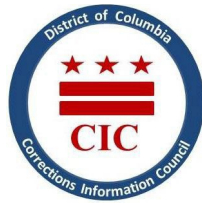


District of Columbia
Corrections Information Council



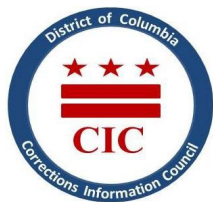
District of Columbia
Women at
**Correctional Treatment
Facility**

Report on Findings and Recommendations



Correctional Treatment Facility (CTF)

September 23, 2022



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.

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Facility Overview

Correctional Treatment Facility Profile

Dates of Inspection: May 17 & 18, 2022

Location: SE, Washington, DC

Security Level: Minimum, Medium

Rated Capacity: 1,400

Population total 5/17/22: 322

Population of women on 05/17/22: 47¹

Population of women surveyed: 25²

Introduction

There were forty-seven women housed at CTF on May 17, 2022. All CTF residents are housed alone in a cell. The top languages spoken by residents at CTF are English and Spanish. Currently, food at CTF is managed by Aramark. For resident receiving visitors at CTF, family members and loved ones are required to show proof of vaccination. The DC DOC provided demographic data about the 47 housed at CTF on May 17, 2022. On that date, the women ranged in age from 21-61 (Appendix A). Length of stay ranged from one day to more than four years (Appendix B). Some of the extended stays may be due to delays in court hearings created by COVID. The population is primarily pre-trial (Appendix C).

There are five women's units:

E2A: 7 women under quarantine since May 14, 2022

E2B: 16 women

E3A: 9 women (Wellness Unit)

E4A: 12 women – contains SHU on bottom level

E4B: 3 women --Isolation unit for COVID

Thirty-seven women were on open units and could participate in the survey and interviews. Ten women were under quarantine and unable to participate. In total, twenty-five women participated in the CIC's survey. Of the twenty-five women surveyed, nineteen were incarcerated at CTF for the first time. Fifteen of the twenty-five women were held at Central Cell Block before coming to CTF.

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 mental health department consists of one psychiatrist, four psychiatric nurse practitioners, and seven mental health clinicians. The dental department consists of two full-time dentists and one part-time dentist. According to data from DC DOC on the 47 women in custody on May 17, 2022, 26 were fully vaccinated or fully vaccinated with a booster (Appendix D).

¹ Female population has increased to 79 since the site visit.

² One survey respondent identified as a transgender female. DOC provided data on transgender residents in custody from 6/1/2020 through 5/31/2022: Two transgender women, 63 transgender men, 10 gender-variant men, and 1 transsexual man.

Thirty-four of the forty-seven women experienced mental health issues at some point in time. Almost half are characterized as seriously mentally ill³(Appendix E). Eleven of the survey respondents stated they are currently receiving mental health medication. Fifteen of the women currently incarcerated have an active addiction to substances⁴ (Appendix F).

Eight of the women surveyed indicated that they had a child under the age of 18. In total, 16 children were counted on the survey. Thirty-four of the 514 women housed at CTF for more than 24 hours from June 1, 2020 through May 31, 2022 were pregnant.

Key Findings

Hygiene, Meals, and Commissary:

- Residents noted the showers sometimes flood and often smell of mold and mildew. During the site visit, the administration recognized the issue and stated that a bid will be forthcoming to renovate and revitalize all the showers in CTF.
- Residents stated that clothing comes back from laundry with a brownish color. Resultantly, some inmates wash their own white clothing.
- Fifteen of the twenty-five women surveyed stated that meals were served appropriately hot or cold.
- Fifteen of the twenty-five stated they have dietary restrictions, and eight of them said those requirements were met.
- Several of the women stated that the meals lack both variety and nutrition, such as a lack of fruit and vegetables.
- Residents expressed satisfaction for the microwaves in each unit to reheat food if needed.
- Items on commissary are often sold out by Friday, which is the day women have access to commissary.

DOC Response to Hygiene, Meals, and Commissary Findings:

1. In each case that the Sanitarian observed excess water outside of the shower stall; it was due to shower curtains that were not long enough. The shower curtains currently in use are made to be fitted so that they are long enough to keep the shower water inside of the shower stall. The showers are cleaned and inspected daily. When there is a shower drain clogged there is a maintenance request submitted. Maintenance has responded immediately to these requests. The smell of mold and mildew can be an indication of the presence of mold/mildew, but not always. In every case of a report of mold/mildew, the affected areas are inspected and if mold/mildew is found that shower is closed pending the abatement of the mold/mildew that has been verified. A report of mold/mildew was received during the recent CIC inspection. There was no mold/mildew found resulting from that report. Every report received of mold/mildew is taken seriously, investigated and sampled if necessary. If mold/mildew is verified, the affected areas are closed pending mold/mildew remediation/abatement.

2 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.

- ³ DC DOC defines “ever been diagnosed” to include past diagnoses as well as current diagnoses. “Active diagnoses have no end date associated with the diagnosis, regardless of the date of diagnosis.
2. Inmate linens (sheets & towels), personal whites and oranges are washed weekly with the approved chemicals for the washers. The amount of detergent is automatically set by Ecoblab according to what is being washed. We routinely have Ecoblab on site to ensure the chemicals are being dispensed properly. If clothing or linen is damaged, inmates can request additional clothing or linen through an inmate request.
 3. Food services conducted a survey. Most of the women requested foods other than vegetables. DOCs meal plans follow all national standards and is certified by a registered dietician.
 4. The inmate population at the Correctional Facility has unlimited access to the kiosks to order commissary. Commissary orders are processed on Monday morning no later than IOam by Inmate Finance. The Office of Contract Administration receives an Out of Stock Report on a day-to-day basis. Items are taken out of the kiosks daily and put back on the kiosks daily. Due to COVID-19, there has been some issue with items being available and in stock. Keefe Commissary has been working to ensure that all items are in stock. DOC is working with Keefe Commissary to replace items when we know that those items will be out of stock for more than 6 months.

Education and Programming

- Thirty-four of the forty-seven women at CTF have achieved a GED, High School diploma, or greater (Appendix G).
- There is exercise equipment on the Women’s Wellness Unit, as well as empty rooms that can be used for mental health counseling and programming.
- Programming is available via tablets, and the schedule of programs is posted on the units.
- Residents stated they started having trouble with the tablets two weeks prior to the date of the CIC’ visit, corresponding with the date that facial recognition software on the tablets was installed.
- On E2B, there is a computer lab with four computers. At the time of the visit, three were working. The computers are used for playing games and making legal contacts.
- There is a library stocked with movies, games, and books.
- Four women are enrolled in the six-week culinary class. The class is conducted from 8:30-10:00 A.M., Monday through Thursday.
- The CIC met with four residents with limited English skills: two spoke Spanish and two spoke other languages. One native English-speaking resident served as interpreter for the women who spoke Spanish.
- Several women noted that case management is not responding in a timely manner and that the case manager is rarely on the unit. DC DOC acknowledged a current shortage of case managers.
- Residents reported that recreation is “inconsistent” and “never guaranteed”.
- Residents stated that they are using “rec time” to attend to vital tasks such as medical care, subsequently resulting in less free recreational time.

DOC Response to Education and Programming Findings:

1. The issue with logging in to the tablets has been resolved by American Prison Data System (APDS) the educational tablet provider. Both DOC and APDS have confirmed the fix and there have been no

additional issues reported.

2. As of July, 2022, all computers are working properly, however there is no internet connection on those computers, therefore legal calls and contacts cannot be made.
3. DOC acknowledged a current shortage of case managers and is working to fill vacant case manager positions, which will enhance timely responses to all case management services.
4. Out of cell recreation occurs daily. The outdoor recreation schedule occurs Monday through Friday, weather permitting. The outdoor recreation schedule is posted in each housing unit.
5. Out of cell recreation is provided, however, when a resident is off unit i.e. court, school, visits, or medical appointments, the amount of out of cell recreation time can be affected when the residents returns to their unit.

Health Services

- Residents indicated they have full access to medical care, mental health care, and dental care. Feedback about access to gynecological care and mammograms was mixed (Appendix H).
- Six of the survey participants indicated they were satisfied or very satisfied with the medical care (Appendix I).
- Residents noted that transport to medical is often very slow.
- Medical staff coordinate care with external providers when necessary.
- Medical Director, Dr. Beth Jordan, stated that access to mammograms is dependent upon age, family history, and medical history. For the most part, residents receive a mammogram after one year of incarceration.
- Dr. Jordan stated that the medical facility at CTF can perform ultrasounds.

DOC Response Health Services Findings:

Need more specifics to address. Medical has not reported any missed appointments due to late medical escorts.

Staff Interactions and Disciplinary Process

- Eight residents reported staff harassment or abuse.
- Several residents spoke about aggressive behavior of female staff, including pushing and kicking.
- Several women feel disrespected when they are required to request permission to shower, which does not require staff notification. Several residents stated that it is a form of intimidation.
- Three residents reported sexual abuse or sexual harassment to the DC DOC administration. Two of the complaints were against female officers.
- Three residents reported harassment or abuse by another inmate.
- Residents stated that case managers are “apathetic” and “disconnected”.
- Sixteen of the respondents said that disciplinary decisions at CTF by the unit staff are not fair.
- Twelve of the respondents said that disciplinary decisions at CTF by administration are not fair.

DOC Response to Staff Interaction and Disciplinary Process Findings:

1. DOC requires additional information to fully address. However, DOC takes all reported allegations of assault seriously. DOC prevents, detects, responds to, investigates, and supports the prosecution of all abuse within all facilities operated by the agency. Inmates may report to any DOC staff person,

- volunteer, or contractor, submit a written complaint or emergency grievance if in imminent danger.
2. DOC requires additional information to address. Showers are available during out of cell time. Those times are regulated to ensure all inmates have the opportunity to engage in out of cell activities.
 3. DOC requires additional information to address. All reported allegations of assaults are taken seriously. All reported allegations are investigated. The DOC has Prison Rape Elimination Act (PREA), posters in all housing units and throughout the facility and encourages all inmates to report sexual assault or abuse. The post includes a confidential number an inmate may call to report, or other methods of reporting allegations of sexual abuse of harassment include telling a staff member, any staff member, submitting a grievance or documenting on any piece of paper. All inmates are provided this information verbally and in writing at intake. All staff are trained to report all allegations, and DOC Office of Investigative Services (OIS) is responsible for conducting all administrative investigations of sexual assault, abuse and misconduct made by inmates, arrestees and residents and for tracking all criminal investigations with law enforcement. DOC's PREA Coordinator is responsible for the development, implementation, and oversight of DOC's plan to comply with the PREA standards, ensure the completion of the PREA standards, monitor DOC training programs to ensure they comply with PREA training standards, monitor inmate, arrestee, and resident screening procedures, investigations, and medical and mental health treatment according to the PREA standards, supervise DOC's PREA data collection, and provide appropriate access and materials to auditors.
 4. DOC requires additional information to address. All reported allegations of harassment or abuse are taken seriously. All reported allegations are investigated. Inmates may report to any DOC staff person, volunteer, or contractor, submit a written complaint or emergency grievance if in imminent danger.
 5. This statement is subjective; however, DOC case managers are trained professionals who take pride in providing and addressing unique individual case management needs for all the residents. Their actions are driven by policies and carried out with integrity. DOC acknowledged a current shortage of case managers and is working to fill vacant case manager positions that will enhance timely responses to all case management services. The hiring of additional case managers will mitigate possible fatigue and any untimely responsiveness.
 6. DOC requires additional information to address. DOC follows its Inmate Disciplinary and Administrative Housing Hearing Procedures policy when implementing inmate discipline. All reported allegations are investigated. Inmates submit a written grievance to report issues with DOC staff.
 7. DOC requires additional information to address. DOC follows its Inmate Disciplinary and Administrative Housing Hearing Procedures policy when implementing inmate discipline.

Grievances (Administrative Remedy) Process

- Residents must ask staff for grievance forms rather than the forms being freely available in the information area on the unit. CTF staff indicated that this change was to prevent residents from using the grievance forms as scrap paper.
- Sick call slips and inmate request slips are available freely on the unit.
- When filing a grievance form using the tablets, residents are unable to retain a copy.
- Seventeen survey respondents used the grievance process at CTF. The most common reason for filing a grievance was "staff".
- Nine of the seventeen who indicated using the grievance process reported receiving a response to their grievance.
- Two out of seventeen women who filed grievances indicated that the response to their grievance was timely.

DOC Response to Grievances (Administrative Remedy) Process Findings:

1. The housing unit officers keep additional forms available when depleted. The Grievance Coordinator collects, and places forms on each unit, Monday through Friday.
2. The IGP Coordinator gives the resident a copy of the electronically submitted grievance when the grievance has been responded to and returned back to them.
3. Any allegation against staff members is investigated, and if it is founded and disciplinary action is needed, it is taken. DOC takes all grievances seriously.

Special Housing Unit

- Thirteen of the twenty-five survey respondents served time in the SHU at least once. All the women who served time in the SHU indicated they were there less than three months. Six of the women who served time in the SHU were in SHU for less than a month.
- Of the thirteen women who served time in the SHU, four noted the absence of showers, library/reading materials, writing materials, visitation, and grievance forms while in the SHU.

DOC Response to Special Housing Findings:

1. DOC requires additional information to address, DOC follows its Inmate Disciplinary and Administrative Housing Hearing Procedures policy when implementing inmate discipline.
2. DOC requires additional information to address. DOC follows its Inmate Disciplinary and Administrative Housing Hearing Procedures policy when implementing inmate discipline. Inmates on disciplinary restrictive housing may lose privileges such as social visits, and social phone calls. Inmates on restrictive housing can request via a request inmate request sheet reading materials and writing materials (so long as there are no additional restrictions). Inmates in administrative restrictive housing have access to programs and services that include, but are not limited to educational services, commissary services with restrictive housing limitations, law/library services on the unit, social services and counseling services, religious guidance, recreational programs, telephone access, access to legal visits, and access to legal visits. All inmates on restrictive housing units receive at least two hours of out of cell time Monday-Friday. During their out of cell time, inmates may use the telephone, watch television, and use the showers.

Transitional Planning

- Eight of the twenty-five women surveyed participated in programs focused on reentry or pre-release preparation.
- Sixteen of the women surveyed said they received information about re-entry resources in the community.
- Eight of the women surveyed said they received information that may be helpful in transitioning to the BOP.

Recommendations

- Renovate/revitalize showers which smell of mold and mildew.
- Continue programming via tablets while expanding in-person programming, including proposed classes on horticulture and music therapy.
- Develop consistent recreation schedules for inmates. If COVID presents scheduling obstacles, then residents should have increased access to exercise equipment.
- Increase case management staff and have case managers respond in a timely manner.
- Explore ways to expand out of cell time that does not include attending vital appointments.
- Increase Language Access practices and staff education regarding how to communicate with non-English proficient and limited English proficient residents.
- Provide writing materials, including envelopes, to women who want to communicate with their families and loved ones.
- Continue providing medical care that consults and coordinates with outside providers when appropriate.

DOC Response to Hygiene, Meals, and Commissary Recommendation:

1. DOC maintains the following protocols for the daily cleaning/sanitizing of unit showers.
 - a. Regularly inspect the showers for water damage;
 - b. Regularly inspecting the showers for biological contamination;
 - c. Respond to all reports concerning sanitation; and
 - d. Reduce staff and resident exposures to biological hazards via closing areas where biological hazards have been confirmed. Following confirmation, remediation/abatement is completed in showers that have confirmed biological hazards.

The same protocol listed above will apply to renovated/revitalized showers.

DOC is in the procurement process for upgrading the showers. This is an ongoing effort.

DOC Response to Education and Programming Recommendations:

1. The Division of College and Career Readiness provides GED, Postsecondary Education, Career and Technical Education and other general educational programming in person. There are also over 600 courses/programs on the education tablets for residents. The Programs and Case Management team has also continued tablet programming and has begun in person programming on the Women's Unit(s), Transition Assistance Programming (TAP) and RSAT Units.

DOC Response to Health Services Recommendations:

1. Medical will continue providing care in consultation with offsite providers based on referrals from in-house providers as needed.

DOC Response to Special Housing Recommendation:

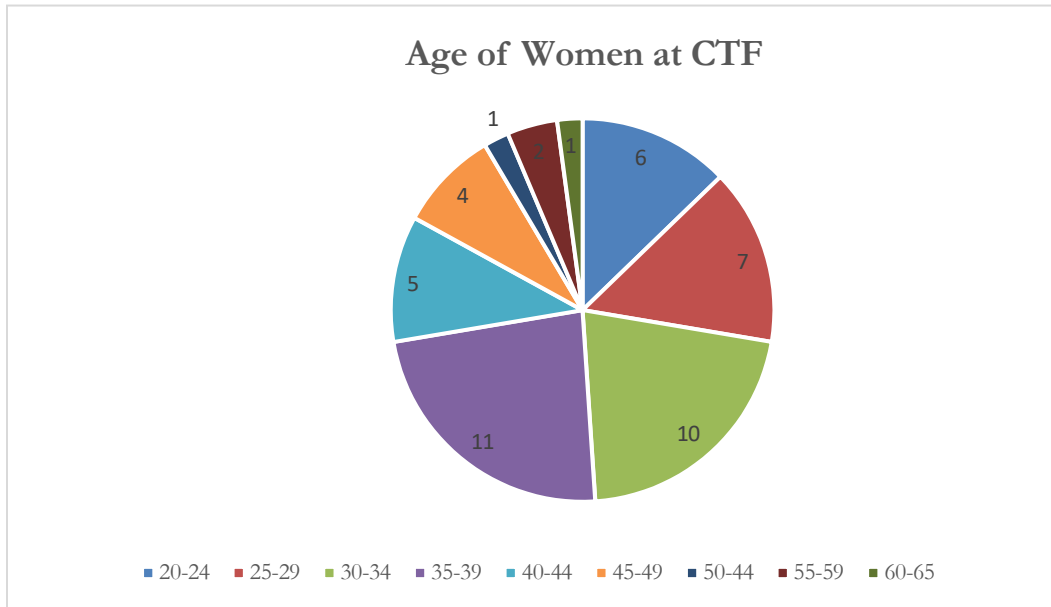
1. Items available in commissary or if the inmate is indigent the inmate may request these items from the law library.

DOC Response to Additional Recommendations:

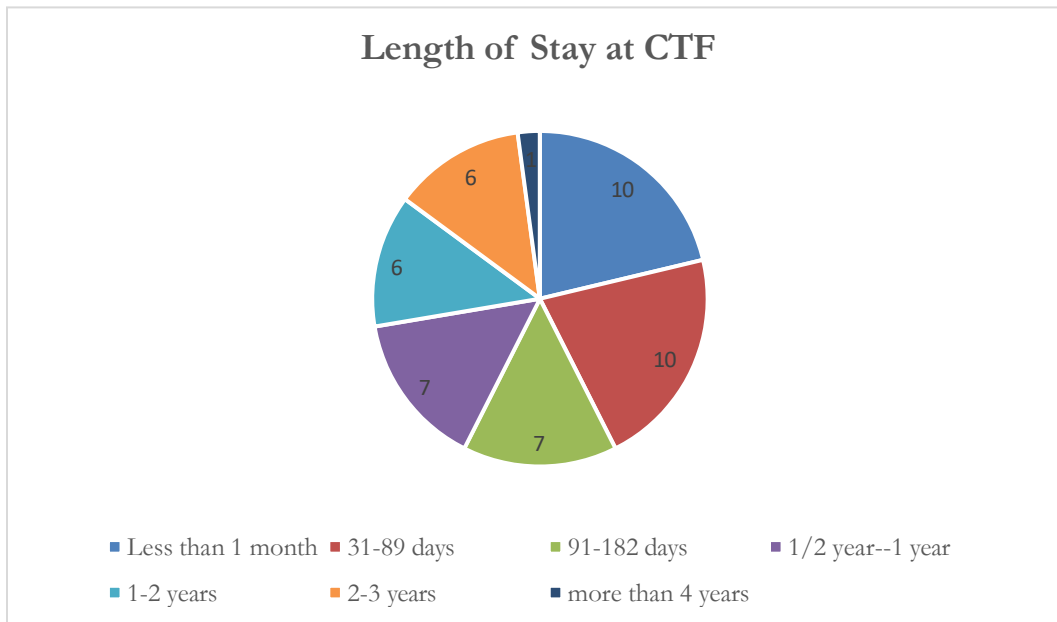
1. DOC has a Monday-Friday outdoor recreation schedule posted in each housing unit. Out of cell recreation occurs on units. Exercise equipment is available on most female units.
2. DOC acknowledged a current shortage of case managers and is working to fill vacant case manager positions that will enhance timely responses to all case management services.
3. Out of cell time includes any activity that occurs while the inmate is not in their cell including using the telephone, watching television, reading, playing board games, recreational activities and use of the showers.
4. 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. Accurate signage is displayed in all units. Designated staff will ensure all signage is updated as needed.

Appendix

Appendix A: Age of Women at CTF ⁴



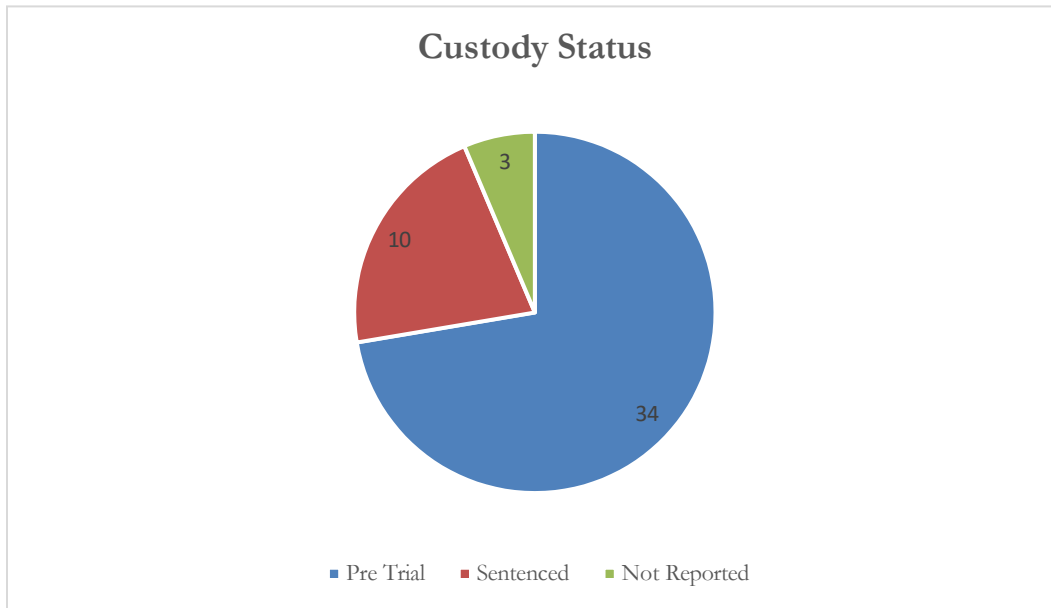
Appendix B: Length of Stay at CTF ⁵



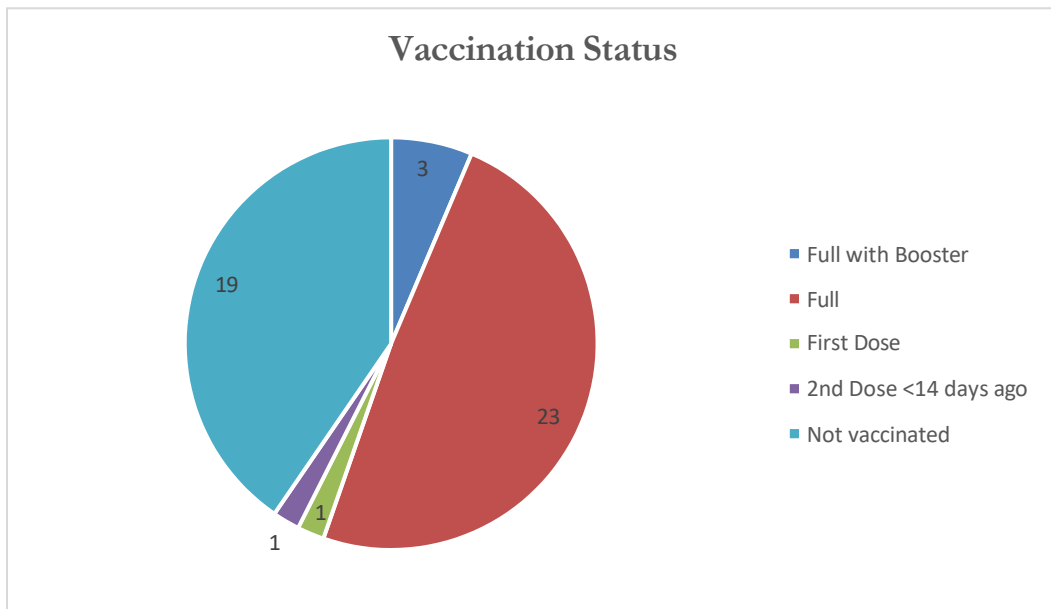
⁴ Data in Appendices A-G comes from statistical information given to the CIC from the DOC concerning the 47 women housed at CTF on May 17, 2022.

⁵ Ibi

Appendix C: Custody Status ⁶



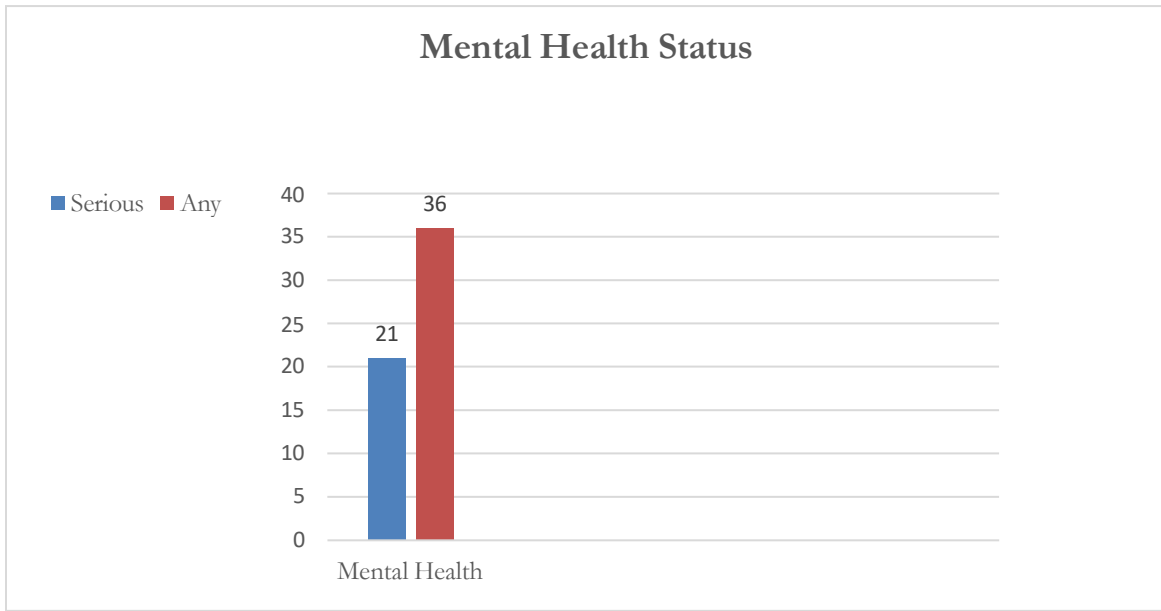
Appendix D: Vaccination Status ⁷



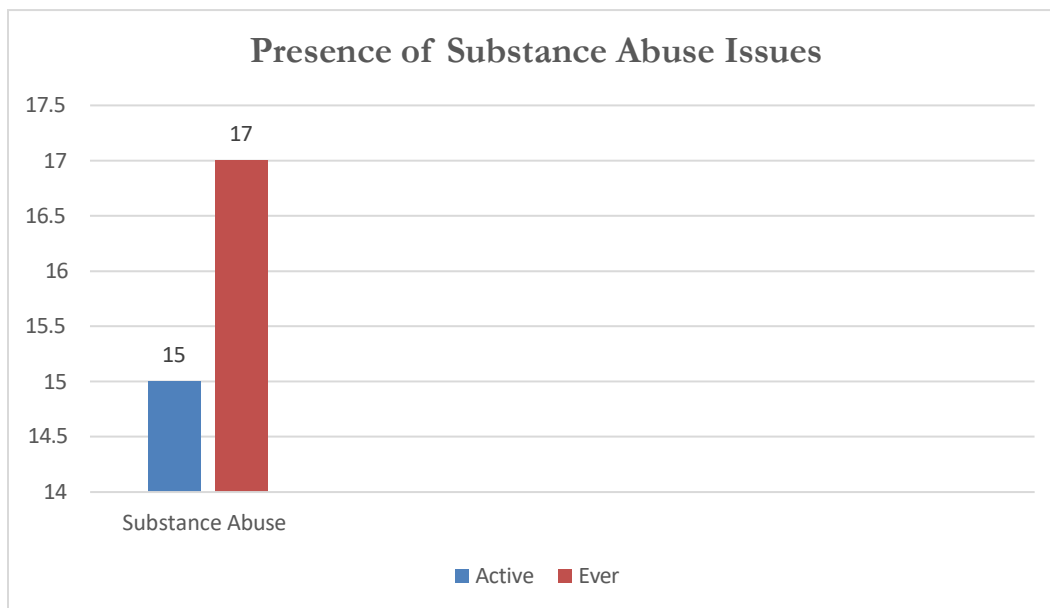
⁶ Ibid.

⁷ Ibid.

Appendix E: Mental Health Status ⁸



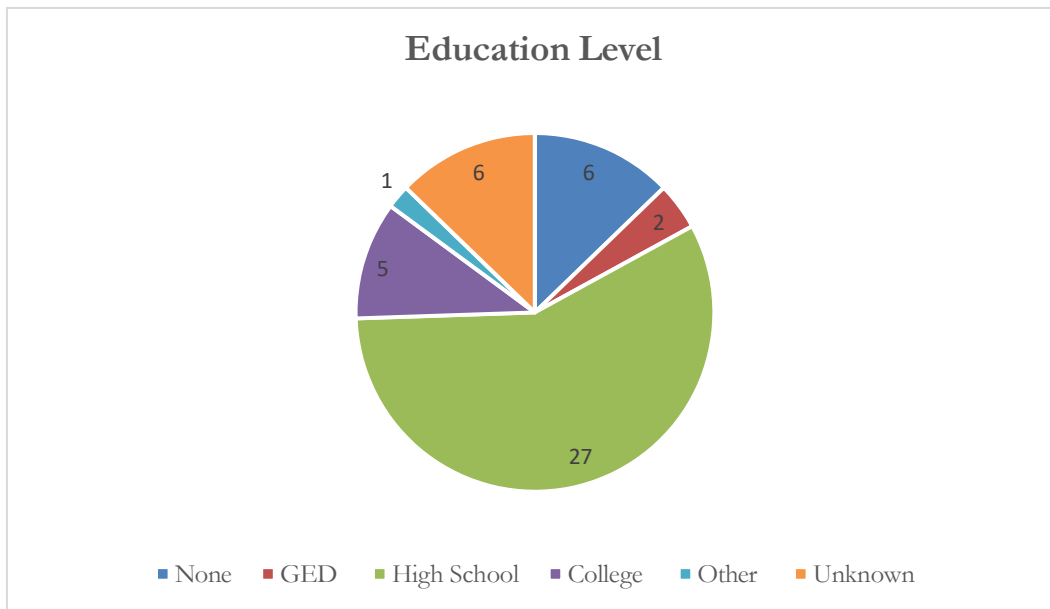
Appendix F: Presence of Substance Abuse Issues ⁹



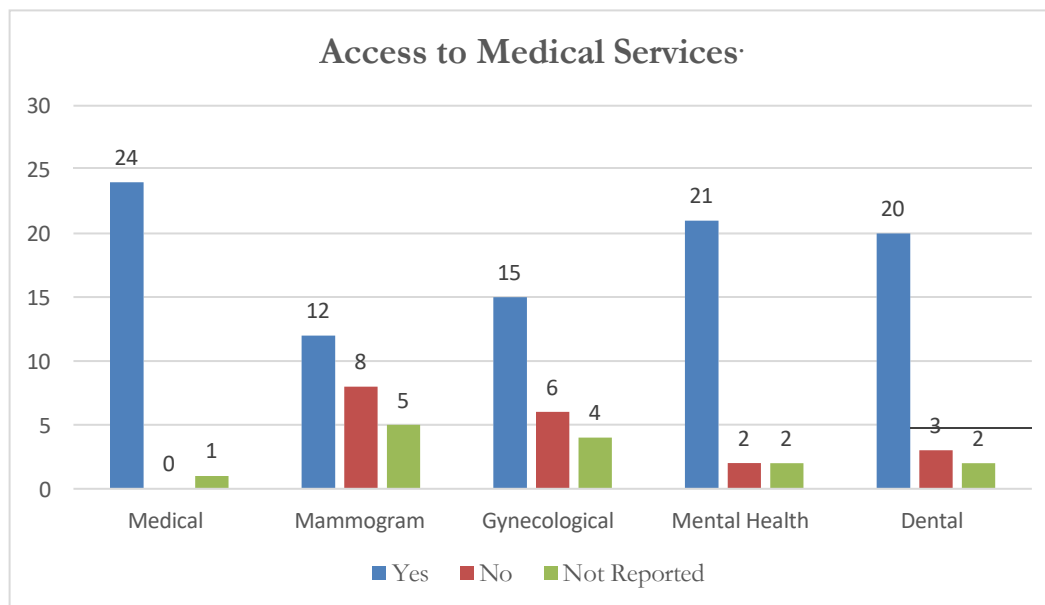
⁸ Ibid.

⁹ Ibid.

Appendix G: Education Level¹⁰



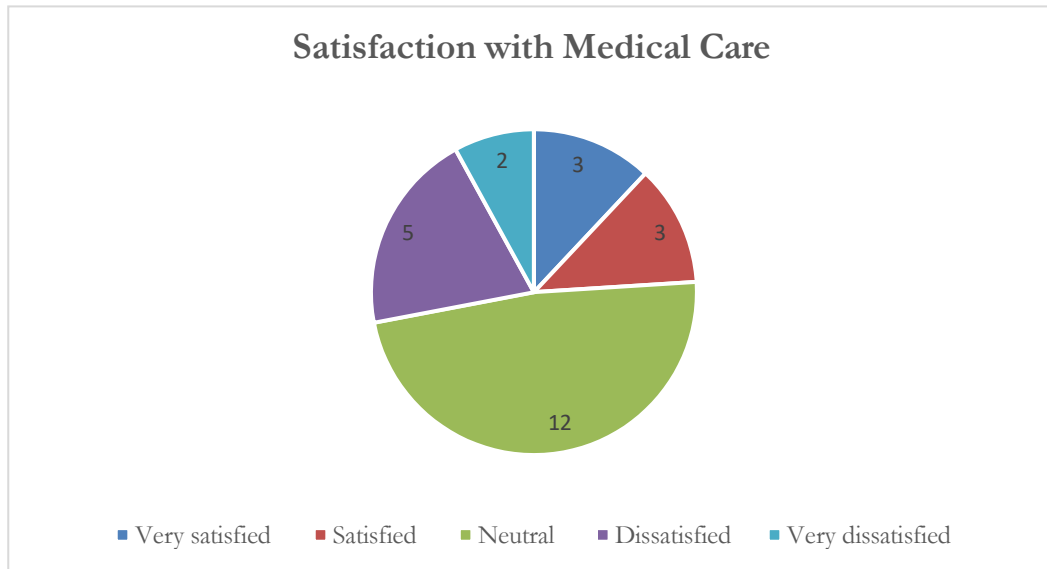
Appendix H: Access to Medical Services¹¹



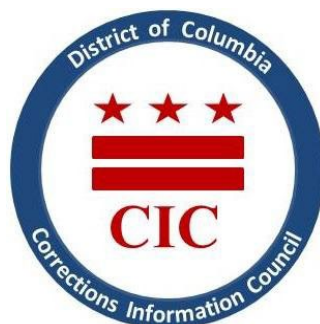
¹⁰ Ibid.

¹¹ Data in Appendices H and I comes from the 25 survey respondents from the CIC's visits on May 17 and May 18, 2022

Appendix I: Satisfaction with Medical Care¹²



¹² Ibid.



¹² Ibid.