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 correctional facilities where people 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 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 inmates, corrections staff not in leadership, and members of the general public will be kept anonymous and confidential.

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Facility Demographics

During the CIC’s visit in June 2021, 137 inmates were DC code offenders. The total census at FCI Cumberland was 1,120 with the 137 DC residents comprising 12.2% of the population. FCI Cumberland has a rated capacity of 1,024. The current census of 1,120 places FCI Cumberland at almost 10% over capacity.

Of the 1,120 people at FCI Cumberland, 508 (45.4%) are incarcerated for drug offenses. In contrast, less than one percent (1%) of DC code offenders are there for drug offenses. The majority of DC code offenders (55%) are serving time for homicide or aggravated assault.

Twenty-seven percent (27%) of DC people who are currently incarcerated at FCI Cumberland are serving life sentences. Of the 58 people at FCI Cumberland serving life sentences, 30 are from DC. Thus, more than half of the people serving life sentences are from DC even though DC residents comprise 13% of the population.

Ten percent of the population of FCI Cumberland is over the age of 55. Twenty-five percent of the DC population at FCI Cumberland is over the age of 55.

Age Distribution of DC Residents by Decade

The age distribution of people from DC who spoke with CIC staff during the site visit and responded to the survey was older than the BOP population at FCI Cumberland.

Age Distribution of DC Survey Respondents by Decade
Many are serving significant time, including 26 people who had served more than 20 years. Thirty of the 111 (27%) of the DC people are serving a life sentence. In addition to the thirty men serving life sentences, 63 (56.7%) are serving 10 years or more. Of that number, 21 people (19%) are serving 15 years or more.

Twenty six of the 61 people who completed the survey have already served more than 20 years. 20 of the respondents have already spent six or more years at Cumberland.

Length of Sentence
I. Introduction

Federal Correctional Institution Cumberland (FCI Cumberland) is a medium security federal prison facility for adult males located in Cumberland, Maryland. FCI Cumberland is approximately 139 miles from Washington, DC. The CIC conducted an inspection of FCI Cumberland June 8-9, 2021.

The BOP indicated that the current staff to inmate ratio is one staff member to every four inmates. Significant vacancies at the time of the site visit included two lieutenants, four correctional officers, two staff psychologists, a clinical nurse, the Drug Abuse Program Coordinator, and the Supervisor of Education.

The CIC toured the facility escorted by members of the executive staff. CIC spoke with facility staff and conducted confidential interviews with 61 DC residents.

The CIC previously conducted an on-site visit to FCI Cumberland on December 5, 2014, and held interviews with 24 of 173 DC residents.
The CIC recommends the BOP take the following actions to address concerns raised by DC residents:

**Recommendation 1:** Determine program eligibility based on the earliest possible release date rather than the maximum possible sentence.

**Recommendation 2:** Develop additional programming and college level classes that assist with job readiness, including people who are serving extended and life sentences.

**Recommendation 3:** Fully explore why 10 people have not yet achieved their GED and offer supports so they are able to complete it.

**Recommendation 4:** Communicate with people who are currently incarcerated in a respectful manner when relaying medical information and provide them with full explanations of changes in medication and medical treatment.

**Recommendation 5:** Provide effective staff training at least once per year about interpersonal interactions and cultural competence, and forward training materials and documentation of effectiveness to the CIC.

**Recommendation 6:** Review conditions of confinement in the SHU to ensure compliance with program statements and standards.
III. Programming

The DC residents at FCI Cumberland are generally older and have already served significant time. Many stated that the current programming offerings are not relevant to them. Several respondents noted that the vocational educational services were worthwhile; however, no detailed information was provided about participation rates by DC residents.

Eight respondents to the survey said that they were not deemed eligible for program participation based on their sentence. DC people who are currently incarcerated sentenced for a crime committed before 2000 are given an indeterminate sentence that includes a “front number” and “back number” (e.g., 10 to 30 years, or 25 to life). These individuals become parole eligible on their “front number” date, and most are released before reaching their “back number.” They want program eligibility based on their front number.

Education

In responding to the questions about education, 37 of the 61¹ men said it was available, 23 said they found it helpful, and 20 said they would like more educational programming. Providing education and programming opportunities will ensure that individuals are released from incarceration with the training and release preparation required for a successful return to their community.

There may be great interest and enrollment in college courses if such courses were offered at FCI Cumberland. Of the 61 respondents to the survey, 22 achieved their GED or High School Diploma before incarceration, and 18 completed their GED while incarcerated. Therefore, there are at least 40 men who are eligible and perhaps interested in college courses—none of which are currently offered at FCI Cumberland. The prior CIC report states, “staff note they are looking to expand college opportunities for inmates”²; however, during the 2021 site visit, there was no mention of any relationship with Allegany College or any institution of higher education. The prior report also noted the existence of classes for computer skills using Microsoft Office, but current residents described a lack of computers to learn technology skills. Several respondents commented on the need for access to computers so they can secure and maintain employment upon release.

There may be a need for Adult Basic Education (ABE) or accommodations for students with special needs, including learning disabilities. Ten survey respondents indicated that they have not completed their GED. Considering the average length of sentence of DC residents in Cumberland, it is likely that these men were enrolled in the GED program at some point. Bureau of Prisons Policy §5350.28 Purpose and Scope states:

Except as provided for in §544.71, an inmate confined in a federal institution who does not have a verified General Educational Development (GED) credential or high school

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¹ Sixty one men responded to the survey; however, not all respondents provided answers to every question. The number of respondents to questions is noted when it varies from the 61.
diploma is required to attend an adult literacy program for a minimum of 240 instructional hours or until a GED is achieved, whichever occurs first.³

Rather than providing additional educational supports for people who require special education services, the policy states:

Inmates who have been determined (on the basis of formal diagnostic assessment) to have a documented emotional, mental, or physical individual impediment to learning shall not be required to complete the literacy program beyond those achievement levels indicated as realistic by the formal diagnostic assessment. Staff shall document in the inmate's education file the specific reasons for not requiring the inmate to participate in, or to complete, the literacy program.⁴

None of the respondents offered feedback or suggestions about current educational programs other than noting the desire for more classes, especially for people who are serving life and extended sentences.

Recommendation: Determine program eligibility based on the earliest possible release date rather than the maximum possible sentence.

Response from Bureau of Prisons: FCI Cumberland offers programming equitably to all inmates that meet eligibility requirements. Inmates on a wait list for a specific program are not denied participation based on their release date. The wait list is based on the time an inmate signed up for the program.

Recommendation: Develop additional programming and college level classes that assist with job readiness, including people who are serving extended and life sentences.

Response from Bureau of Prisons: FCI Cumberland continually works to develop and implement new programming to assist inmates with job readiness. FCI Cumberland actively seeks partnerships within the local community to enhance resource availability for offenders. Due to COVID-19 restrictions, developing a college partnership has been challenging. However, FCI Cumberland continues to foster relationships with local colleges and work to implement college course offerings. Opportunities are available for all inmates to participate in college correspondence classes.

Program recommendations are provided to inmates by staff. However, inmates bear the responsibility of enrolling, actively participating and completing any program offered. FCI Cumberland currently offers approximately 17 First Step Act (FSA) Programs, including apprenticeships in HVAC and Drywall. Equipment and materials have been purchased to offer a new General Construction Apprenticeship Program which will be offered in the coming

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³ Literacy Program (GED Standard) Program Statement 5350.28 dated 12/1/2003, page 1
⁴ Literacy Program (GED Standard) Program Statement 5350.28 dated 12/1/2003, page 8
months. FCI Cumberland also operates a UNICOR Factory providing offenders with tangible factory experience making signage.

Recommendation: Fully explore why 10 people have not yet achieved their GED and offer supports so they are able to complete it.

Response from the Bureau of Prisons: FCI Cumberland’s Education Department and Unit Team continuously monitor inmate progress toward educational requirements. Departmental staff develop plans and offer programming to inmates based on their individual need. The institution screens all inmates for characteristics of dyslexia and provides instruction for those with characteristics. FCI Cumberland has a Special Education Teacher who provides instruction for basic literacy and modifications, interventions, and accommodations for inmates in all classes. GED classes were suspended to mitigate the spread of COVID-19, by minimizing communal activities. The Education Department has resumed GED programming and testing. Without specific case information regarding ten inmates who have not earned their GED, the assessment provided by the CIC is anecdotal, and the BOP cannot thoroughly address these claims.

Faith-Based

In responding to the questions about faith-based programming, 43 men said it was available, 28 said they found it helpful, and 28 said they would like more faith-based programming. None said they would like less faith-based programming. None of the respondents made comments about religious services.

Life Skills

Twenty-five respondents said that life skills programming was available; 16 respondents identified the life skills programming as helpful. Residents were hopeful and 27 expressed a desire for more life skills programming. Several of the respondents offered positive comments about the helpfulness of vocational training.

Recreation

Forty-seven respondents said that recreation was available and that 38 noted it was helpful. Twenty-three residents expressed an interest in additional recreation opportunities. None of the respondents offered comments about recreation.

Mental Health

FCI Cumberland is classified as a Level 2 mental health facility; however, at the time of the site visit four DC residents indicated they required a higher level of mental health care. Less than half of the respondents (28 of 61) indicated that mental health services are available; and less than 20% of the respondents (12 of 61) noted that mental health programming was helpful. More than 36% (22 of 61) of the respondents noted that would like more mental health services.

Currently, two staff psychologist positions are vacant.
Twenty eight of the sixty-one (46%) respondents identified their level of mental health care as determined by the BOP. When asked about the quality of mental health care, 56% of the respondents indicated they were unsatisfied or very unsatisfied with the quality of mental health services; however, almost 50% of the respondents credited the timeliness of mental health services.

**Employment including UNICOR**

The UNICOR factory at FCI Cumberland produces license plates and signage for federal agencies, including the Department of Interior’s National Park Service and the Bureau of Prisons. No data is available to determine if employment in the FCI Cumberland facility led to improved chances of employment upon release.

Forty-one of the 61 respondents indicated that employment in the institution is available. Thirty-two respondents found that employment was helpful; however, only 21 of the respondents stated they would like more employment. Similarly, 38 respondents indicated that UNICOR was available and 25 found it helpful. Expansion of UNICOR was desired by 17 respondents.

**Response from the Bureau of Prisons:** Several studies have been performed that consider the impact of Correctional Industries on recidivism and the costs of crime, corrections, courts, and law enforcement. Some study [Federal Prison Industries] FPI in particular, other examine programs similar to FPI such as the correctional industries of one state or another. The Saylor and Gaes study, Post-Release Employment Project, 1997 (https://www.bop.gov/resources/research_projects/published_reports/recidivism/o_repprep_cmq.pdf). More recent studies are those of Lutze et. al. They were completed from 2015 to 2020 and were presented at Indianapolis NCIA; they are highly regarded and attached for your convenience.

Regarding employment and recidivism, inmates who participate in FPI are 24% less likely to recidivate for as long as 12 years following release as compared to similarly situated inmates who did not participate. Additionally, they are 14% more likely than non-participants to be employed 12 months following release from prison. These findings are taken from research conducted by the Bureau of Prisons’ (BOP) Office of Research and Evaluation through the Post-Release Employment Project (PREP) which was designed to evaluate the impact of FPI and vocational/apprenticeship training, data was collected for up to 12 years on more than 7,000 federal inmates. It involved sophisticated research design and statistical analysis to eliminate the problems that often plague correctional research including selection bias. The results demonstrate convincingly that FPI and vocational/apprenticeship programs have a positive effect on post-release employment and recidivism, increasing the likelihood that inmates will successfully reintegrate into the community following release from federal prison. BOP provides numerous reports and summaries of reports on this topic at https://www.bop.gov/resources/research_and_reports.jsp#. Please refer to this webpage if you require more information.
Recovery

Forty-five percent (508 of 1,120) of the residents are incarcerated due to drug offenses. In contrast, only one person from DC is serving time on a drug offense. Twenty men said recovery programming was available. Fourteen respondents said recovery programming was helpful; 14 said it was not. Despite this split opinion, 21 respondents desired more recovery programming. The Drug Abuse Program Coordinator position is currently vacant.

Reentry Services

The need for reentry services is urgent for twenty-two of the 111 DC people who are currently incarcerated (less than 20%) who will be released in a year or less. The BOP limits re-entry services to people anticipating release within two years. Forty of the 111 (36%) DC people who are currently incarcerated at FCI Cumberland will be released within two years.

People with long sentences especially those with “life on the back end” are not considered for reentry services. Individuals serving life sentences can be released for a variety of reasons, including compassionate release, sentence reconsideration, or granting of parole. This can lead to their release without participating in any reentry programming. Thirty of the DC individuals at FCI Cumberland fall into this category.

The survey did not contain questions about reentry services; however, three of the 61 respondents added comments about reentry to their surveys:

“BOP does not provide enough programs to prepare us for the community. I talk to men here every day who cannot write a resume.”

“I would like to see this institution more focused on returning inmates back into society.”

“More programs need to be offered for old law D.C. inmates especially [those] who have to see the parole board.”

IV. Medical Care

More than 72% of the respondents reported that the medical care was either unsatisfactory or very unsatisfactory. Only five people were very satisfied with the quality of medical care while 11 were satisfied with the quality of medical care. In contrast, 17 people were unsatisfied and 25 were very unsatisfied with the quality of medical care.
Respondents’ Level of Satisfaction Regarding the Quality of Medical Care

The most frequently repeated complaint about the medical services reported that upon arrival residents were stripped of all medications, including blood pressure and psychotropic medications. Residents were concerned about the efficacy of reliance on over-the-counter medications in contrast to receiving the medical treatments and medications previously prescribed. Residents frequently spoke about receiving vague responses to medical questions and a sense that medical services would only provide the minimal care required. Several residents relayed information about pleas for treatment or testing (including MRIs) being ignored. Overall, there were concerns about the lack of on-going oversight of medical issues and a sense of frustration about lack of care and compassion.

Concerns about medical care at FCI Cumberland are a recurring theme. The previous CIC report about FCI Cumberland states, “Heath Services was the top concern reported by inmates, with numerous complaints specifically about the Clinical Director. … [C]oncerns included lack of care overall and especially for chronic care patients, and referrals to the commissary instead of medical care.”

FCI Cumberland has been involved in at least five lawsuits regarding medical care during the past few years. Each of the lawsuits focuses on lack of care and lack of communication by medical staff.

Sixty-six percent of the respondents were unsatisfied or very unsatisfied about the timeliness of medical care. Only 18 people indicated that they were very satisfied (6) or satisfied (12) with the timeliness of medical care. In contrast, 35 people were unsatisfied (13) or very unsatisfied (22) with the timeliness of medical care.

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Respondents’ Satisfaction with Timeliness of Medical Care

In response to the question “does sick call respond within 48 hours”, 24 people responded “rarely.” Sixteen responded that sick call “usually” responds within 48 hours. Another 16 indicated that staff “sometimes” responds to sick call requests within 48 hours.

Does Sick Call Respond within 48 Hours

Responsiveness to Medical Emergencies

[Pie charts showing satisfaction levels for medical care and responsiveness to emergencies]
Recommendation: Communicate with people who are currently incarcerated in a respectful manner when relaying medical information, and provide them with full explanations of changes in medication and medical treatment.

Response from the Bureau of Prisons: Without specific case information, the assessment provided by the CIC is anecdotal, and the BOP cannot thoroughly address these claims. However, inmate medical care, including guidance for chronic care clinics, medical intake screenings, physicals, consultations from outside health providers, triage and access to care, BOP National Formulary, and over-the-counter medication procedures, are outlined in the following policies.

Program Statement 6031.01, Patient Care (bop.gov) – Patient Care
Program Statement 6360.01, Pharmacy Services (bop.gov) Pharmacy Services
Program Statement 6541.02, Over-the-counter Medications (bop.gov) – Over the Counter Medications

V. Safety and Supports

Several of the respondents stated that the atmosphere at FCI Cumberland was currently non-violent. Several interviewees spoke about instances of staff interaction which were perceived as racist or mean-spirited.

When responding to the question: “how concerned are you for your physical there seems to be two very different perceptions of physical safety among the residents as indicated by the data in the following chart.

How Concerned are You for Your Physical Safety?
(Scale of 1-5 with 5 being the most concerned)

Respondents indicated that their relationship with other residents was generally better than with staff with fewer reports of poor or terrible rankings. Residents reported that their relationship with their case manager was similar to their relationship with unit manager with slightly more (14 rather than 12) having a poor or terrible relationship with their case manager. Survey respondents most commonly reported negative relationships with correctional staff (17 responses), followed by case managers (14), unit managers (12), and other residents (7). Survey
respondents reported positive relationships with other residents (29), case managers (29), unit managers (28), and correctional staff (23).

**Report by Survey Respondents of Poor and Terrible Relationships**

![Bar chart showing responses of poor and terrible relationships across different roles.]

**Report of Survey Respondents of Excellent and Good Relationships**

![Bar chart showing responses of excellent and good relationships across different roles.]

Respondents stated: “My issues are not with the guys that’s locked up with me; it’s with the staff and officers in the BOP.” “I believe the staff should have some training—People skills which 80% lacks. Also, there should have more training on how to best deal with DC inmates because right now they don’t have a clue.”

**Recommendation:** Provide effective staff training at least once per year about interpersonal interactions and cultural competence, and forward training materials and documentation of effectiveness to the CIC.

**Response by Bureau of Prisons:** All current and newly hired staff at FCI Cumberland receive mandatory annual training on Diversity Management, Communication Skills, and Core Values. The training includes sections on interpersonal interactions, working in an inclusive environment, and stress management. The Human Resources Department documents all staff training participation.
VI. Special Housing Unit (SHU)

The CIC’s current agreement signed in 2019 with the BOP explicitly states that the CIC is not permitted to tour the SHU. As a result, DC CIC staff did not tour the SHU at FCI Cumberland. Staff of the DC CIC made repeated requests to interview the DC residents currently housed in the FCI Cumberland SHU. BOP staff at the institution said they provided DC residents in the SHU the opportunity to speak with CIC staff via video conference and no DC residents expressed an interest. The lack of participation in interviews may be grounded in a fear of retaliation.

The Special Housing Unit (SHU), which is also known as segregated or restrictive housing, is designed to securely separate people who are currently incarcerated from the general inmate population. In the BOP, people who are currently incarcerated placed in the SHU are housed in two-person cells. The two categories of Special Housing are administrative detention and disciplinary segregation. According to BOP policy, an inmate may be placed in administrative detention for the following reasons:

(a) Pending Classification or Reclassification.
(b) Holdover Status.
(c) Removal from general population.
   1. Investigation.
   2. Transfer.
   3. Protection cases.
   4. Post-disciplinary detention.

People who are currently incarcerated in the SHU are generally confined to their cells for 23 to 24 hours a day. BOP policy provides for five hours of recreation time per week, which ordinarily should occur in one-hour periods on separate days. Plans to increase recreation time are developed locally at each institution. Inmates are also permitted to receive one non-contact visit per month and make one 15-minute phone call per month. Inmates may be allowed to make additional calls in the event of an emergency or death.

7 The MOU specifies that the DC CIC can tour “program areas” and that the Warden can deny any area on the basis of safety/security. For the past few years, the BOP has stated that the SHU is not a “program area” while simultaneously contending that people in the SHU have access to programs, such as educational packets and reading material.
8 This assessment is based on comments during interviews including “No trust between staff and residents in SHU.” “The staff members been assaulting the guys (in SHU)” “Haven’t been to SHU but hear that they abuse you back there, don’t know the reasons why.” “Most of the officers don’t know how to respect you when you are in the SHU and they try to hurt you most of the time.” “I have not been to SHU but I heard horror stories about inmates being assaulted by staff and [name of person redacted] sanctioning it.”
10 Disciplinary segregation is imposed as a sanction for violations of BOP rules and regulations.
11 BOP informed CIC staff during a telephone conversation on November 8, 2021 that this list included in the policy is not exhaustive.
13 Id.
14 Non-contact visit is not defined: could be face to face, through glass, or via video
Fourteen of the 61 respondents to the surveys and interviews had served time in the SHU at FCI Cumberland. Thirteen respondents provided information about items and services available while in SHU. While only one person stated that medical staff did not visit the SHU regularly, slightly less than half of the respondents stated that mental health staff (7 vs 6), educational services (7 vs 5), and the chaplain (7 vs 5) were available and accessible while they were in the SHU. The items and services noted as being most readily available were visits by medical staff, showers, recreation, writing materials, and sick call. Only two people complained about the lack of recreation and writing materials, while eight complained about the lack of access to the telephone.

On the first day of the site visit, CIC staff was informed that 12 DC residents were housed inside of the SHU and none of them desired to be interviewed via the video system, which the staff set up for that purpose. Survey and interview commentary on the SHU varied. Six respondents provided comments about the SHU on the written survey.

<table>
<thead>
<tr>
<th>People who have served time in SHU at FCI Cumberland</th>
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<td>“The hole is vicious. Complete oppression, and they have impunity to beat you up. They’ll crush you back there. Strip you naked, look at your hind parts, in your ass, under your balls. Personally, I think it is sexual harassment every time. And they’re getting a pleasure out of seeing Black parts.”</td>
</tr>
<tr>
<td>Usually you have a cell mate in the SHU. Other than that treatment was fair.</td>
</tr>
<tr>
<td>I can not even find the words to express this! They will lock you down for anything here.</td>
</tr>
<tr>
<td>The living conditions are very poor and the hygiene procedures are even worse.</td>
</tr>
<tr>
<td>(1) Having access to phone every two weeks is insufficient. (2) The clouded windows destroy one’s mental perception. (3) Reading material should be varied. (4) Access to law library more is needed. (5) More recreation time needed.</td>
</tr>
<tr>
<td>Needs more and better reading material.</td>
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</tbody>
</table>

**Recommendation:** Review conditions of confinement in the SHU to ensure compliance with program statements and standards.

**Response by the Bureau of Prisons:** FCI Cumberland’s Special Housing Unit (SHU) is operated in accordance with Program Statement 5270.11, Special Housing Units. Conditions of confinement are reviewed regularly in accordance with policy and ACA standards. As noted in the CIC’s report, the CIC staff did not tour the Special Housing Unit at FCI Cumberland. However, it should be noted that the CIC and Bureau of Prisons (BOP) have a Memorandum of Understanding (MOU) that was mutually agreed upon and signed by both parties that states, “The CIC will not be mutually agreed access to or authorized to tour non-programming areas such as the Special Housing Unit (SHU), Protective Custody (PCU), and Special Management Unit (SMU), Suicide Observation Rooms, dry cells, etc., to ensure the safety and security of the institution and the CIC staff.”
Additionally, under Section VI. Special Housing Unit (SHU), the CIC states, “Please note this section is based on data from inmate surveys and interviews only.” The report also states, “Staff of the DC CIC made repeated requests to interview the DC residents currently housed the FCI Cumberland SHU. BOP staff on site said they provided DC residents in the SHU the opportunity to speak with CIC staff via video conference and no DC residents expressed interest.” The MOU between the CIC and BOP outlines, “No later than five calendar days before a scheduled visit, the CIC shall endeavor to provide the Institution Coordinator with a list of those inmates authorizing review of their records and consent to interview...” The MOU also states, “The CIC is responsible for informing the D.C. Code offenders of scheduled visits and opportunities for document reviews and interviews, and any other matters, which do not jeopardize the safety and security of institutions, inmates, staff, or the public.” To clarify, FCI Cumberland streamlined the interview process and were prepared to accommodate both SHU and general population inmates for interviews by the CIC via video visiting. However, the CIC did not provide FCI Cumberland with a specific list of inmates who authorized consent to be interviewed, including inmates housed in the SHU, prior to their visit to FCI Cumberland. Instead, the CIC requested FCI Cumberland schedule all DC inmates listed on an inmate roster that was provided to the CIC prior to the visit for interview. The BOP was not provided verification of any inmate’s consent to participate in interviews with the CIC prior to the visit. Therefore, staff at FCI Cumberland accommodated the CIC and asked all DC offenders, including those housed in SHU, if they would like to participate in interviews with the CIC on the day of the interviews. All of the inmates housed in the SHU declined to participate in the CIC interviews and were not interviewed, during this visit.

**VII. Conclusion**

This current report on FCI Cumberland focuses on four areas: programming, medical care, safety and supports, and the Special Housing unit.

The major concern about programming was the lack of available and relevant programming especially for those people from DC who have already served considerable time. Several of the men spoke of the need for educational opportunities above the GED level. At least 40 men are eligible and interested in college courses. There is also a need for increased BOP assessments to determine the educational needs of the 10 respondents who indicated they have not completed their GED. Additionally, DC residents frequently noted that they were excluded from programming opportunities due to the BOP practice of determining eligibility based upon the maximum possible sentence rather than the earliest possible release date.

The quality of medical care was unsatisfactory or very unsatisfactory to many of the respondents to the survey. Respondents reported that they were unsatisfied or very unsatisfied about the timeliness of medical care. In addition to relaying information about treatment or testing being ignored, the most frequent complaint reported about medical services at FCI Cumberland was that upon arrival residents were stripped of all medications, including blood pressure and psychotropic
medications. Residents noted that they received little or no information about changes in treatment.

Several residents of FCI Cumberland during their interviews noted the lack of violence; however, they noted problematic relationships with correctional staff, unit managers, and case managers. Residents stated that some staff make remarks that are racist and mean spirited. Comments by residents focused on those staff who antagonize residents due to the lack inter-personal skills.

BOP facilities would benefit from greater oversight and transparency including reviewing conditions of confinement in the SHU. Residents who had previously served time in the SHU noted a variety of concerns including lack of access to telephone, recreation, and writing materials. Some spoke about the lack of access to mental health and medical care. While survey and interview commentary about the SHU, the overall sense of concern was summed up by the resident who said, “Never been, but I heard it’s a place you could be hurt.”
Appendix A: Methodology

In accordance with the Memorandum of Understanding (MOU) between the CIC and the BOP that requires at least 30 days ‘notice of an inspection, the CIC notified the BOP on May 4, 2021 of its request to inspect FCI Cumberland on June 8-9, 2021, including a tour of all areas to which people who are currently incarcerated have access, discussions with staff, and confidential interviews with DC inmates.

On May 26, 2021 the BOP provided the CIC with the roster of DC people who are currently incarcerated at FCI Cumberland.
On May 27, 2021, the CIC communicated with the DC people who are currently incarcerated at FCI Cumberland, informing them of the upcoming inspection and offering them the opportunity for a confidential interview with a member of the CIC.

The CIC conducted an onsite inspection of FCI Cumberland on June 8-9, 2021. In preparation for the site visit, the BOP provided demographic and other data on the DC residents with DC code offenses. At the end of the tour, the CIC spoke to DC people who are currently incarcerated to offer each individual the opportunity to fill out a survey and speak with a member of the CIC. The CIC interviewed 61 people who are currently incarcerated on June 8-9, 2021.

Prior to the site visits, DC residents had conveyed concerns to CIC staff about the lack of programming especially for residents who have already served long sentences. Medical services were reviewed because of the high number of DC residents over the age of 50 and inmate feedback in the past. Safety and supports are often the key to the smooth running of an institution. Conditions of confinement in SHU continue to be of concern because of the MOU’s stipulation which does not allow the DC CIC to tour the SHU.\(^\text{15}\)

After the inspection, the surveys were compiled using SurveyMonkey, a business intelligence tool, with unique identifiers used instead of individual names to protect confidentiality. The total number of respondents for a particular question is noted on each chart. Extended responses from the surveys were compiled with comments from other forms of communications with DC people who are currently incarcerated at the facility and were used to inform analysis and provide context in applicable sections.

In addition to the onsite inspection, survey data, and communication with individuals incarcerated at the facility, the CIC reviewed general inmate and facility data related to inmate population and demographics, facility staffing, significant incidents, urine surveillance, and disciplinary records. The CIC also reviewed an education report, dining menus, commissary lists, the Admissions and Orientation Handbook, the most recent ACA audit, and the most recent Prison Rape Elimination Act (PREA) report. DC CIC requested and did not receive detailed information about the status (disciplinary, administrative, protective) of the 12 people who were

\(^{15}\) The MOU specifies that the DC CIC can tour “program areas” and that the Warden can deny any area on the basis of safety/security. For the past few years, the BOP has stated that the SHU is not a “program area” while simultaneously contending that people in the SHU have access to programs such as educational packets and reading material.
in the SHU the day of the site visit nor did DC CIC receive information about their length of stay in the SHU or if any had been diagnosed with a mental health issue.

Additionally, DC CIC did not receive information about the enrollment in or attainment of GED’s by DC residents. Subsequently, educational data was self-reported by the 61 respondents to the survey.

Based on the site visit, interviews with 61 DC residents of FCI Cumberland, and their responses to survey questions, the report provides factual data and suggests six recommendations.

The CIC provided the BOP with a draft version of the report for review of factual information and an opportunity to respond to follow-up questions and any other information in the report. The BOP responses to the CIC draft report are included in the final version of this report.
District of Columbia
Corrections Information Council

The electronic version of this report is available on the CIC website:
http://www.cic.dc.gov/