Recommendations for Safe Release Procedures from Immigration Detention during the COVID-19 Pandemic

The following are recommendations for all stakeholders, including Immigration and Customs Enforcement (ICE), sponsoring family members or friends, and organizations offering post-release stabilization services, on steps to take to prepare for an individual’s or a family’s release from immigration detention during the COVID-19 pandemic.

PRIOR TO RELEASE

1. As consistent with ICE’s Performance-Based National Detention Standards (PBNDS, Section 4.3, BB.4), ICE should prepare the person’s complete medical records, medications, and any supplies required to maintain the individual’s optimal state of health until seen by a community health professional.
   A. Per the PBNDS, this includes provision of “medication, referrals to community-based providers as medically appropriate, and a detailed medical care summary. This summary should include instructions that the detainee can understand and health history that would be meaningful to future medical providers.” (Emphasis added.)
2. ICE should communicate with the attorney of record, the sponsor, and any post-release service provider as soon as details of a planned release are available, including the time and post-release plan, coordination of transportation, and temporary housing.
   A. Wherever possible, there should be a collaborative approach between ICE, local governments, post-release service providers, and community organizations to secure a post-release medical encounter (in person or via telehealth) and identify temporary housing.
3. Similarly, ICE should communicate with the sponsor and/or community volunteer who will meet the released person and offer information on:
   A. Whether the person has been tested for COVID-19
   B. Whether the person has had any symptoms in the past 14 days
   C. Whether the person has come into contact with anyone who tested positive or had symptoms
   D. Whether the person has been in quarantine, isolation, or been “cohorted.”
4. ICE should provide masks to all released individuals and other personal protective equipment (PPE) as needed prior to the release. The person being released should receive information in a language they understand on the recommended preventive measures

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1 Cohorting refers to the practice of isolating individuals together in the same housing unit after testing positive or after exposure to someone who has tested positive for COVID-19.
(social distancing, hygiene measures, wearing a mask, etc.), as well as the explanation of risk factors for contracting the disease.

A. For a list of specific risk factors, stakeholders should review the Centers for Disease Control and Prevention (CDC) guidance.

5. If the person is showing signs or symptoms or has tested positive for COVID-19, attempts should be made to coordinate post-release care with a local physician or the local health department (see below). The CDC is offering technical assistance to facilities on coordination with local public health officials on release.

A. Ensure that release into facilities with medical isolation is an option. (For the difference between quarantine and isolation, see this CDC explanation.)

B. For more information, see CDC guidance on symptom screening and coordination with public health officials for the safe release of incarcerated or detained persons.

RELEASE FROM DETENTION

1. General Guidelines for Coordination of Release

A. Release in cases where an individual/family can be picked up directly from a facility.2

   i. Engage in warm greetings without physical contact — remain six feet/two meters apart — while wearing a mask and using non-verbal communication, as well as kind words or even a colorful sign.

   ii. Familiarize the person with the journey and the new adaptations to social interactions during the pandemic, such as mask use, increased hand washing, maintaining social distancing, not touching one’s face, and disinfection procedures, in the person’s language. Advise them about current state or city regulations at their final destinations.

   iii. The released person should have masks provided by ICE, but the sponsor/community service providers should have masks, hand sanitizers, and disinfecting wipes on hand to give to the released person.

   iv. Provide tissues, water, snacks or food, and access to a phone charger or a phone or other communication device (depending on what the person already has). If the person released needs to borrow a phone to make a call, use the speaker and make sure to sanitize the phone after use.

B. In cases where an individual cannot be picked up from a facility, use available means of communication to prepare them for the journey by, for example, going over the information in this guidance document over the phone or mailing information to the person about COVID-19 preventive measures.

2. Transportation

A. A volunteer, organization, or family member should take the following precautions when offering transportation to someone recently released (assuming a car ride that could last anywhere from an hour to many hours)

   i. For all transportation: Minimize the number of people showing up for pick up!

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2 This section draws heavily from, and with gratitude to, the Asylum Seeker Sponsorship Project “Covid-19 Release Guidelines,” accessed in May 2020 and available at: https://docs.google.com/document/d/1pfYGb644dKqmZn2y0Rgn22o9KOFxeB5-EhzfLtMgo/edit?usp=sharing
Safe Release Procedures

Though this may be a joyous occasion, designate one person to do the driving. All individuals should have access to and engage in regular hand washing/hand sanitizing and avoid touching their face. A mask should be worn for the entirety of a journey, including in all public spaces, cars, or planes/buses/trains.

ii. For a car journey: A clear divide using plastic sheeting can be taped between the front and back seats with duct tape. If only one person is released, they should sit behind the passenger seat, as far from the driver as possible. The car windows should remain at least partially open to mitigate the lack of air circulation inside. Car interiors and door handles should be sanitized prior to picking someone up and again after completing the ride.

iii. For a bus/plane: Any person should sit in a window seat if possible, because it decreases contact with others. Use disinfecting wipes to clean hard surfaces such as the arm rest, seat belt buckle, TV screen, and tray table. Use a tissue to touch the TV screen as a barrier to your hand. Use wipes when opening the bathroom door and touching the bathroom faucet as a barrier to your hand.

SPECIAL CONSIDERATIONS for people who have symptoms — e.g., a fever, cough, shortness of breath, chills, muscle pain, sore throat, lost sense of smell or taste — or who have tested positive.

A. Release should not be halted if the individual is showing symptoms, because release will facilitate isolation and prevent further spread within the detention center and the community. Attempts should be made to coordinate post-release care with a local physician and with the local health department as much as possible. Describe the person’s health status and symptoms to assess the need for an emergency room visit or hospitalization. If the person is stable, inquire about testing (as necessary) or processes for ongoing medical checks (via phone or telehealth platforms) for those on home isolation. Attorneys, advocates, sponsors, local visitation groups, accompaniment volunteers, and family members are some of the stakeholders that can work together to coordinate these efforts, including by providing a list of urgent care medical facilities or community health service providers.

B. If a released individual is showing symptoms, they should be assessed by a medical provider right away and be kept in isolation (not quarantine) — meaning they should be in a private room with a private bathroom and maintain no contact with anyone living in the same household for 7-10 days from the onset of symptoms. Isolation may be implemented in a house or in community-based medical isolation facilities. If

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3 See the Asylum Seeker Sponsorship Project guidance, available at: https://docs.google.com/document/d/1pfYGb644dKqmZn2yh0Rqn22o9KOFXeB5_EhztLtfMgo/edit?usp=sharing. See also: Lyft, “How to Be a Responsible Rider,” available at: https://www.lyft.com/safety/coronavirus/rider#responsible-rider.

private rooms are not possible, it is essential to reduce contact with others as much as possible and regularly disinfect self and surfaces.

C. All community-based transportation providers, family members, and/or sponsors must consistently use masks near/around released individuals.

D. Local advocacy groups should consider partnering with local medical teams to ensure access to community-based medical isolation facilities. If the person is symptomatic or has tested positive, and if their final destination is not nearby, isolation should occur prior to transportation.

E. Provide information (in the person’s native language) about handling symptoms and when to consider going to the emergency room.

F. Plan to deliver food and basic supplies that can last for two weeks in case the released individual needs to be in medical isolation or quarantine (see below for more).

G. Provide information about local resources for food, hygiene and cleaning supplies, toiletries, etc., both in any interim or final destination.

**FINAL DESTINATION**

1. Steps a sponsor can/should take to prepare their home for a recently released individual/family:
   A. Supplies to have ready: Food and basic hygiene and other supplies that can last for two weeks in case the released person needs to be in medical isolation or quarantine. Thermometers, pulse oximeters, and pain relievers can also be provided.
   B. When possible, sponsors should provide, together with local community groups if needed, food, hygiene and cleaning supplies, such as toiletries, until the initial period of self-isolation is complete and it is safer for the individual to make these purchases themselves.
   C. Ensure that you have contact information for relevant local health services (e.g., doctors and hospitals), the local health department, and relevant social services organizations, if needed. Check local and state health agency websites for the most up-to-date local guidance and regulations.

2. Self-quarantining and medical isolation:
   A. Those who are symptomatic need to be tested, and if they have tested positive (or are waiting for test results) need to go into isolation (which separates sick or potentially sick people from those who are not sick).
   B. Those who are asymptomatic but have been exposed to the virus need to be in quarantine for 14 days to see if they develop symptoms. They must keep social distance at all times, avoid contact with people at higher risk for severe illness, and self-monitor for symptoms.

3. Guidance on when to seek medical attention:
   A. When experiencing symptoms of coronavirus, it is best to check with a medical

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professional (ideally through telehealth) since symptoms guidelines are being regularly updated.

4. Guidance on general hygiene/disinfecting practices
   A. Use disinfectant wipes or other strong cleaning products to disinfect regularly. Check the label on the product to see if it is intended for disinfection, but products with at least 70% alcohol and many bleach solutions are effective. Cleaning means removing dirt and germs, while disinfecting means using chemicals to kill germs.7
   B. Remember to disinfect often-touched objects like light switches, doorknobs, sink faucet handles, toilet flush handles, refrigerator and cupboard door handles, countertops, etc.

5. Guidance on physical distancing
   A. Avoid going outside, and if you have to, wear a mask at all times. If you do not have a mask, you can wrap a bandana, scarf, or other breathable fabric around your face, which covers your nose and mouth.8
   B. Always wash hands with soap and warm water for at least 20 seconds after being outside.
   C. Do not touch your face.
   D. Keep six feet/two meters away from others at all times, more if possible.

For more information, contact:

Kathryn Hampton, Physicians for Human Rights, khampton@phr.org
Paula Kahn, Freedom For Immigrants, pkahn@freedomforimmigrants.org
Katharina Obser, Women’s Refugee Commission, katharinao@wrcommission.org

May 2020

8 For more on masks, see the CDC guidance on cloth face coverings: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html