

# Guidance for preventive and responsive measures to coronavirus for parole, probation, and clemency

March 18, 2020

The coronavirus, or COVID-19, has already been declared by the World Health Organization as a global pandemic.<sup>1</sup> As the number of people infected in the United States grows exponentially, we must focus on prevention and containment in the criminal and immigration legal systems.

Actors in the criminal and immigration legal systems have a unique and critical role to play. The importance of this role is underscored by how vast these systems are—almost 10.5 million arrests a year,<sup>2</sup> 2.2 million people in jail and prison at any given time,<sup>3</sup> 50,000 in immigration detention,<sup>4</sup> and another 4.5 million under some form of supervision on probation or parole.<sup>5</sup>

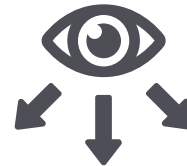
## Footprint of U.S. corrections, detention, and supervision systems



**10.5 million**  
people arrested  
every year



**2.3 million**  
people behind bars



**4.5 million**  
people under  
community supervision

The Vera Institute of Justice (Vera) and Community Oriented Correctional Health Services (COCHS) have created the guidance in this document to protect people who interact with these systems and for the staff and personnel who work with them. For other system guidance, see Vera's [COVID-19 Response page](#).

## State and local probation and parole authorities, as well as the executive offices that grant clemency, should:

**Prioritize prevention first and foremost.** To reduce contact between people, probation and parole departments should:

1. Promulgate a policy to temporarily *suspend any incarceration to jail or prison for technical violations*—noncompliance with the terms of community supervision—such as failing a drug test, missing a meeting with the probation or parole officer, violating curfew, or using alcohol.
2. Supervision agencies should also recommend *early termination* of probation and other forms of supervision where possible, particularly for those who have already demonstrated compliance with conditions of supervision.
3. If a probation or parole officer initiates the revocation process in circumstances where someone has allegedly committed a new criminal offense, *schedule revocation hearings after public health concerns have dissipated* if it is determined that the person can remain in the community prior to the hearing.
4. *Suspend all in-person reporting and check-ins for people under supervision, lengthen reporting intervals, and allow people to connect remotely by phone or videoconference* while the pandemic continues. In cases where canceling an in-person check-in may cause harm or delay, such as when people on probation or parole need signatures or approvals from their officers, probation and parole offices can set up alternative measures—over video or by e-mail—to vet those issues and provide electronic signatures or approval.
5. *Suspend collection of supervision fees indefinitely* to accommodate for lost wages and to encourage people in financially precarious situations to observe social distancing. All persons on supervision should be advised that nonpayment will not result in revocation of their supervision or some other sanction.

**Contain the possibility of spread.** To protect especially people who are at high risk—those who are 55 years and older, pregnant, or have serious chronic medical conditions—probation and parole departments should:

1. Use a CDC-informed *screening tool* for anyone who is under community supervision or has applied for clemency with the aim of identifying both people with possible exposure and people at higher risk of infection.
2. Share *guidance and best practices about coronavirus prevention and containment* with all people on supervision by emailing, mailing, and handing out brochures and information in the office.
3. *Immediately commence a clemency review process* that requires officials in the state prison system to help identify candidates for clemency among the currently incarcerated population

who are high risk. There should be an expectation that these candidates will be granted clemency and immediate release. In states with discretionary parole, parole boards should prioritize immediate review of cases to identify candidates for release.

4. *Release to supervision for the remainder of their sentences people serving “split sentences”—judicially-imposed sentences that include a period of incarceration followed by a period of supervision.*

**Respond swiftly to active cases while preserving due process.** To prevent transmission from or to the community, probation and parole departments should:

1. *Create a medical care plan (that includes guidance on medical insurance, accessing emergency care and hospitals, a plan for transportation, etc.) for each person under supervision in case he or she develops an active infection.*
2. *Develop a policy that includes training probation and parole staff in special procedures for responding to coronavirus if someone under their supervision answers affirmatively to screening questions or has active symptoms typical of coronavirus infection.*
3. *For staff members or personnel who test positive for coronavirus and who cannot continue to work, develop a comprehensive policy that provides paid sick leave and a plan for staffing substitutions and triage. The staffing plan should identify priority tasks and operations that must continue even if a significant proportion of staff is unable to work at any given time.*

### **Additional resources**

[Best Practices Statement from ExIT: Executives Transforming Probation and Parole](#)

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## Endnotes

- 1 World Health Organization, “Rolling Updates on Coronavirus Disease (COVID-19),” updated March 11, 2020, <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>.
- 2 Vera Institute of Justice, “Every Three Seconds: Unlocking Police Data on Arrests,” January 2019 (database), <https://www.vera.org/publications/arrest-trends-every-three-seconds-landing/arrest-trends-every-three-seconds/findings>.
- 3 Wendy Sawyer and Peter Wagner, “Mass Incarceration: The Whole Pie 2019,” Prison Policy Institute, March 19, 2019, <https://www.prisonpolicy.org/reports/pie2019.html>.
- 4 The Marshall Project, “Detained: How the United States Created the Largest Immigration Detention System in the World,” September 24, 2019, <https://www.themarshallproject.org/2019/09/24/detained>.
- 5 Danielle Kaeble, *Probation and Parole in the United States*, 2016 (Washington, DC: Bureau of Justice Statistics, 2018), <https://www.bjs.gov/content/pub/pdf/ppus16.pdf>.

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### For more information

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The Vera Institute of Justice is a justice reform change agent. Vera produces ideas, analysis, and research that inspire change in the systems people rely on for safety and justice and works in close partnership with government and civic leaders to implement it. Vera is currently pursuing core priorities of ending the misuse of jails, transforming conditions of confinement, and ensuring that justice systems more effectively serve America’s increasingly diverse communities. For more information, visit [www.vera.org](http://www.vera.org).

Community Oriented Correctional Health Services (COCHS) works to bridge the gap between correctional and community systems. COCHS’ major emphasis has been to reframe jail health care not as a place separate from the rest of the community but as another health care delivery site within the community. COCHS provides [technical assistance](#) to assist communities in finding ways to improve health care in local correctional facilities, as well as providing expertise on [health information technology](#) to create connectivity and data sharing