# CARE AND COVID IN BROWARD COUNTY JAILS

A report by the COVID-19 Hotline for Incarcerated People (CHIP)

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Original art by Raven Spires

Once there were no prisons that day will come again.
Mission and Methods

Since April 5th 2020, the COVID-19 Hotline for Incarcerated People (CHIP) has been in operation in South Florida. CHIP is a volunteer-run hotline for incarcerated people offering information, resources, & referrals to prisoners who are facing dire conditions in the face of COVID-19. We accept calls multiple days a week from 9 AM to 9 PM, and we document the conditions in the jail, connect prisoners with family members and other resources, and do direct advocacy as well as agitate for systemic change. Because visitors are barred from the jails and prisoners have extremely limited access to phone time, many prisoners describe being unable to share their stories with family, attorneys, and the community. CHIP’s work has resulted in the release of a few individuals, reduced bonds, and has helped callers better connect with their families and their lawyers? This report furthers our mission to document and investigate the reports that we’re receiving about medical neglect, abuse, and illness inside the jails.

We use a detailed intake questionnaire to capture initial information from all callers, including information about their identity, their health, any pre-existing conditions or active symptoms, and other information related to the novel coronavirus. Each caller is asked whether they want their story shared with their name attached, shared anonymously, or kept private. All callers who want to remain anonymous are listed in this report as “Anonymous.” Initials are used for all callers who want their stories to be shared with their names attached. We have made this decision out of an abundance of caution given the fears that many expressed about facing retaliation for sharing their descriptions and observations of their experiences inside the jail. Our telephone conversations are usually expansive and wide-ranging. Therefore, drawing on detailed notes from hotline volunteers answering calls we have used emergent coding to identify additional themes, including: the lack of personal protective equipment; the prevalence of retaliation for seeking healthcare; and persistent noncompliance with the Centers for Disease Control and Prevention (CDC) guidelines as well as the policies of Broward Sheriff’s Office (BSO). This report provides detailed accounts and statistics regarding these serious problems.

It should also be noted that due to the large amount of calls we receive and the variety of issues that are reported to us, it is likely that the numbers in this report are lower than the reality of the reports we received, which also come from only a fraction of the population within Broward County jails. While we have tried our best to review our seven months worth of notes and data, some stories may have slipped through the cracks. Rarely do we offer direct quotes, since
volunteers are taking notes while talking with callers rather than transcribing calls. However, every effort has been made to preserve the intent and meaning of the original statements even as they are lightly edited to ensure clarity.

Public health experts recommend decarceration as the only way to prevent severe outbreaks within prisons and jails.\(^1\) While Broward County claims to be pursuing decarceration, BSO has been repeatedly sued for overcrowding and other health and well-being violations, including most recently on June 5, 2020 by the American Civil Liberties Union (ACLU).\(^2\) On October 15th, BSO stated in an email to CHIP that there were no cases of coronavirus in any of the jails, yet on that same day, we received multiple reports that the 4th floor of the Main Jail was quarantined due to suspected COVID-19 exposure. In response to our follow-up questions, BSO acknowledged that prisoners were quarantined, but asserted that there were no cases because no positive tests had been completed. The following week, BSO continued to claim that there were zero cases of COVID-19 in the jails, despite on-going quarantines. Because BSO cannot be trusted to follow internal policies, external recommendations, or accurately report on the conditions inside the jails, first-person reports from incarcerated people provide crucial data about what is taking place within Broward County jails.

Broward County Jails

Broward County’s criminal punishment system has a remarkably bad history, including the use of predictive sentencing algorithms that ProPublica has shown to have profoundly racist impacts\(^3\) and decades of other unjust policies and practices:

“The ACLU has had litigation at the Broward County jail for more than a quarter of a century due to unconstitutional conditions in this jail,” said Anjana Samant, senior staff attorney at the ACLU’s Women's Rights Project.\(^4\)

BSO operates four detention facilities in Broward County, Florida: The Joseph V. Conte Facility at 1351 NW 27th Avenue, Pompano Beach, FL 33069 (1,328 Medium Security Beds); North Broward Bureau at 1550 NW 30th Avenue, Pompano Beach, FL 33069 (1,200 Special Needs Beds); Paul Rein Detention Facility at 2421 NW 16 Street, Pompano Beach, FL 33069 (1,020 Direct Supervision Beds); and the Main Jail Bureau at 55 SE 1st Avenue, Fort Lauderdale, FL.

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33301 (1,538 Maximum Security Beds). CHIP has received calls and reports from all 4 jails, although the majority of calls have come from the Main Jail. While there are some variations between the facilities, the major problems remain consistent across all four jails.

By definition, the majority of people in jail facilities are awaiting trial or sentencing, and have not been convicted of a crime. Although bars, gyms, and many other unessential establishments have been opened in response to the State of Florida’s push for Phase 2 and Phase 3 reopenings,⁵ the courts have remained largely closed for criminal proceedings, resulting in long delays and long-lasting backlogs.⁶ As of this report’s release, many people are being held without trial and without the ability to have their day in court because of the Florida Supreme Court’s suspension of the right to a speedy trial during the pandemic.⁷ Florida currently has the 3rd highest rate of COVID-19 cases in the nation.⁸

**COVID-19 in Broward County Jails**

**Testing**

Testing is a critical component of COVID-19 detection and prevention, but our data indicate that it is not being deployed appropriately within Broward County Jails. As a result, BSO is often able to claim that there are zero positive tests for COVID-19 among the incarcerated population even as callers report that dorms, wings, and even entire floors are under quarantine for suspected COVID-19 exposure. As Judge Thomas Coleman of the 17th District made clear during a hearing on October 22nd, the claims that there are no active cases of COVID-19 within the jails cannot be reconciled with public health research and knowledge. One of CHIP’s projects has been to learn more about how testing is actually being used within Broward County Jails from speaking directly with people incarcerated in the jails.

<table>
<thead>
<tr>
<th>Callers</th>
<th>Tested for COVID-19</th>
<th>Positive</th>
<th>Negative</th>
<th>Unknown⁹</th>
</tr>
</thead>
<tbody>
<tr>
<td>254</td>
<td>35</td>
<td>11</td>
<td>17</td>
<td>7</td>
</tr>
</tbody>
</table>

During each intake, callers are asked if they have been tested for COVID-19 or if anyone they know has been tested for COVID-19, and the information they provide is recorded at that time. This is merely an instantaneous snapshot of the conditions at Broward County Jails, and the

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⁹ Some callers did not yet know their results at the time they spoke with us.
data is also compromised by the fact that many prisoners have been told by deputies that temperature checks are COVID-19 tests, despite the fact that temperature checks are not able to detect asymptomatic carriers or those whose symptoms don’t include a fever. Nonetheless, our data suggests that Broward County is conducting far fewer tests than would be required by CDC guidelines for people who are in close proximity to suspected and confirmed cases of COVID-19.

According to the CDC, the following individuals should be tested for COVID-19:

- People who have symptoms of COVID-19
- People who have had close contact (within 6 feet for a total of 15 minutes or more) with someone with confirmed COVID-19

<table>
<thead>
<tr>
<th>Total Callers</th>
<th>COVID-19 Symptoms</th>
<th>Symptoms and No Test</th>
<th>Exposure to someone with confirmed COVID-19</th>
<th>Exposure and No Test</th>
<th>Symptoms, exposure, and no test</th>
</tr>
</thead>
<tbody>
<tr>
<td>254</td>
<td>76</td>
<td>60</td>
<td>10</td>
<td>7</td>
<td>4</td>
</tr>
</tbody>
</table>

Due to the cramped conditions in the jails, many prisoners are in close contact with each other, and using the same public spaces as prisoners or deputies who are suspected or confirmed positive for COVID-19. Yet as the stories below reveal, many prisoners who fit the above conditions are not being tested, or they are being misled into believing that temperature checks or questionnaires are COVID-19 tests, and/or they are facing retaliation for requesting COVID-19 tests.

Although the intake questionnaire only asks whether the caller or someone they know has been tested and whether they have received the result, some callers elaborated and volunteers captured additional details in the following paraphrased statements:

- 4/11: My cellmate and I have asked for a test and have been denied it (A. W.)
- 4/11: I was exposed to a person who has the virus but I haven’t been tested (Anonymous)
- 4/12: I am immunocompromised and demanded a test but have not gotten one (D. S.)
- 4/20: I have symptoms and was housed with someone who got it but haven’t been tested (C. P.)
- 4/23: Neighboring cell was tested but the nurse won’t even take my temperature (F. W.)
- 4/23: People are only tested if they are at the point of collapse (Anonymous)
- 5/1: I was told that a deputy is positive, but they aren’t testing, just keeping people on lockdown (D. W.)
- 5/4: I was just moved into a cell of someone who tested positive but they aren’t testing me even though I have pre-existing conditions and am coughing up blood (D. B.)

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• 5/3: I have pre-existing conditions and know someone who tested positive, but I haven’t been tested (M. F.)
• 5/3: Me and others who were exposed to someone with COVID-19 haven’t been tested (D. S.)
• 7/28: I have symptoms and am immunocompromised but they aren’t testing me even though I’ve asked to be tested (M. H.)
• 8/11: My next cell roommate just tested positive for COVID. He told deputies when he came in that he was sick 2 weeks ago. 1 week ago the deputy moved him out after he tested positive. Today the dorm was put on quarantine, but I have only had my temperature taken. They are calling this a COVID test, but they are not swabbing us (Anonymous)
• 9/11: Even though new people keep coming in and out of the unit, I didn’t get an actual COVID test until this week (J. P.)

Additional stories reveal the human toll of how Broward County Jails are mishandling testing:

• As a prisoner at Broward County Main Jail explained on April 23rd, “The sheriff gets on the news and says this and that, but he don’t come to the jails and he don’t talk to the inmates. When they say 14 people got it, that’s only the people who were finally tested because they got so sick they are spitting up blood.”
• A. F. says he was exposed to a COVID-19 patient who later died. F says he has not himself been tested, but that corrections officers told other inmates that F, who was returned to the general population from the infirmary, had been exposed; such a decision not only risks spreading the virus within the jail, but risks F’s safety.
• One caller who wished to remain anonymous was exposed to multiple fellow prisoners with COVID-19 and to an attorney who later tested positive, but has repeatedly been refused a test himself. He reports that those who test positive are not receiving increased medical care, but are simply isolated.
• P. R. and C. P. both report that they were in close contact with prisoners who were isolated as confirmed or suspected COVID-19 cases, but they have not been tested.
• A. W. says, “I’m afraid of dying in here. My mother-in-law, she needs me. I usually take care of her. I have trouble breathing and a cough but the nurse says I can’t get tested. Everyone in here should be tested automatically. They are playing a guessing game, walking around taking people temperatures.”
• P. D. reports that jail staff continue to work in close proximity to each other and to prisoners even when they have tested positive.
• In August, prisoners in the North Broward Bureau reported that when an individual is suspected of having COVID-19, they are simply removed from the unit, but the unit itself is not cleaned, and the people who were in contact with the individual are not being tested.
Pre-existing Conditions & Increased Risk for Severe Illness

The CDC makes it very clear that adults of any age with certain underlying medical conditions are at an increased risk of severe illness when contracting COVID-19. The only publicly known death of an incarcerated person in the Broward jails was reported to have pre-existing medical conditions. Of the 254 respondents we spoke to incarcerated at the Broward County jails, 192 reported having pre-existing conditions. Pre-existing medical conditions range from those that are immediately life threatening such as broken bones, gunshot wounds with bullets still inside, or blood clots to life-long conditions such as HIV, and mental health issues such as schizophrenia and bipolar disorder. Of the 192 people reporting pre-existing medical conditions, nearly half of all the respondents we corresponded with (124), reported conditions that may increase their risk for severe illness if they contract COVID-19. These conditions include HIV, high blood pressure, asthma, heart issues, other respiratory issues, compromised immune systems, Type 1 Diabetes, and Hypertension. Of those 124 reports, 18 people had underlying conditions that dramatically increase their risk for severe illness if they contract COVID-19. These conditions include various cancers, Type 2 Diabetes, Obesity, Sickle Cell disease, having organ transplants or loss of a kidney. There were an additional 17 who had diabetes or heart conditions, but because the types of conditions were not known, we could not determine whether they were dramatically at risk, therefore had to remain in the “may be at risk for severe illness” category. We did not, however, determine who was a smoker, which is new data that according to the CDC also increases risk for severe illness of contracting COVID-19, therefore the results could have been much higher.

61 of the reports of pre-existing conditions which may increase risk for severe illness if COVID-19 is contracted involve asthma or asthma coupled with other pre-existing conditions. It is important to note that, in addition to their potential susceptibility, asthmatics also have to be careful around disinfectants. Disinfectants such as bleach can trigger an asthma attack, and any disinfectant overused or used without proper ventilation can also trigger an asthma attack. We received multiple reports from asthmatics of the lack of ventilation or access to fresh air, which was exacerbated at the Broward Main jail by the fact that recreational time had been suspended for months up until 3 weeks ago. However, the lift of suspension is barely an improvement, with access to recreation time a mere single time per two week period. A 21 hour lockdown in cells also has yet to be lifted at that facility.

Individual descriptions of pre-existing medical conditions:

- **4/13:** I had it so bad that I had to have an asthma pump last night and get my oxygen level and blood pressure checked. I also was in the process of having a seizure, but I have not seen a doctor. They just came and gave me the asthma pump. There are 5 of us here with asthma and it is very very hard for me to breathe, especially at night, because it seems like they turn the air off. At night, you feel nothing at all and it is very hot (Z.P. at North Broward)

- **5/3:** I have Sleep Apnea, high cholesterol, Diabetes, kidney problems, high blood pressure, and sinus problems. I'm having trouble breathing, and my body is aching. But I don't even know how to see the doctor, they keep all the information from us. It's just "wash your hands" and reuse masks (L.D. at Joseph V Conte)

- **8/3:** My bones have been broken from being shot 5 times by an assault rifle and I also have only 1 kidney, a repaired intestine, a piece of liver removed, and titanium from shoulder to forearm (Anonymous)

- **8/15:** I have an amputated leg, breathing conditions and blood clots (Anonymous)

- **9/6:** I got hit in the shin with a spade. It put a 1-2" gash in my leg, and I'm still suffering from the injury from 2 years ago. Also I was bit by a police dog while running from the police out of fear. I have nerve damage and a lump on my hand from the bite. I have to take pain meds for these injuries (Anonymous)

- **10/20:** I have seizures, Asthma, High Blood Pressure and I'm diagnosed Bipolar with Depression. On July 21st, when I was first arrested, I was housed with someone who had COVID-19 (E.R. at North Broward)

- **10/20:** I'm transgender and HIV and Hep C positive. I was thrown out of a car in Atlanta in 2015 and ran over by cars and I have a lot of mental trauma from that incident. I tend to forget things sometimes from the head trauma (C.P. at Broward Main)

- **10/31:** I have asthma, my breathing is really tight, and there are people with COVID-19 in the next pod. My lawyer applied for emergency medical release since my charges are nonviolent, but it was denied on Zoom court. I didn't understand the process (A. T.)

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I have seizures, Asthma, High Blood Pressure and I’m diagnosed Bipolar with Depression. On July 21st, when I was first arrested, I was housed with someone who had COVID-19.

(E.R. at North Broward)
Quarantine

Quarantining is a basic public health measure that is critical to containing, managing, and controlling the COVID-19 pandemic. According to the CDC, “Quarantine is used to keep someone who might have been exposed to COVID-19 away from others” and it involves total separation of the quarantined individual from those who might carry the virus out into the wider community.\(^\text{13}\) Within Broward County Jails, however, the term “quarantine” is used extraordinarily loosely to describe a wide range of practices that do not fit the CDC definition, presenting a facade of compliance while failing to ensure the safety of incarcerated people or the surrounding community. As a result, “quarantine” measures -- from 22-hour lockdowns to “quarantined” dorms to 14-day “quarantine” periods for newly incarcerated individuals -- cause stress, harm, and confusion without achieving the actual goal of quarantine: to prevent the transmission of the novel coronavirus.

The numbers below represent the most detailed individual reports of basic failures to actually implement quarantines within the jails. In other words, each report enumerated below comes from a distinct individual caller, and many other less detailed reports confirm that these are pervasive issues:

<table>
<thead>
<tr>
<th>New inmates brought into general population w/o adequate quarantine period or testing (&lt;14 days)</th>
<th>“Quarantine” cells inter-mixed with non-quarantine cells</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>24</td>
</tr>
</tbody>
</table>

Since mid-March 2020, Broward County jails have been on 21-23 hour lockdowns, meaning that prisoners remain within their cells with their roommates for all but 1-3 hours of each day. This practice has devastating impacts on prisoners, their health, their right to justice, and their families. Psychologically, extended lockdowns are having profoundly negative effects on the mental health of people who are incarcerated, many of whom already have pre-existing mental illness.\(^\text{14}\) The CDC recommends recreation spaces where individuals can spread out to maintain health and wellness,\(^\text{15}\) but this is not the path that Broward County jails are taking. After advocacy from CHIP, we received reports in late September that outdoor recreation time was being offered again, but only for one hour every two weeks. For prisoners with respiratory illness, obesity, diabetes, and other comorbidities that make them more vulnerable to COVID-19, the lack of exercise and fresh air can be devastating.


Finally, the lockdowns mean that it is incredibly difficult for prisoners to take care of legal phone calls, phone calls to family, mask washing, and personal hygiene within the limited time they are out of their cells. Prisoners report that this near-total lockdown of the facility still does not result in adequate cleaning, disinfecting, and other measures that would prevent prisoners from infecting each other as they move in and out of the common spaces during their allotted time periods. Moreover, deputies and prisoners regularly move between “quarantined” and non-quarantined cells.

A small sample of narrative accounts illustrate BSO’s failures to employ quarantine to protect imprisoned people:

- 4/10: They didn’t clean the cell after the person with COVID-19 was removed for quarantine, they just threw another inmate in (Anonymous)
- 4/13: They have us on lockdown. The rooms are very hot. We have no ventilation. The cells are not livable and not sanitized. There are feces all over the walls (Z. P.)
- 4/18: There’s a quarantine cell block on the 4th floor at Broward County Main with 6 people sick with COVID-19. They beat on the walls and windows all night long asking for their lives to be saved (Anonymous)
- 7/28: Broward County Main Jail isn’t testing for COVID-19 when people are arrested. Large groups of about 25 people are “quarantined” for 14 days. However, people in this large group come and go to court appearances, while deputies and other inmates on work assignments also come in and out of the "quarantine" unit (Anonymous)
- 8/11: Someone was just removed from the unit with COVID. He knew he was exposed to COVID before being arrested, and let it be known, and was still placed in a housing unit with others without being quarantined (M. H.)
- 8/11: There is no protocol for testing people when they come in off the streets before placing them in a housing unit, even if that person says they are sick (Anonymous)
- 8/15: I contracted COVID-19 from an officer...it's a scary ordeal. I almost died, I was short of breath and I almost died. I don't want to go through this again. I wore my mask, I stayed far from other people. The deputies go home every day and they get in contact with the outside world, I guess the officer contracted it somewhere and brought it in here. I'm still coughing, sneezing, feverish, but I'm not quarantined any more (Anonymous)
- 9/6: 7B2 is on quarantine but all that is happening is that extra deputies are assigned to the quarantine unit as overtime, and then these deputies work other units on their regular shifts. If you would see it you would be very concerned (A. N.)
- 9/12: Although we are on lockdown and only coming out in small groups, when we get meds, everyone still comes out at once (L. P.)
- 10/25: There’s a deputy working our unit who has tested positive for COVID-19 and she’s working again after only being away for 2-3 days; they are slacking on cleaning, they used to do it twice a day but now they're only cleaning once a day; "it's like they don't care about our health, but we're human too" (P. R.)
Personal Protective Equipment

Personal protective equipment (PPE) includes masks, gloves, and disposable full-body coverings. PPE is key to preventing the spread of the novel coronavirus. However, reports indicate that PPE is inadequate, inconsistent, and improperly used. Furthermore, PPE is ineffective and can even transmit the virus when reused or used incorrectly, such as when disposable masks are reused or when an individual fails to discard PPE after coming into contact with a person who is infected with COVID-19. Based on the reports CHIP has received, these are persistent and pervasive problems.

The use of PPE in the jails has shifted over time, but it has dramatically lagged behind the latest public health recommendations and has usually improved only in response to active advocacy from CHIP and our allies, as this timeline illustrates:

March
1st Public Health Emergency Declared in Florida
10th Broward County Declares Local State of Emergency

April
3rd CDC recommends face coverings; deputies begin wearing them but face coverings are not issued to prisoners and they face disciplinary measures for attempting to follow the directive
10th DeCARcerate Broward County Protest; Chainless Change, CHIP, and others protest outside Broward County Main Jail and prisoners receive individual, single-use disposable masks for the first time
12th Reports that deputies aren’t changing gloves between tasks or when moving between cells or dorms
15th Z. P.: “I’ve been using the same mask for 5 days. It is very out of proportion now. It is all torn up.”
19th Reports continue to state that the masks distributed in response to the DeCARcerate protest have not been replaced and that prisoners are being required to reuse them
22nd Reports increase that deputies are moving between quarantine and non-quarantine dorms or cells without changing/discardng PPE

May
1st Second DeCARcerate Broward County Protest Held
Reports that deputies are threatening disciplinary measures for anyone whose mask wears out before the deputies decide it is time to change the masks (Broward Main Jail)
Reports that a “mask expert” was brought in to explain how to make a single-use disposable mask last for 4 weeks (Joseph V. Conte)
2nd Reports that new disposable masks were distributed after the protest
August
23rd  First cloth face masks distributed, though each person is only issued one, washed once a week, and they cannot handwash the masks themselves since they must be masked in order to access the washrooms

September
13th  First reports of KN95 masks issued to those with asthma and similar conditions
29th  Reports that Broward Main Jail was replacing KN95 masks with disposable construction masks

October
3rd  After advocacy from CHIP, KN95 masks were again distributed

Overcrowding and Unhealthy Conditions

By definition, people who are incarcerated are not in control of their surroundings and their environment. As a result, their health and safety during the coronavirus pandemic is utterly dependent upon the decisions that are made by those who control the prisons and jails. As the ACLU’s June 5th lawsuit points out: “Unlike the non-incarcerated population, incarcerated and detained persons are not free to take those measures that can best protect themselves from COVID-19. A prisoner cannot choose where to sleep, where to shower, when they are transferred to another cell, or another facility, or how they are moved. A prisoner cannot buy or make their own mask. A prisoner cannot choose how to clean their own living quarters. And a prisoner cannot choose to be isolated, or create for themselves conditions that will allow them to socially distance from others.”

Reports from inside Broward County jails illustrate that this reality of incarceration is acutely devastating and dangerous, with numerous reports of overcrowding, significant ventilation issues, spoiled food and food shortages, and profound uncleanliness. Although Broward County jails are not at capacity, multiple callers reported that empty cells and wings were not being used to space out prisoners, but instead, prisoners remained crowded together to reduce the time it takes deputies to make rounds. Prisoners persistently report that it is hot and stuffy inside the jail, and that the black mold problem in Broward Main Jail is getting worse. The lack of ventilation aggravates asthma and other respiratory conditions, leaving prisoners all the more vulnerable to the virus.

Despite the fact that public health recommendations indicate that no one should be jailed for minor infractions during the COVID-19 pandemic, prisoners report that many people are being arrested for violations of probation and failure to appear, charges which do not necessarily indicate safety risks for the wider community. CHIP has been able to independently confirm that

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people continue to cycle through Broward County jails for minor infractions. Even though many of these individuals are released within days or weeks of being arrested, it is this cycling through the jails that dramatically increases the risk of COVID-19 to both incarcerated people and the surrounding communities. According to a prisoner who asked to go by the initials T. B., he was rearrested for accidentally breaking curfew when he returned home a little late from a substance abuse recovery meeting. He is far from the only person in Broward County jails facing the real risk of a fatal or debilitating illness as the result of a curfew or other technical violation.

These selected individual accounts provide details about the conditions within Broward County jails, conditions that prisoners cannot control but which impact their health and risk every day:

- **4/11:** There are crowded conditions in the showers and at the mess hall. Additionally, 2 people in each room makes social distancing impossible (Anonymous)
- **4/29:** Broward County Main Jail is serving spoiled milk and rotten food (D. G.)
- **5/2:** I’m unsure why, but they have been removing things off the menu, and reducing portions….There is juice, a little juice that comes with the meal. But then they stopped bringing in the juice, they never explained why. About a week ago, the dinner trays came through and they were extremely small. People refused to eat, because they were so small (A. K.)
- **5/3:** Hand-washing advice is impossible to follow because of a sewage issue, the sinks are backed up (Anonymous)
- **5/7:** There is mold all over the showers, room, and ceilings (Anonymous)
- **5/17:** They say that we have to social distance, but there’s 4 in a room in an open dorm situation (T. W.)
- **6/28:** We’re not social distancing at all — they’re really not doing anything. We’ll have to sit two to a seat in the day room while watching TV — we’ll be that close to each other (Anonymous)
- **7/18:** The AC is set really cold, “it’s cold as I don’t know what, feels like the North Pole.” We’re not getting proper exercise, getting no sunlight and I haven’t been outside since I was incarcerated (Z. P.)
- **9/1:** At least once a week, exhaust fumes come through AC, which makes me and others nervous (R. S.)
- **9/6:** Sanitation is very poor. People don’t take showers, there is a lack of hygiene, which can be a magnet for COVID-19. Officers come in coughing, and they aren’t switching their gloves like they are supposed to (M. S.)
- **9/6:** They used to clean the phones every 2 days and now they are not doing that (M. O.)

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**Broward County Main Jail is serving spoiled milk and rotten food. (D. G.)**

**There is mold all over the showers, room, and ceilings. (Anonymous)**

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● 9/8: The jails have stopped disinfecting the phones between calls (Anonymous)
● 9/12 Vegetables and fruit have been rotten. I bit into an apple and saw that it was black. Oranges have mold (D. G.)
● 10/10: At the Conte jail they would announce on the loudspeaker reminders to social distance, and exchange masks once a week. But at North Broward they don’t say anything. Inmates are given chemicals to clean themselves, but no one is assigned to anything. Guards don’t wipe down surfaces, seating areas, or phones (R. B.)

Healthcare in Broward County Jails

Medical Neglect

In the Broward County Sheriff’s Office Inmate Handbook, the section on Health Care Services begins: “No inmate will be denied medical, mental health, or dental care while in custody. Ability to pay for medical services will have no bearing on services rendered. Qualified health care professionals are available to provide medical, dental, and mental health care in all BSO facilities.” Data collected from our callers, as well as other well-documented incidents, prove that this statement is categorically incorrect.

People who are incarcerated in Broward County jails consistently describe an unsanitary and violent environment where medical neglect and crowded cells are rapidly fueling the spread of the novel coronavirus. But COVID-19 is only the latest healthcare crisis within the Broward County jails. As has been well-documented, Broward County jails have a long and horrific history of severe medical neglect. This includes the experiences of Tammy Jackson and Stephanie Bretas, both of whom were left alone during labor, screaming for help for hours. In Bretas case, this was in direct violation of a law that had been passed just a year before to protect pregnant people following Jaskcon’s harrowing ordeal. These are just two examples of an incredibly broad problem, one that the Broward County Office of the Public Defender has

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Within the jail, healthcare is provided by Wellpath, a for-profit corporation that has a long history of violations and corruption.

Approximately 30% of callers mention some sort of medical neglect when calling our hotline. They describe difficulty accessing medical care, receiving poor care once they are finally seen (which is often after waiting days or even weeks), having their pre-existing conditions ignored, facing insufficient quantities and quality of medical staff, being charged up to $17 to see a nurse, among other serious issues. 75 of 252 callers from Broward jails reported some form of medical neglect, with many callers reporting multiple different instances and types and neglect in the same call, totaling 137 reports of medical neglect. Nearly half of these issues have to do with difficulty in getting medical attention when needed. The chart below captures the types of reports of medical neglect we have received:

Medical attention problems: Reports of difficulties in trying to obtain medical attention, including long wait times to see a nurse or doctor, sick calls being ignored, and payment unlawfully being required for COVID-19 related medical services.

Medical care problems: Reports that the medical care that is being given is cursory, dehumanizing, or rife with possibility for infection, for example, medical exams being performed in public, or tylenol being given for every illness.

Medication/supplies problems: Reports of difficulties obtaining medications or other medical supplies or records, or other lack of access to resources used to improve and maintain health.

Staff problems: Reports of insufficient numbers of medical staff, medical staff not performing their usual duties, or medical staff's lack of expertise.

Emergency medical release: Reports of callers seeking emergency medical release due to inability to get proper care/fear of COVID-19.

Known conditions ignored: Reports of staff not responding appropriately to a known condition, such as a prisoner's pre-existing medical condition or a supply used in the facility that is dangerous to health.

Statements from callers elaborate on the conditions inside the jail and the shocking medical neglect that is taking place:

- 4/13: I have been diagnosed with Hep C. I am in pain and at very serious high risk for COVID-19. My life is in danger. I have no medical help. I am supposed to be under medication and they won't give it to me. I can't get any answers from anybody. I am scared. I don't know where this is going (Anonymous)
- 4/14: I have a very bad broken bone in my arm. My hand is turning color as we speak. A doctor said it was very bad, but all they can do is a bottom bunk for 8 days and some tylenol (M. P.)
- 4/24: I was spitting up clots of red blood, but it was 14 days before I got to see medical. They just gave me tylenol and sent me back to solitary (Anonymous)
- 4/29: I can't smell or taste my food, I'm coughing up blood, but they won't let me see a doctor (Q. J.)
- 4/29: There are lumps growing under my skin in different places, but the doctor says they're not able to do anything because of the pandemic (J. C.)
- 5/2: I have an upper respiratory infection and they're not giving me any meds, but they put me on a cardiac diet even though I have no cardiac issues. I'm allergic to peanuts but still given peanuts. The doctor prescribed Albuterol 2x a day but told me to use someone else's inhaler and just put a cup over it to block germs (B. J.)
- 5/15: Some of us have court orders to see medical and still aren't seeing medical. The judge ordered them to bring me to the hospital for the gastrointestinal bleeding but it's
been since November and I haven’t been back to the hospital. Wellpath is telling us medication isn’t covered, sue us if you don’t like it (Anonymous)

- 6/29: I have asthma and they won’t give me an inhaler; I’m not getting any medical attention for toothaches (Anonymous)
- 7/26 I have shortness of breath, my body is aching, and my breasts have been bleeding for 3 months. I went to the doctor around the second week of June and they just gave me neosporin, it hasn’t stopped (B. J.)
- 7/28: I’m HIV+ and not getting my medicine. In intake, I told them what meds I need. It took 4 days for them to start giving me my meds and it is random whether the nurse has the meds each day. They say they can’t get my meds in and so they have to take pills of my medication from other prisoners’ prescriptions (M. H.)
- 8/2: I have a torn rotator cuff and haven’t gotten a sling; my roommate has multiple gunshot wounds and isn’t in a medical unit (Anonymous)
- 8/11: I haven’t gotten blood thinners in days, and I have blood clots. They say that they don’t have my medication for blood clots. My chest is hurting and the blood clot in my leg is getting worse (Anonymous)
- 9/19: I’m having issues with my blood sugar because they’re not giving me insulin. One nurse in particular doesn’t want to administer it. They stopped taking my blood pressure altogether, and stopped my meds for it a week ago. Normally I can control blood sugar and blood pressure through diet and exercise but in the jail we get no outdoor time and no ability to exercise and the diet is very poor, especially for diabetics (D. S.)
- 10/31: I’ve placed sick calls three times but no one ever shows up (A. T.)

Retaliation for Seeking Care or Filing Grievances

Beyond the numerous and serious incidents of medical neglect documented above, prisoners in Broward County jails are further dehumanized and put at risk by the retaliation they face when attempting to advocate for their own health. Prisoners are strongly discouraged from both seeking medical attention as well as calling attention to the medical neglect and abuse they have faced.

In addition to retaliation for seeking care, we have also received reports of threats of discipline for cleaning common spaces on their own and creating face coverings; Even though deputies and corrections officers are getting sick and often using PPE inappropriately themselves, prisoners report that they are punished for attempting to encourage safer conditions and follow federal instructions to use face coverings in circumstances when social distancing is not an option.
The modes of retaliation and threats differ across reports, but all are extremely concerning. Some examples of reports we have received are of jails blocking grievances for certain medical related issues, staff emotionally and verbally abusing prisoners who try to speak up about their health or the unsafe conditions surrounding them, and of prisoners who do manage to file grievances or sick calls either having the requests denied, being given Disciplinary Reports (DRs), or facing other punishments and loss of privileges for filing them.

Experiences from our callers expand on these dire issues.

- **4/10:** I tried to submit a grievance and they would not let me. They told me: "So, why are you talking then, if you have shortness of breath?" (Anonymous)
- **4/17:** We don't want to get beat up for trying to get medical attention. Since I have been complaining, sometimes they don't let me out for 2-3 days, if I do something wrong such as wanting to write a grievance. When I ask for a nurse, the CO's say that they don't have time to do that for me (D.T.)
- **4/23:** Last night there was a big speech that if anyone needs a new mask before the deputies decide it's time to pass out new masks, they will receive a DR. We are also going to get in trouble if the disposable masks wear out at the corners (J.O.).
- **5/2:** I was told if I filed a grievance they would take away an hour off of lockdown. This means I would have even less time to leave my cell and make phone calls (S.A.)
- **5/15:** I was written up for a DR and transferred to a different facility in retaliation for contacting the ACLU. My medications are being delivered inconsistently and I am being given medications that are unsafe to take together. I've submitted around 75 grievances on file by my last count and filed a lawsuit over not getting meds. Wellpath, the jail health provider, is telling me that my medication isn't covered and they aren't getting it. The jail says "sue us if you don't like it." (Anonymous)
- **7/18:** I tried to file a grievance over the fact that when I requested testing, all they did was check my temperature, weight, and blood pressure. I was blocked from submitting a grievance and told I couldn't file one for that (C.D.)
- **8/9:** The last grievance I submitted was from 4/28 and it hasn't been responded to, which was requesting a release form so my lawyer can access my medical records. Charge nurse asked me why I needed my medical records released and then directed me to fill out a grievance form, which isn't available because the kiosk machines are not working (Anonymous)

Even more disturbing reports include throwing away prisoners' property, purposefully coughing on prisoners, and threats and actual acts of physical violence. Again, our callers experiences portray these events best.
4/10: My roommate expressed concern to guards about them having coughs and coming in our cells and interacting with us. In response, the guards pulled him out of the cell, and in his words, "pulled the curtain and jumped on me," giving him a black eye (L.F.)

4/24: Deputies are coughing on me on purpose. I asked to file a grievance multiple times, but was continuously told to wait for the next shift or that I should have asked last shift, or that the guards don't know how (Anonymous)

5/4: I was threatened that if I report not being seen by medical staff they would kill me and make my sentence harder (D.B.)

9/6: I do not feel safe. One staff member has ignored my requests for medical, has refused to let me get my mask when needed, has threatened me, and has denied me from filing grievances in the past. When I was finally able to file against this staff member, she retaliated against me, shaking me down and having my personal items thrown away as contraband, threatening me, and writing me up for things I haven't done (Anonymous)

This pattern of behavior by both Broward County jail staff as well as the contracted healthcare workers from Wellpath leaves many prisoners afraid to speak up even when they are feeling sick or are not receiving adequate care. One caller who wished to remain anonymous summarized this feeling in an extremely concerning statement:

4/29: Even if I was feeling serious symptoms I would probably say nothing. I don't want to open that door. I hear things through the grapevine but ain't nothing I hear good. So I want no part of it (Anonymous)

Finally, some callers also experienced concerns that speaking with CHIP would cause them to face retaliation, and either requested to remain anonymous and gave limited information, or in some cases even expressed that they intended to cease contact with us to protect themselves. For that reason, we are concerned that many important stories remain untold, and we believe that the data we have collected and presented in this report is likely only the tip of the iceberg.

Demands

In response to BSO's violation of Broward County law when Stephanie Bretas was left alone in labor for hours on 9/27, and in response to the horrific conditions and medical neglect/abuse within Broward County jails, we join Chainless Change and others in demanding:
1. An immediate, thorough, and transparent investigation of the September 27th incident, followed swiftly by a public report detailing what happened. Report must also include a detailed and transparent plan about the steps that will be taken to remedy the harm caused.

2. The aforementioned report must include actionable policy measures that will ensure future compliance with all laws pertaining to the health and safety of incarcerated people in Broward County.

3. Termination of Wellpath’s contract as the healthcare provider for Broward County correctional facilities, and complete transparency around the budget available for these services (and how it is currently being allocated), so that a suitable replacement entity such as Broward Health or other local provider(s) can be identified and contracted for physical and mental health services.

4. Increased transparency and accountability regarding the grievance process in Broward County correctional facilities, to include the implementation of a citizen’s review committee with the authority to investigate incidents, subpoena records, and make recommendations for disciplinary action, including prosecution, with regards to negligence, abuse, and/or policy violations.

5. Complete closure of the Broward North jail facility, followed by a detailed plan for depopulating and closing other local institutions. The said plan should include increased and accessible diversion programs.

6. The State Attorney’s office must create lasting alternatives to incarceration for individuals with mental health conditions, and people who are pregnant, or who are otherwise medically vulnerable.

7. Full and complete transparency with the general public about the status and severity of COVID-19 cases within Broward’s correctional facilities.

8. Full and complete transparency with detained persons and the public about COVID-19 and the status of cases in all local institutions. This must include increased access to public health information related to COVID-19, expanded access to COVID-19 testing, and increased access to necessary cleaning supplies and personal protection equipment (PPE) for those in the custody of Broward Sheriff’s Office.

9. Broward County correctional facilities must allow free, unlimited phone calls from jails so that incarcerated persons can communicate directly with their loved ones during COVID-19.
10. Broward Sheriff’s Office must immediately stop charging those jailed for physical and mental health services.

11. Broward County must make increased investments in health and wellness for incarcerated persons, to include access to daily outdoor recreational activity, access to fresh and healthy food in sufficient portion sizes, and access to medical care, mental health services, and substance use treatment options, both in-person and remote.

12. Broward County correctional facilities must expand emergency housing options for those exiting incarceration, who are at increased risk for homelessness.

13. Broward County correctional facilities must not house any pregnant woman or those with mental illness pre-trial unless probable cause has been established by the judge that the individual is a danger to the public and there are no other alternatives to keep the public safe.

14. Broward County must mitigate negligence, violence, and the potential loss of life at the hands of the criminal legal system by taking all possible measures to immediately reduce local jail populations (including following the COVID-19 decarceration plan that was previously shared with the general public), and by supporting policies aimed at preventing chronic overpopulation of local correctional facilities. This includes, at a minimum, the immediate release of every person qualified for cash bail who is at increased risk for COVID-19. In particular, anyone who is pregnant, anyone who is 50 years of age or older, anyone who is living with HIV/AIDS, and anyone who is otherwise medically vulnerable must be released. Individuals who have identities that have shown to be risk factors for contracting/dying from COVID-19, such as being a person of color, being LGBTQIA, and/or being a person with disabilities, should also be given priority consideration for release.

The following organizations join us in these demands:

Chainless Change, Inc.
Black Lives Matter Alliance-Broward
Broward Young Black Progressives
Ruth’s List-Broward
United We Dream
Florida Immigrant Coalition
Florida Justice Center
Women’s March Florida - Miami Chapter
Dream Defenders
Lake Worth Food Not Bombs
Broward for Progress
Florida Immigrant Action Alliance
COVID-19 South FL Mutual Aid Coalition
Dignity Coalition
Fedfam4life
Women’s March - West Palm Beach
Dignity Florida
Fight Toxic Prisons
Florida Prisoner Solidarity
Human Rights Defense Center