

## **RE: AFFIDAVIT OF SHERIFF THOMAS M. HODGSON**

As a Sheriff Of Bristol County, conduct and reputation must be the priority for a person elected as a Sheriff. Thomas M. Hodgson was employed as a Detective with Ocean City Police Department in the State of Maryland and in 1997 became Sheriff OF Bristol County.

As He said; the primary mission of the Sheriff's Office (BCSO) is the safety and security of the people of Bristol County which includes the security, health and welfare of both "INMATES" and "DETAINEES" as well as the correctional officer and support staff working at the two facilities run by the department.

Sheriff Thomas M. Hodgson contrary to his Affidavit on the date of this 26th day of March 2020, "**Signed under penalty of perjury**"

1. Inmates who are admitted to custody are medically screened by CPS staff prior to admitted to the general population with the intake area and holding cells being continually sanitized, so contrary to his affidavit nothing like that is been executed in the facilities, specially "Ash Street Jail Correctional."
2. By having contracted COVID-19 He is not providing a PPE mask at all and either placed in isolation for 14 days.
3. Nor all housing units are sanitized, it's haven't been see it at all.
4. Fresh air constantly circulated by opening windows and utilizing handler/ vents throughout the day is not executed as the Sheriff's affidavit
5. All feeding is done outside at the dinning hall, all inmate get together at the dinning hall, non of the Sheriff's affidavit is alleged is true, there are cameras monitoring inmates around the facility to see all the allegations by the Sheriff.
6. Recreation still are the same, nothing has been change, all inmates contact and not prevention at all.
7. Non inmates had been educated to the proper sanitary procedure, not hand washing and non social distancing and either hand sanitizer and soap if inmates need soap it need to be purchased at the "Cantine" (Keefe Commissary) at high price.

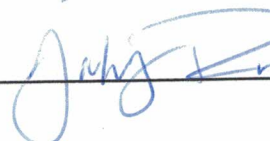
## **RE: AFFIDAVIT THIS IS WHAT WE NEED**

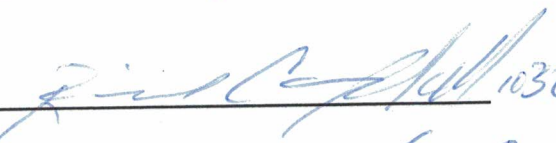
- Release Low-level offenders such as Elderly or Infirm
- Release Non-Violent offenders or Non-Violent Crimes
- ACLU pushing to release Non-Violent detainees
- Release on alternative forms of detentions such as Supervised Release or Electronic Ankle Monitors to limit detainees risks of contacting COVID-19
- Consider Bails for detainees
- Review and Release Protocol for previous cases
- Ensure Facilities are as empty, safe and clean as possible and Increase cleaning and disinfecting frequency for high-touch surfaces
- Protect the human race at the end of the day. The Criminal Justice System will survive.
- Provide us inmates with Hand Sanitizer and Disinfecting Wipes or provide alcohol-based hand sanitizer stations throughout facilities

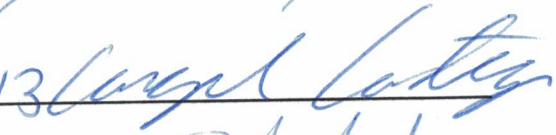
- Release detainees who have underlying medical issues and who otherwise pose little or no risk
  - Social Distancing line at least Six(6) feet
  - The Board Of Health asks that every resident does their part in mitigating the spread of the virus by adhering to orders from the governor as well as continuing to practice Social Distancing, Good Personal Hygiene and Staying informed on the situation
  - Go above and beyond in a very difficult time
  - Social Distancing protocols
  - Public Health experts (CDC)(WHO) recommend that seniors with medical needs use distancing opportunities to protect each other
  - Reinforce personal hygiene
  - Increase hand washing requirements
  - Cough etiquette
  - Encourage symptomatic employees to stay home
- Educate and inform all inmates/employees of infection status and proper infection control procedures

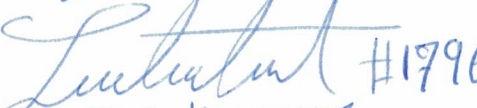
Signed By Inmates At Ash Street Jail Facility under penalty of perjury this 31th day of March 2020.

Keven Aquino #183431  #192682

Luis Santiago #193469  #176231

Maurice Amos #128258  #103226

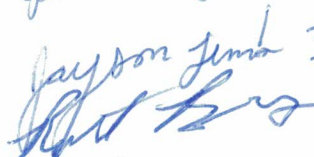
Angel Ortega Molina 164713  #103226

Dutra da Silva RAFAEL #197851  #199654

Brian Dager #179886

George Boucher #100053

Jarred La Mere ID# 194820  
Jarred La Mere

Jayson Juma ID# 197591  
 #162931

Eddy  #190308

Joshua Sanford #104277  
ANDRESS BJORGEN #198351

#144888 - 8M

Jeffrey Graciani #198059



## AFFIDAVIT OF SHERIFF THOMAS M. HODGSON

Now comes Sheriff Thomas M. Hodgson, duly sworn and under oath and says and deposes as follows:

1. I am the Sheriff of Bristol County. Prior to coming to Massachusetts, I was employed as a Detective with the Ocean City Police Department in the State of Maryland. On arriving in Massachusetts I assumed the position of head of the enforcement division of the Bristol County Sheriff's Office and in 1997 I became Sheriff of Bristol County and have served in that office to date. I am currently the longest serving Sheriff in the Commonwealth.
2. The primary mission of the Sheriff's Office (BCSO) is the safety and security of the people of Bristol County which includes the security, health and welfare of both inmates and detainees as well as the correction officers and support staff working at the two facilities run by the department.
3. The health care of our inmates and detainees is now and since 2009 has been administered by Correctional Psychiatric Services, Inc. (CPS) under the direct supervision of Jose Veliz, M.D and Medical Director Nicholas Rencricca, MD, both of who have combined correctional experience of over 50 years. CPS medical personnel are continually on site 24/7 at both of our facilities to address, manage and treat any and all medical issues arising from the inmate/detainee population. Medical issues that require the attention of medical specialists or hospitalization are immediately transported to such facilities. Bristol County is fortunate to have access to three well respected hospitals in the area, St. Luke's Hospital, Charlton Memorial Hospital and Morton Hospital, all within a few minutes distance by transport or ambulance. CPS has relationships with specialty local community providers many of which are located on Faunce Corner Road to address any conditions requiring a specialist i.e. eye care, orthopedic, imaging, dermatology, OBGYN, Oncology, Neurology, ENT, and many more which are utilized on a routine basis. These providers are critical for the inmates who have these conditions and provide for continuity of care when needed upon the inmate's release from custody. Specialty clinics at the Shattuck Hospital are also utilized when needed. BCSO has successfully managed inmates with kidney failure, cancer, infectious disease issues and inmates who have chronic illnesses. BCSO also has the ability to utilize telehealth with community providers as well as CPS onsite providers.
4. The BCSO is currently and has for many years been certified by the following nationally recognized entities:

American Corrections Association  
National Commission for Corrections Health Care  
Certified in compliance with the federal Prison Rape Elimination Act (PREA)

5. With the onset of the appearance of COVID-19, in conjunction and consultation with the Massachusetts Department of Public Health, the CDC and other public health agencies and correctional institutions, CPS and the BCSO have instituted strict protocols to keep inmates, detainees and staff safe and take all prudent measures to prevent exposure to the COVID-19 infection.

6. Since February, the following measures have been undertaken:


a. All inmate/detainee visitation, with the sole exception of attorney and clergy visitation, has been cancelled until further notice. Prior to the COVID-19 crisis, all inmate/detainee visitations, with the exception of attorney visits, had been non-contact.

b. During the crisis all prisoners are permitted two free telephone calls per week added to their regular allotment.

c. Volunteer assisted programs have been suspended but program material continue to be available to those incarcerated.


d. Attorneys and clergy, who visit as well as all BCSO staff, are medically screened prior to entrance by questions relating to COVID-19 symptoms and by body temperature assessment.

e. Inmates who are admitted to custody are medically screened by CPS staff prior to being admitted to the general population with the intake area and holding cells being continually sanitized. Protocol requires that any admission suspected of having contracted COVID-19 is provided a PPE mask, placed in isolation for 14 days and continually monitored for symptoms and followed continually by CPS medical personnel as well as the Mental Health Department.

 f. All housing units are sanitized no less than three times per day. Fresh air is constantly circulated by opening windows and utilizing handler/vents throughout the day. All feeding is done inside the housing or cells and inmates do not congregate for meals in the main dining hall. Outside recreation is done as usual daily except that it is now done on split schedule to prevent close inmate-to-inmate contact.

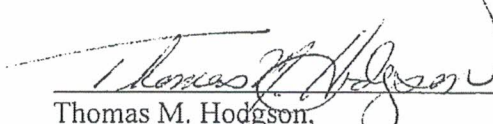
g. Medical pass and normal sick call procedures continue to run as normal with added scrutiny of both CPS medical staff and correction officers on alert for any prisoner experiencing or complaining of symptoms consistent with COVID-19 illness. In conjunction with community standards, Providers in the Health Services Unit are seeing inmates with emergent issues only in order to minimize the possibility of contamination and spread of the disease and to provide containment. Medical continues to evaluate and adjust its operations in conjunction with circumstances as they arise and with the guidance provided by CDC and DPH.



- h. All inmate treatment and educational programs, mental health services including evaluations, assessments and therapies, detoxification, behavioral modification programs and therapies for acute and chronic illnesses are carried on as normal with the exception of groups meeting and utilizing the social distance precautions.
-  i. All inmates and detainees who have chronic illnesses which would make them immune-compromised or who are over sixty years of age are being specially monitored by officers and health personnel for the development of any symptoms consistent with COVID-19. CPS is continually monitoring the on-site situation and developing emergency plans for cohorting high risk inmates.
- j. Staff and inmates have been educated as to proper sanitary procedure, including repeated hand washing, and social distancing and hand sanitizers as well as soap and water are readily available to all inmates and staff.
- k. For those inmates nearing end of sentence, an extensive Re-entry program continues to operate normally insuring that each inmate scheduled for release into the community has in place proper housing and the continuity of medical care.
- l. Normal schedules are maintained with the bail magistrates and unless ordered by the court, appearances with courts are performed via video-conferencing and telephone. Prior to every proceeding a prisoner is afforded telephone access to his or her attorney. Some Regional Lock-up and pre-trial detainees have been released by the courts either on personal recognizance or on GPS bracelets. Additionally, when the district attorney and the defendant's counsel have agreed on a disposition, the courts have undertaken the practice of faxing a "disposition form" to the BCSO and the defendant is able to undergo a colloquy with the court by tele-conferencing, sign the form at the BCSO and often be released on the spot.
7. At present no inmate, detainee or staff member has tested positive for COVID-19. Our medical provider has assured us that we have on hand the appropriate PPEs and other equipment to meet our needs to combat COVID-19 and protect health care workers and other staff.
8. For over the twenty-three years that I have been Sheriff, the BCSO has safely and efficiently managed several pandemics including the H1N1 and SARS viruses as well as the HIV and Hepatitis C explosion in the community.
9. Contrary to the allegations contained in the Plaintiff's Petition and expert affidavits, the BCSO penal facilities are not over-capacity nor have we been running over capacity for several years. The BCSO facilities were certified for a capacity of 1638 persons and as of March 24, 2020 our population is 931, which translates into 52% capacity. Our historical breakdown is attached as Appendix "A."

10. The initiation of our COVOID-19 preventative measures have been received well by the inmate population who have expressed their understanding as to the measures taken and have been cooperative.
11. It is my opinion based on a lifetime of law enforcement experience and over 23 years of experience in managing correction facilities that if inmates are released into the community pre-maturely without the necessary re-entry planning being in place that:
- a. Many will become homeless and place themselves and their communities at great risk of contracting COVID-19;
  - b. Many will not have access to proper medical care including mental health care and medication;
  - c. Many who are or have been addicted to substances will relapse and become victims of overdose.
  - d. Many will likely re-offend and place local police at risk with re-apprehension.
  - e. Those having to be readmitted to prison after re-apprehension will place the prisons at greater risk of introducing COVID-19.
  - f. Many of those released inmates with not medical support will flood local emergency rooms that are already overburdened.

Signed under penalty of perjury this 26<sup>th</sup> day of March 2020

  
Thomas M. Hodgson,  
Sheriff of Bristol County