District of Columbia Corrections Information Council



Department of Corrections Women at Correctional Treatment Facility

Inspection Report



Correctional Treatment Facility (CTF)

December 4, 2023



District of Columbia Corrections Information Council

Charles Thornton, Board Chair Katharine A. Huffman, Board Member Nkechi Taifa, Board Member

About the District of Columbia Corrections Information Council

The District of Columbia Corrections Information Council (CIC) is an independent oversight body mandated by the United States Congress and the Council of the District of Columbia to inspect, monitor, and report on the conditions of confinement in jails where residents from the District of Columbia are incarcerated. This includes facilities operated by the Federal Bureau of Prisons (BOP), the District of Columbia Department of Corrections (DOC), and private contractors.

The CIC reports its observations and recommendations to the District of Columbia Representative in the United States Congress, the Mayor of the District of Columbia, the Council of the District of Columbia, the District of Columbia Deputy Mayor for Public Safety and Justice, the Director of the BOP, the Director of the DOC, and the community.

Although the CIC does not handle individual complaints or provide legal representation or advice, individuals are still encouraged to contact the CIC. Reports, concerns, and general information from incarcerated DC residents and the public are very important to the CIC, and they greatly inform our inspection schedule, recommendations, and reports. However, unless expressly permitted by the individuals or required by law, names and identifying information of residents, corrections staff not in leadership, and members of the general public will be kept anonymous and confidential.

DC Corrections Information Council

1400 Eye Street NW – Suite 400 Washington, DC 20005

Phone: (202) 478-9211 Email: dccic@dc.gov Website: https://cic.dc.gov/

Table of Contents Facility Overview4 Introduction......4 Demographics5 Key Findings......6 Daily Conditions 6 Mental Health......9 Conditions on Medical 82......9 Staff Interactions and Disciplinary Process9 Grievances (Administrative Remedy) Process.......10 Restrictive Housing 11

Facility Overview

Correctional Treatment Facility Profile

Dates of Inspection: May 17, 2023 Location: SE, Washington, DC Security Level: Minimum, Medium

Population of women: 72 Women surveyed: 44

Introduction

The Correctional Treatment Facility (CTF) is a specialized medium security institution that houses women and specialized populations of men. Currently, there are four units designated for the female population. Men and women in need of medical care are placed on Medical 82. This report includes information and observations on the experiences and conditions of confinement for women within the facility.

The facility was activated in May 1992. The Correctional Treatment Facility consists of five separate, multi-story buildings that are situated immediately adjacent to each other, presenting the appearance of one large structure. Building A includes administration, maintenance, personnel, and medical services. Building B includes master control, visitation, the gymnasium, and a large chapel. Buildings C and D house male residents. All women are held in Building E.

Contractual services [are] provided by Unity Health Care, Inc. (medical, mental health, dental), Aramark (food service), Keefe (inmate commissary), Spectrum and GSIDA (janitorial services).¹ Telephone services for CTF are provided by Securus.

All social visits last one hour with a maximum of three visitors at once. Locker areas are provided for visitors, and they may purchase vending machine items to consume for both them and the resident they are visiting; however, residents may not bring those items from the vending machine back to the housing areas. All visits occur Monday through Friday. Through a partnership with the DC Public Library, satellite video visitation sites are also available.²

Unit	Population on	Population from
	May 17, 2023	May 2022 to May
		2023
E1A		6
E2A	10	59
E2B Reentry	26	72
E3A Wellness Unit (see description below)	8	94
E3B		3
E4A Intake and Contains RH on the upper	23	186
level		
E4B Isolation unit for COVID.	0	4
Medical 82	4	14

¹ Commission on Accreditation for Corrections (CAC) Standards Compliance Reaccreditation Audit District of Columbia Department of Corrections October 3-5, 2022, page 9.

² CAC Audit, page 18.

Wellness Unit

Unity conducts a Substance Abuse Disorder Program in the Women's Wellness Unit (EA3). Priority for placement on the Women's Wellness Unit is given to women who are taking medication for opioid use disorder and who are willing to engage in intensive treatment. Admission to the women's wellness unit occurs on a rolling basis. While the population on the Wellness Unit is small at any given time, almost a hundred women have benefitted from programming on the Wellness Unit.

The three phased program is a medication assisted treatment with extensive programming. During the first thirty days (Intensive Treatment Plan), participants engage in five to six hours a day of programming, which includes yoga, trauma informed curriculum, art therapy, and individual counseling. During the second phase of the program (Treatment Phase), participants engage in four hours of treatment of core daily group activities, plus three hours of elective programming. During this phase, they may be eligible to participate in the work detail or other facility programs. The men's version of the program includes a peer mentorship, which is not provided for the women. During the final phase (Maintenance Phase), participants engage in a minimum of one group and two meetings with program staff each week.

Staff of Unity stated that participants in the program often have difficulty finding re-entry services, including housing, upon release. Community-based programs require participants to be drug free, and all graduates continue to receive medication for their substance abuse disorders.

Demographics³

The average female population in CTF has varied month to month. The lowest counts of 47 occurred on both Tuesday May 17, 2022 and Wednesday May 18, 2022. The highest count of 83 occurred on nine dates, the earliest of which was October 4, 2022, and most recently on April 13, 2023. On inspection day, 72 women were housed at CTF. One woman was subject to privilege restrictions and two women were under suicide watch. Forty-four women participated in the CIC survey. Women who completed the survey ranged in age from 19-76.⁴ Two women completed the Spanish version of the survey.

Of the 72 women incarcerated at CTF, 62 are black; seven are white; two are Hispanic; and one is other. Of the 438 women held at CTF during the past year, 387 are black. Fifty of the seventy-two women claimed DC residency. Of the 438 women held during the year, 288 women claimed DC residency: 45 claimed Maryland residency; and 16 claimed Virginia residency. On average, at least half of the population of women had children under age eighteen.

Sixty-one of the 72 women were under the jurisdiction of Superior Court, and 11 were under of the jurisdiction of District Court. Fifty-nine women are pre-trial. Of the 438 women held during the year, 414 were committed by Superior Court. Twenty-two of the 44 survey respondents indicated that they had been incarcerated at CTF at least once before. Of the 438 women held during the year, 321 served time at CTF prior to their most recent time; fifty-one previously served time in the Federal Bureau of Prisons, and were released ranging between August 2003 and as recently as April 2023.

Sixty-six of the 72 women were unemployed prior to their incarceration; forty have a high school

³ All data subject to daily fluctuations contingent upon the current population.

⁴ Table 1 in Appendix A compares total female population at CTF on the day of the site inspection (72) with 44 survey respondents and the unduplicated count of women (438) incarcerated May 17, 2022 to May 11, 2023.

diploma; five have their GED; and six have a college degree. Of the 438 women held during the year, 257 were unemployed prior to their incarceration; 206 have a high school diploma; 55 obtained their GED; and 32 have a college degree.

Fifty-six of the 72 women were diagnosed with a mental illness, and 43 women were diagnosed with a serious mental illness.⁵ Of the 438 women, 328 were diagnosed with a mental illness and 212 were diagnosed with a serious mental illness.⁶

Key Findings

Daily Conditions

- There are four case managers assigned to the women's units. Several women reported that case managers do not respond in a timely manner and rarely visit the unit.
- Several residents reported difficulties with making private legal calls and connecting with external case managers because they are unable to accept collect calls.
- Residents reported receiving five hours outside of their cells daily, and half of the unit is outside at once.

Hygiene, Meals, and Commissary

- The showers in all the female units smelled of mold and mildew, and there was peeling paint in several showers (see appendix B).
- Peeling wall paint was visible in unit E2B.
- According to the residents, sanitary products are readily available; however, several women expressed dissatisfaction with the quality.
- The top four things the women reported as accessible were clean sheets and towels (40); telephones (40); commissary (40); and showers (39).
- The top four things the women reported lacking were legal materials (19); reading materials (12); writing materials (12); and mail, which was reported as chronically late or mishandled (7).
- Meals are managed by Aramark, prepared at CDF, then transported to CTF. Residents receive a hot
 meal for breakfast and dinner and a cold meal for lunch. The average cost per meal is approximately
 \$2.50.
- Twenty-five survey respondents reported that hot meals were not served hot. Thirty-seven respondents stated that fruit is not available daily, and 22 respondents stated that vegetables are not available daily. The women also reported that fruit appears old or frozen.

⁵ DC DOC defines "serious mental illness" as a diagnosis considered Axis 1 under DSM IV classification of mental illnesses; the main categories observed in DC DOC's female population include Bipolar Disorders, Post Traumatic Stress Disorders, Major Depressive Disorders, Schizophrenia, and Psychosis. It also includes those diagnosed with Schizoaffective Disorders, which are classified as Axis II under DSM IV classification of mental illness.

⁶ DC DOC defines "serious mental illness" as a diagnosis considered Axis 1 under DSM IV classification of mental illnesses; the main categories observed in DC DOC's female population include Bipolar Disorders, Post Traumatic Stress Disorders, Major Depressive Disorders, Schizophrenia, and Psychosis. It also includes those diagnosed with Schizoaffective Disorders, which are classified as Axis II under DSM IV classification of mental illness.

Education and Programming



Library and Resource Center in Unit E3A

The Education Department has a short-term goal of enhancing female program participation by checking on women who are choosing to not participate in classes. Women engaged in programming were pleased with educational and other programs. Several residents on the re-entry unit commented that education and library services are exceptional. Ten of the women surveyed said they completed reentry programs and received information about resources. Thirteen women reported that DC agencies or organizations had contacted them about programs or services available upon release.

CTF has partnerships with various colleges and universities in the DC area, such as the University of the District of Columbia (UDC) and Georgetown University. Six women are enrolled in Georgetown University programs. Harvard University hosted a very popular program "Act like a Lady", which is an extension of the Street Law program. Staff also reported that several women on E2A participate in the Frederick Douglass Project. Additionally, Free Minds partners with the Education department at CTF. Petey Green offers a college bridge writing and math program for residents who have attained their GED but are not yet ready for post-secondary education; it is a hybrid program that offerings educational opportunities using tablets and in-person tutors.

Some residents do not understand how to use the APDS tablets, so they are not able to maximize its features. Through APDS educational tablets, residents may complete the following: file grievances; complete legal research; conduct attorney messaging; review DOC Policies; contact CCR instructors; send messages to case management; send requests to DCPL for books; have access to religious information/services; course work, including some Georgetown University courses; Behavioral Health Services; review Aramark menus; send requests or messages to the Ready Center; receive DOC announcements; review downloaded information; review visitation information; listen to designated radio stations; voter registration information; TED talks; Maya Angelou Public Charter School classes and support services; virtual classrooms; over 800+ courses on Curriculum Commissary; over 2000+ books (including audible) with the National Corrections Library; closed course enrollment for post-secondary courses; Inside Scoop articles; and Inside Voices and other podcasts.⁷

⁷ CAC Audit, page 8.

Five women are enrolled in the C-TECH certificate program, which offers classes in telecom and fiber optics. Coursework consists of worksheets, review lessons, videos, and study groups. Class sizes for C TECH courses is based on the availability of materials, but typically consist of six to eight residents. The Fiber Optics class uses Grade A tools, which residents check-out daily and must return after class. If a resident fails to return the tools, they will be searched and possibly removed from the class. After completing the Fiber Optics class, residents progress to other courses in the program, such as Grounding and Bonding, which consists of learning the skills needed to install copper wiring.

There are no in-person programs for women on E4A. Programs and educational materials are available via tablets, and a schedule is posted in the units.

Health Services

- Several residents stated that sick call request slips are not collected twice a day.
- Twenty-two women reported that they are prescribed medications for physical illnesses.

Medical

The medical department at CTF, which holds dual accreditation by the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC), is operated under contract with Unity Health Care. The department received National Commission on Correctional Health Care (NCCHC) accreditation in June 2021. All accreditation standards were fully met despite fifteen staff position vacancies, including seven licensed practical nurses. There were four medical examination rooms, one optometry clinic, and an on-site laboratory. Nurses conduct triage while midlevel providers perform sick call encounters. No co-pay is charged for services. Residents are not permitted to have non-prescription medications outside of health services.

Unity reported an average of six hundred intake screens monthly. The facility averages two to five pregnancies monthly. There is an OBGYN on site, but appointments for things like mammograms, CT scans, and MRIs are referred out. Unity has contracts with specific places to get these services and reported no issues with transporting residents to these appointments. Residents are transported to Washington Hospital Center, GW Hospital, and Howard Hospital for care beyond the capability of the on-site services, including birthing. The transport location is determined by 911. One Unity Case Manager is assigned to coordinate residents' care upon reentry into the community by ensuring that continued care is provided upon release, and that community providers receive the resident's medical records.

Thirty-six survey respondents reported receiving medical care while at CTF: eleven indicated satisfaction; 14 indicated neutrality; and fifteen indicated dissatisfaction.

The upstairs levels of all women's housing units are converted into offices for Unity healthcare. None of the offices appeared operational; there were no chairs, desks, books, or items signifying occupancy. Residents suggested that these spaces should be used for mental health counseling and programming.

Dental

The dental department consists of two full-time dentists and one part-time dentist. Staff stated that 10-12 residents are seen per day depending on the dentist's schedule. The dental area is a large room with four dental chairs that are separated by dividers. There is an x-ray room in the dental lab. To access dental care,

⁸ CAC Audit, page 12.

⁹ CAC Audit, page 12.

¹⁰ CAC Audit, page 12.

residents send a sick call request. Staff indicated that the average wait time for an appointment is contingent upon "how long the waitlist is."

Mental Health

Twenty-six survey respondents reported having a mental health diagnosis and receiving mental health medication. The mental health department consists of one psychiatrist, four psychiatric nurse practitioners, and seven mental health clinicians. One mental health clinician is assigned to the female mental health unit. There are three clinician vacancies and two behavioral health specialist vacancies.

There are three safe cells in CTF.¹¹ The facility has established a multi-disciplinary Suicide Review Committee, which conducts reviews on multiple attempts or successful attempts.¹² Several residents reported that there are no services on the weekends to address mental health emergencies other than active suicides.

Fifteen women are participating in individual therapy. Each of the following groups accommodate six women: "TAMAR (Trauma, Addiction, Mental Health and Recovery)", "Helping Women Recover", and art therapy.

Conditions on Medical 82

- On inspection day, a space air conditioner was operating in the hallway.
- Residents reported that staff are slow to respond to the call bell and sometimes do not respond at all.
- Female residents on Medical 82 reported privacy concerns about their exposure to male guards while changing clothes and expressed the need for a safe alternative to their suggestion to place paper over the glass door panel to obstruct the view.
- One bed was broken, so it could only adjust manually.
- Mattress springs on one of the beds was poking through the fabric (see below).



Visible Mattress Springs

Staff Interactions and Disciplinary Process

- Three survey respondents indicated that they have reported sexual abuse or sexual harassment to the DOC. Seven women reported not knowing how to report sexual abuse.
- Prison Rape Elimination Act (PREA) signage about reporting sexual misconduct was observed on two units.
- From September 22, 2022 to May 19, 2023, there were 15 PREA complaints involving female residents. Of the fifteen reports, nine were reports of "inmate on inmate" sexual abuse; three were

¹¹ Safe cells have suicide prevention mattresses which are tear resistant, fire resistant, and 100% sealed seams.

¹² CAC Audit, page 13.

reports of "staff on inmate" sexual abuse; two were reports of retaliation; and one report was "unknown" sexual abuse.

Grievances (Administrative Remedy) Process

There were 502 grievances filed from May 17, 2022 to May 11, 2023. Of those, 170 involved "improper staff action" and 146 were non-grievable. The frequency of grievances filed by women regarding additional topics are below:

Grievance Topics from May 17, 2022 to May 11, 2023	Number of Grievances
Access to health care	49
Food service	33
Mail	22
Case management	20
Inmate on inmate improper action	10
Facilities management	7
Religious services	7
Canteen	6
Quality of health care	5

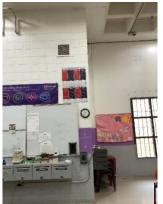
- Residents must ask staff for grievance forms rather than the forms being freely available in the information area on the unit.¹³ Unit staff was not knowledgeable about the location of grievance forms or the process. No staff ever mentioned placing forms in a sealed envelope.¹⁴
- Neither staff nor residents were knowledgeable about the Inmate Grievance Advisory Committee¹⁵ or the name of the Inmate Grievance Coordinator, despite policy which requires weekly visits to the units.¹⁶
- When filing a grievance form using the tablets, residents are unable to retain a copy.
- On one unit, grievance process information was posted too high on the wall to clearly read (see below).

¹³ DOC Inmate Grievance Policy Procedure (Number 4030.1M) Section 9 d states that "The Inmate Grievance Coordinator (IGP-C) shall insure IGP forms are available on each housing unit. The Housing Unit Officers shall ensure the IGP forms are accessible to inmates at all times." Page 5.

¹⁴ DOC Inmate Grievance Policy Procedure (Number 4030.1M) states in Section 2 h that "Grievances are considered legal correspondence. Staff shall not open or inspect a sealed envelope that is labeled "Grievance" and addressed to the Grievance Coordinator, Warden, or any Deputy Director of the DC DOC." Page 3.

¹⁵ DOC Inmate Grievance Policy Procedure (Number 4030.1M) Section 16 outlines the composition—including "three (3) to five (5) inmates"-- and responsibilities of the Inmate Grievance Advisory Committee. Pages 10-11.

¹⁶ DOC Inmate Grievance Policy Procedure (Number 4030.1M) states also states that part of the responsibility of the Inmate Grievance Coordinator is "visiting housing units and inmate activity area(s) at least weekly to encourage information contact with staff and inmates and to informally observe living and working conditions." (section 9e) Page 5.



Grievance poster positioned above the clock.

Restrictive Housing

Restrictive Housing (RH) for the women is located on the upper level of unit E4A. On inspection day, no women were in Disciplinary Restrictive Housing. Eighteen of the survey respondents served time in RH at least once. Fifteen women who spent time in RH reported access to grievance forms; six reported that there were no reading, writing, or library materials.¹⁷

¹⁷ The lack of reading, writing, and library materials was also noted by other women in all units.

Recommendations

Daily Conditions

• Increase case management staff in unit E4A.

Hygiene, Meals, and Commissary

• Renovate showers that smell like mold and mildew and require paint.

Education and Programming

- Repurpose unused space on the top floor of units as classrooms or programming areas.
- Increase program offerings in multiple languages on educational tablets.
- Coordinate with Language Access agencies to provide non-English proficient and limited English proficient accommodations for programs.
- Provide APDS tablet orientation and re-orientation (scheduled or upon request) to ensure that residents understand how to utilize their tablets.
- Continue specialized educational programming and excellent library services.

Health Services

- Replace damaged and broken furniture and equipment on Medical 82.
- Increase mental health staff to ensure that residents have access to regularly scheduled mental health appointments.
- Implement a tracking system to ensure that sick call slips are collected twice daily and that residents are provided care within 24 hours of their request.

Staff Interactions and Disciplinary Process

Post PREA signage and reporting options in visible, common areas in both Spanish and English.

Grievances (Administrative Remedy) Process

- Train staff about the grievance process so they may properly execute it with residents.
- Ensure that grievance forms and instructions on filing are visibly located near the Grievance Submittal box.
- Provide a receipt confirming submission of grievance form submitted via tablet.

Appendix A: Table of Age of Women at CTF 4

Age	Unduplicated	Population (May	Survey
	Population	17, 2023)	Respondents
	(May 2022-May		
	2023) 438		
Under 20	1	1	1
20-24	53	8	4
25-29	67	13	6
30-34	68	10	7
35-39	77	13	7
40-44	65	12	9
45-49	51	7	5
50-54	23	1	1
55-59	17	3	2
60-64	13	2	1
65-69	1	0	0
70 Plus	2	1	1
Total	438	72	44

Appendix B: Pictures of showers in women's units of CTF



