

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CORRECTIONS**



October 6, 2026

Reverend Donald L. Isaac
Executive Director
Corrections Information Council
1400 I Street, NW
Washington, DC 20005

Dear Director Isaac:

Thank you for the opportunity to provide a response to the Corrections Information Council (CIC) inspection of the District of Columbia Department of Corrections (DOC) Central Detention Facility (CDF), the Correctional Treatment Facility (CTF), and the Central Cell Block (CCB) conducted on May 7–8, 2026, as well as the Women's Unit inspection conducted on June 3, 2026.

DOC appreciates our ongoing partnership with CIC, through which we work collaboratively to identify opportunities for improved conditions and better outcomes for individuals in our custody as they transition back to the community. As you are aware, DOC is regularly audited and inspected by several accrediting and regulatory bodies, including the American Correctional Association and the National Commission on Correctional Health Care. These entities apply established, measurable standards that provide clarity and consistency in evaluating our compliance.

For this reason, we continue to encourage CIC to develop or adopt a standardized and formally recognized inspection instrument. Such a framework would allow DOC to better understand CIC's expectations, ensure alignment with recognized best practices, and provide a clear basis for responding to inquiries or demonstrating compliance during future inspections.

We trust that this response addresses your observations. Should you need additional information or further clarification, please feel free to contact me at (202) 673-7316.

Sincerely,

Thomas Faust

boxSIGN Thomas Faust 4WYQXY64-42QR3939

Director

Corrections Information Council Findings and Recommendations for the Central Detention Facility (CDF), Correctional Treatment Facility (CTF) and the Central Cell Block (CCB)

CIC Findings, Recommendations and DOC Responses:

1. *Laundry: The laundry service is a reoccurring issue within the DOC. Residents complained about the schedule and that the DOC is not facilitating laundry services according to its policy, which requires services once a week for uniforms, personal items, and sheets and towels.*
2. *Laundry: The linen has not been exchanged in weeks. Some reported being confined for approximately two months, and their orange uniforms have never been washed.*
3. *Laundry: The laundry retrieval occurs at approximately 5 AM, so sleeping residents miss their opportunity to have their laundry cleaned.*
4. *Laundry: If the laundry exchange occurs during recreation time, then the only residents who can exchange laundry are those who are outside of their cells for recreation.*
5. *Laundry: Oftentimes, residents wash personal laundry in the shower because laundry is not picked up consistently, or - when the laundry is picked up, it returns looking dirty. Some residents reported stains, as well as the appearance of dried blood on the sheets.*

DOC Response:

DOC policy and the established facility schedule provide for weekly uniform, personal laundry, and linen exchange. Laundry operations are conducted Monday through Friday across multiple shifts to support housing-unit operations and resident access.

DOC recognizes the importance of consistent laundry and linen services to sanitation, hygiene, and facility operations. Supervisory staff are reinforcing adherence to the established schedule and monitoring completion of scheduled exchanges. When an exchange cannot be completed as scheduled because of an operational disruption, staff are expected to reschedule and complete the service as soon as practicable. DOC is also reviewing collection and distribution times to minimize conflicts with recreation, sleep periods, and other scheduled activities.

Laundry is inspected before reissuance. Items that remain excessively stained, damaged, or otherwise unsuitable for reuse are removed from circulation and replaced in accordance with established procedures.

6. *NOI: There were ten cells offline due to maintenance issues; however, the DOC reported that work orders have been submitted. Staff also reported that problems with the toilets have persisted for roughly three months.*

DOC Response:

DOC reviewed the identified maintenance concerns. Work orders were initiated for the affected cells, including issues involving water service and plumbing. Repairs within DOC's control were addressed as identified, and cells requiring additional corrective work remained offline until they could be safely returned to service.

7. *NOI: There is a shortage of staff in this unit due to officers' external obligations to support outside medical trips with residents.*

DOC Response:

The recent increase in the resident population has increased operational staffing requirements, including the opening of additional housing units and increased demands associated with outside hospital details, specialty medical appointments, internal medical and mental-health services, court movements, visitation, programs, and other essential functions.

DOC continuously evaluates staffing and operational priorities and deploys available personnel based on safety, security, population needs, and required services. DOC continues recruitment, hiring, deployment, and overtime-management efforts to stabilize staffing and maintain essential operations.

8. *NOI Resident(s) Comments: Residents who are on Kosher diets believe that there is no variety in their meals, which are reportedly - heavily dependent on beans and rice.*

DOC Response:

The Kosher menu includes a vegetarian meal once per week. All other meals contain a protein source. The only meals that include beans are the turkey franks, the vegetarian meal, and the beef stew. Rice is served only with the chicken chow mein entrée. Please see Attachment -1 "Kosher Menu QT4".

9. *NOI Resident(s) Comments: Rodents get into residents' commissary purchases inside of their cells.*

DOC Response:

DOC maintains an integrated sanitation and pest-control process. Residents are provided approved cleaning materials and are expected to maintain their cells in a sanitary and clutter-free condition, including properly storing commissary items.

In addition, DOC's contracted pest-control provider inspected and/or treated NO1 on April 7, April 21, and April 28, 2026. DOC's Sanitarian and facility staff continue to identify conditions requiring intervention and refer affected areas for professional inspection and treatment.

- 10. NO1 Resident(s) Comments: Residents' photos are blocked on the tablets. The DOC is not blocking the photos but acknowledged it as a Viapath issue.*

DOC Response:

Photographs submitted through the tablet platform are reviewed under Viapath's content-review requirements. According to the applicable ViaPath requirements, photographs may be rejected based on established content criteria, including requirements involving minors, attire, gestures, or other prohibited content.

- 11. NO1 Resident(s) Comment: On the top right tier - only one shower was working, and the water temperature inside of the other shower is cold. On the same tier, the top right shower and surrounding area was dirty; however, the residents working as "details" 2 in the unit said that they were about to clean it.*

DOC Response

The water pump that controls the housing units was replaced on May 11, 2026. The shower water temperature now ranges between 90-105° F.

- 12. NW1 Resident(s) Comments: Residents reported that they do not receive anything back when they submit requests for copies of cases or documents from the law library.*

DOC Response:

DOC is working to ensure that all legal requests are accurately logged, tracked, and fulfilled within the required five-day timeframe. DOC has reinforced monitoring procedures, including regular review of submission logs and follow-up verification with staff, to confirm that all legal requests are processed and returned to residents in a timely and complete manner. DOC will continue to maintain enhanced oversight to ensure full compliance with all legal-request requirements.

- 13. SO1 Resident(s) Comments: Residents in the unit only receive fresh towels and sheets every two months.*

DOC Response:

DOC's established schedule requires linen exchange once per week. In addition to regularly scheduled exchanges, DOC completed a facility-wide linen exchange in May 2026.

DOC is reinforcing supervisory verification of scheduled exchanges to ensure services are completed consistently and any missed exchanges are promptly rescheduled.

14. *SO1 Resident(s) Comments: During the laundry exchange, if the towels or sheets are stained or damaged when the residents attempt to exchange them - the DOC does not exchange them, resulting in some residents washing them by hand.*

DOC Response:

DOC recognizes that clean and serviceable linen is essential to sanitation, hygiene, and professional facility operations. Linen is laundered using established washing procedures and approved cleaning agents and is inspected during processing and before reissuance. Items that remain excessively stained, damaged, or otherwise unsuitable for continued use are removed from circulation.

Supervisory staff will continue reviewing laundry operations, including inventory controls, quality assurance, distribution, and staff oversight, and will address identified deficiencies.

15. *NW3: It appeared that the mold was painted over recently in some cells. During the CIC's previous inspections, this housing unit had the most complaints about mold, and it is also where the CIC has observed the most instances of alleged mold.*

DOC Response:

NW3 was inspected on August 24, 2026. The inspection did not identify evidence that suspected mold contamination inside resident cells had been painted over without appropriate remediation.

When suspected mold is identified, DOC follows its established assessment and remediation process. Depending upon the conditions identified, corrective action may include inspection, resident relocation, cleaning and disinfection, repair of contributing moisture conditions, remediation, and repainting following completion of the necessary treatment. DOC continues to monitor housing areas and respond to reported environmental concerns.

16. *NW3: The bottom right shower was stopped up and flooded, and the other shower had water shooting out of the handle*

DOC Response:

The shower has been unclogged on multiple occasions. After a thorough investigation by DOC Maintenance, it was discovered that the issue stemmed from a faulty sewer pipe. Repairs are underway, and the work is being completed in a manner that does not disrupt normal operations.

17. NW3: *The sink in cell 31 had been running for over a week; maintenance was supposed to address the issue that day per CIC request.*

DOC Response:

The sink in cell 31 was repaired on May 8, 2026.

18. NW3: *It felt hot in the unit, and the fans were extremely dusty.*

DOC Response:

DOC investigated the reported temperature concern and identified an air-handler performance issue. Adjustments began in May, and the contractor completed corrective work in June 2026.

DOC has also established a biweekly cleaning schedule for housing-unit fans to reduce dust accumulation and support sanitation and airflow.

19. NW3: *Residents did not have cold drinking water. Water from the drinking fountain was hot, and there was no ice present at the time of inspection.*

DOC Response:

DOC performs quarterly preventive maintenance on housing-unit water coolers and responds to reported equipment failures between scheduled maintenance cycles. For NW3, maintenance was performed in May and June 2026, and the affected fountain was subsequently replaced on July 14, 2026. Necessary adjustments were also completed for the SW3 water fountain.

Ice and drinking water are provided to housing units at least once per shift, with additional ice provided when operationally necessary.

20. NW3 Resident(s) Comments: *The unit might be cooler if there were more floor fans.*

DOC Response:

NW3 is currently equipped with four floor fans. DOC assesses the placement and replacement of fans based on environmental conditions, equipment availability, safety considerations, and the condition of existing equipment. Equipment that becomes damaged or presents a safety concern is removed from service.

21. NW3 Resident(s) Comments: *There are connectivity issues during visitation on the tablets, resulting in an inability to hear or see visitors.*

DOC Response:

The reported connectivity concerns were assessed on August 20, 2026. Following corrective action, tablet-based internet visitation was successfully restored. DOC will continue coordinating with the service provider regarding reported connectivity issues.

22. *NW3 Resident(s) Comments: There are concerns about mold, rodents, and bugs flying around the cells.*

DOC Response:

DOC investigated the environmental concerns reported in NW3. During the August 24, 2026 inspection, suspected mold was identified on the ceiling of the top-right-tier shower area and was addressed by the environmental team.

On August 28, the pest-control contractor inspected and treated the lower-right-tier shower area for flying insects. NW3 had also received multiple pest-control assessments and treatments between March and May 2026.

DOC continues to use its environmental, sanitation, maintenance, and contracted pest-control resources to identify contributing conditions and perform additional treatment or remediation when warranted.

During inspection this was the only area found to have flying insects. During the months of March through May in 2026, NW3 was assessed and/ or treated by DOCs pest control vendor on:

March 3, 2026	March 31, 2026	May 12, 2026
March 6, 2026	April 3, 2026	
March 10, 2026	April 7, 2026	
March 13, 2026	April 14, 2026	
March 17, 2026	April 17, 2026	
March 20, 2026	April 21, 2026	
March 24, 2026	May 1, 2026	
March 27, 2026	May 5, 2026	

23. *NW3 Resident(s) Comments: The day before the CIC inspection, residents with alleged mold issues inside of their cells were given bleach in attempt to clean it, as well as paint to cover the affected areas.*

DOC Response:

When suspected mold is reported, the affected area is evaluated, and appropriate corrective measures are taken based on the conditions identified. These measures may include relocation, cleaning and disinfection, correction of contributing moisture conditions, environmental remediation, and subsequent restoration or painting of the affected surface.

Inmates were not provided bleach or paint to remediate the mold. The Environmental Officer and his crew completed the mold abatement and repainted the affected areas inside of the cell.

24. *SW3: The water from the water fountain was hot, and there was no ice in the unit.*

DOC Response:

Quarterly DOC performs preventative maintenance for the water coolers which took place during the months of May and June. All necessary adjustments have been completed for the water fountain, and the water fountain is cold. Ice is placed on each housing unit at least once per shift. If additional ice is needed, officers will report to the kitchen to refill the coolers.

25. *SW3: There are seven phones in this unit, but only four are operable.*

DOC Response:

The reported telephone deficiencies were referred for service. The unit's telephones were serviced, and DOC verified on August 25, 2026, that all unit telephones were operational.

26. *SW3 Resident(s) Comments: Residents have not been outside for recreation in months.*

DOC Response:

DOC is committed to providing residents with access to outdoor recreation consistent with safety, security, staffing, and operational requirements. DOC continuously assesses daily operational needs across both facilities, including court movements, internal and external medical appointments, hospital details, visitation, programs, and other essential functions, to ensure available resources are appropriately deployed.

Outdoor recreation is provided when operational conditions and staffing permit, with the goal of maximizing access while maintaining safe and secure facility operations.

27. *SW3 Resident(s) Comments: Residents have filed multiple grievances about an officer who retaliates by harassing them with constant shakedowns and write-ups. The initial cause for the grievances resulted from the officer allegedly seeing roaches in the food on a tray and not allowing residents to exchange the food tray.*

DOC Response:

DOC reviewed grievances received by the Warden's Office between March and May 2026 and did not identify grievances within that review period alleging the specific retaliatory conduct described in the CIC finding.

DOC prohibits retaliation against residents for exercising the grievance process. Staff assigned to SW3 have been reminded of their responsibility to maintain professionalism

and conduct searches, enforcement actions, and resident interactions consistent with policy and legitimate safety and security requirements. DOC also has procedures in place for alleged food tray concerns.

28. *SW3 Resident(s) Comments: Residents mostly wash their clothes in the shower due to the infrequency of laundry. The officer retrieves laundry between 3 and 4 AM when most residents are asleep.*

29. *SW3 Resident(s) Comments: There has been no linen exchange in four weeks.*

DOC Response:

DOC policy and the established facility schedule provide for weekly uniform, personal laundry, and linen exchange. Laundry operations are conducted Monday through Friday across multiple shifts to support housing-unit operations and resident access.

DOC recognizes the importance of consistent laundry and linen services to sanitation, hygiene, and facility operations. Supervisory staff are reinforcing adherence to the established schedule and monitoring completion of scheduled exchanges. When an exchange cannot be completed as scheduled because of an operational disruption, staff are expected to reschedule and complete the service as soon as practicable.

DOC is also reviewing collection and distribution times to minimize conflicts with recreation, sleep periods, and other scheduled activities.

30. *SW3 Resident(s) Comments: The staff in this unit is disrespectful, unprofessional, and lacks communication skills.*

DOC Response:

DOC requires staff to maintain professional, respectful, and appropriate communication with residents and coworkers. Supervisors have reinforced these expectations with staff assigned to SW3 and are responsible for addressing documented conduct inconsistent with DOC standards.

31. *NW3: There were flooded and stopped up showers with standing water inside of them, and there were shower handles with water shooting out.*

DOC Response:

Shower handles on the housing unit were replaced. Also, the shower had a sewer pipe that has been replaced.

32. *NW3: Fans in the housing units needed to be cleaned, which were caked with dust.*

DOC Response:

DOC has assigned a crew to clean the housing unit fans, biweekly.

33. *Viapath blocks certain photos, specifically photos of children.*

DOC Response:

Photographs submitted through the tablet platform are reviewed under Viapath's content-review requirements. DOC does not make individual approval or denial determinations for submitted photographs.

According to the applicable ViaPath requirements, photographs may be rejected based on established content criteria, including requirements involving minors, attire, gestures, or other prohibited content.

34. *Residents are still reporting mold and rodents in their cells.*

DOC Response:

DOC maintains established processes for responding to environmental and pest-control concerns. Reports of suspected mold are assessed and, when warranted, corrective actions may include relocation, correction of moisture sources, cleaning and disinfection, environmental remediation, repairs, and restoration of affected surfaces.

DOC also maintains contracted pest-control services. Reported or observed pest activity is referred for inspection, treatment, and follow-up as warranted. DOC's Sanitarian, maintenance personnel, housing-unit staff, and contracted vendors share responsibility for identifying and addressing conditions that may contribute to recurring environmental concerns.

CENTRAL CELL BLOCK

1. *Certain maintenance issues are reportedly not prioritized in anticipation of the upcoming relocation:*

a. *There are eight cells where the doors do not close, and work orders have been submitted for those cells.*

DOC Response:

Eight cells remain offline because of identified door deficiencies. Work orders have been submitted to the Department of General Services (DGS) for repair, and the affected cells will remain unavailable for housing until the necessary corrective work is completed and the cells are determined suitable for use.

b. *One of the staff bathrooms is still closed because of the damage from the flood in October 2025.*

DOC Response:

DGS completed repairs to the affected rear staff restroom on July 17, 2026, and the maintenance concern has been resolved.

WOMENS UNIT INSPECTION – RECOMMENDATIONS MAY 2026

1. *DAILY LIVING- Provide effective cleaning materials to residents*

DOC Response:

DOC provides housing units with cleaning products approved for use in a correctional environment. Supplies are issued daily and replenished as necessary. Housing-unit officers are responsible for supervising assigned detail workers and ensuring common areas are routinely cleaned and maintained.

2. *DAILY LIVING- Sanitize telephones daily.*

DOC Response:

Assigned detail workers are responsible for routine sanitation of housing-unit telephones under staff supervision. Telephones are scheduled to be sanitized at least once per shift, and supervisors have reinforced compliance with housing-unit sanitation requirements.

3. *DAILY LIVING- Dust and clean artificial plants and windowsills.*

DOC Response:

Housing-unit sanitation responsibilities include windowsills, furnishings, fixtures, and other common-area surfaces. Supervisors have reinforced these expectations with housing-unit staff and assigned detail workers. Each housing unit has assigned detail workers.

4. *LAUNDRY-Audit the laundering process to ensure the cleanliness of stained and soiled laundry.*

DOC Response:

DOC conducts quality-control reviews of laundry operations, including the condition and cleanliness of laundered items. Items determined unsuitable for reissuance are removed from circulation. Supervisory oversight will continue to focus on processing, inventory control, quality assurance, and timely distribution.

5. *MEALS-Provide larger portions of daily meals, including two servings of cooked and raw dark green vegetables; two servings of additional cooked and raw colored vegetables; two servings of raw fruit; and protein-rich foods, including meat, poultry, eggs, fish, nuts, seeds, or tofu. Reduce bread and starch.*

DOC Response:

DOC's menu is designed to meet a 2,800-calorie standard while remaining within a fixed cost structure. The current menu provides balanced portions of protein, fruits, and vegetables in accordance with nutritional guidelines. While we understand the desire for larger portions or additional protein, fruits, and vegetables, incorporating these enhancements would require adjustments to the overall cost framework.

The menu was updated on July 1, 2026, to reduce starch content and introduce more cold salad options at lunch, reflecting our continued efforts to offer both nutritious and appealing meal choices.

6. *RECREATION- Minimize the constant use of modified schedules by adding officers to the unit and incentivizing good behavior*

DOC Response:

Each inmate housed in a general population unit at CTF is provided daily out-of-cell and recreation time in accordance with established procedures. This reflects our standard operating schedule and is not considered a modified recreation program. Additionally, as part of our efforts to encourage and reinforce positive behavior, units may be offered extended late-night out-of-cell time when appropriate and operationally feasible.

7. *RECREATION Increase outdoor recreation when temperatures are not below freezing, or during excessive heat.*

DOC Response:

General-population residents at CTF are provided scheduled daily out-of-cell activity consistent with housing-unit operations, safety, and security requirements. DOC also uses positive incentives, including expanded recreation opportunities when operationally feasible, to encourage constructive behavior and support effective housing-unit management.

8. *DENTAL- Ensure that residents receive routine dental care at least annually and that dental emergencies are addressed within forty-eight hours.*

DOC Response:

Unity Health Care currently meets or exceeds the recommended timelines for routine and emergency dental services. All residents receive an oral health screening at intake and are referred for further dental evaluation and treatment as clinically indicated. Routine dental examinations are scheduled within one year of admission. Residents may submit a sick call slip and be evaluated by a medical provider within 24 hours, including on weekends. Dental emergencies are addressed immediately through the 24-hour Urgent Care Clinic, with referral to dental services on the next business day when clinically appropriate.

9. *MENTAL HEALTH- Expand the capacity of the mental health unit or add an additional mental health unit.*

DOC Response:

Unity Health Care has enhanced mental health services by increasing access to individual therapy and counseling, group therapy, trauma-informed care, addiction and recovery programming, and yoga. During the intake process, residents receive education on how to access mental health services, including instructions for submitting a sick call request. Residents requesting mental health services through the sick call process are evaluated by mental health staff within 24 hours. This process helps ensure timely access to behavioral health assessment and intervention.

10. *MEDICAL- Review and adhere to the record-keeping process for documenting and tracking service refusals.*

DOC Response:

Unity Health Care has an established process for documenting and tracking patient refusals of medical services. When a refusal is generated, the refusal form is scanned into the electronic medical record (EMR), and the associated clinical appointment is rescheduled to ensure continuity of care. This process allows refusals to be readily tracked and monitored within the EMR. Additionally, the Unity Quality Improvement Department conducts periodic audits of refusal documentation to evaluate compliance with established procedures and identify opportunities for improvement. The CIC report also notes that appointments are rescheduled when services are refused, and that medical staff committed to more aggressive tracking of refusal forms.

Whenever possible, refusals are completed in the presence of the medical provider to ensure the patient fully understands the nature, purpose, benefits, and potential risks of declining the recommended health service. This practice promotes informed decision-making and provides an opportunity for the provider to address questions or concerns. In many cases, patients elect to proceed with the recommended service after receiving additional education and clarification from the medical professional.

As a result, Unity Health Care believes its current refusal tracking and documentation processes support appropriate record keeping, patient education, and continuity of care while maintaining ongoing quality oversight through routine auditing activities.

11. *PROGRAMS- Repurpose unused space on the top floor of units as classrooms or programming areas.*

DOC Response:

The program spaces on the top tier were specifically designed for classrooms and small-group activities and have historically been used in that capacity. DOC currently utilizes the upstairs spaces on top of the tiers, though not every housing unit uses them to full capacity. The Women's Program Coordinator will be reviewing these spaces and updating equipment in FY2027 to support increased and more consistent use.

12. *PROGRAMS-Continue ongoing efforts to expand both in-person and tablet-based programming.*

DOC Response:

DOC continues expanding both in-person and technology-based programming. Tablet programming has increased through additional devices, software enhancements, expanded digital content, virtual classes, and instructional video programming. DOC will continue evaluating opportunities to broaden meaningful programming based on resident needs, security requirements, staffing, and available resources.

13. *PROGRAMS- Continue the provision of special education to meet or exceed legal requirements.*

DOC Response:

DOC continues to work closely with the Maya Angelou Academy to ensure all students receiving special education services are delivered the services, accommodations and supports outlined in their individualized education programs. All required supports are being provided, and DOC will maintain ongoing collaboration with the Maya Angelou Academy to ensure that services meet all legal special education requirements.

14. *STAFFING- Continue hiring efforts to ensure that each housing unit maintains at least two officers at all times, and at least three officers in units requiring more support due to population size or safety and security management*

DOC Response:

DOC continues active recruitment and hiring efforts to fill correctional officer vacancies. Staffing assignments are determined based on population, post requirements, safety and security conditions, specialized housing needs, and daily operational demands. DOC continuously evaluates deployment to maintain safe and effective facility operations.

15. *STAFFING- Fill four vacant case management positions*

DOC Response:

Four (4) prospective case managers were advanced to the background investigation stage. One candidate received a conditional offer of employment but was subsequently removed from consideration due to failure to respond to follow-up communications. The Case Management unit is currently initiating the process to repost the vacancy.

CIC Recommendations

- 1- *Place more traps in the housing units for rodents.*

DOC Response:

DOC has increased trapping in housing areas where rodent activity has been reported. DOC's Sanitarian and contracted pest-control provider continue monitoring affected areas and implementing additional treatment measures when warranted.

- 2- *Exterminate cells for bugs.*

DOC Response:

Housing areas with reported or observed insect activity are referred to DOC's contracted pest-control provider for inspection and treatment when warranted. DOC continues follow-up monitoring to determine whether additional intervention is necessary.

- 3- *Clean the fans weekly and put more fans on the floors in the units.*

DOC Response:

DOC has established a biweekly cleaning schedule for housing-unit fans. Fan placement and replacement are evaluated based on environmental conditions, equipment availability, safety, and operational need.

- 4- *Exchange the water coolers on the water fountains that are not producing cold water.*

DOC Response:

The water coolers are adjusted or replaced every quarter as part of preventive maintenance. If a unit is reported as failed sooner, a ticket will be generated, and maintenance will inspect and resolve the problem.

- 5- *Ensure ice is available inside of the housing units on each shift when water or unit temperatures indicate a need DOC disagrees.*

DOC Response:

DOC provides ice and drinking water to housing units at least once per shift and may provide additional quantities based on environmental conditions and operational need.

- 6- *Inspect cells for maintenance and suspected mold concerns before residents are housed, and prohibit housing inside of cells with any concerns.*

DOC Response:

DOC inspects cells before occupancy for sanitation, suspected environmental concerns, and essential functionality, including plumbing, lighting, and security-related

conditions. Residents are not knowingly assigned to cells requiring environmental remediation or repairs that make the cell unsuitable for occupancy.

When suspected mold is identified in an occupied cell, DOC evaluates the condition and implements corrective action as warranted, including relocation when necessary, correction of contributing moisture conditions, cleaning and disinfection, remediation, repair, and restoration of affected surfaces.

7- *Allow residents consistent access to outside recreation.*

DOC Response:

DOC is committed to providing residents with meaningful access to outdoor recreation consistent with safety, security, staffing, and operational requirements. DOC continuously assesses operational demands across its facilities, including court movements, internal and external medical services, hospital details, visitation, programming, and other essential functions, to appropriately deploy available resources.

DOC will continue working to maximize outdoor recreation opportunities while ensuring that movement, supervision, and recreation can be conducted safely and securely.