

DECLARATION OF MICHAEL SCRONIC

I, Michael Scronic, am over the age of 18 and fully competent to make the following declaration:

1. I am currently incarcerated in the minimum security¹ satellite camp at the Federal Correctional Institution at Fort Dix. I make this declaration in follow up to my April 28, 2020 declaration.

2. On the morning of April 30, I and the 60 to 70 other inmates in B-wing were tested for COVID-19. That evening, during temperature check, a member of medical staff told a group of five inmates that there had been 41 positives from that testing. On May 1, a staff member told us 19 had tested positive. Later, we learned from the bulletin board the total was 14. Those people were moved to Building 5851 that day. Many of us believe the actual number of positive results was higher. An officer told a group of three inmates that there were “more positives on the B-side” but they didn’t want “regional” to know of more.

3. People have not been allowed to see records of their negative tests, although a number have asked for them.

4. I tested negative and have remained in B-wing. On May 5, the last set of tests was performed at the camp, for people in A-wing. On May 6, nine people learned they had tested positive and were moved to Building 5851. Included in these were an older man who was a

¹ My April 28, 2020 declaration referred to the Fort Dix camp as low security in paragraph 1. That was a typographical error. In fact, the camp is minimum security and the main facility is low security, often referred to by inmates as “the Low.” There was also a typographical error in paragraph 11. The following language appeared in duplicate in that paragraph. “In order to maintain the health of staff and inmates, the following is expected from all inmates: wear your surgical face masks! Since social distancing is not possible in this environment, masks will help keep you and others from spreading viruses.” This language appeared once, not in duplicate, in the April 11 Notice to the Inmate Population.

kitchen line server and had recently passed out during church service. He had had his blood pressure taken and then was returned to the population. The previous week, he had been away from the kitchen sick for four days and then had returned to work on May 5 and for the breakfast shift on May 6 before receiving his positive result. I know this from another kitchen server who told me and also because I saw him when I picked up my meal tray. Also included was a man who had been experiencing symptoms for about five to seven days and had begged to be tested then, but was told to wait until the mass testing was performed for his wing. I know this because he told me about it about two days before the mass testing.

5. Since May 6, I have witnessed people in B-wing experience symptoms of COVID-19. This includes someone who was told he was negative on May 1 but was nevertheless sure he had the virus and was bedridden for days. I have been told and/or observed at least four other people in B-wing exhibiting symptoms, all of whom have bunks in the same row. These symptoms include dry throat and cough, chills, and weakness, with a number of people staying in bed and not eating. As I describe later, these same people have registered high temperatures during temperature check but have not yet been evaluated by medical. I know there are a number of people who are not reporting their symptoms because they are afraid of being moved to Building 5851 where we have heard there is no medical care and no doctors on site.

6. To my knowledge, since May 6, no one at the camp has been evaluated by a nurse or doctor for COVID-19 symptoms and no additional tests have been performed. Although there are fewer of us here than before, we are still sleeping in beds close together. From my observations, most people sleep in bunks with someone to their left and right still, and not empty bunks in between. This is in part because we were able to choose our bunks when A-wing and B-

wing populations were rearranged on April 24. I am fortunate to have chosen a bunk near the bathroom with fewer people around.

7. About a week ago, we heard that people in Building 5851 who have “recovered” would be returning to the camp. That has not yet happened but it makes us very nervous because of the crowded, communal living conditions.

8. On May 6, my locker was searched by corrections officers and printouts of the warden’s Notices to Inmate Population, including the March 30 Notice about makeshift masks being forbidden and the April 11 Notice acknowledging social distancing was impossible, were removed. I was not provided a reason. After that, I went to the computer and also saw that those two Notices had been deleted from the online bulletin board.

9. It is my understanding from corrections officers and nurses that they go back and forth between the camp and the main facility east and west compounds (called “the low”), possibly with increased frequency now because of staff shortages. The obvious added contamination potential scares me. Other people in my unit have shared similar concerns with me.

10. Since COVID-19 started, I have observed that there have been many more officers working double shifts, as I believe staff are calling in sick or taking vacation more often. Since the low is larger, it has more openings, so our typical camp officers will fill in over there, before or after their shifts here. Officers openly tell inmates that they are on the front or back of a double shift.

11. Additionally, officers who are usually at the low come to the camp now. For example, we only have one officer on the night shift now (whereas it used to be two). Now, for every night count (at 7 pm, 9:30 pm, midnight, 3:30 am, and 5 am) an officer comes from the

low and does our count and returns back to the low. After count one time, I heard our night officer mention to another officer that he is working many double shifts. He said he works at our camp from 4 pm to midnight and then goes to the low to work midnight to 8 am.

12. I have been told by nursing staff that they also rotate between the camp and rest of the prison. For example, nursing staff spend an hour at the camp each morning and then again in the afternoon to take temperatures, give out pills, and deal with anything else that is needed. They rotate between the camp, the Unicorn building where a group of negatives were sent, Building 5851 where the positives were sent, and the east and west compounds. I had heard this from nursing staff a while ago. On May 13, another inmate asked the nurse on-duty where she works and how, and he told me she explicitly verified this rotation.

13. Until about mid-May, we had temperature checks usually twice per day. The results were consistently low, around mid-96, with some low 94s. Many of us believe these readings are lower than they should be. When the temperature device hits a certain threshold temperature, it is supposed to beep. In the past, people who got beeps were taken to medical to be examined. Significantly, to my knowledge, temperature checks are the only COVID-19 symptom Fort Dix is ostensibly checking prisoners for.

14. On May 13, during the morning temperature check, three inmates who are in bunks close together set off the temperature device. The nurse took all three IDs and told each they would have an oral test in her office after all the temperature checks were complete. However, upon completion, she returned to the three and without explanation handed them back their IDs and never called them in for an oral test. Although I did not observe this, the three of them told me this directly. To my knowledge, none of them have been tested yet. To me this represents a changed protocol, because in the past anyone who had a high temperature reading

would receive an oral test. Although temperature checks are usually twice per day, that afternoon, we had no temperature check.

15. During afternoon temperature check on May 14, a man who sleeps between two of the three men who registered high temperatures on May 13 set off the control. His ID or name was not taken and he was not evaluated further at the time. I do not observe our temperature readings, even the high ones, being written down anywhere or otherwise recorded to look for patterns or exposure of contacts. There is often a different person performing the temperature checks from day to day, so they may not be able even to observe any recurrence or patterns.

16. My understanding is people do not report symptoms because they are afraid of going to Building 5851 and think we can take care of it better ourselves. I have heard that people in 5851 are only being provided Tylenol and are having to go to the hospital because treatment there is insufficient.

17. I have still not been provided cleaning supplies by Fort Dix such as a spray bottle or disinfectant, even though sometimes one of the day officers tells us to disinfect items we touch, such as gym equipment, phones and computers. I only have bar soap and alcohol-free hand sanitizer, both of which I had to buy off commissary during the two times we have had access to commissary since mid-March

/s/ Michael Scronic (by consent)

I, Tess Borden, certify that I reviewed the information contained in this declaration with Michael Scronic by telephone and, as to footnote 1, by correspondence on May 20, 2020, and that, at that

time, he certified that the information contained in this declaration was true and accurate to the best of his knowledge.

/s/ Tess Borden

Tess Borden (260892018)
American Civil Liberties Union of
New Jersey Foundation
P.O. Box 32159
Newark, New Jersey 07102
(973) 854-1733
tborden@aclu-nj.org