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18	NORTHERN DISTR	ICT OF CALIFORNIA
19		
20	JOHN ARMSTRONG, et al.,	Case No. C94 2307 CW
21	Plaintiffs,	DECLARATION OF ERNEST GALVAN IN SUPPORT OF
22	V.	PLAINTIFFS' MOTION TO PROTECT ARMSTRONG CLASS
23	GAVIN NEWSOM, et al.,	MEMBERS DURING COVID-19 PANDEMIC
24	Defendants.	Judge: Hon Claudia Wilken
25		Judge. Hon. Claudia Wilken
26		
27		
28		Casa Na C04 2207 CW
	DECLARATION OF ERNEST GALVAN IN SUPPOR CLASS MEMBERS DUI	T OF PLAINTIFFS' MOTION TO PROTECT ARMSTRONG RING COVID-19 PANDEMIC

I, Ernest Galvan, declare:

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I am an attorney duly admitted to practice before this Court. I am a partner
 in the law firm of Rosen Bien Galvan & Grunfeld LLP ("RBGG"), counsel of record for
 Plaintiffs. I have personal knowledge of the facts set forth herein, and if called as a
 witness, I could competently so testify. I make this declaration in support of Plaintiffs'
 Motion to Protect *Armstrong* Class Members During COVID-19 Pandemic

7 2. I have represented the Plaintiff class in the above-captioned matter since
8 1999. I am also counsel for many of the same class members in the mental health class
9 action, *Coleman v. Newsom*, No. 90-520 KJM (E.D. Cal.). I am familiar with the data
10 produced to Plaintiffs' counsel by CDCR regarding *Armstrong* and *Coleman* class
11 members

3. During the past several months I have reviewed many iterations of data from
 the California Department of Corrections (CDCR) and from California Correctional Health
 Care Services (CCHCS) regarding the Covid-19 risks faced by persons incarcerated in
 CDCR facilities.

4. I have become familiar with the various Covid-19 reporting systems used by
CDCR and CCHCS. Among the metrics employed by CDCR and CCHCS is a "COVID
Weighted Risk Score." On the CCHCS's Covid Monitoring Patient Registry, CCHCS
provided, as of July 13, 2020, the following definition of COVID Weighted Risk Score,
with each risk factor followed by the number of points that the factor contributes to the
weighted score:

22	The COVID Weighted Risk Score Factors and their weights in
23	parentheses include: Age 65+ (4), Advanced Liver Disease (2),
~	Persistent Asthma (1), High Risk Cancer (2), Chronic Lung
24	Disease - Other (including Cystic Fibrosis, Pneumoconiosis, or
25	Pulmonary Fibrosis) (1), COPD (2), Diabetes (1), High Risk
26	Diabetes (1), On Dialysis (2), Heart Disease (1), High Risk
20	Heart Disease (1), HIV/AIDS (1), Poorly Controlled
27	HIV/AIDS (1), Immunocompromised (2), Morbid Obesity (1),
28	Other High Risk Chronic Conditions (1), and Pregnancy (1).
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5. In late June and early July 2020, I undertook the task of cross-referencing the
 information Plaintiffs' counsel had received from CCHCS regarding vulnerability to
 Covid-19 complications with other data regarding membership in the *Armstrong* and
 Coleman classes on account of physical or psychiatric disability. This declaration focuses
 on *Armstrong* class membership. The work described in this declaration is derived
 principally from three data sources:

7 CCHCS Worksheet with Covid Weighted Risk Scores. On or a. 8 about June 22, 2020, attorney Marc Shinn-Krantz at RBGG received an email from Stave 9 Fama at the Prison Law Office containing an Excel workbook named "PLO High Risk 10 Population 20200608.xlsx." The table "PLO High Risk Population 20200608.xlsx" 11 includes 14,009 persons with a CovidRiskFactorCount and CovidWeightedRiskScore of 0. 12 I am informed and believe that these persons are present because the Receiver decided to 13 include persons aged 50 and over on the list, even though the accepted threshold for 14 counting age as a factor is 65. I confirmed this by filtering the list for 15 CovidWeightedRiskScore of 0 and then used a filter on the Age column to see that all records with a CovidWeightedRiskScore of 0 were for persons aged 50 or over. This table 16 17 therefore is properly understood as containing persons with 1 or more Covid-19 risk 18 factors, plus persons who are 50 years or older. The table includes records for 41,455 19 unique individuals. I am informed and believe that the Receiver's office sent this 20 spreadsheet to Mr. Fama. The "PLO High Risk Population 20200608.xlsx" workbook 21 includes one worksheet with the following columns:

22		А	PID
22		В	CDCNumber
23		С	Institution
24		D	LastName
25	A B C D E F G H I J	E	FirstName
23		F	Age
26		G	Gender
~ -		Н	Facility
27		1	CellBed
28		J	BedType

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1	К	ClinicalRiskLevel
2	L	AllRiskFactors
	М	COVIDRiskFactorCount
3	Ν	COVIDWeightedRiskScore
	0	AdvancedAge
4	Р	AsthmaPersistent
5	Q	LungDisease
	R	Immunocompromised
6	S	AdvancedLiverDisease
7	Т	OtherChronic
<i>'</i>	U	CancerHighRisk
8	V	Diabetes
0	W	COPD
1	Х	CVD
0	Y	HIV
1	Z	Pregnant
	AA	Dialysis
12	AB	BMI40orMore

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b. *Armstrong* Program Access List. On June 8, 2020, Tamiya Davis transmitted by email to Plaintiffs' counsel in *Armstrong* a spreadsheet named "June-20.xlsx," containing several separate tabs. The tab named "CountData" contains approximately 113,869 records for individuals, with, among other things, CDCR numbers and disability identifying codes and Mental Health codes. I refer to this spreadsheet below as the "Program Access data". The CountData tab contains the following columns:

•	А	Cdcno
20	В	LastName
21	С	Institution
21	D	Facility
22	E	BedType
22	F	DDP
23	G	DPPHearing
	Н	DPPKidney
24	Ι	DPPMobility
	J	DPPSpeech
25	K	DPPVision
2	L	DPPLearningDisability
26	М	DPPCode
27	Ν	MHLOC
21	0	DisabilityStatus
28		
-0		

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Armstrong Disability Placement Program (DPP) Roster. On June c. 1, 2020, Alexander Powell transmitted by email to Plaintiffs' counsel in Armstrong three pdf documents, including a document named "DPP Roster Report - By Name June 2020.pdf." I converted this PDF to an Excel file. This is an imperfect process, as some of the information carries over into extra rows that do not work well in Excel. But for the limited purpose here it was adequate. The "DPP Roster Report - By Name June 2020" contains the following columns.

8	А	Inst.
	В	Name
9		CDC
	С	Number
10	D	Current Facility\Bed
	Е	Code
11	F	Housing Restrictions
10	G	Durable Medical Equipment
12	Н	DME Comments
12	-	LD
13	J	LD Comments
14	К	SLI
• '		

15 6. The spreadsheets described above are quite large, and contain personally 16 identifiable medical information for thousands of individuals. I therefore have not 17 attached the underlying data to this declaration. I am informed and believe that the data is 18 equally available to counsel for the Defendants, as in each instance either they or the 19 Receiver produced it.

20 7. I took the single worksheet from "PLO High Risk Population 21 20200608.xlsx," and copied it my working workbook, and renamed it "PLOHIGHRISK 22 and CountData." I also put a copy of the "CountData" worksheet from the Program 23 Access data workbook into my working workbook. Columns A though AB in 24 "PLOHIGHRISK and CountData" are from the original worksheet. I added columns AD 25 through AL and extended the table formatting across the entire worksheet. The purpose of 26 columns AD through AL is to contain information from the "CountData" worksheet of the 27 Program Access data, specifically Columns F-O from the "CountData" worksheet that 28

contain the disability information. I gave Columns AD through AL in "PLOHIGHRISK
 and CountData" the same heading names as Columns F through O of the "CountData
 Worksheet."

8. 4 In order to facilitate spot-checking to catch any errors in matching the records from "PLO High Risk Population 20200608.xlsx" and "CountData," I created 5 Column AC in "PLOHIGHRISK and CountData," after the end of the "PLO High Risk 6 7 Population 20200608.xlsx" data and before the beginning of the information pulled from 8 the "CountData" worksheet. I named Column AC "COUNTMATCH." This column 9 shows the row number in "CountData" that contains the record matching the CDC number 10 in Column B of "PLO High Risk Population 20200608.xlsx", which is identified as 11 "CDCNumber" in the column headings. With this number visible, I can quickly spot 12 check that the data is pulling correctly. The formula in Column AC "COUNTMATCH" is 13 =MATCH([@CDCNumber],CountData!A:A, 0).

9. To get the disability-identifying information from the "CountData"
worksheet into the "PLOHIGHRISK and CountData" worksheet in the correct rows, I used
an Excel Index function to lookup the correct row in "CountData" based on the matching
CDC number, and to capture the data in the cell under the correct heading. The function
used is a table formula: = INDEX(CountData!\$A:\$O, [@COUNTMATCH],

MATCH(Table2[[#Headers],[DPPHearing]:[DisabilityStatus]],CountData!\$1:\$1,0)). If
the person does not appear in "CountData," the function returns the value "#N/A".

21 10. As a double check, and to account for persons who are not in the Program 22 Access data's "CountData" sheet, and who thus return "#N/A" in the INDEX function 23 described above, I also created two columns to pull information from the worksheet "DPP 24 Roster Report - By Name June 2020." These are Columns AM and AN in 25 "PLOHIGHRISK and CountData", which I have labelled "DPPRow" and "Combined 26 ARM Class Status," respectively. Column AM is a Match function which looks up the 27 incarcerated person's CDC number in the worksheet "Export of June DPP log" and returns 28 the row if found, and "#N/A" if not found. The function used is a table formula:

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1 = MATCH([@CDCNumber], 'Export of June DPP'!C:C, 0). Column AN in

2 "PLOHIGHRISK and CountData" is a conditional function which only has three possible results: "NonClass Member," "Class Member," and "UNKNOWN." If the function finds a 3 4 number in the COUNTMATCH column, indicating that the incarcerated person is present 5 on the Program Access worksheet, then the function returns the "Disability Status" from the Program Access spreadsheet, which can be either Class Member or NonClass Member. 6 7 Otherwise, the function looks to see whether the person is present on the DPP DECs log, 8 i.e., whether the function in Column AM found the person on the DPP DECs log. If the person was found on the DPP DECs log, then the function returns "Class Member." If not 9 10 found, the function returns "Unknown." The function used is a table formula:

11 = IF(ISNUMBER([@COUNTMATCH]), [@DisabilityStatus],

12 || IF(ISNUMBER([@DPPRow]), "Class Member", "UNKNOWN")).

13 11. Combining the data as described above resulted in Armstrong class
14 membership information for all but 185 entries in the PLO High Risk spreadsheet. (In the
15 breakdowns described in the rest of this declaration, these 185 persons are omitted.) After
16 spot checking the match between the records in the three spreadsheets, I created a pivot
17 table to tabulate the numbers of individuals in various categories. To keep track of the
18 tabulations, I copied the pivot table into separate tabs for each tabulation.

19 12. Before analyzing the pivot tables, I created a simple table to derive the
20 overall percentage of Armstrong class members in the CDCR institutional population. I
21 entered the total institution population as of June 10, 2020 from the CDCR Website,
22 https://www.cdcr.ca.gov/research/wp-

content/uploads/sites/174/2020/06/Tpop1d200610.pdf, for the total population, the count
of unique CDCR numbers in the "DPP Roster Report - By Name June 2020.pdf" as the
class population, and the difference between those two numbers as the non-class member
population. Below is the resulting table and bar chart, showing that the persons CDCR
recognizes as part of the *Armstrong* class represent just over 10% of the institutions
population.





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1 15. I copied the tab again and renamed it "Weighted Covid Score 4 or More." I
 reset the data slicer to exclude all Covid weighted risk scores of less than 4. The
 breakdown of persons with Covid weighted risk scores of 4 or higher is 3,859 Class
 Members (52.06%), 3.484 Non Class Members (47%) and 69 unknown (0.93%), as shown
 in the table and chart below.

18 16. I copied the tab again and renamed it "Weighted Covid Score 9 or More." I 19 reset the data slicer to exclude all Covid weighted risk scores of less than 9. The 20 breakdown of persons with Covid weighted risk scores of 9 or higher is 528 Class 21 Members (83.28%), 101 Non-Class Members (15.93%), and 5 Unknown (0.79%), as 22 shown in the table and chart below, showing that the persons CDCR recognizes as part of 23 the Armstrong class represent over 83% of the institutions population with Covid 24 weighted risk scores of 9 or above. 25 26 27

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1			NonClass		Grand
1	Row Labels	Class Member	Member	UNKNOWN	Total
2	0	12.78%	87.01%	0.21%	100.00%
-	1	13.10%	86.60%	0.30%	100.00%
3	2	22.01%	77.33%	0.66%	100.00%
	3	37.64%	61.77%	0.59%	100.00%
4	4	38.34%	60.75%	0.92%	100.00%
_	5	51.12%	47.72%	1.16%	100.00%
5	6	52.78%	46.30%	0.92%	100.00%
6	7	64.39%	34.92%	0.68%	100.00%
0	8	69.03%	30.04%	0.93%	100.00%
7	9	80.20%	18.81%	0.99%	100.00%
·	10	84.47%	14.91%	0.62%	100.00%
8	11	85.44%	13.59%	0.97%	100.00%
	12	88.10%	11.90%	0.00%	100.00%
9	13	92.86%	7.14%	0.00%	100.00%
	14	100.00%	0.00%	0.00%	100.00%
10	15	100.00%	0.00%	0.00%	100.00%
	16	100.00%	0.00%	0.00%	100.00%
11	Grand Total	22.43%	77.12%	0.45%	100.00%
12	_[
13	120.00%				

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18. I also grouped the scores in the following ranges: No Score or 0, Scores 1-3, 1 2 Scores 4-8 and Scores 9-16, and used the pie charts below to show how the Class Member 3 group and the Non Class Member group break down in ranges. The Armstrong Class Member group has a minority (32.68%) of people with No Score or a Covid Weighted 4 5 Risk Score of zero, then 32.72% with Scores 1-3, 29.86% with Scores 4-8, and 4.73% with Scores 9-16. The Non-Class Member group, by contrast, has an overwhelming majority of 6 7 people with No Score or 0 (80.02%), then 16.46% with Scores 1-3, 3.42% with Scores 4-8, 8 and only one-tenth of percent with Scores 9-16.

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