

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



May 19, 2022

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) report of Department of Corrections (DOC) Correctional Treatment Facility (CTF). CIC inspected CTF on March 17, 2022. We appreciate our ongoing partnership with the CIC whereby we look both to seek improved circumstance and outcomes for District of Columbia inmates returning to the community.

CTF received its initial accreditation from the American Correctional Association (ACA) in 2018. Accreditation is a system of verification that correctional agencies/facilities comply with national standards promulgated by the ACA. Accreditation is achieved through a series of reviews, evaluations, audits and hearings. To achieve accreditation a facility must comply with 100% of applicable mandatory standards and at least 90% of applicable non-mandatory standards. Under some circumstances, the ACA may waive certain accreditation standards. There are different standards for different types of facilities, such as adult correctional institutions, jails, juvenile detention facilities and boot camp programs. DOCs reaccreditation audit is expected to occur in August 2022.

DOCs medical program is dually accredited. In addition to ACA, DOCs medical program has been accredited by the National Commission on Correctional Health Care (NCCHC) since 2004. NCCHCs goal is to improve the quality of health care in jails, prisons and juvenile confinement facilities. NCCHC establishes standards for health services in correctional facilities, operates a voluntary accreditation program for institutions that meet those standards, produces resource publications, conducts educational conferences and offers certification for correctional health professionals.

DOC will continue to be appreciative for CIC's follow-up and recommendations that seek to ensure improvements. With that said, below you will find DOC's response to specific findings and recommendations.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**

**DEPARTMENT OF CORRECTIONS**



**Office of Internal Control Compliance and Audit**

**Inspection Response: Action Plan**

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**Audit Name:** Corrections Information Council

**Audit Period:** March 17, 2022

**Facility:** Correctional Treatment Facility

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**Prepared By:** Gloria J Robertson, Compliance and Review Officer

Document Owner(s)	Job Title	Approval	Date
	Director	Thomas Faust	5-20-22
	Compliance and Review Officer	Gloria J Robertson	May 19, 2022

**CIC Findings for Medical:**

1. *Medical should increase attention towards inmates with chronic or serious health conditions by communicating more frequently with them and consulting inmates' external doctors when beneficial.*
2. *Inmates in the 50 and over unit are not receiving their medications on time, and have been unable to see the dentist.*
3. *Eliminate any practice of housing unvaccinated inmates with vaccinated inmates, especially considering the low population as compared to the facility capacity.*

**DOC Response to Medical Findings:**

1. CIC spoke to numerous inmates during their tour of both CDF and CTF. CIC presented to DOC Medical Director's 4 allegations from DOC residents who alleged they had not been seen in a timely manner or had not received medications. CIC members and DOC's Medical Director immediately met with Unity's Director of Nursing to review the medical records as well as the electronic medication administration record for each resident. Sick call slips were also reviewed. This timely and comprehensive collective review demonstrated that the residents did receive appropriate and timely care as well as medications. Additionally, chart notes demonstrate that outside records were sought. CIC staff appeared satisfied with the record review.
2. DOC will continue to provide comprehensive medical, mental health and dental care and available to review any and all allegations CIC receives to document care provided and planned follow up care.
3. DOC has worked in partnership with DC Department of Health (DC Health) and subject matter expert, Dr. Anne Spaulding, on COVID-19 matters for the past 2 years. DOC is pleased to show that our work has been successful and DC Health data demonstrates that DOC residents are 6 times less likely to get COVID-19 and die in the jail compared to within District of Columbia community. DOC provides ongoing availability for inmates to get vaccinated throughout their stay at DOC. DOC also offers extensive testing for our resident population throughout. While residents are not mandated to get vaccinated, we provide personal protective equipment (PPE), recommend social distancing and provide widespread testing, in addition to vaccination to help prevent the spread of COVID-19. Separately housing residents based in their vaccination status has not been recommended by DC Health nor Dr. Spaulding. DOC will continue offering PPE, vaccinations and testing to the fullest extent possible.

**Recommendations Medical:**

1. *Medical staff should increase attention towards residents with chronic or serious health conditions by communicating more frequently with them and consulting residents' external doctors when beneficial.*
2. *Eliminate any practice of housing of unvaccinated residents with vaccinated residents, especially considering the low population as compared to the facility capacity.*

**DOC Response to Medical Recommendations:**

1. CIC spoke to numerous inmates during their tour of both CDF and CTF. CIC presented to DOC Medical Director's 4 allegations from DOC residents who alleged they had not been seen in a timely manner or had not received medications. CIC members and DOC's Medical Director immediately met with Unity's Director of Nursing to peruse the Medical Records as well as the electronic Medication Administration Record. Sick Call slips were also reviewed. This timely and comprehensive collective review demonstrated that inmates did receive appropriate and timely care as well as medications. DOC will continue to provide comprehensive medical, mental health and dental care and is happy and available to review any and all allegations CIC receives to document care provided and planned follow up care.
2. DOC, to include our medical department and contractor Unity Health Care, works closely with and follows the guidance of the DC Health. The DC Health provided guidelines to assist in the development and implementation of our "Modified Medical Stay-in Place" which describes housing, recreation, visitation and all aspects of inmate living conditions within the department.

**CIC Findings for Language Line Access:**

1. *Increase language access practices and staff education on how to communicate with non-English proficient and limited English proficient inmates.*
2. *Lack of current/accurate language line signage in units, and throughout the facility.*
3. *Lack of staff onsite 24/hours to communicate inmate needs.*
4. *Many of the sign in the facility were outdated, which included information about June 2020 mask mandates, old schedules for tablet offerings, and programming for the previous month instead of current offerings.*

**DOC Response to Language Line Access Findings:**

1. DOC will provide language line access training in both preservice and in-service.

2. DOC posted the language line information on all units in both jails.
3. DOC identifies staff that speak multiple languages. Identified employees cover all shifts.
4. DOC posted updated COVID and language line access and voting signage.

**Recommendations Language Line Access:**

1. *Increase language access practices and staff education on how to communicate with non-English proficient and limited English proficient residents.*
2. *Display accurate and current signage and programming schedules in each unit.*

**DOC Response to Language Line Access Recommendations:**

1. DOC will implement language line access training in both preservice and in-service. The language line information was posted on units in both jails. DOC has a census of DOC staff that speak multiple languages. That census covers all three shifts.
2. Accurate signage is displayed in all units. Designated staff will ensure all signage is updated as needed.

**CIC Findings for Ready Center:**

1. *DOC should provide a physical space for the Ready Center to conduct in person counseling services.*
2. *The Ready Center should increase staff, and create an updated comprehensive plan explaining current services and required partnerships with DC government organizations.*

**DOC Response READY Center Findings:**

1. Effective May 2, 2022, the READY Center is now under the management and purview of DOCs Deputy Director of College and Career Readiness & Professional Development (CCR). The Deputy Director of CCR has already met with DGS regarding a temporary space for the READY Center until the permanent building has been erected. Meetings are currently taking place to identify this temporary location.

2. Staffing for the READY Center is being planned. Current education staff will assume roles in reaching out to returning citizens in a variety of ways, including attending monthly events sponsored by Court Services and Offender Supervision Agency (CSOSA) and Volunteers of America Chesapeake and Carolinas (VOACHES), various events in DC wards, the women's halfway house, and other community events. Current READY Center staff will continue to answer phone calls. The Deputy Director of CCR will also make all READY Center plans available as soon as they are solidified. In addition, a full staffing compliment will be available to ensure returning citizens will have support. The Deputy Director of CCR has also reached out to current

and new Community Based Organization's (CBO) and sister agencies to form strong partnerships that will enhance the successful reintegration of our citizens returning to our community.

**Recommendations READY Center:**

*Provide a physical space for the Ready Center to conduct in person counseling services. The Ready Center should increase staff, and create an updated comprehensive plan explaining current services and required partnerships with DC government organizations.*

**DOC Response READY Center Recommendations:**

Effective May 2, 2022, the READY Center is now under the management and purview of DOCs Deputy Director of CCR. The Deputy Director of CCR has already met with DGS regarding a temporary space for the READY Center until the permanent building has been erected. Meetings are currently taking place to identify this temporary location.

**CIC Findings for Young Men Emerging (YME) Unit:**

*Inmate complained there was no GED program for Mentors. CIC was informed a program was in place, and will be provided additional information.*

**DOC Response YME Unit Findings:**

General Education Diploma (GED) program began March 21, 2022 (in-person). As DOC transitioned to a medical stay-in-place due to the COVID-19 public health emergency in 2020, all inmates on D2A (YME) who were eligible to attain a GED were registered for the GED ACADEMY on the American Prison Data System (APDS) tablets and continued their studies through virtual instruction and with in-person instructor support via APDS correspondence and unit visits with their assigned GED instructors. When small group, in-person instruction was allowed to resume, GED classes immediately resumed on the unit. Office of the State Superintendent of Education (OSSE), the GED Administrator for the DOC, did not come into the DOC due to COVID-19 restrictions (some imposed by the DOC and some imposed by OSSE) until March 2022. However, students and instructors continued to prepare for testing without pause.

Currently, students housed on D2A (YME) attend GED prep classes in the CCR classrooms at CTF. Those students eligible to take any of the GED tests did so March 21-25, 2022 (Attachment 1- GED Testing Schedule March 2022) and each month thereafter.

There has never been a gap in learning opportunities for our GED students on the YME unit, either for mentors or mentees. Historically, education participation has been a requirement of all YME participants, and the Division of College and Career Readiness has continuously served those students since the inception of the program.

The following are included in Attachments 1 through 4 for your review:

- Enrollment in GED ACADEMY (YME students highlighted) (Attachment 2)
- Various attendance records throughout the public health emergency of GED students on YME (Attachment 3)
- Sample of current movement sheets for YME students enrolled in GED Preparation (Attachment 4)
- Current GED testing schedule for March 21-25 2022 (Attachment 1)

**CIC Findings for 50 and Over Unit:**

1. *Inmates want increased programming and re-entry options for inmates aged 50 and up.*
2. *An inmate expressed he had completed an educational program on a tablet months ago but has not been contacted by Educational Services to receive their certification.*

**DOC Response to 50 and Over Unit Findings:**

1. The assigned program manager and case manager for the 50 and over unit conducted a town hall meeting on April 19, 2022. The men on the unit expressed what type of programming that they would like to see being provided and re-entry services they felt would be beneficial to them. At this time, the program manager has volunteered to conduct some programming while awaiting the development of a more comprehensive plan on how the 50 and over unit can best receive programming/services.
2. Without specifics, DOC cannot respond to this complaint. Not all courses on the education tablets result in a certification, and for those that do, we find that frequently residents skip portions of the course work to get to the questions without reading the instructions that state each portion of the course must be checked off as read before completion is granted. Residents have the opportunity to submit an inquiry about CCR programs on their tablet or through their case manager. If DOC has not delivered a certificate, that most likely means one was not earned.

**Recommendations for 50 and Over Unit:**

*Increase programming and re-entry options offered to residents aged 50 and up.*

**DOC Response to 50 and Over Unit Recommendations:**

Additional programming was implemented on the unit in April 2022. More comprehensive programming to follow.

**CIC Findings for Recreation:**

1. *Develop consistent recreation schedules for inmates.*

2. *If COVID presents scheduling obstacles, then inmates should have increased access to exercise equipment.*

**DOC Response to Recreation Finding:**

1. DOC updates and posts a recreation schedule in each housing unit. (Attachment-5)
2. The allowable out of cell time includes recreational items such games, television, telephone, pull up bars and some units are equipped with exercise machines.

**Recommendations for Recreation:**

*Develop consistent recreation schedules for inmates. If COVID presents scheduling obstacles, then residents should have increased access to exercise equipment.*

**DOC Response to Recreation Recommendation:**

Recreation schedules are reviewed at least monthly, and revised as needed. Exercise equipment is available on most CTF units.

**CIC Findings for Legal Resources:**

1. *Inmates want more access to legal resources, legal information, and legal professionals.*
2. *Inmates can access the law library using a tablet, but some inmates stated that they do not know how to access or interpret legal texts.*

**DOC Response to Legal Resources Findings:**

1. The legal resources available to inmates in the DOC is expansive. If a resident wants information or a specific resource, he/she must submit the Legal Research Request Form on their tablet or on paper, to their case manager, and the law library staff will respond. DOC is not authorized to provide access to legal professionals for residents.
2. Residents can submit questions via the Legal Research Request Form on their tablet or on paper, submitted to their case manager, and law library staff will respond.

**Recommendations for Legal Resources: NONE**



**CIC Findings for Meals:**

1. *Provide different meals for lunch and dinner, with dinner being a hot meal. CTF should also increase the amount of vegetables offered to inmates to, at minimum, one serving with lunch and one with dinner.*
2. *Assure that staff checks the requirements and accuracy of dietary specific trays (Halal, Kosher, etc.)*

**DOC Response to Meals Findings:**

1. Effective May 9, 2022, DOC changed the hot meal serving periods. Breakfast and dinner are now the hot meals and lunch the cold meal. Currently, at least one vegetable is served every day on the lunch or dinner meals. There is a proposed menu secondary to inmate preferences. (Attachment 6). Hot meals are being served at breakfast and dinner, and the cold meal for lunch.
2. Staff were retrained on diet menus requirement and allergies.

**Recommendations for Meals:**

1. *Provide different meals for lunch and dinner, with dinner being a hot meal. CTF should also increase the amount of vegetables offered to residents to, at minimum, one serving with lunch and one with dinner.*
2. *Assure that staff checks the requirements and accuracy of dietary specific trays (Halal, Kosher, etc...)*

**DOC Response to Meals Recommendations:**

1. Currently, the facility serves a vegetable every day either on the lunch or dinner meals. On May 9, 2022 the hot meals became breakfast and dinner, and the lunch cold cuts.
2. Staff were retrained on diet menu requirements.

**CIC Findings for Visitation:**

1. *Families must show proof of vaccination to visit the facility in-person but inmates juxtaposed their daily interactions with other inmates and DOC staff who are not vaccinated.*

2. *Tablets have phone and text capabilities to facilitate alternative means of communicating with family, but inmates mentioned those features do not always work.*

**DOC Response to Visitation Findings:**

1. The DOC, to include our medical contractor Unity Health Care, work closely with, and follow the guidance of DC Health. The DC Health provided guidelines to assist in the development and implementation of our Modified Medical Stay-in Place (Attachment 7) which describes housing, recreation, visitation and all aspects of inmate living conditions within the facilities.
2. The educational tablets, APDS, do not provide telephone and video telephone services for inmates. The Global Tel Link (GTL) tablets have telephone capability at CDF. However, GTL is not the telephone provider at CTF, therefore the tablets do not have the telephone feature enabled. DOC is working on establishing one telephone provider for both facilities. Once this occurs, inmates at both CTF and CDF will be able to use the tablets for telephone services.

**Recommendations for Visitation: NONE**