

EXTRA EXTRA EXTRA EXTRA

MSOP-ML Goes into Restricted Movement Again after Covid Variant Cases Found in MSOP-SP.

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Dateline: October 15, 2021,
MSOP-Moose Lake

During the most recent two weeks, rumors have circulated within the MSOP facility at Moose Lake, MN (MSOP-ML) to the effect that at least three cases of Covid Variant D infections had been detected among confinees at our sister facility in St. Peter, MN (MSOP-SP). Before the end of last week, this rumor was confirmed by staff here and at MSOP-SP. These staff also stated that MSOP-SP was in a state of full lockdown while plans are laid there to combat this incursion by that life-threatening virus.

At the same time, public health figures have shown that the surrounding Moose Lake, MN community has suffered a substantial rise in its numbers of Covid Variant D infections and of additional positive test results for that viral strain without symptoms. This has increased fears that MSOP-ML staff, many of whom live in and around Moose Lake, may bring that virus into the MSOP-ML facility before the regular employee testing program already in place can detect an incursion.

There has been unreasoning reluctance on the part of far too many in the nation's populace to take the Covid-immunizing shots. This is based only on internet-whipped wildly false rumors about various claimed ill-effects of the Covid immunization. This has resulted in refusal by many to accept the assurance of a veritable army of physicians and viral researchers that the shots are safe and very effective at preventing Covid infections for at least nearly a year and possibly far longer. For some, uncritically swallowing the campaign of false rumors has already caused their deaths.

For the rest of us, this refusal by many to be immunized has contributed greatly to the persistence and mutation of the Covid virus. In turn, this has made Covid infections surprisingly persistent and recurrent,

in spite of the nation's most intensive immunization campaign ever.

This bears repeating in words more blunt: Those who refuse to take the shot have, without realizing it, caused deaths among others in the population at large by making its continued spread difficult to halt and making it nearly impossible to bring the pandemic to an end. If this is you, realize that this is a sin, immoral, and a stealthy crime against humanity. Go, take the shot, and sin no more.

Meanwhile, influenza infection rates, which had dropped off dramatically in 2002 due to mask wearing and self-imposed reduced movement by the public, have now soared back up, at least partly due to the fact that preoccupation with the Covid pandemic caused people to forgo injections to immunize them against flu, then seen as a lesser threat. However, reduced immunity due to such isolation and lack of immunizing shots appear to have made flu infections more virulent than before, transforming flu into a serious respiratory infection that is already causing hospitalizations in its own right, and even some deaths among the elderly and immune-compromised individuals.

Altogether, then, the totality of these adverse circumstances spells the need for unusually strong responses to prevent deaths and limit such flu and Covid infections as much as possible.

Now at the end of this week (Friday, Oct. 15th), MSOP-ML Health Services Director Nikki Boder, under approval by MSOP Executive Director Nancy Johnston, announced that the MSOP-ML facility is under a state of restricted movement by confinees, essentially identically to the general state imposed during the first wave of Covid infections during 2020.

This state of affairs, officially referred to as "Covid-19 Precautions," includes suspended free off-unit movement by confinees. This is intended to eliminate contact between confinees from different living units in order to confine any Covid

Variant D outbreak(s) that might occur to the unit in which they are discovered.

A temporary suspension of treatment groups and modules was immediately ordered, effective until reduced scheduling and restriction of those treatment meetings to each unit in which the specific treatment participants live can be devised and put in place.

Visiting and virtually all off-unit activities are also being suspended indefinitely. Unit-specific courtyards may still be used by the residents of that living unit. A rotating schedule will also be established to allow each unit's residents to access the Main Yard to the exclusion of all other units at that time.

As in 2020, dining arrangements will immediately revert to each living unit being called to the Dining Hall separately, with all preceding diners leaving the Dining Hall before the next unit is called to the meal. This dramatically lengthens the time it takes to feed all confinees. A related measure, effected immediately, limits confinee-workers to cleaning the Dining Hall only after the last living unit's confinees have left the Dining Hall. Table cleaning between living unit call-outs to the Dining Hall is to be performed instead by security staff.

Further, Kitchen confinee-workers (including Dining Hall cleaners) who are symptom-free will be rescheduled in a different way to ensure that such workers from different living units do not work together or at the same time. This will make it difficult, perhaps next to impossible to schedule the current crew of Kitchen workers under these constraints. Additionally, some Kitchen confinee-workers may resign at the change in hours.

Meanwhile confinee-workers in other areas closed due to this renewed movement restriction, such as the Industry shop, recreation, and library, as well as in the halls, have been laid off for the duration. Some of these workers have been

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asked if they are willing to accept shifts in the Kitchen in partial replacement for those lost work hours. Other than the Kitchen and the Laundry, only unit work will be allowed to continue.

It can be anticipated that tests for Covid exposure and exams for Covid symptoms will probably be reinstated soon on a rotating basis (again as in 2020), as well as targeted in response to indications of possible infections in any given living unit.

Among confinees, comments are being made about the fact that that staff workers go home at the end of each workday and are in contact with family, neighbors, friends, those they circulate with and meet in restaurants, bars, various recreation and entertainment venues, and those they interact with while shopping and other errands. Many of these contacts, certainly family/household ones, are highly likely to be unmasked and at close distance. In light of the observation of rising new Covid infections in the Moose Lake area, the likelihood of transmission of the Covid virus to such MSOP staff members is high.

Most (especially the vaccinated) will not show symptoms or, at worst, will show only symptoms that are mild and indistinguishable from those of common colds. MSOP Health Services concedes that symptoms may not show up for as long as 14 days following Covid infection. Due to a settlement between the current Minnesota administration and the leading state employees' union, state employees (including MSOP staff) who have not been vaccinated and refuse to take the Covid shots need only submit to a Covid test once per week as a substitute measure.

Covid tests can only detect the presence of the virus after it has been there two to three days. Hence, an MSOP staff member may contract the virus on a Sunday, pass the test on Monday, work all week (perhaps including some overtime on the ensuing weekend), then be tested the following Monday and finally be declared positive for Covid. This allows a period of as long as be 7 workdays during which the virus can be transmitted to MSOP confinees by that hypothetical staff member, often while that staff person shows no symptoms and doesn't even know they are

sick.

MSOP-ML has about 500 staff members. Given this, the likelihood is extremely high that this infectivity to which MSOP confinees are exposed will include countless simultaneous instances at any given time of contact with persons infected with Covid Variant D during this renewed pandemic period. Yet MSOP confinees must interact with MSOP staff at least many times per day.

Further comments by confinees here are now also being made that, looking back, those here who died from Covid in the first Covid wave had no visitors during or just before they became sick. In short, they almost surely caught Covid from staff. No one wants this infection opportunity to be repeated, but no one yet knows exactly how to prevent it and still retain any level of MSOP operation.

As the official MSOP memo introducing the new restricted movement states, "[Covid] hospitalizations and deaths are mostly among unvaccinated people." That is surely a huge understatement; it would be more accurate to say that almost all deaths are among the unvaccinated.

Therefore, to all here and everywhere else as well, I give this urgent lifesaving advice: If you have yet to be vaccinated, do so at once! Your life could well depend on it.

Further, those who did not get vaccinated and became ill with Covid and managed to pull through often find themselves suffering, apparently permanently, with respiratory symptoms now known as "Covid Syndrome," from the damage in their lungs and even in their digestive tract caused by the virus while it raged inside of them. It is not yet known whether Covid Syndrome will reduce longevity through gradually increased symptoms or interaction with other respiratory illnesses, including influenza and pneumonia, or conditions such as COPD or emphysema. This is yet another reason to take the shot. In extreme cases, some of these may wind up praying for death. Make sure this isn't you!

Beyond getting the shots against Covid, everyone should personally do all of the following with religious dedication:

- * Wear the mask you have received at all times while out of your room.
- * Wash your hands at least several times per day (not just when visibly or palpably

dirty); do vigorously, with plenty of soap, and for at least 29 seconds before rinsing.

- * Maintain "social distance" of at least 6 feet (and preferably 12 feet when not conversing). This includes while waiting in lines.
- * When sharing a table, individuals should choose opposite corners/ends of the table for seating.
- * Cover every cough or sneeze completely and tightly.
- * Hand wash your mask nightly and dry it overnight.

These points are not just polite, they could well save your life and lives of others! Do not associate with anyone who declines to do these simple things for others as well as themselves. Between these pointers and taking the shot, Covid can be kept out of this facility until it is no longer a threat in this area. The sooner this happens, the sooner we can get back to life as normal in MSOP. It wasn't much, but it's better than it is right now, and it's a whole lot better than dying in the nightmarishly awful way of death by Covid: gradual asphyxiation by lung damage and lungs filled with your own juices that can't be coughed up fast enough to stay alive.

Lastly, some vital tips: If you experience a recurrent/persistent cough – especially "coughing jags," or notice a new/unexpected shortness of breath, notify Health Services and request to be examined right away. Emergency signs are any of the following: trouble breathing, persistent pain/pressure in the chest, confusion, difficulty waking up or bluish appearance of the lips or face. If you experience any of these or see anyone who has them, tell staff that a respiratory emergency is probably in progress and insist that they immediately call Health Services for directions.

We will all be inconvenienced more than a little during this period of renewed Covid infections. However, following the instructions here will help keep it to no more than passing inconvenience. Believe me, you want that!
