District of Columbia Corrections Information Council



DEPARTMENT OF CORRECTIONS (DOC) SITE VISIT REPORT

March 18, 2021



Charles Thornton, Board Chair Katharine A. Huffman, Board Member Nkechi Taifa, Board Member Charlie Whitaker, Board Member Calvin Woodland Jr., 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 correctional facilities where inmates 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 inmates, corrections staff not in leadership, and members of the general public will be kept anonymous and confidential.

DC Corrections Information Council

1400 I Street, NW, Suite 400 Washington, DC 20005 Phone: (202) 478-9211 Email: dccic@dc.gov

Website: https://cic.dc.gov/

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I. Introduction

On December 22, 2020, the Corrections Information Council (CIC) visited the Department of Corrections (DOC) for a site visit. This visit was premised upon DOC residents being placed on a "medical stay in-place" since March of 2020. The medical stay in-place is a safety precaution in response to COVID-19, which means inmates are locked in their cells for 23 hours a day to minimize the potential spread of COVID-19. Residents are normally allowed out of their cells several hours a day for recreation, showers, phone calls, and programming, but since the medical stay in-place - residents have been restricted to their cells, and they receive one hour per day to shower and use the phones.

During October of 2020, CIC staff met with the DOC to get a status update on conditions. DOC executive staff stated that residents were receiving accommodations to help with the restrictions of the medical stay in-place. All residents now have access to education tablets in order to attend school virtually and participate in post-secondary educational courses. For a fee, there is also a limited set of tablets that allow residents to communicate with loved ones via phone and text, and contain entertainment options, such as movies and games. Additionally, there are unique virtual provisions for legal and court visits.

II. Statutory Authority

The following section provides the statutory parameters of the CIC's site visit:

(a) There is established a Corrections Information Council ("CIC"). The CIC shall be responsible for the inspection of all facilities housing District of Columbia inmates who are under the jurisdiction of either the Bureau of Prisons or the Department of Corrections, and for the monitoring of the conditions and treatment of District of Columbia inmates incarcerated in those facilities.¹

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¹ Corrections Information Council, D.C. Code 24-101.01(a)

III. CIC Findings

- A) The DOC has maintained a medical stay in-place since March of 2020.
- B) All social visitation has been suspended.
- C) Most legal visits occur virtually.
- D) Most residents are attending court dates virtually.
- E) Residents who leave the facility are quarantined for 14-days.
- F) There are 437 Global Tel Link (GTL) tablets.
- G) There are 1,189 American Prison Data System (ADPS) tablets.
- H) There has been no outside recreation since March.

IV. Recommendations

- 1. Develop a plan to allow residents some form of outside recreation.
- 2. Create a system to govern how GTL tablets are distributed to ensure adequate opportunities for widespread usage.
- 3. Implement technology that improves connectivity for the tablets throughout the facility.

V. Detailed Findings

a) The DOC has maintained a medical stay in-place since March of 2020.

Since March 2020, the DOC began making changes regarding normal operating procedures due to the COVID-19 pandemic. One of the modifications was a medical stay in-place recommended by the Centers for Disease Control and Prevention (CDC) and DC Health. The medical stay in-place is a process used to limit the movement of residents to help minimize the spread of COVID-19 within the facility.² As a result, the DOC provided PPE to staff and residents, stopped all visitation, and began placing some residents in single cells, as opposed to double cells. Additionally, staff members are provided COVID-19 educational materials every Wednesday. Nurses were initially placed at entrances to take the temperatures of individuals coming into the facilities, although this process is now done by machine. Residents who work details outside of the housing unit are restricted to their housing units. Residents are allowed out of their cells for an hour

² DC DOC Coronavirus Prevention, Medical Stay In Place, April 4, 2020, available at https://doc.dc.gov/page/coronavirus-prevention.

every day. They are limited in their ability to participate in recreational activities, because outdoor recreation is not permitted. The remainder of time, they are confined to their cells.

b) All social visitation has been suspended.

The DOC has suspended all social visitation privileges due to COVID-19. Visitation was suspended during March of 2020, and there is no definitive information regarding the restoration of those privileges.

c) Most legal visits occur virtually.

There are four ways in which the DOC conducts non-contact legal visits:

- 1) There is a designated area on the first floor where residents can visit with their lawyers via video; or
- 2) If a resident has a single cell, s/he can visit with an attorney via cell phone through the case manager; or
- 3) Residents can use the regular phone system and have a free unmonitored legal call if the attorney calls the facility and registers in the Global Tel Link (GTL) database, which requires them to provide their name, phone number, client's name, and client's DC number; or
- 4) Residents can visit with their attorneys in person, but in a non-contact fashion behind the glass in the visiting hall.

If necessary, residents can still physically meet with their attorney in person. In person visits occur only on the first floor of the CDF, and afterwards - the resident must be placed in quarantine for 14 days before returning to the general population.

d) Most residents are attending court dates virtually.

The DOC has set up technology in each of the visiting areas that allows residents to attend court via video. DC Superior Court, the United States District Court, and Maryland's courts each have their own designated areas. Residents who must attend court physically are placed in quarantine for 14 days upon their return before returning to their original housing units within the general population.

e) Residents who leave the facility are quarantined for 14-days.

All residents who leave DOC facilities for any reason are quarantined for 14 days as a precaution before returning to the general population.

f) There are 437 Global Tel Link (GTL) tablets.

All tablets are loaned to residents for free. Any damage to a tablet within a resident's custody will be investigated, and a resident may be charged \$350 or more for replacing the tablet. The DOC has not implemented a system governing to whom and how the tablets are issued, so the current system is first come, first serve. There are connectivity issues in certain areas of the facility, but executive staff is trying to minimize the issue.

There are several profiles for usage of the tablets, which each contain access to different content:

- 1. **Free.** The free profile provides residents with free tools that allow them to check account balances and activity. The free profile is limited to 60 minutes a day per resident.
- 2. **Education**. The education profile provides residents with access to educational content. There may be educational content of the education profile in the free profile. The cost of this profile is free.
- 3. **Promotional.** The promotional profile provides residents with tools to message family and friends and has limited games and music. The content in this profile is subject to change without notice. The cost for residents to use this profile is \$0.03 per minute.
- 4. **Standard.** The standard profile has games residents can play, books, music, and more. Residents have access to news, sports, and a photo album of all received photos for use while residents are in custody at the facility. The cost to use this profile is \$0.05 a minute.
- 5. **Phone Dialer.** The phone dialer is simply a wall phone on the tablet. The cost is the same as a wall phone and the same rules apply.

GTL tablets, also known as entertainment or black tablets, are provided so residents have an additional means of communicating with loved ones, and to provide entertainment while confined to cells for 23 hours a day. There are 437 GTL tablets at the DOC: 285 at the CDF and 152 at the CTF. The total population at the DOC as of December 18, 2020 was 1,461 residents, which equates to approximately one tablet for every three residents. For a fee, residents can use the phone on these tablets, send and receive text messages, play limited games, and watch movies.

Friends and family can send messages to residents by setting them up as a contact on www.gettingout.com. All messages and photos are subject to review and approval. Inappropriate content will be blocked and is non-refundable.

g) There are 1,189 American Prison Data System (ADPS) tablets.

ADPS tablets are available to any resident who wishes to enroll in school. They are available from 9 AM to 11 PM. There are 160 different courses on these tablets, including DCPS high school content and religious services content. There are also medical, grievance, and general request forms. The tablets are closed systems and do not connect to the internet. They do not allow for communication with the outside, nor entertainment, but there is no cost to use them. There are 1,189 educational tablets for 1,450 residents; however, not all residents desire to enroll in school.

h) There has been no outside recreation since March.

Since March of 2020, residents have not had any outside recreation. Several residents expressed serious concerns regarding the issue. DOC executive staff expressed awareness of the issue, but there is no definitive plan regarding the resumption of outdoor activities.

VI. Methodology

The CIC is responsible for the inspection of all facilities housing District of Columbia inmates who are under the jurisdiction of either the Bureau of Prisons or the Department of Corrections, and for the monitoring of the conditions and treatment of District of Columbia inmates incarcerated in those facilities.³ The CIC visited the DOC's Central Detention Facility and walked through units NE 3, SE 2, and the visiting hall on the third floor. The CIC also spoke with staff and residents concerning the American Prison Data System (ADPS) tablets and the Global Tel Link (GTL) tablets.

The CIC visited the Central Treatment Facility (CTF) and the Young Men Emerging (YME) unit. CIC spoke with staff and residents about the medical stay in-place and its effects on residents, as well as the use of tablets and their availability.

³ Corrections Information Council, D.C. Code 24-101.01(a), available at https://code.dccouncil.us/dc/council/code/sections/24-101.01.html.

VII. Appendix: BOP Response

GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF CORRECTIONS



Office of the Director

March 15, 2021

Rev. Donald Isaac Executive Director Corrections Information Council 1400 I street, NW Ste 400 Washington DC 20005

Dear Rev. Isaac:

Thank you for the opportunity to provide a response to the draft Corrections Information Council (CIC) FY21 Annual Inspection Report on the Department of Corrections (DOC). We appreciate the ongoing unbiased oversight of the CIC as we both seek improved circumstances and outcomes for District of Columbia residents in our custody the majority of whom will return home. As we continue our current efforts to expand programming, albeit in a radically reimagined manner necessitated by the global pandemic, we will continue to be grateful for the CIC's follow-up and constructive recommendations as we progress towards our shared goal. With that said, DOC would like to add, in its own words, some of the efforts taken to mitigate the spread of the global virus.

DOC prioritizes health, safety and well-being of staff and residents including attention to behavioral health and well-being, including access to and provision of mental health services. It has continued to emphasize these priorities during its response to this never before encountered and unprecedented pandemic. Through service enhancements, residents have been provided an exceptionally high level of access to health and behavioral health care in all housing units at both facilities with urgent care requests generally seen within 2 hours, sick call requests fulfilled within 24 hours, and behavioral needs attended to by facility-based clinicians as needed and upon referral. All of DOC's actions are primarily motivated by these concerns and objectives.

Access to Medical Care and Testing:

DOC residents were initially tested if they presented symptoms associated with COVID-19. Beginning June 9th, 2020 all new intakes received both simultaneous point of care (Abbot Machine) and laboratory-based molecular testing (PHL, DOH or LabCorp) for SARS-CoV-2 at intake. Before release from entry quarantine, persons were tested via laboratory-based polymerase chain reaction (PCR) a second time (Abbot, PHL, DOH or LabCorp). Residents are tested thrice within a fourteen-day post-intake initial quarantine period, at day 1, day 7, and day 14. They are also tested prior to release, after court appearances, and prior to transfer to a federal facility and St. Elizabeths. As of 2/26/2021, 72.8% of all individuals housed at CDF or CTF from 3/18/2020 through 2/26//2021 had been tested for COVID-19.

Residents are issued a disposable mask each day and housing unit staff provide replacement masks upon request or as needed. They are also issued soap to practice frequent hand hygiene and microfiber cloths sprayed with disinfectant daily to disinfect all cell surfaces.

Cell-mates and any resident who may have been exposed to the resident, for example during out of cell time, are tested. If a non-intake resident tests positive in a housing unit the entire housing unit is mass tested to rapidly detect and stem any asymptomatic transmission.

Residents may access health services through six different paths to care. If they have COVID related symptoms, they will be referred to Urgent Care and typically seen within approximately 2 hours. They may also fill out sick-call slips for non-urgent matters and they will be seen by a provider within 24 hours. Providers performing sick call on housing units will do rounds to encourage any resident who is not feeling well to seek care. Many who are served by daily sick call are seen without having previously submitted a sick call request. Residents may also report and be referred for urgent care or sick call through chronic care clinics. On quarantine housing units and enhanced medical observation (intake) units temperature checks are conducted twice daily and residents can request care through this pathway as well. Urgent care and temperature checks have been the most productive paths to identifying symptomatic positive inmates prior to DOC's implementing the triple testing protocols at intake. Most resident positives identified since June 2020 have been through intake testing. DOC is able to offer rapid Abbot tests on-site and also send out for lab-based testing. Residents may be cell restricted to prevent infection transmission if they are patients under surveillance to prevent spreading infection to others. Once residents test negative they will be released from cell restriction. If they test positive they will be moved to an isolation unit until they recover and can be discharged from isolation. If they require higher standards of care, they will be sent to an emergency room at a local hospital for evaluation and may subsequently be admitted for care if medically necessary.

Tablets and Access to Loved Ones:

The DOC Tablet program consists of 1439 American Prison Data System (APDS) tablets, and 437 Global Tek Link (GTL tablets. The APDS tablets used for discovery (10 tablets) have the capability to communicate with legal counsel. The remaining APDS tablets are used to engage residents in over 300 courses and programs. The GTL tablets provide greater access to

communicating with loved ones through phone (at no additional cost compared to usual phone rates), email, and text messaging for a fee. The GTL tablets have allowed DOC to expand phone service to in-cell based service; more residents are now able to connect to their loved ones as a result. Additionally, the GTL tablets provide numerous options in entertainment and education. All residents are still allowed to use the housing unit telephones when partaking in out of cell time.

Outdoor Recreation:

As of March 10th, the DOC has reinstated outdoor recreation in a phased and socially distanced manner with the following requirements:

- properly wearing PPE at all times (masks and gloves)
- proper social distancing
- No basketball
- No football
- No soccer

Upon completion of outdoor recreation and returning into the building, residents are required to sanitize their hands. Staff will sanitize all equipment between usage. The recreation coats are used once daily and after usage they are removed for overnight cleaning and sanitizing.

While the pandemic has posed challenges for DOC operations, DOC has also availed of opportunities to innovate in how it responded to residents' health and behavioral health concerns by expanding both responsiveness and overall access to case; enhanced and deployed technology to facilitate justice system processes, connect residents to legal services, and allow loved ones to remain connected; and, expanded the reach and variety of programming for residents at DOC.

Sincerely,

Viusacy L. Booth

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