. Staff wear own masks and gloves, but me and other detainees do not have access to them.
12 When we have asked for gloves and masks, they have only said "maybe tomorrow," but we never get
13 them.

14 21. There are only two urinals. There is often a line to use the urinal, especially in the
15 mornings when we first wake up. And people are one after another in line. That's the same at night,
16 when everyone needs to use the sinks to brush our teeth. It feels impossible to maintain distance.

17 22. We haven't been told anything about the virus. About three weeks ago, they put up a flier
18 that says there is free soap. Then they put up a poster about the symptoms of COVID-19 but no one has
19 told us about the virus or what we should do. About two weeks ago, a Sargent came by C Pod. There
20 were four of us sitting at a table on the second floor. He looked at us and said, "guys, keep your
21 distance. Six feet," and then casually walked away. We don't have anywhere else to be. We see on the
22 news that we are supposed to maintain six feet of distance, but this was the first time that anyone at the
23 facility had told us.

24 23. When we go to see the medical staff, they call our names and we walk about 30 steps
25 down a hallway to the pharmacy. We're one after another as we walk. They open the door and we sit in
26 another hallway that they use as a waiting room. The chairs used to be right next to each other, but on
27 April 18th for the first time, the chairs were spaced farther apart. On that day, there were three of us that
28

1 went to the clinic from C Pod, and there were two other people from B pod. The Sargent came by, with
2 some other officials I didn't recognize. They had masks and they were spraying what smelled like
3 bleach all over. They shut us in a small room while they sprayed. There was a mattress on the floor and
4 some sheets. That room is probably three meters by three meters, and the five of us were in there for
5 maybe five minutes, without any protection like masks.

6 24. To deliver our medication, staff come twice a day, in the morning and again in the
7 afternoon. There are probably 15 people taking medications. In the morning, they come early, maybe
8 around 6am. They call our names, and we get up to get our medications. Before, we would all get up
9 and stand in a line, one after another, to get our medication. About a week ago, there was some kind of
10 argument between the officer and a detainee, so now they call us up by name, one-by-one. In the
11 afternoon, when they come to deliver medications, we basically have get in line. With their masks on
12 and everyone awake and talking, its much harder to hear them, so we have to gather closer together.

13 25. They have started taking our temperatures every morning. I think this has been happening
14 for at least the past two weeks. It's in the early morning. They wake us up, and everyone gets in line.
15 Since people are still half asleep, we don't think about it and one person is right behind the next. The
16 nurse and the guard have gloves and a mask on, but they don't say anything about people standing so
17 close together. They don't change their gloves or masks, and they use the same thermometer.
18 Sometimes they use an under-the-tongue reader. They also use a machine that you insert your pointer
19 finger in, and it reads your temperature. I don't think they clean the machine between detainees. And
20 then we see the nurse and guard go to the next pod, and take their temperatures, too. We see that those
21 people are in line one behind the next, too.

22 26. I also worry about our clothes and our sheets, that they aren't cleaned well. They take our
23 clothes to laundry every two or three days. When our clothes get taken to the laundry, they sometimes
24 come back really stinky. It's like they don't use laundry detergent. So many people prefer to wash their
25 own clothes, in the shower or the sink. When we get clothes that are in decent condition, like ones that
26 aren't like beggars' clothes with holes and no elastic, we wash those ourselves in the shower and try to
27 hold onto them for more time. Our sheets are the same way. They smell bad a lot of the time, too. Lots
28

1 of guys here have rashes all over, I have a rash right now on my chest. It's like a ton of little spider bites
2 all over. Once, I saw an officer drop a food tray on the ground, and then grab a sheet from the laundry
3 bin to clean it up with. Then, the officer threw the sheet straight back in the laundry bin.

4 27. About a month ago, someone came into C Pod with a cough and a fever. And then another
5 person seemed to get sick, and since we can't stay far enough away from each other and don't have any
6 kind of protection or enough soap, in the end about 15 people were sick.

7 28. I got what felt like the flu, too. I got a fever, cough, and body ache. The cough was bad,
8 and I felt short of breath. I didn't want to get out of bed for days and I didn't feel strong enough to
9 walk. I just went to get food, and then back to lay down. I felt like that for maybe four days. They gave
10 us some medication, we weren't told what, and I slowly started to feel better. They didn't do any tests.
11 The original person that was put in C Pod with symptoms was removed from the pod, but only after
12 many others had gotten sick.

13 29. About three weeks ago, they brought a new person into C Pod. He told us he came from
14 Santa Rita jail. It just so happened that the same day, I went to see the nurse for my allergies. I was
15 worried, because we didn't know what kind of precautions they were taking with new people, and we
16 all are afraid of what could happen if someone with the virus comes in. So I asked the nurse what steps
17 they were taking, and about this new detainee. She told me that the person had been in quarantine for
18 two weeks before being placed in C Pod. When I went back to my pod, I asked him if he had been
19 quarantined, and he told me that he had only been in isolation for six hours after arriving at the facility.

20 30. On Friday, April 17, 2020, another new person from Santa Rita Jail was brought to Yuba
21 and put in C Pod. I talked with him, and he told me he has been at Yuba for about two weeks. He was
22 in booking by himself for five days, then he went to the F Tank, and then he was brought to C Pod.

23 31. It is incredibly frightening to be away from my daughter and my partner during this time.
24 I am terrified I will get the virus. My daughter was hospitalized in early April for something unrelated to
25 COVID-19. It was terrifying not to be there for her. I am afraid, because I'm far from my family. I
26 don't want anything to happen to me or to my family. I feel pretty desperate. There are times when I'm
27 in bed and I cry, because I'm scared and far away from my little girl. It's really hard.

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1 32. If I am released, I would go stay with my partner’s 23-year-old US citizen daughter in
2 Oakland to be in quarantine and protect my family. I am committed to sheltering in place as required by
3 state and local ordinances and complying with any conditions of release.

4 33. I understand that, as a class representative, I represent the interests of everyone in the class,
5 and not just myself. I understand I need to stay informed about what is happening with my case and stay
6 in touch with my attorney to give them information they need. I am committed to being a class
7 representative because I know how dangerous it is to be here, and I want all detained immigrants to
8 benefit from this case just as much as I do. I have never served as a class representative in any prior
9 action.

10
11 I, Angel de Jesus Zepeda Rivas, declare under penalty of perjury that the foregoing is true and
12 correct to the best of my recollection. I sign this from Marysville, California.

13
14 Date: April 18, 2020

//s// Angel de Jesus Zepeda Rivas

15 Angel de Jesus Zepeda Rivas
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CERTIFICATE OF INTERPRETATION AND AFFIRMATION

I, Theodora Simon, certify that I am fluent in Spanish and English and that I am competent to interpret between these languages. I further certify that I have read the foregoing to Angel de Jesus Zepeda Rivas in Spanish. I further declare that I am competent to render this interpretation and that I would testify to the same under the penalty of perjury if I were called upon to do so.

I further certify that on April 18, 2020 I read the foregoing to Angel de Jesus Zepeda Rivas and that he affirmed that the foregoing is true and correct. I have not been able to obtain a signature from Angel de Jesus Zepeda Rivas because Yuba Detention Center is located approximately two hours away from my home by car, and at the time I reviewed the foregoing declaration with him, the county where I reside was, and remains, under a “shelter in place” order.

Date: April 18, 2020

//s// Theodora J Simon

Theodora J Simon

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1 **DECLARATION OF VERONICA PRATT**

2 I, Veronica Pratt, hereby declare:

3 I make this declaration based on my own personal knowledge and if called to testify I could
4 and would do so competently as follows:

5 1. I am 34 years old.

6 2. I am living with HIV and hepatitis C.

7 3. I have been in custody in the Riverside County jail system since September 2019. I am
8 housed at the Southwest Detention Center, also known as the Cois M. Byrd Detention Center, in
9 Murrieta, California.

10 4. I am a transgender woman and I have been going by the name Veronica for some time,
11 but I was booked under my original legal name, Kevin Pratt.

12 5. I live in a housing unit made up of 32 two-person cells. The unit has been fully occupied
13 since I have been in it; whenever someone leaves the unit, their bed is promptly refilled with a
14 new person.

15 6. The cells are all about 6 feet by 10 feet. The bunk beds in the cells are about 4 feet apart,
16 and I share a toilet and a sink with my cellmate. During the time that we are in our cells every
17 day it is physically impossible to stay six feet apart from my cellmate.

18 7. I have been sick for approximately the past 11 days with a cough, among other
19 symptoms. It is painful for me to be exposing my cellmate to my coughing, but there is nothing
20 I can do about it because our cell is so small, and our beds are so close together.

21 8. During my recent illness I have been experienced a persistent cough, fever, chills, body
22 aches, and a loss of my senses of smell and taste and my appetite. The past couple of days, I
23 have been coughing up blood. Even though these symptoms are consistent with a diagnosis of
24 COVID-19 and I am at high risk from COVID-19 because I am living with HIV, I have been
25 unable to see a doctor and have never been tested for COVID-19. I have been told by a nurse
26 that the protocol in this jail is only to take people to medical for testing who had higher fevers
27 than mine. My temperature was repeatedly measured at between 99 and 100 degrees after I had
28 taken Tylenol.

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1 9. For medical treatment of my illness thus far, I have received a “cold setup,” consisting
2 of Tylenol, Sudafed, and Mucinex. I have also been offered salt for a salt water gargle. I have
3 been getting cough drops from commissary, but I have to pay for them, and am only allowed to
4 purchase up to two packs per week.

5 10. Normally each day, the deputies let up to half of the housing unit into the dayroom for
6 about an hour at a time, three to six times per day. Because there were up to 32 of us in a
7 relatively small space it was impossible for us to remain six feet apart from other people. For
8 example, there are only three phones in the dayroom, which are about 3 feet apart. There is a
9 constant demand for the phones, especially with family visitation suspended for the past several
10 weeks, so it has been impossible to use the phone and maintain six feet of separation from
11 others who were also using the phone.

12 11. Since Saturday, April 11, this facility has been on quarantine lockdown, meaning that
13 we are no longer allowed to use the dayroom as a group. People incarcerated here are being kept
14 in our cells at least 23 hours per day. One or two cells at a time (meaning two to four people)
15 are let out of our cells to order commissary, make phone calls, or take a shower, for a total of
16 about 15 minutes per day. The rest of the time, we must stay in our cells in very close proximity
17 to our cellmates. We eat our meals in our cells.

18 12. People incarcerated in this jail do not have access to hand sanitizer or gloves. For the
19 first several weeks of the COVID-19 public health emergency, we did not have access to face
20 masks, and in late March I asked a sergeant about getting masks and his response was to laugh
21 at me. During the week of April 6, face masks were distributed and we were told that wearing
22 them was mandatory while in the dayroom. We were also told that the supply of masks
23 available is very limited and that anyone who lost or damaged their mask would have to go
24 without one going forward.

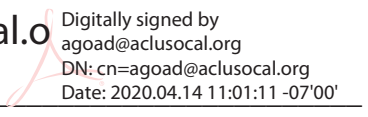
25 13. People incarcerated in this jail have very limited access to soap and to cleaning products
26 with which we can clean and disinfect surfaces in our cells, the dayroom, and the shower area.

27 14. I declare under penalty of perjury of the laws of the State of California and the United
28 States that the foregoing is true and correct to the best of my knowledge and belief.

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Because of the coronavirus, and my confinement, I was not able to sign this declaration in person. The declaration was read to me, over the phone, by Amanda Goad on April 14, 2020. I understood and verified its contents in full, and authorized Amanda Goad to sign the declaration on my behalf. Executed on April 14, 2020 in Riverside, California.

agoad@aclusocal.org
rg



Digitally signed by
agoad@aclusocal.org
DN: cn=agoad@aclusocal.org
Date: 2020.04.14 11:01:11 -07'00'

Signed by Amanda C. Goad
on behalf of Veronica Pratt

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**SUPREME COURT OF NEW JERSEY
DOCKET NO. 084230**

FILED

MAR 22 2020

Heather J. Sale
CLERK

CRIMINAL ACTION

**In the Matter of the Request to
Commute or Suspend County Jail
Sentences**

CONSENT ORDER

This matter having come before the Court on the request for relief by the Office of the Public Defender (see attached letter dated March 19, 2020) seeking the Court's consideration of a proposed Order to Show Cause (see attached) designed to commute or suspend county jail sentences currently being served by county jail inmates either as a condition of probation for an indictable offense or because of a municipal court conviction; and

The Court, on its own motion, having relaxed the Rules of Court to permit the filing of the request for relief directly with the Supreme Court, based on the dangers posed by Coronavirus disease 19 ("COVID-19"), and the statewide impact of the nature of the request in light of the Public Health Emergency and State of Emergency declared by the Governor. *See* Executive Order No. 103 (2020) (Mar. 9, 2020); and

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The Office of the Attorney General, the County Prosecutors Association, the Office of the Public Defender, the American Civil Liberties Union of New Jersey having engaged in mediation before the Honorable Philip S. Carchman, P.J.A.D. (ret.); and

The parties having reviewed certifications from healthcare professionals regarding the profound risk posed to people in correctional facilities arising from the spread of COVID-19; and

The parties agreeing that the reduction of county jail populations, under appropriate conditions, is in the public interest to mitigate risks imposed by COVID-19; and

It being agreed to by all parties as evidenced by the attached duly executed consent form;

IT IS HEREBY ORDERED, that

- A. No later than 6:00 a.m. on Tuesday, March 24, 2020, except as provided in paragraph C, any inmate currently serving a county jail sentence (1) as a condition of probation, or (2) as a result of a municipal court conviction, shall be ordered released. The Court's order of release shall include, at a minimum, the name of each inmate to be released, the inmate's State Bureau of Identification (SBI) number, and the county jail where the inmate is being detained, as well as any standard or

specific conditions of release. Jails shall process the release of inmates as efficiently as possible, understanding that neither immediate nor simultaneous release is feasible.

1. For inmates serving a county jail sentence as a condition of probation, the custodial portion of the sentence shall either be served at the conclusion of the probationary portion of the sentence or converted into a “time served” condition, at the discretion of the sentencing judge, after input from counsel.
 2. For inmates serving a county jail sentence as a result of a municipal court conviction, the custodial portion of the sentence shall be suspended until further order of this Court upon the rescission of the Public Health Emergency declared Executive Order No. 103, or deemed satisfied, at the discretion of the sentencing judge, after input from counsel.
- B. No later than noon on Thursday, March 26, 2020, except as provided in paragraph C, any inmate serving a county jail sentence for any reason other than those described in paragraph A shall be ordered released. These sentences include, but are not limited to (1) a resentencing following a finding of a violation of probation in any Superior Court or municipal court, and (2) a county jail sentence not tethered to a

probationary sentence for a fourth-degree crime, disorderly persons offense, or petty disorderly persons offense in Superior Court. The custodial portion of the sentence shall be suspended until further order of this Court upon the rescission of the Public Health Emergency declared Executive Order No. 103, or deemed satisfied, at the discretion of the sentencing judge, after input from counsel. Jails shall process the release of inmates as efficiently as possible, understanding that neither immediate nor simultaneous release is feasible.

C. Where the County Prosecutor or Attorney General objects to the release of an inmate described in Paragraph A, they shall file a written objection no later than 5:00 p.m. on Monday, March 23, 2020. Where the County Prosecutor or Attorney General objects to the release of an inmate described in Paragraph B, they shall file a written objection no later than 8:00 a.m. on Thursday, March 26, 2020.

1. The objection shall delay the order of release of the inmate and shall explain why the release of the inmate would pose a significant risk to the safety of the inmate or the public.
2. Written objections shall be filed by email to the Supreme Court Emergent Matter inbox with a copy to the Office of the Public Defender.

3. The Office of the Public Defender shall provide provisional representation to all inmates against whom an objection has been lodged under this Paragraph.
4. The Office of the Public Defender shall, no later than 5:00 p.m. on Tuesday, March 24, 2020, provide responses to any objections to release associated with inmates described in Paragraph A, as it deems appropriate. The Office of the Public Defender shall, no later than 5:00 p.m. on Thursday, March 26, 2020, provide responses to any objections to release associated with inmates described in Paragraph B, as it deems appropriate.
5. The Court shall appoint judge(s) or Special Master(s) to address the cases in which an objection to release has been raised.
 - a. On or before Wednesday, March 25, 2020, the judge(s) or Special Master(s) will begin considering disputed cases arising from Paragraph A; on or before Friday, March 27, 2020, the judge(s) or Special Master(s) will consider disputed cases arising from Paragraph B.
 - i. The judge(s) or Special Master(s) shall conduct summary proceedings, which shall be determined on the papers. In the event the judge(s) or Special

Master(s) conduct a hearing of any sort, inmates' presence shall be waived.

- ii. Release shall be presumed, unless the presumption is overcome by a finding by a preponderance of the evidence that the release of the inmate would pose a significant risk to the safety of the inmate or the public.
- iii. At any point, the Prosecutor may withdraw its objection by providing notice to the judge(s) or Special Master(s) with a copy to the Office of the Public Defender. In that case, inmates shall be released subject to the provisions of Paragraphs D-I.
- iv. If the judge(s) or Special Master(s) determine by a preponderance of the evidence that the risk to the safety of the inmate or the public can be effectively managed, the judge(s) or Special Master(s) shall order the inmate's immediate release, subject to the provisions of paragraphs D-I.

1. The Order of the judge(s) or Special Master(s) may be appealed on an emergent basis, in a summary manner to the Appellate Division.
 2. Should a release Order be appealed, the release Order shall be stayed pending expedited review by the Appellate Division.
 3. The record on appeal shall consist of the objection and response filed pursuant to this Paragraph.
- v. If the judge(s) or Special Master(s) determine by a preponderance of the evidence that risks to the safety of the inmate or the public cannot be effectively managed, the judge(s) or Special Master(s) shall order the inmate to serve the balance of the original sentence.
1. The Order of the judge(s) or Special Master(s) may be appealed on an emergent basis, in a summary manner to the Appellate Division.

2. Should an Order requiring an inmate to serve the balance of his sentence be appealed, the Appellate Division shall conduct expedited review.

3. The record on appeal shall consist of the objection and response filed pursuant to this Paragraph.

b. The judge(s) or Special Master(s) should endeavor to address all objections no later than Friday, March 27, 2020.

D. Any warrants associated with an inmate subject to release under this order, other than those associated with first-degree or second-degree crimes, shall be suspended. Warrants suspended under this Order shall remain suspended until ten days after the rescission of the Public Health Emergency associated with COVID-19. *See* Executive Order No. 103 (2020) (Mar. 9, 2020).

E. In the following circumstances, the county jail shall not release an inmate subject to release pursuant to Paragraphs A, B, or C(5)(a)(iii) or (iv), absent additional instructions from the judge(s) or Special Master(s):

1. For any inmate who has tested positive for COVID-19 or has been identified by the county jail as presumptively positive for COVID-19, the county jail shall immediately notify the parties and the County Health Department of the inmate's medical condition, and shall not release the inmate without further instructions from the judge(s) or Special Master(s). In such cases, the parties shall immediately confer with the judge(s) or Special Master(s) to determine a plan for isolating the inmate and ensuring the inmate's medical treatment and/or mandatory self-quarantine.
2. For any inmate who notifies the county jail that he or she does not wish, based on safety, health, or housing concerns, to be released from detention pursuant to this Consent Order, the county jail shall immediately notify the parties of the inmate's wishes, and shall not release the inmate without further instructions from the judge(s) or Special Master(s). In such cases, the parties shall immediately confer with the judge(s) or Special Master(s) to determine whether to release the inmate over the inmate's objection.

F. Where an inmate is released pursuant to Paragraphs A, B, or C(5)(a)(iii) or (iv), conditions, other than in-person reporting, originally imposed by the trial court shall remain in full force and effect. County jails shall inform all inmates, prior to their release, of their continuing obligation to abide by conditions of probation designed to promote public safety.

Specifically:

1. No-contact orders shall remain in force.
2. Driver's license suspensions remain in force.
3. Obligations to report to probation officers in-person shall be converted to telephone or video reporting until further order of this Court.
4. All inmates being released from county jails shall comply with any Federal, State, and local laws, directives, orders, rules, and regulations regarding conduct during the declared emergency. Among other obligations, inmates being released from county jails shall comply with Executive Order No. 107 (2020) (Mar. 21, 2020), which limits travel from people's homes and mandates "social distancing," as well as any additional Executive Orders issued by the Governor during the Public Health Emergency associated with COVID-19.

5. All inmates being released from county jails are encouraged to self-quarantine for a period of fourteen (14) days.
 6. Unless otherwise ordered by the judge(s) or Special Master(s), any inmate being released from a county jail who appears to be symptomatic for COVID-19 is ordered to self-quarantine for a period of fourteen (14) days and follow all applicable New Jersey Department of Health protocols for testing, treatment, and quarantine or isolation.
- G. County Prosecutors and other law enforcement agencies shall, to the extent practicable, provide notice to victims of the accelerated release of inmates.
1. In cases involving domestic violence, notification shall be made. N.J.S.A. 2C:25-26.1. Law enforcement shall contact the victim using the information provided on the “Victim Notification Form.” Attorney General Law Enforcement Directive No. 2005-5.
 - a. Where the information provided on the “Victim Notification Form” does not allow for victim contact, the Prosecutor shall notify the Attorney General.

- b. If the Attorney General, or his designee, is convinced that law enforcement has exhausted all reasonable efforts to contact the victim, he may relax the obligations under N.J.S.A. 2C:25-26.1.
 2. In other cases with a known victim, law enforcement shall make all reasonable efforts to notify victims of the inmate's accelerated release.
 3. To the extent permitted by law, the Attorney General agrees to relax limitations on benefits under the Violent Crimes Compensation Act (N.J.S.A. 52:4B-1, *et seq.*) to better provide victims who encounter the need for safety, health, financial, mental health or legal assistance from the State Victims of Crime Compensation Office.
- H. The Office of the Public Defender agrees to provide the jails information to be distributed to each inmate prior to release that includes:
 1. Information about the social distancing practices and stay-at-home guidelines set forth by Executive Order No. 107, as well as other sanitary and hygiene practices that limit the spread of COVID-19;

2. Information about the terms and conditions of release pursuant to this consent Order;
 3. Guidance about how to contact the Office of the Public Defender with any questions about how to obtain services from social service organizations, including mental health and drug treatment services or any other questions pertinent to release under this consent Order.
- I. Any inmate released pursuant to this Order shall receive a copy of this Order, as well as a copy of any other Order that orders their release from county jail, prior to their release.
 - J. Relief pursuant to this Order is limited to the temporary suspension of custodial jail sentences; any further relief requires an application to the sentencing court.

3/22/2020 9:50 p.m.
Date

/s/Stuart Rabner
Chief Justice Stuart Rabner, for the Court

The undersigned hereby consents to the form and entry of the foregoing Order.

3/22/2020
Date

/s/Gurbir S. Grewal
Office of the Attorney General

3/22/2020
Date

/s/Angelo J. Onofri
County Prosecutors Association of New Jersey

3/22/2020
Date

/s/Joseph E. Krakora
Office of the Public Defender

3/22/2020
Date

/s/Alexander Shalom
American Civil Liberties Union of New Jersey

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CURRICULUM VITAE

JOE GOLDENSON, MD
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BERKELEY, CA 94703
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EDUCATION

Post Graduate Training

February 1992 University of California, San Francisco, CPAT/APEX
Mini-Residency in HIV Care
1979-1980 Robert Wood Johnson Fellowship in Family Practice
1976-1979 University of California, San Francisco
Residency in Family Practice

Medical School

1973-1975 Mt. Sinai School of Medicine, New York
M.D. Degree
1971-1973 University of Michigan, Ann Arbor

Undergraduate Education

1967-1971 University of Michigan, Ann Arbor
B.A. in Psychology

PROFESSIONAL EXPERIENCE

Practice Experience

1993-2015 Director/Medical Director
Jail Health Services
San Francisco Department of Public Health
1991-1993 Medical Director
Jail Health Services
San Francisco Department of Public Health
1990-1991 Chief of Medical Services, Hall of Justice
Jail Health Services
San Francisco Department of Public Health
1987-1990 Staff Physician
Jail Health Services
San Francisco Department of Public Health
1980-1987 Sabbatical
1975-1976 Staff Physician
United Farm Workers Health Center, Salinas, CA

Consulting

6/16-8/19 Consultant to Los Angeles Department of Health Services re: provision of health care services in the LA County Jail

4/02-Present Federal Court Medical Expert, *Plata v. Newsome*, Class Action Lawsuit re: prisoner medical care in California State Prison System

6/14-9/14 Medical expert for the Illinois Department of Corrections and the ACLU of Illinois

6/10-12/13 Federal Court appointed Medical Monitor, *U.S.A. v. Cook County, et al.*, United States District Court for the Northern District of Illinois, No. 10 C 2946, re: medical care in the Cook County Jail

6/08-6/12 Member, *Plata v. Schwarzenegger* Advisory Board to the Honorable Thelton E. Henderson, U.S. District Court Judge

5/08-9/09 Medical Expert for ACLU re Maricopa County Jail, Phoenix, AZ

1/08 Member of the National Commission on Correctional Health Care's Technical Assistance Review Team for the Miami Dade Department of Corrections

9/07-1/10 Federal Court appointed Medical Expert, *Herrera v. Pierce County, et al.*, re: medical care at the Pierce County Jail, Tacoma, WA

8/06-8/12 State Court Appointed Medical Expert, *Farrell v. Allen*, Superior Court of California Consent Decree re medical care in the California Department of Juvenile Justice

6/05 Member of Technical Assistance Review Team for the Dallas County Jail

11/02-4/03 Medical Expert for ACLU re Jefferson County Jail, Port Townsend, Washington

4/02-8/06 Federal Court Medical Expert, *Austin, et. al vs Wilkinson, et al*, Class Action Law Suit re: Prisoner medical care at the Ohio State Penitentiary Supermax Facility

1/02-3/02 Consultant to the Francis J. Curry, National Tuberculosis Center re: *Tuberculosis Control Plan for the Jail Setting: A Template (Jail Template)*,

8/01-4/02 Medical Expert for ACLU re Wisconsin Supermax Correctional Facility, Boscobel, WI

7/01-4/02 Medical Expert for Ohio Attorney General's Office re Ohio State Prison, Youngstown, OH

1/96-1/14 Member and Surveyor, California Medical Association Corrections and Detentions Health Care Committee

5/95-6/08 Medical Expert for the Office of the Special Master, *Madrid vs Alameida*, Federal Class Action Law Suit re: Prisoner medical care at the Pelican Bay State Prison Supermax Facility

3/98-12/98 Member, Los Angeles County Department of Public Health Jail Health Services Task Force

2/98 Medical Expert, Department of Justice Investigation of Clark County Detention Center, Las Vegas, Nevada

6/94 Surveyor, National Commission on Correctional Health Care, INS Detention Center, El Centro, CA

Work Related Committees

1/14 to present Member, Editorial Advisory Board, *Correctional Health Care Report*

10/11 to 5/19 Member, Board of Directors of the National Commission on Correctional Health Care

5/07-10/12 Liaison to the CDC Advisory Council for the Elimination of Tuberculosis (ACET) from the National Commission on Correctional Health Care

12/04-3/06 Member of the CDC Advisory Council for the Elimination of Tuberculosis (ACET) Ad Hoc Working Group on the *Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from CDC* (MMWR 2006; 55(No. RR-9))

6/03-8/03 Member of the Advisory Panel for the Francis J. Curry National Tuberculosis Center and National Commission on Correctional Health Care, 2003: *Corrections Tuberculosis Training and Education Resource Guide*

3/02-1/03 Member of the Advisory Committee to Develop the *Tuberculosis Control Plan for the Jail Setting: A Template (Jail Template)*, Francis J. Curry, National Tuberculosis Center

6/01-1/15 Director's Cabinet
San Francisco Department of Public Health

3/01 Consultant to Centers for Disease Control on the Prevention and Control of Infections with Hepatitis Viruses in Correctional Settings (MMWR 2003; 52(No. RR-1))

9/97-6/02 Member, Executive Committee of Medical Practice Group, San Francisco Department of Public Health

3/97-3/02 American Correctional Health Services Association Liaison with American Public Health Association

3/96-6/12 Chairperson, Bay Area Corrections Committee (on tuberculosis)

2/00-12/00 Medical Providers' Subcommittee of the Office-based Opiate Treatment Program, San Francisco Department of public Health

12/98-12/00 Associate Chairperson, Corrections Sub-Committee, California Tuberculosis Elimination Advisory Committee

7/94-7/96 Advisory Committee for the Control And Elimination of Tuberculosis, San Francisco Department of Public Health

6/93-6/95 Managed Care Clinical Implementation Committee, San Francisco Department of Public Health

2/92-2/96 Tuberculosis Control Task Force, San Francisco Department of Public Health

3/90-7/97 San Francisco General Hospital Blood Borne Pathogen Committee

1/93-7/93

Medical Staff Bylaws Committee, San Francisco Department of
Public Health

ACADEMIC APPOINTMENT

1980-2015 Assistant Clinical Professor
University of California, San Francisco

PROFESSIONAL AFFILIATIONS

Society of Correctional Physicians, Member of President's Council, Past-Treasurer and
Secretary
American Correctional Health Services Association, Past-President of California
Chapter
American Public Health Association, Jails and Prison's Subcommittee
Academy of Correctional Health Professionals

PROFESSIONAL PRESENTATIONS

Caring for the Inmate Health Population: A Public Health Imperative, Correctional Health
Care Leadership Institutes, July 2015
Correctional Medicine and Community Health, Society of Correctional Physicians Annual
Meeting, October, 2014
Identifying Pulmonary TB in Jails: A Roundtable Discussion, National Commission on
Correctional Health Care Annual Conference, October 31, 2006
A Community Health Approach to Correctional Health Care, Society of Correctional
Physicians, October 29, 2006
Prisoners the Unwanted and Underserved Population, Why Public Health Should Be in Jail,
San Francisco General Hospital Medical Center, Medical Grand Rounds, 10/12/04
TB in Jail: A Contact Investigation Course, Legal and Administrative Responsibilities, Francis
J. Curry National Tuberculosis Center, 10/7/04
Public Health and Correctional Medicine, American Public Health Association Annual
Conference, 11/19/2003
Hepatitis in Corrections, CA/NV Chapter, American Correctional Health Services
Association Annual Meeting, 1/17/02
Correctional Medicine, San Francisco General Hospital Medical Center, Medical Grand
Rounds, 12/16/02
SuperMax Prisons, American Public Health Association Annual Conference, 11/8/01
Chronic Care Programs in Corrections, CA/NV Chapter, American Correctional Health
Services Association Annual Meeting, 9/19/02
Tuberculosis in Corrections - Continuity of Care, California Tuberculosis Controllers
Association Spring Conference, 5/12/98
HIV Care Incarcerated in Incarcerated Populations, UCSF Clinical Care of the AIDS Patient
Conference, 12/5/97
Tuberculosis in Correctional Facilities, Pennsylvania AIDS Education and Training Center,
3/25/93

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Tuberculosis Control in Jails, AIDS and Prison Conference, 10/15/93

The Interface of Public Health and Correctional Health Care, American Public Health Association Annual Meeting, 10/26/93

HIV Education for Correctional Health Care Workers, American Public Health Association Annual Meeting, 10/26/93

PUBLICATIONS

Structure and Administration of a Jail Medical Program. Correctional Health Care: Practice, Administration, and Law. Kingston, NJ: Civic Research Institute. 2017.

Structure and Administration of a Jail Medical Program – Part II. Correctional Health Care Report. Volume 16, No. 2, January-February 2015.

Structure and Administration of a Jail Medical Program – Part I. Correctional Health Care Report. Volume 16, No. 1, November-December 2014.

Pain Behind Bars: The Epidemiology of Pain in Older Jail Inmates in a County Jail. Journal of Palliative Medicine. 09/2014; DOI: 10.1089/jpm.2014.0160

Older jail inmates and community acute care use. Am J Public Health. 2014 Sep; 104(9):1728-33.

Correctional Health Care Must be Recognized as an Integral Part of the Public Health Sector, Sexually Transmitted Diseases, February Supplement 2009, Vol. 36, No. 2, p.S3-S4

Use of sentinel surveillance and geographic information systems to monitor trends in HIV prevalence, incidence, and related risk behavior among women undergoing syphilis screening in a jail setting. Journal of Urban Health 10/2008; 86(1):79-92.

Discharge Planning and Continuity of Health Care: Findings From the San Francisco County Jail, American Journal of Public Health, 98:2182–2184, 2008

Public Health Behind Bars, Deputy Editor, Springer, 2007

Diabetes Care in the San Francisco County Jail, American Journal of Public Health, 96:1571-73, 2006

Clinical Practice in Correctional Medicine, 2nd Edition, Associate Editor, Mosby, 2006.

Tuberculosis in the Correctional Facility, Mark Lobato, MD and Joe Goldenson, MD, *Clinical Practice in Correctional Medicine, 2nd Edition,* Mosby, 2006.

Incidence of TB in inmates with latent TB infection: 5-year follow-up. American Journal of Preventive Medicine. 11/2005; 29(4):295-301.

Cancer Screening Among Jail Inmates: Frequency, Knowledge, and Willingness Am J Public Health. 2005 October; 95(10): 1781–1787

Improving tuberculosis therapy completion after jail: translation of research to practice. Health Education Research. 05/2005; 20(2):163-74.

Incidence of TB in Inmates with Latent TB Infection, 5-Year Follow-up, American Journal of Preventive Medicine, 29(4), 2005

Prevention and Control of Infections with Hepatitis Viruses in Correctional Settings, Morbidity and Mortality Reports, (External Consultant to Centers for Disease Control), Vol. 52/No. RR-1 January 24, 2003

Randomized Controlled Trial of Interventions to Improve Follow-up for Latent

Tuberculosis Infection After Release from Jail, Archives of Internal Medicine, 162:1044-1050, 2002

Jail Inmates and HIV care: provision of antiretroviral therapy and Pneumocystis carinii pneumonia prophylaxis, International Journal of STD & AIDS; 12: 380-385, 2001

Tuberculosis Prevalence in an urban jail: 1994 and 1998, International Journal of Tuberculosis Lung Disease, 5(5):400-404, 2001

Screening for Tuberculosis in Jail and Clinic Follow-up after Release, American Journal of Public Health, 88(2):223-226, 1998

A Clinical Trial of a Financial Incentive to Go to the Tuberculosis Clinic for Isoniazid after Release from Jail, International Journal of Tuberculosis Lung Disease, 2(6):506-512, 1998

AWARDS

Armond Start Award of Excellence, Society of Correctional Physicians, 2014

Award of Honor, San Francisco Board of Supervisors, 2014

Award of Honor, San Francisco Health Commission, 2014

Certificate of Appreciation, San Francisco Public Defender's Office, 2014

Certificate for Excellence in Teaching, California Department of Health Services, 2002

Employee Recognition Award, San Francisco Health Commission, July 2000

Public Managerial Excellence Award, Certificate of Merit, San Francisco, 1997

LICENSURE AND CERTIFICATION

Medical Board of California, Certificate #A32488

Fellow, Society of Correctional Physicians

Board Certified in Family Practice, 1979-1986 (Currently Board Eligible)