GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CORRECTIONS

April 3, 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 Central Detention Facility (CDF) and Correctional Treatment Facility (CTF) on December 10, 2025, and the Central Cell Block (CCB) on December 12, 2025.

DOC appreciates our ongoing partnership with CIC whereby we look both to seek improved circumstance and outcomes for District of Columbia inmates returning to the community.

As you are aware, DOC is frequently audited and/or inspected by several agencies, such as the American Correctional Association and the National Commission on Correctional Health Care, and these agencies use measurable standards that DOC is familiar with to ensure we are compliant with the standards/regulations that will be used to audit our facilities. Therefore, using a standardized recognized instrument will allow DOC to understand CIC standards and further know what to expect from CIC as an inspecting body. We continue to encourage CIC to draft or implement recognizable standards to ensure that DOC is able to appropriately ensure compliance or respond to inquiries.

In addition, DOC has implemented several significant improvements during 2025–2026 that strengthen safety, living conditions, health services, and operational efficiency across our facilities. Recent projects include:

- **CDF Housing Unit Renovation:**
  Renovated selected units with improved lighting, refreshed paint, new cell doors, and upgraded shower facilities to enhance sanitation and livability.
- **CTF Sink and Shower Renovation:**
  Completed renovations of the sink and showers for all units in the C & D building at CTF, and with two remaining housing units to complete at the E building.
- **Security Camera and IT Infrastructure Upgrade:**
  Installed high-resolution cameras, updated recording technology, and improved network reliability across CDF and CTF.

- **iCARE Program**

  Piloting the iCare program by Aramark on select housing units allows families to send meals to loved ones within the DOC facilities.

These initiatives reflect DOC's continued investment in facility updates, resident well-being, and the safe and effective operation of our institutions.

We hope that this information is responsive to your observations. Should you require any additional information or further clarification regarding our submission, please contact me at (202) 673-7316.

Sincerely,

Thomas Faust
Director

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

CIC Findings, Recommendations and DOC Responses:

1. *NO1 -There was a flood on the bottom right tier that came from the top tier showers.*
   DOC Response:
   Work orders were generated and completed to address these issues. The showers were unclogged, and the showerheads and handles were replaced.

2. *NO1 - Some residents communicated that the staff was not responding to their grievances.*
   DOC Response:
   As March 4, 2026, there are no outstanding grievances for North 1 housing unit. The IGP team has completed a review of the grievance responses for the past 90 days to ensure that residents have received a written response to their grievances.

Month	Closed NO-1 Grievances	Non- Grievable	Pending
December	5	2	0
January	1	8	0
February	1	15	5

   Except for the 5 pending grievances due this week, all of the closed and non-grievable grievance decisions were delivered to DOC residents.

3. *NW2- Residents communicated that they have not been allowed haircuts in three months.*
   DOC Response:
   This statement is inaccurate. NW2 residents received haircuts in September 2025, October 2025, and December 2025. The barber schedule is currently also in compliance, as residents in NW2 received haircuts in January 2026 and February 2026, following the visit by CIC. Please note that schedules may be adjusted as needed for security reasons.

4. *NW2- Residents communicated that the housing unit has been locked down every Wednesday for reasons unknown to them.*
   DOC Response:
   In December 2025, some housing areas were placed on lockdown on Wednesdays to support housing-unit movement. While this practice is no longer in effect, some units may still be placed on modified recreation status or lockdown when necessary to maintain safety and security. During these periods, Operations will assign a captain or designated supervisor to communicate directly with the housing-unit population regarding the status of daily activities, expected restrictions, and any operational updates.

5. *NW2- Residents communicated that their linen returns soiled after being washed.*
DOC Response:
Each unit follows a scheduled laundry schedule. A review of the laundry process was conducted, including wash temperatures, detergent levels, and machine performance, and no issues were identified. Staff have also increased quality checks before linens are redistributed to the population. Residents may report any linen discrepancies to an officer, who will inspect the items and provide replacements as appropriate.

6. *SW2- Residents mentioned that they receive one roll of toilet paper each Wednesday and Sunday, but it's not enough.*
DOC Response:
Each resident receives one roll of toilet paper twice per week. Additional toilet paper may be requested from the housing unit officer.

7. *SW2- Residents stated that the housing unit has been locked down every Sunday during the past four months for reasons unknown to them.*
DOC Response:
This statement is inaccurate. The housing unit has not been locked down every Sunday during the past four months as alleged. However, housing unit lockdowns may occur when necessary to maintain the safety and security of the facility.

8. *SW2- Residents complained that two hours on the law library tablet is not enough time, especially considering that you must wait twenty-four hours before using it again.*
DOC Response:
On October 30, 2025, ViaPath updated its tablet settings to provide all users 24/7 access to the electronic law library. DOC has notified all residents of this change and has also reported this change to the CIC in our last report.

9. *SW2- Residents reported that the Wi-Fi is inconsistent, which results in shortened calls and visitation on tablets.*
DOC Response:
ViaPath engineers confirmed that the Wi-Fi access points are functioning correctly. ViaPath will continue to monitor service and promptly address any reported issues.

10. *SW2- Residents communicated that only two out of five visiting screens in the unit are working, and even though tablets have visitation, the residents must pay sixteen cents per minute on them.*
DOC Response:
All five video visitation station monitors on SW2 are currently working. VVS monitors are legacy systems that are increasingly difficult to maintain and repair. ViaPath, DOC contracted vendor, continues to monitor the devices for operability and we encourage residents to use the video communication features available through the ViaPath tablets. Each resident is provided 30 minutes of free video communication through the tablets each week.

11. *NW3- The CIC went to Northwest 3 to visit with a resident, and subsequently observed what appeared to be mold growing in the cell. At the same time, other residents*

communicated that there was mold in their cells. Further observation revealed that there were multiple cells where residents were housed with what appeared to be mold. The CIC informed DOC staff, and they relocated those residents to other cells and housing units.

DOC Response:

All housing units and cells undergo routine inspections to ensure they meet health and safety standards. As part of these procedures, all cells were inspected for mold, and any areas where mold was identified were immediately cleaned, treated, and prepared for safe reoccupation.

DOC maintains a clear protocol for addressing environmental concerns. When residents or staff report suspected mold or other environmental hazards, the concern is promptly referred to the designated Facilities staff member. That individual conducts a formal inspection, documents all findings, and ensures that any mold is properly abated in accordance with safety guidelines and environmental health standards.

DOC remains committed to maintaining a clean and safe environment for both the inmate population and staff. Routine inspections are conducted to identify any hazards, and all findings are forwarded to the appropriate department for timely abatement.

12. *NW3- The right side of the unit was vacant and cordoned off for renovations.*

DOC Response:

Maintenance was managing a project in NW1 that required the water to be turned off in designated areas of upper-level units, to include NW3. The project was completed on December 22, 2025.

13. *NW3- The CIC inquired about the mold remediation team and whether they had previously inspected the cells in this unit; however, the DOC staff did not have an answer.*

DOC Response:

Cells in NW3 are routinely inspected for various issues, including mold. Whenever residents or staff suspect the presence of mold, those concerns are referred to the appropriate staff member for inspection and if needed, abatement.

14. *E1B- The women in this unit communicated that they would like to have in-person programming within the unit, but currently there is none.*

DOC Response:

The following in-person groups are currently offered on the E1B housing unit: Trauma Support, the STAND Program, and Parenting Classes. Captivate Workforce Development workshop sessions are scheduled to begin in late March or early April. In addition, residents on all housing units have access to in-person programming at CTF through our Education Department, including apprenticeships, industry-recognized certifications, post-secondary credit-bearing and non-credit courses, parenting groups, the Debate Team, and Thinking for a Change (T4C), all of which are conducted in person.

15. *D3A- There were several residents who had medical equipment in their cells (authorized by the medical department). These gentlemen applauded medical services for attending to their medical needs, but other residents said the medical services could be better because they are not attentive.*

DOC Response:

Unity Healthcare provides several avenues for residents to access medical care, including regular sick call, chronic care appointments, and urgent care services. Medical equipment is ordered based on the patient's clinical needs. When equipment is available on site—such as canes, crutches, or wheelchairs—it is issued immediately. If an item must be ordered, it is provided to the patient upon receipt, typically within two weeks or sooner, unless the item is on backorder.

16. *D3A- Residents said that they feel there is a lack of processing and referrals for reentry needs related to homelessness and substance abuse.*
DOC Response:
The READY Center Outreach Team provides reentry outreach, linkages, and referrals to all residents who have an upcoming release date—7, 15, 30, 60, and 90 days out—regardless of the housing unit the resident is assigned to. A town hall meeting will be conducted on D3A by the READY Center Outreach Team to address any questions or concerns related to reentry linkages and referrals.

17. *D4A- Residents communicated that there are no ladders in the cells to help them get to the top bunk, and that it is difficult to climb from the bottom to the top without risk of injury.*
DOC Response:
DOC has established procedures to ensure that individuals with medical conditions affecting their ability to safely access a top bunk receive appropriate accommodations. Incarcerated individuals who believe they require a bottom bunk due to a medical condition may submit a request directly to Medical.

Upon receiving the request, medical staff conduct an assessment of the individual's condition and make a clinical determination. If medically justified, a bottom-bunk pass is issued, and housing staff ensure the resident is reassigned accordingly. This process ensures that bunk assignments are based on verified medical need and that residents receive safe and appropriate housing accommodations.

18. *D4A- Residents communicated that there is not much in-person programming for them on this unit. They also reported that there are not many options for them to get information about job opportunities and reentry opportunities, which they feel is due to their age.*
DOC Response:
Residents in all housing units have access to in-person programming at the CTF through our Education Department, including apprenticeships, industry certifications, and post-secondary credit-bearing and non-credit courses. Additional programming includes parenting groups, the debate team, and Thinking for a Change.

The DC Department of Aging and Community Living began facilitating bi-monthly unit-based meetings in January 2026 to provide information on reentry services and programs available to residents ages 50 and older.

In addition, the READY Center Outreach Team will conduct a town hall meeting with residents on the D4A housing unit.

19. *CCB- There were eight cells that required maintenance.*
DOC Response:
Work orders were submitted to DGS for cell maintenance and repair. Seven of the eight cells were repaired. Cell 17 remains offline pending DGS repair.

20. *CCB- There were two power outages recorded in the medical area. This did not affect the entire CCB facility - only the medical area, due to the use of additional heaters.*
DOC Response:
The electrical issues were repaired on October 20, 2025. The power outage was fully resolved prior to the CIC's visit in December 2025. This information was reported to the CIC by the medical provider.

CIC Recommendations

1- The DOC mold remediation team needs to inspect the areas where there are complaints of mold, and no residents should be housed in cells where mold is present.
DOC Response:
DOC has established and documented processes to routinely inspect all housing areas for the presence of mold. When a cell is suspected of having mold, the resident is immediately relocated to another housing unit to ensure their safety and well-being.

The suspected cell is then inspected by trained facilities staff, who assess the extent of the issue. If mold is confirmed, the cell undergoes full remediation and proper abatement in accordance with environmental health standards. The cell is not returned to service until all corrective actions have been completed and the area has been cleared for safe occupancy.

No resident is housed in a cell identified as having mold. A cell may be reoccupied only after the issue has been fully addressed and the space has been deemed safe.

2- The DOC should implement a system to provide unlimited access to the law library on the tablets.
DOC Response:
Effective October 30, 2025, DOC collaborated with ViaPath to remove the previous two-hour daily cap on access to the law library application. Residents now have unlimited, 24-hour-a-day access to the law library app on their tablets. This information was reported to CIC in our December 2025 report. Notification of this change was sent to all residents via the tablets on April 2, 2026.

In addition to digital access, residents may continue to submit manual request slips to the law librarian. The law librarian is available Monday through Friday to provide printed legal documents, case law, and other requested materials. This dual-access model ensures that all residents—regardless of digital proficiency or tablet availability—can obtain the legal information they need.

3- In the 50 and older unit, consider placing a mechanism in the cells to assist residents with climbing onto the top bunk.

DOC Response:
DOC is not aware of any safe, practical mechanisms –other than ladders- that would assist residents to accessing top bunks. The use of ladders, however, poses significant health and safety risk to both residents and staff. These risks include the potential for falls, the possibility of ladders being used as escape tools, and their misuse as weapons against staff or other residents. DOC continues to encourage the CIC to become familiar with best practices within a correctional environment before making recommendations of this nature.

DOC has established procedures to ensure that individuals with medical conditions affecting their ability to safely access a top bunk receive appropriate accommodations. Residents who believe they require a bottom bunk due to a medical condition may submit a request directly to our medical provider.

Upon receiving the request, medical staff conduct an assessment of the individual's condition and make a clinical determination. If medically justified, a bottom bunk pass is issued, and housing staff ensure the resident is reassigned accordingly. This process ensures that bunk assignments are based on verified medical needs and that residents receive safe and appropriate housing accommodations.

4- Consider ways to make in-person programming available to the female population units that lack it.

DOC Response:
DOC continues to work diligently to expand in-person programming opportunities for female residents. DOC would like to note that several in-person programs offered off the unit are available to female residents; however, participation remains voluntary, and some residents choose not to enroll for various reasons.

Providing on-unit programming remains challenging when the unit includes general population residents who are not required to participate in unit-based programming. Nonetheless, DOC continues to make programming offerings still available to select general population female housing units to ensure access and opportunity for engagement.