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Governor Tony Evers  
115 East, State Capitol  
Madison, WI 53702

Governor Evers,

We respectfully request that you direct the Attorney General and the state’s judges to work with the Department of Corrections to release incarcerated individuals who are at risk for COVID-19 from Wisconsin’s prisons. Currently, the five largest known coronavirus clusters in the United States are [inside prisons and jails](#). While the overall coronavirus infection rate in the United States has remained relatively flat, the number of incarcerated people infected has [doubled and deaths have risen 73 percent over the past two months](#). We urge you to use every available resource to release incarcerated individuals to protect those most vulnerable to the coronavirus and to de-densify our prisons to protect those who remain housed there and those who work there. This is an increasing emergency.

Dr. Mark Stern, an expert in prison health care, filed an [affidavit](#) in March of this year, calling for the immediate downsizing of California prison populations given that incarcerated individuals are at an extraordinary risk of dying from the COVID-19 virus. His arguments apply to Wisconsin’s prison population as well. Testing has not yet been widespread in Wisconsin’s prison with as few as [22 incarcerated individuals tested at Kettle Moraine Correction Institute](#) as of June 15, 2020. This is a facility that was designed to house a capacity of 950 people but currently [houses 1,150 persons](#). Overcrowding, housing incarcerated persons above the design capacity of the prison, is currently a condition in all but three of Wisconsin’s adult institutions. It is but one factor that increases the likelihood of the spread of the coronavirus in Wisconsin’s prisons. Furthermore, these original prison “design capacities” did not include the capacity for social distancing and other [CDC Correctional and Detention Facilities](#) recommendations for management of the coronavirus.

Dr. Stern indicated that “there are two values to immediate downsizing. First, downsizing will reduce the density of congregation. This will allow people in prison to maintain better social distancing. The reduction in population will also make it easier for prison authorities to implement

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infection prevention measures such as: provision of cleaning supplies to residents; frequent laundering of towels and clothes; provision of soap for handwashing; frequent cleaning of transactional surfaces; frequent showers; etc. The reduction in population while implementing these enhanced measures helps prevent overloading the work of prison staff such that they can continue to ensure the safety of incarcerated people. For those people housed in dormitories, reducing the density will enable people to live in group settings with sufficient space to maintain six feet of distance from others.” As you know, “all these steps can slow or stop the spread of infection, to the benefit of residents and staff and, ultimately, the community at large.”

“Second, immediate downsizing that prioritizes residents who are elderly and those with underlying health conditions reduces the likelihood they will contract the disease. Individuals in these groups are at the highest risk of severe complications from COVID-19 and when they develop severe complications, they will be transported to community hospitals. Prisons are integral parts of the community’s public health infrastructure. Reducing the spread and severity of infection in a state prison slows, if not reduces, the number of people who will become ill enough to require hospitalization where they will be using scarce community resources (ER beds, general hospital beds, ICU beds) which also in turn reduces the health and economic burden to the local community at large.”

Hundreds of Wisconsin residents who work in our prison system leave these institutions at the end of their shifts and return to their communities. If we do not stop the spread of the virus in prisons, the crisis will become a crisis in communities surrounding Wisconsin prisons and eventually spread beyond these communities now that the “Safer at Home” restrictions have been lifted. Lily Hu, a PhD candidate in Math and Philosophy at Harvard University recently [presented epidemiologic data modeling](#) of coronavirus infection that forecast a [grim outlook](#) for those who are incarcerated and those who work in Wisconsin prisons along with employees’ family members and close associates. This is an increasing emergency.

Pursuant to the [Wisconsin Statutes s. 302.113\(9g\)](#), Extraordinary Health Care and Geriatric Condition Release Review, we must use our “compassionate release” process now. This legislation allows a sentence modification due to extraordinary health conditions for incarcerated persons who are 60 years or older and have served at least 10 years of their sentence or who are 65 years old or older and have served at least 5 years of their sentence. Persons incarcerated under what is referred to as “old-law” who have serious medical conditions, elderly, and who have the required time served, are also eligible for release on parole. It is urgent that all eligible individuals in the care of the Department of Correction are considered for compassionate release. The Department of Corrections staff should immediately work to release the persons eligible under these rules to de-densify prisons for those who cannot be released and to protect the employees in our state correctional institutions. The Department of Corrections should establish realistic but urgent time frames to gather required documents and complete assessments that include medically informed decisions that expedite these reviews during this coronavirus public health pandemic. Staff must be directed to prioritize this work. We cannot wait! This is an increasing emergency.

To ensure that medically vulnerable people who are released will receive required health care and access social supports, social workers in the correctional facilities must work to assist these individuals in applying for any eligible public assistance, veterans' benefits, appropriate housing and other resources including Medicaid and/or Medicare. Institutional staff should coordinate release planning and care with [local community re-entry services](#). [Minnesota's Department of Corrections](#) begins release planning as soon as an incarcerated individual is identified as potentially eligible, including connecting the person with their county social service department. Wisconsin's Department of Corrections should adopt and implement a similar process as well. We must ensure that the release of these medically vulnerable people is completed diligently with all necessary supports will be in place.

While Congress has not passed the [Proposed COVID-19 Correctional Facility Emergency Response Act of 2020](#), we urge you to work with the state legislature to provide emergency legislation for this public health crisis allowing release of additional persons in an attempt to further de-densify Wisconsin's correctional institutions. These include but are not limited to: individuals who do not pose a risk of serious and imminent injury to any person; individuals 50 years and older; individuals with serious chronic medical conditions; pregnant women; immunocompromised individuals; and other individuals with conditions or disabilities otherwise making them vulnerable to COVID-19 even if they do not meet the criteria in the Wisconsin Statutes s. 302.113(9g). This is an increasing emergency.

Further, We urge you to allow emergency rules to grant parole to those who are within six months of their parole eligibility date; direct the Parole Commission to review parole decisions for those previously denied parole, and that you use your clemency powers to release medically vulnerable prisoners similar to the recommendations outlined in a [10 Point Emergency Plan](#) by a coalition in Massachusetts.

While there have been requirements put in place to mitigate coronavirus infections in Wisconsin Correctional Institutions, there are ongoing accounts (from correctional staff themselves) of employees in these institutions who are not following required policies. In one institution, staff in the "gate house" who have contact with every employee entering the institution were not wearing masks as required. In another facility, a correctional officer said that while every employee has a mask, they frequently aren't wearing them "until a supervisor comes around." Coronavirus testing for staff at Waupun Correctional Institution was completed by National Guard members without any social distancing. Employees were lined up side by side in multiple lines waiting to be tested. These ineffective practices and procedures will only increase the infection rate for employees and subsequently result in tragic consequences for the most vulnerable persons in the care of Wisconsin's Department of Corrections.

We urge you to act now to release the most vulnerable incarcerated individuals who are at risk for COVID-19 from Wisconsin's correctional institutions. In addition, others who do not pose a risk of serious and imminent injury to any person should also be released to de-densify the living environment and reduce the risk of infection for those who remain incarcerated and those who work in Wisconsin's correctional institutions. This is an increasing emergency.

Respectfully,

*Wendy Volz Daniels, MSW, LCSW*

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CC: Kevin Carr, Secretary, Wisconsin Department of Corrections  
Evan Goyke, Assembly Representative; Committee on Corrections  
Michael Schraa, Assembly Representative; Chair, Committee on Corrections  
Rob Hutton, Assembly Representative; Vice-chair, Committee on Corrections  
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*“Justice will not be served until those who are unaffected are as outraged as those who are” – Benjamin Franklin“*

*“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.”  
–Margaret Mead*

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