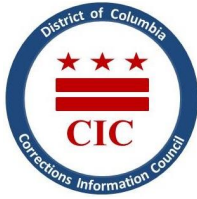


SFF Hazelton Inspection Report

**District of Columbia
Corrections Information Council**

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District of Columbia Corrections Information Council (CIC)

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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 (FBOP), 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 FBOP, 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.

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Inspection Methodology

The CIC collected information on facility SFF Hazelton from August 2014 through July 2016, with an onsite inspection occurring on August 26, 2014. During the onsite inspection, the CIC was escorted by the Warden, the Executive Assistant, and other members of the executive staff. The onsite inspection consisted of a facility tour, discussions with staff, interviews with 27 DC inmates, and document review.

Prior to the onsite inspection, the CIC communicated with all incarcerated DC residents at SFF Hazelton, informing them of the impending inspection, and offering them the opportunity for a confidential interview with a member of the CIC. The onsite inspection consisted of an opening session with the executive staff, a tour of the facility, dialogue with facility staff, and confidential interviews with DC inmates. Throughout the inspection process, the CIC received and reviewed general inmate and facility data related to staffing, significant incidents, urine surveillance, and disciplinary records. The CIC also reviewed an education report, menus, the most recent American Correctional Association (ACA) Audit, and administrative remedy filings and responses at the facility, regional, and central office levels.

To understand the conditions at SFF Hazelton in 2016, the CIC mailed surveys to women at the facility and received six responses. The CIC also conducted a focus group with three DC inmates who had been formerly incarcerated at SFF Hazelton. The focus group took place at the Fairview Halfway House in Washington, DC on February 20, 2016.

After the CIC inspection process was completed, the CIC provided the FBOP with a draft version of the report for review of factual information and requested responses to follow-up questions. The FBOP responses to the CIC draft report are included in the final published report.

Executive Summary

SFF HAZELTON

Location: Bruceton Mills, West Virginia
Distance from DC: 186 Miles from DC
3 Hours by Car / 12 Hours by Bus

Date of Inspection: August 26, 2014

SFF Hazelton houses female inmates exclusively.

INSTITUTION PROFILE

Security Level: High
Rated Capacity: 612
May 2014 Occupancy: 659 (107.7% capacity)
October 2016 Occupancy: 682 (111% capacity)
DC Inmates in May 2014: 76 (11.5% of total population)
DC Inmates in October 2016: 57 (8% of total population)
Average Age of DC Inmates: 40 years
Median Sentence of DC Inmates: 10 years
Inmate-to-Staff Ratio: 4.51 : 1

KEY FINDINGS

- **Overcrowding:** Overcrowding has increased between 2014 and 2016. Inmates reported the use of three-person and 14-person cells.
- **Staff/Inmate Interactions:** Inmates provided positive feedback on the unit manager. They also reported disrespectful staff and inaccessible case managers.
- **Significant Incidents:** Few significant incidents, such as assaults, were reported.
- **Visitation:** Inmates provided positive feedback on family visitation trips as well as weekly videoconferencing.
- **Gender-Specific Perspective:** The CIC inspection revealed a facility-wide lack of gender-responsive practices regarding hygiene, medical care, and programming.
- **Medical/Mental Health:** There are long wait times to obtaining medical and mental health care. The majority of SFF Hazelton's medical and mental health staff also serves the entire FCC Hazelton complex.
- **Residential Programs:** The facility offers a Residential Drug Abuse Program (RDAP) and Resolve program to provide treatment for substance abuse and gender-specific mental health treatment.
- **Programming:** Inmates expressed the most numerous concerns about the lack of programming and jobs at the facility.
- **Resource Center:** The resource center that provided reentry resources and programming was closed and then re-opened with limited hours.
- **Release Preparation Program (RPP):** At the time of inspection, approximately 35% of inmates at the facility were to be released within 24 months. Inmates reported inadequate reentry planning and insufficient halfway house placements.
- **Vital Documents:** Some inmates receive vital documents prior to release and others do not. Vital documents include social security cards and birth certificates.
- **Hygiene Concerns:** Staff members chew and spit tobacco in the dining halls. Inmates also reported receiving used and stained undergarments. Women are also not receiving an adequate amount of feminine hygiene products.
- **Privacy:** Inmates reported that male officers view them in states of undress while inmates are in their cells. Women are not given warning to cover themselves up.

RECOMMENDATIONS

- 1.** Ensure that 14-person cells (“bus stops”) are not used.
- 2.** Monitor staff conduct to ensure respectful and fair treatment of DC inmates.
- 3.** Take all necessary steps to eliminate male officer voyeurism of female inmates.
- 4.** Improve medical quality of care and decrease wait time by evaluating the time medical staff (specifically physicians, mid-level practitioners, and dentists) spend at the SFF.
- 5.** Hire a physician who specializes in women’s health.
- 6.** Hire a psychiatrist qualified to provide mental health care and oversee mental health medication given that SFF Hazelton is a Mental Health Care Level I, II, and III facility.
- 7.** Implement strict patient confidentiality protocols.
- 8.** Implement additional educational, vocational, and employment programming while also facilitating new employment opportunities.
- 9.** Implement a gender-specific parenting program (e.g. developing communication skills, realistic family life goal setting, and parenting behind bars).
- 10.** Develop and track performance measures related to education, including reducing the GED waitlist, increasing the number of classes offered, and increasing overall inmate productivity.
- 11.** Recruit and utilize volunteers to provide classes to inmates.
- 12.** Eliminate staff use of chewing tobacco in the meal hall.
- 13.** Ensure that women are provided with new and unused undergarments.
- 14.** Provide women with a sufficient allowance of feminine hygiene products
- 15.** Stop plans to provide smaller “women’s portions” and ensure existing portions are adequate.
- 16.** Expand the length and content of the Release Preparation Program.
- 17.** Ensure that all DC residents released from SFF Hazelton have all vital documents, including birth certificates and social security cards.
- 18.** Ensure all eligible women receive a minimum of six months of Residential Reentry Center (RRC) time and consistently track the amount of time case managers spend on coordinating RRC placement.

I. Facility Overview

Secure Female Facility (SFF) Hazelton is a high security facility for women located in Bruceton Mill, West Virginia. SFF Hazelton operates within Federal Correctional Complex (FCC) Hazelton. The facility is located within Federal Correctional Institution (FCI) Hazelton in close proximity to United States Penitentiary (USP) Hazelton.

The rated capacity of the facility is 612. As of October 17, 2016, SFF Hazelton houses 682 inmates, 57 of whom are DC inmates. At the time of the CIC inspection, the total population at SFF Hazelton was 659, 76 of whom were from DC. The inmate to staff ratio for FCC Hazelton was 4.51 to 1.¹ A demographics overview table of the entire FCC Hazelton Complex is available at Appendix A.

General Population Housing Units

The CIC inspected two housing units during the on-site visit: Unit J-1 and Unit J-2. The facility has two units composed of two pods each, and each pod can house a maximum of 184 inmates. Unit J-1 houses the RDAP participants and has 48 cells with either two or three people each. Each pod is staffed by a correctional officer (CO), a counselor, a case manager, and a unit secretary. Each pod also shares a unit manager with the adjoining pod.

Special Housing Unit (SHU)

The Special Housing Unit (SHU), often referred to as segregated housing, is a unit designed to securely separate inmates from the general inmate population.² Inmates in the SHU are generally confined to their cells for 23 to 24 hours a day. Federal Bureau of Prisons (FBOP) policy provides for five hours of recreation time per week, which ordinarily should occur in one-hour periods on separate days.³ Inmates are also permitted to receive one non-contact visit per month and make one 15-minute phone call per month.⁴ Inmates may be allowed to make additional calls in the event of an emergency or death.⁵

Inmates in the SHU are classified under either disciplinary or administrative status. Disciplinary segregation is a punishment for rule violations or other prohibited acts while administrative detention is considered non-punitive.⁶ An inmate can be placed in SHU for various administrative reasons, including preparation for unit designation, preparation for transfer to another facility, investigation or protection of an inmate, and other security concerns.⁷

The SHU at Hazelton is designed to house 32 inmates and includes one four-point restraint cell. At time of the CIC inspection, 20 inmates were in the SHU, representing 63% capacity. A total of four DC inmates were in the SHU. As of October 17, 2016, there are 25 inmates in the SHU, six of whom are DC inmates. There are 10 inmates in SHU not awaiting disciplinary action, six of whom were DC inmates. The average stay in the SHU between March 24, 2016 and

September 24, 2016 was 25 days. There is one inmate who has been in the SHU over 12 months (convicted of assault and awaiting sentencing).

A member of Health Services and unit staff conduct rounds daily, and a member of Psychology Services conducts rounds once per week. As of October 17, 2016, there are two inmates in the SHU who had previously been identified as Mental Health Care Level II. GED materials are stored in the SHU and distributed by Education staff. The law library also has a room in the SHU for inmates to conduct legal research.

Inmate Feedback

During the onsite inspection, the CIC received four positive comments from DC inmates about the unit manager and one about the DHO. The CIC also received 62 concerns regarding disrespect and poor conduct by staff. These concerns also included inaccessible case management, staff retaliation and intimidation, and racist comments from staff. The CIC received an additional five concerns about unfair treatment of inmates from DC. Survey data revealed that DC residents felt that they are treated worse than other inmates by staff and the same by other inmates.

The CIC received 23 concerns regarding the facility which included overcrowding, “bus stops,” and limited space for three women in one cell. A “bus stop” is an activity room turned into a cell for 14 people, and inmates reported that mattresses were laid on the floor. Inmates also reported that certain surveillance cameras do not work.

DC inmates during the onsite inspection also provided 10 concerns regarding the SHU, which included cells flooding. CIC received five concerns regarding long wait times to see the DHO. One survey respondent reported spending 85 days in the SHU during an SIS investigation pending a possible transfer. Another reported that inmates in the SHU receive very limited hygiene products (only six feminine pads a week and no opportunity to order more).

Of particular concern to the CIC were reports of male officers invading female inmate privacy. DC residents participating in the focus group in 2016 reported that male officers are peeping into windows while women are changing or using the restroom and that inmates are not allowed to cover up their windows with paper during these times. Additionally, they reported that male staff members do not announce their presence every time they enter the unit; instead, there is only a general announcement made over the loudspeaker about male staff in unit. One DC resident reported that male officers would ask inmates to flash them through the window. Women are not given warning that a male officer would be looking into or entering their cell.

The CIC received a survey response that described an incident in which a fight broke out, and officers did not respond until 20 minutes later.

Recommendations

- 1. Ensure that 14-person cells (“bus stops”) are not used:** Although the CIC did not observe 14-person cells while onsite, the CIC received numerous inmate concerns on this issue. The CIC recommends that the facility continue to operate without the use of the 14-person cells.
- 2. Monitor staff conduct to ensure respectful and fair treatment of DC inmates:** Due to the mixed feedback regarding staff at SFF Hazelton, the facility should work to ensure high performance across staff members. Additionally, executive staff should train staff accordingly to ensure that there is no disparate treatment of inmates based on race, ethnicity, or locality.
- 3. Take all necessary steps to eliminate male officer voyeurism of female inmates:** The CIC is highly concerned about the reports of male officers viewing female inmates in states of undress within their cells. SFF Hazelton should immediately address this issue to ensure there are practices in place to give women a warning (i.e., knocking and waiting a few moments) to get dressed absent any exigent circumstances. All acts of voyeurism must immediately end.

II. Health Services

SFF Hazelton is a Medical Care Level II facility and a Mental Health Care Level, I, II, and III facility. The facility provides programs for suicide prevention, substance abuse, mental health issues, and trauma. Although medical indicators specific to SFF Hazelton were not available to CIC, a table with information for the entire FCC Hazelton complex is available at Appendix B.

Medical Care

SFF Hazelton is a Medical Care Level II facility.⁸ At the time of inspection, Health Services staff included two doctors (including a Clinical Director), a contract physician, and two X-ray technicians who all serve both USP and SFF Hazelton facilities. Staff also included two physician assistants and a contract lab technician. As of October 2016, there are a total of 55 employees in Health Services (six of whom were contract employees) and 10 vacancies. There are two full-time mid-level providers, and the facility is in the process of hiring an OB/GYN physician.

For specialist medical work, the facility contracts with an orthopedist and an optometrist, both of whom split their time between the facilities at the Hazelton complex. An on-call staff member will either report to the facility for after-hour emergencies or authorize transport to a local hospital. Inmates who are in need of hospital care are sent to Ruby Memorial Hospital, Monongalia General Hospital, or Preston Memorial Hospital. Medical records are stored electronically.

Health Services can accommodate routine procedures including X-rays, basic examinations, medication, and chronic care concerns. X-rays are digital and are sent to Maryland for processing. The facility also includes a procedure room, two negative pressure rooms, and two observation rooms which can also be used for Suicide Watch. Any inmates who require Medical Care Level III services are sent outside of the facility to receive care. Mammograms are also performed off-site; inmates are automatically scheduled and then shuttled by bus in large groups. There is no charge for mammograms, which are considered routine medical care.

Pursuant to FBOP policy, inmates must submit a cop-out request to receive medical care.⁹ The standard FBOP fees are charged for medical care: \$2.00 for sick calls and no charge for emergency care, chronic care, or care for indigent inmates.¹⁰ Staff reported that inmates are seen by triage medical staff the same day that they submit a cop-out request if the request is submitted by 6:30 AM. Inmates over 50 years old receive physicals annually, and those under 50 years old receive physicals every two years upon request by the inmate.

Medication

The pharmacy at USP Hazelton has three pharmacists and four pharmacy technicians who serve the entire FCC Hazelton complex, which includes SFF Hazelton. Medication is provided through

a pill line twice a day. In the appropriate situations and under careful monitoring, inmates are sometimes allowed to self-carry their medications.

Dental Care

Dental care is provided onsite at the facility. As a complex, FCC Hazelton has two full-time dentists, one contract dentist, and two dental hygienists. At SFF Hazelton, there is one full time dentist. The wait time for ordinary procedures, such as check-ups and routine cleanings, is 18 months. The wait time for fillings is around 24 months. For dentures, the wait time is set according to an FBOP-wide list. Staff at the facility noted the difficulty of acquiring new dental staff although they also noted the facility has no current vacancies and is not currently looking for new dental staff.

Mental Health Care

Hazelton is a Mental Health Care Level I, II, and III facility.¹¹ At the time of inspection, Psychology Services included one staff psychologist, one Care Level III psychologist, four RDAP treatment specialists, two non-residential drug treatment specialists, and a Resolve Program coordinator. Psychology Services had six psychology staff positions vacant at the time of inspection. As of October 2016, there are six vacancies in the department.

Data from October 2016 indicates that 319 inmates are on psychiatric medication.¹² Psychology Services also offers an inmate-run meditation group and formerly offered a yoga group. In addition, SFF Hazelton operates a mental health companion program in which inmates are trained and then paired with other inmates who have mental health needs. As of October 2016, there are 242 inmates participating in group therapy and 16 participating in individual therapy.

Suicide Prevention

FBOP policy requires facilities to implement suicide prevention practices.¹³ Upon intake, a mental health screening is conducted, including a screening for suicide risk.¹⁴ Additionally, inmates may refer themselves or be referred by staff to Psychology Services for an evaluation.¹⁵ Inmates who pose a suicide risk at intake or a later time are placed on Suicide Watch, which requires constant visual surveillance.¹⁶ Only the Program Coordinator may take an inmate off Suicide Watch.¹⁷ After an inmate is removed from Suicide Watch, follow-up evaluation and care are required.¹⁸

The suicide prevention program and Suicide Watch at Hazelton operate in accordance with FBOP guidelines. Inmates placed on Suicide Watch are monitored constantly by suicide watch companions, placed in special observation cells, and provided with a suicide-proof mattress, smock, and blanket. After an inmate leaves Suicide Watch, follow-up care is provided.

SFF Hazelton has an inmate companion program that trains inmates to monitor fellow inmates who are on Suicide Watch. To qualify for participation, inmates must maintain clear conduct for at least one year. An inmate who receives an incident report within one year of expressing interest in the companion watch program may be ineligible. Inmates interested in serving as

suicide watch companions are screened and must receive four hours of initial training and an additional two hours of training every quarter.

Residential Drug Abuse Program (RDAP)

RDAP is a voluntary treatment program available to inmates with a documented alcohol or substance abuse problem.¹⁹ A majority of inmates in federal prison have regularly used drugs and meet the criteria for substance abuse programs within the FBOP.²⁰ At the time of the CIC inspection, four DC inmates were enrolled in the program out of a total of 96 inmates enrolled. As of October 17, 2016, there is one DC inmate participating in RDAP.

Intended as a comprehensive counseling program, RDAP uses cognitive behavioral therapy to teach positive social attitudes and behaviors.²¹ Inmates who qualify begin with a residential treatment program and then participate in follow-up treatment and community-based treatment.²² The residential portion includes three phases: Orientation, Core Treatment, and Transition.²³ Inmates in RDAP live on a separate unit for at least nine months and complete a minimum of 500 hours of counseling with treatment staff, including individual and group treatment.²⁴

After successfully completing the residential portion of the program, inmates participate in follow-up treatment, which is based on a standardized treatment protocol that reviews concepts learned during the residential portion of RDAP.²⁵ Inmates must remain in Follow-Up Treatment for 12 months or until transferred to a Residential Reentry Center (RRC, also known as a halfway house).²⁶ The final component of RDAP is the Community Transitional Drug Abuse Treatment (TDAT), which usually occurs during a 120-day placement at an RRC.²⁷ Inmates who successfully complete RDAP may qualify for up to a year of sentence reduction. Additionally, each facility may also offer its own incentives which could include, but are not limited to, the maximum amount of halfway house time allowable for each inmate.

Compared to other general population units, RDAP units display a more positive atmosphere and are usually more orderly and hygienic. In order to qualify for the RDAP program at SFF Hazelton, inmates must have a diagnosis of a substance abuse problem within the past 12 months. Staff includes a supervisory doctor, four treatment specialists, and a unit team. A unit counselor is assigned to each treatment team. Psychology Services offers additional mental health services beyond substance abuse treatment on the RDAP unit. Inmates also have the opportunity to participate in meditation through the RDAP program. SFF Hazelton staff reported that the RDAP program reduces recidivism by 50%.

The RDAP Unit can accommodate 118 inmates. The unit does not use the third bunk located in some cells in an effort to avoid overcrowding. Because RDAP was relatively new at SFF Hazelton, the program did not have a waiting list. Staff intends to use graduates of the program as mentors, and they will also have follow-up services available on the unit for the mentors. Staff reported that the DC inmate population was relatively low because many of the DC inmates at the facility have detainers and therefore cannot complete the final TDAT component, which occurs in an RRC. Staff also noted that since PCP use is a particular issue for DC inmates, recovery may take longer.

Resolve Program

The Resolve Program is a voluntary, cognitive-behavioral treatment program designed to address trauma and related mental health needs of female offenders.²⁸ The program includes two main components: an initial workshop and then a non-residential treatment portion.²⁹ The FBOP implemented the program in 2007 as the primary model for trauma treatment across female facilities.³⁰ The program seeks to decrease the incidence of trauma-related psychological disorders and improve inmates' level of functioning.³¹ In addition, the program aims to increase the effectiveness of other treatments, such as drug treatment and health care.³²

The Resolve Program at SFF Hazelton is currently active and has two staff members assigned to the program. Inmates must have a diagnosis of post-traumatic stress disorder (PTSD) to be eligible for the program. The program can accommodate a maximum of 25 inmates. As of October 17, 2016, there are 25 inmates participating, none of whom are from DC. There are three DC inmates on the waiting list.

Inmate Feedback

The quality of health services at SFF Hazelton was the second largest area of concern for DC inmates who participated in the onsite interviews. Of the 75 concerns received, the majority focused on the poor quality of medical and mental health care, barriers to obtaining medical and mental health treatment, and difficulty receiving necessary medical and mental health medications. Six inmates reported a lack of confidentiality and privacy during conversations with medical staff, and three indicated that they had never seen a doctor, only physician assistants. Urgent concerns included the outbreak of skin rashes in the facility and poor medical care for inmates with diabetes. The CIC also received three positive comments from DC inmates regarding health services, which included approval for surgery, an onsite mammogram, and a visit with a psychologist.

Follow-up information from the 2016 surveys indicated that an inmate had been charged a co-pay even though she requires chronic care treatment. Another had her chronic care medication changed and was taken off mental health medication without ever having met with a mental health professional. One inmate had not been able to get a pap smear since her arrival in 2013.

Recommendations

- 4. Improve medical quality of care and decrease wait time by extending the amount of time physicians spend at the SFF:** Given that the medical staff serves the entire Hazelton complex, FCC Hazelton should evaluate the amount of time physicians spend on the women at SFF Hazelton in particular. CIC recommends this evaluation to identify potential gaps in care, to provide preventative medical care, and to effectively reduce wait times for medical care at SFF Hazelton. FCC Hazelton should also ensure that female inmates have sufficient access to physicians (not just physician assistants) especially considering that SFF Hazelton is a Medical Care Level II facility.
- 5. Hire a physician who specializes in women's health:** To better address female-specific medical needs, SFF Hazelton should hire a physician who specializes in women's health.

This women's health physician could then alleviate the workload of the general physician (who serves the entire FCC Hazelton complex) such that both are coordinated more efficiently to address the urgent and chronic medical concerns of all inmates. According to the FBOP response to this report, the facility is in the process of hiring an OB/GYN physician.

6. **Hire a psychiatrist qualified to provide mental health care and oversee mental health medication given that SFF Hazelton is a Mental Health Care Level I, II, and III facility:** SFF Hazelton is unique in that it includes inmates at Mental Health Care Levels I, II, and III. Due to the different mental health needs at the three care levels and the inmate concerns related to mental health care and corresponding prescriptions, the CIC recommends SFF Hazelton hire a psychiatrist to provide care and oversee mental health medication.
7. **Implement strict patient confidentiality protocols:** As a general practice, medical personnel are responsible for safeguarding the medical records of their patients. CIC recommends that SFF Hazelton staff follow existing protocols or develop new protocols to ensure strict patient confidentiality at all times.

III. Education and Programming

Education Services

The FBOP requires all inmates who enter FBOP custody without a GED or high school diploma to enroll in education classes and participate in 240 hours of instruction towards their GED before they are permitted to withdraw from the programming.³³ To be exempt from the GED requirement, an inmate must demonstrate within 60 days of arrival that the inmate has a high school diploma or GED. Inmates who are not exempt are tested using the Tests of Adult Basic Education (TABE), which allows for placement in an appropriate class level. Inmates who test below a fifth grade level are placed in special education classes.

SFF Hazelton offers GED classes in accordance with the FBOP standards curriculum. SFF Hazelton does not offer pre-GED classes, and instead offers a special education class and literacy class. Staff includes four teachers, including a literacy teacher. SFF Hazelton offers additional educational classes, including English as a Second Language (ESL), Adult Continuing Education (ACE), and HIV/AIDS education.

A total of 119 inmates were enrolled in GED classes at the time of the inspection with approximately 12 to 15 inmates in each of the nine GED classes. A total of 26 DC inmates were enrolled in GED classes. In FY 2016, there were 31 GED completions, 88 enrolled in GED, and 16 enrolled in ESL.

For ACE classes, which are taught by inmates, the inmates get to have a say in choosing the subjects that are taught. Ordinarily, five to six classes are taught each month, and there is usually a waiting list. Classes that have been offered include Spanish, History of Rome, African-American History, American History, U.S. Geography, World Geography, and Poetry. The Inside Out Program, in which students from local colleges take classes alongside inmates, is also offered at SFF Hazelton. Local community organizations also come into the facility to teach one-day classes. These classes include Courage to Change and Seven Areas of Life Training (SALT). SFF Hazelton has a total of five volunteers assisting in the Education Department.

SFF Hazelton also offers college correspondence courses that are the same as those at the USP and FCI. Inmates must pay for tuition and books, and staff proctors the exams. At the time of the CIC inspection, five SFF Hazelton inmates were enrolled in college courses. As of October 2016, there are eight women enrolled. SFF Hazelton also provides a parenting program called “How to be a Responsible Mother.”

Vocational Programming

Vocational training provides individuals with marketable skills that increase the likelihood of obtaining employment after release and substantially decrease the likelihood of recidivism.³⁴ SFF Hazelton currently offers vocational training programs in Microsoft Office and Culinary

Arts. SFF Hazelton also offers apprenticeships in Culinary, Electric, Maintenance, and Plumbing, all of which are certified through the Department of Labor.

Resource Center

When SFF Hazelton was activated in 2006, the administration instituted a Reentry Resource Center with the purpose of providing reentry programming and assisting inmates with release preparation. The Reentry Resource Center was the host site for a classroom, books, literature, and resource materials to assist inmates with drafting resumes, planning academic goals, developing interview and job searching skills, and obtaining vital documents in preparation for reintegration. The Reentry Resource Center provided additional job opportunities for inmates who would otherwise be unemployed. According to FBOP response to this report, the Resource Center is available during the same time frames as the Education department: 7:30AM to 8:30PM on Mondays through Fridays, 8:00AM to 4:00PM on Saturdays, and four hours on Sundays.

Inmate Feedback

Education and programming at SFF Hazelton was the largest area of concern for DC inmates. CIC received 78 complaints that focused primarily on the little to no programming or vocational training available to inmates, lack of jobs, and the closing of the Reentry Resource Center. One inmate estimated that only 25-30% of women at SFF Hazelton were employed. With respect to education, inmates throughout the inspection process reported overuse of inmate-taught classes and a waitlist for the GED program. Overall, inmates reported an abundance of idle time.

The CIC inspection determined that the Reentry Resource Center had been closed. The focus group conducted in 2016 confirmed that the center was later re-opened with a very limited schedule and with only one staff member.

CIC received nine positive comments about education and programming, which included seven DC inmates reporting that they had jobs on the compound.

Recommendations

- 8. Implement additional educational, vocational, and employment programming while also facilitating new employment opportunities:** To address inmate concerns regarding little to no programming (the largest number of inmate concerns), SFF Hazelton should provide additional educational and vocational opportunities to ensure that at least half of the compound is working more than 20 hours a week. This practice may also have the added benefit of reducing overcrowding in units. According to FBOP response to this report, 45% of inmates at SFF Hazelton are currently working 20 hours a week.
- 9. Implement a gender-specific parenting program (e.g. developing communication skills, realistic family life goal setting, and parenting behind bars):** FBOP education and programming are standardized across facilities and are not tailored to the needs of women. CIC recommends providing gender-specific parenting programs that address the specific needs of mothers, especially in facilitating successful family reunification during the reentry

process. According to the FBOP response to this report, SFF Hazelton currently provides a parenting program for mothers.

- 10. Develop and track performance measures related to education, including reducing the GED waitlist, increasing the number of classes offered, and increasing overall inmate productivity:** CIC recommends that SFF Hazelton staff develop performance measures geared towards providing inmates with the education they need for successful reentry. Given that education has been shown to be a major factor in reducing recidivism, tracking the opportunities provided to inmates will allow staff to identify and address educational needs.
- 11. Recruit and utilize volunteers to provide classes to inmates:** Volunteers from the community can provide important and low-cost educational opportunities to inmates. CIC recommends that SFF Hazelton conduct outreach and recruit additional volunteers who can teach GED classes and courses in other subjects.

IV. Discipline and Administrative Remedies

Disciplinary Hearing Officer (DHO)

The DHO handles serious disciplinary infractions and other matters referred by the Unit Disciplinary Committee (UDC). Disciplinary measures include, but are not limited to, revocation of an inmate's visiting privileges, revocation of phone privileges, forfeiture of good time credit, or placement in disciplinary segregation within the SHU. The average wait time for a DHO hearing at SFF Hazelton is 14 days. The DHO facilitates hearings at SFF Hazelton as needed, based on alleged inmate misconduct. The DHO conducting hearings at the SFF also conducts hearings at the USP and FCI. The most frequent infractions at the Hazelton complex are drugs and alcohol possession, refusal to obey an order, weapon possession, and refusal to work.

Significant Incidents

Facility locked down	0
Inmate suicides	0
Inmate homicides	0
Inmate deaths from natural causes	0
Inmate assault on inmate, with weapon	1
Inmate assault on inmate, without weapon	5
Inmate assault on staff, with weapon	0
Inmate assault on staff, without weapon	0
Inmate attempted assault on inmate, with weapon	0
Inmate attempted assault on inmate, without weapon	0
Inmate attempted assault on staff, with weapon	0
Inmate attempted assault on staff, without weapon	1
Inmate escape from secure facility	0
Inmate escape from non-secure facility	0
Inmate sexual act, non-consensual, on inmate	0
Inmate sexual assault on staff	0
Inmate sexual contact, abusive, on inmate	1
Staff uses of chemicals	0
Staff uses of force	3
Staff uses of restraints	1
Form 583 reports filed by staff (reports to Central Office) ³⁵	30

Source: Federal Bureau of Prisons. Statistics dated July 2013 to June 2014

Administrative Remedy Program

The Administrative Remedy Program allows inmates to seek formal review of issues related to their confinement.³⁶ The process provides for three levels of review with corresponding filing forms: Facility (BP-9), Regional Office (BP-10), and Central Office (BP-11). At each level, an inmate submits a request or appeal, which is reviewed by FBOP officials and either rejected or filed.³⁷ All requests or appeals that are filed must be answered within specific time frames, and remedy of the issue may be granted at any level.³⁸ The tables below provide an overview of the categories with the most numerous administrative remedy filings submitted at each level regarding the entire FCC Hazelton complex as well as filing related to the SHU.

OVERVIEW OF ADMINISTRATIVE REMEDY FILINGS (FCC HAZELTON)

Facility Level Requests (BP-9s)					
	Submitted	Rejected	Filed	Answered	Granted
Staff	94	23	71	0	0
Medical	63	9	54	6	3
Institution Operation	47	15	32	11	1
Transfer	47	14	33	7	1
Regional Office Appeals (BP-10s)					
	Submitted	Rejected	Filed	Answered	Granted
DHO Appeals ³⁹	170	83	87	8	2
Staff	100	77	23	0	0
Medical	37	17	20	1	0
Transfer	30	17	13	1	0
Central Office Appeals (BP-11s)					
	Submitted	Rejected	Filed	Answered	Granted
DHO Appeals	46	21	25	2	0
Staff	24	14	10	0	0
Transfer	11	6	5	0	0
Medical	10	3	7	0	0

Source: Federal Bureau of Prisons. Statistics dated June 2013 to May 2014.

Administrative Remedy Filings Related to the SHU					
	Submitted	Rejected	Filed	Answered	Granted
BP-9s (facility level)	30	7	23	6	0
BP-10s (Regional Office)	18	10	8	2	0
BP-11s (Central Office)	8	3	5	0	0

Source: Federal Bureau of Prisons. Statistics dated June 2013 to May 2014.

Inmate Feedback

The CIC received numerous concerns from DC inmates regarding discipline and administrative remedies. Key topics included fear of retaliation from staff when inmates file administrative remedies and concern that administrative remedies are not processed or are altered or destroyed. Inmates also reported long wait times to see the DHO after placement in the SHU. One inmate provided positive feedback about the DHO.

Recommendations

Recommendations with respect to the administrative remedy process will be included in a separate CIC thematic report given that concerns around this issue have been identified not just for a specific facility, but across FBOP facilities.

V. Communication and Visitation

SFF Hazelton is 186 miles from downtown DC (three hours by car and 12 hours by bus).

Visitation

SFF Hazelton participates in Children's Day through a partnership with the DC Mayor's Office on Returning Citizen Affairs (ORCA). ORCA has been facilitating family visitation trips to FCC Hazelton since 2013 and provides transportation to children, family members, and loved ones from the District. Community-based, faith-based, and municipal partners often accompany ORCA. The purpose of the trip is to assist incarcerated District residents with maintaining family ties to support successful reentry. ORCA also facilitates Reentry Resource fairs at FCC Hazelton.

In January 2014, SFF Hazelton began a partnership with Hope House⁴⁰ and the Court Services and Offender Supervision Agency of Washington, DC (CSOSA) to conduct a weekly Family Reunification Videoconferencing which links female DC inmates with their minor children in DC. Hope House conducts onsite recruitment of mothers at the facility, and the sessions take place every Wednesday from 4:00-5:00 PM at the CSOSA field office located at 3850 South Capitol Street, SE. The videoconferencing previously had five women participating, and as of summer 2015, there were 10 women participating.

Communication

Computer:

SFF Hazelton has 15 computers available for use in the computer room. Computers are also available for access to email and the electronic law library.

Email:

All general population inmates in FBOP facilities have access to email through CorrLinks, the email server on the TRULINCS software platform used in FBOP facilities. Funding for TRULINCS is provided entirely by the Inmate Trust Fund, which is maintained by profits from inmate purchases of commissary products, telephone services, and fees for use of TRULINCS. At SFF Hazelton, an email costs \$0.05 a minute to send and receive.

Mail:

Pursuant to FBOP policy, ordinary mail may be opened and inspected for contraband and content outside of an inmate's presence. Special mail, including legal mail, must be opened in the recipient inmate's presence and inspected only for contraband.⁴¹ For outgoing mail, an inmate may seal the envelope prior to giving it to staff, and the mail is not subject to inspection.

Phone:

Phones are located within the housing units at a cost of \$3.15 for a 15-minute call to DC.

Inmate Feedback

DC inmates provided positive feedback regarding family visitation trips and the weekly family videoconferencing event. One inmate reported that the visiting room staff is personable and respectful. Of the survey respondents, five out of six reported not having problems receiving visits within the last six months. One DC resident explained that the most positive aspect of SFF Hazelton is the 25-minute video visit that costs \$6.

The key concern for DC inmates regarding communications is staff tampering of legal mail. Specifically, inmates at SFF Hazelton reported issues with special or legal mail being opened outside their presence. CIC also received concerns regarding the lack of visitation and long processing times for visitation forms. One survey respondent indicated that her legal mail has been received by other inmates.

Recommendations

CIC commends SFF Hazelton for its participation in Children's Day and the Hope House Family Reunification Videoconferencing. While CIC encourages following proper protocol regarding communications, CIC does not have any key recommendations on this topic.

VI. Daily Life Services

Religious Services

Religious Services at SFF Hazelton is staffed by two Protestant chaplains, a Roman Catholic chaplain, and a Muslim chaplain. The facility also contracts with volunteers to offer Wiccan, Santeria, and Jewish services. Staff noted that the complex has two to three vacancies for chaplains; as of October 17, 2016, the positions have been filled. There are 10 different faith groups represented at the facility, and one service is offered per week for each faith group. A portable baptism tank is available as is a DVD viewing room to watch religious videos. Additionally, 25 to 40 volunteers provide various services, including faith groups meetings, reentry programs, financial and life skill classes, and a mentoring program.

Various programs are offered by the department, including the Courage to Change program and the Threshold Program. Courage to Change is a six to eight week program that encourages inmates to examine issues leading to their incarceration and promote positive changes. The Threshold Program is a voluntary non-residential, faith-based reentry program.⁴² It is a modified version of the Life Connections Program, which is an 18-month residential program.⁴³ Threshold is designed to strengthen inmate community reentry and reduce recidivism through spiritual understanding.⁴⁴ It is taught by chaplains and volunteers ordinarily over a period of six to nine months and involves mentoring and community service work.⁴⁵ Staff at SFF Hazelton noted that the program covers topics that include parenting, financial management, and managing emotions and relationships. As of October 17, 2016, there are five DC inmates and 28 other inmates participating in the Threshold Program.

Recreation

SFF Hazelton offers a variety of recreation activities, and the Recreation Department includes outdoor fields and a gym that includes a basketball court, volleyball net, and aerobic exercise machines. Outdoor recreational space includes a track and areas for softball, volleyball, basketball, and soccer. Staff noted that the track is used frequently, including for picnics. Indoor activities in the gym include board games, television, music, pastel and watercolor painting, crochet, sewing, beading, scrapbooking, card making, and step aerobics. SFF Hazelton also has activity rooms, such as a music room, a spinning room, a wellness room, and a game room. The facility offers a variety of classes, including step classes, music, introductory and advanced crocheting, and other hobby crafts. The Recreation Department has tried to introduce sports leagues, but inmates were more interested in taking classes. Yarn, which had previously been taken off commissary, is now available via special purchase order according to the facility.

The Recreation Department offers several ways to participate in community service. Crocheting is a popular activity at the facility, and inmates use donated yarn to make blankets, hats, and other clothing items for local children's hospitals and senior centers. The facility also

participated in fitness walks for the Susan G. Komen Race for the Cure but has not done so since 2013.

Library

SFF Hazelton has a library where inmates can watch movies and read magazines, newspapers, and books. Inmates may use the library from 7:30AM to 8:30 PM Mondays through Fridays, from 8:00AM to 4:00PM on Saturdays, and for four hours on Sundays. Inmates may also make copies at the library.

The law library and a leisure library are available to inmates. Hazelton inmates have access to the interlibrary loan program with Morgantown Public Library every other week.

Meals

Food Service at SFF Hazelton employs 63 inmates, who work in two shifts. The dining hall can seat up to 400 inmates. Staff stands in the main line during lunch to answer questions and address concerns that inmates may have.

The facility follows standard FBOP menu guidelines, which include offering vegetarian, heart-healthy, and religious diet options. Unlike the national menu, SFF Hazelton always offers rice, beans, and lettuce at meals. Religious diet meals are prepared off-site and arrive sealed at the facility in accordance with kosher standards and are stored in a separate kitchen area. Vegetarians are given daily options on the main line. Inmates in the SHU eat the same meals as the general population, with the meals prepared in the main kitchen and transported to the SHU.

During the inspection, staff reported that a “women’s menu” with reduced portions would be coming out in November 2014. FBOP response to this report indicates that there currently is not a “women’s menu.”

Commissary

Each inmate in the general population is allowed to make purchases at the commissary once per week with a maximum spending limit of \$320 per month. Per FBOP policy, all products except for religious items are marked up 30%.⁴⁶

Inmate Feedback

There were a total of 56 concerns from DC inmates regarding daily life services, most of which focused on staff use of tobacco in the meal hall, small portions, and poor food quality and service. Inmates confirmed that while no official “women’s portions” had been enacted, portions had always been too small. The CIC also received complaints regarding hygiene, specifically, that inmates were receiving used and stained undergarments. Inmates also reported receiving arbitrary “handfuls” and insufficient amounts of female hygiene products; additionally, staff do not provide additional products upon request. The lack of female hygiene products was also reported in the 2016 survey responses.

Regarding commissary, inmates reported that both yarn and sewing kits were taken off commissary. Inmates also expressed concerns about the lack of variety at commissary, that the items available are based on FCI men's suggestions, and that women are not given input.

Recommendations

- 12. Eliminate staff use of chewing tobacco in the meal hall:** Approximately half of all concerns regarding meals addressed staff use of chewing tobacco in the meal hall. SFF Hazelton should ensure that staff does not use tobacco in the meal halls to ensure proper hygiene.
- 13. Provide women with new and unused undergarments:** Proper hygiene is necessary to prevent medical ailments, such as infections. SFF Hazelton should ensure that women are no longer receiving used and stained undergarments to ensure that proper hygiene standards are being met.
- 14. Provide women with a sufficient allowance of feminine hygiene products:** SFF Hazelton should provide inmates with an adequate number of tampons, sanitary napkins, and toilet paper. The distribution amount should be carefully determined and standardized such that women consistently receive a sufficient amount each month. According to the facility's response to this report, the institution provides sanitary napkins and tampons to inmates, which are distributed monthly and as needed or requested. Feminine hygiene products are also available at the commissary (pads at \$5/package, tampons at \$5.30/package, and panty liners at \$2.40/package).
- 15. Stop plans to provide smaller "women's portions" and ensure existing portions are adequate:** CIC does not support the proposal to provide "women's portions" to inmates given that inmates have already expressed concerns about the current portions being too small. SFF Hazelton should ensure that inmates are receiving adequate portions regardless of gender.

VII. Reentry

At the time of the CIC inspection, approximately 35% of inmates were set to be released within 24 months.

Release Preparation Program

All FBOP facilities follow a Release Preparation Program (RPP) intended to prepare inmates for community reentry upon release.⁴⁷ The program operates at both the unit and facility level, and institutions are responsible for developing their own curricula. Inmates generally receive training on resume writing, job search skills, job retention skills, and other topics relevant to reentry. The program is overseen at the facility level by the Reentry Affairs Coordinator (RAC), who coordinates programs and services available in the community to partner with the facility. The Case Manager prepares the referral for inmates to be placed in a Residential Reentry Center (RRC, also known as a halfway house) as an inmate nears the end of her sentence.⁴⁸ For female DC inmates in FBOP custody, the RRC is The Fairview, which is located in Northeast DC.⁴⁹

At SFF Hazelton, the RPP class consists of six categories: Health and Nutrition, Personal Growth, Release Requirements, Community Resources, Employment, and Personal Finance. The RPP classes result in a certificate at the end of each class.

CSOSA Outreach

The Court Services and Offender Supervision Agency of Washington, DC (CSOSA) provides a quarterly Community Resource Day for DC inmates in FBOP custody. SFF Hazelton participates quarterly. Through videoconferencing, CSOSA staff and representatives from other organizations provide inmates with information on housing, healthcare, employment, education, and other resources in the DC area to assist DC inmates who are within 90 days of release. This service ensures that returning citizens receive the information and connection to services necessary for successful reentry.

Inmate Feedback

The CIC received 12 concerns from DC inmates that addressed lack of reentry planning and inadequate halfway house time. Specific concerns included lack of RPP classes, never meeting with the RAC, and not receiving a Social Security card upon release. Two inmates indicated that they successfully received Social Security cards upon release.

Survey respondents were unanimous in expressing their desire to be moved closer to DC within the last 24 months of their incarceration. Reasons include the opportunity to rebuild relationships, assistance with reentry, and more frequent visitation.

Recommendations

- 16. Expand the length of the Release Preparation Program (RPP) and require completion for all inmates within 18 months of release:** Although the topics covered in the RPP are helpful for reentry, the length of the program is currently insufficient to ensure successful reentry. The CIC recommends that the length of the program be expanded to at least 80 hours to cover adequately the six categories set forth by SFF Hazelton. The facility should require all DC inmates to complete the program within 18 months of release.
- 17. Ensure that all DC residents released from SFF Hazelton have all vital documents, including birth certificates and social security cards:** The CIC has heard from women at SFF Hazelton who received all vital documents upon release. The CIC recommends all DC residents depart secure FBOP custody with vital documents as they are an essential component of successful reentry. According to the FBOP response to this report, FBOP is attempting to develop an agreement with DC to issue district identification cards to inmates upon release.
- 18. Ensure all eligible women receive a minimum of six months of RRC time and consistently track the amount of time case managers spend on coordinating RRC placement:** RRC time has been shown to be a critical part in successful reentry, and CIC recommends that SFF Hazelton prioritize efforts to secure a minimum of six months for each returning citizen. SFF Hazelton should ensure that inmates meet with the Reentry Affairs Coordinator prior to release and then also track the amount of time case managers spend on securing RRC time for inmates and adjust the time as necessary.

Endnotes

¹ The FBOP has stated that overcrowding is its biggest challenge, especially its effect on staffing and safety. *See* U.S. DEP'T OF JUSTICE, FY 2016 PERFORMANCE BUDGET CONGRESSIONAL SUBMISSION: FEDERAL PRISON SYSTEM: SALARIES AND EXPENSES (Feb. 2015), *available at* http://www.justice.gov/sites/default/files/jmd/pages/attachments/2015/02/02/27._federal_bureau_of_prisons_bop_se.pdf

“The largest internal challenge for the BOP is to provide adequate levels of bed space and staffing to safely manage the growing inmate population. Crowding is a very real danger in prisons—causing frustration and anger for inmates whose access to basic necessities like toilets, showers, and meals becomes very limited and who face hours of idleness resulting from limited availability of productive work and program opportunities. Crowding also strains facilities’ infrastructure like water, sewage, and power systems, and increases the maintenance service needed to keep these systems operational.”

In fiscal year 2014, the FBOP was operating system-wide at an inmate-to-staff ratio of 4.58, after an average ratio of 4.87 between 2005 and 2013. *Id.* In comparison, the five states with the highest prison populations had an average inmate-to-staff ratio of 3.10, and the FBOP previously operated at a ratio of 3.75 in fiscal year 1998. *Id.*

² FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5270.10, SPECIAL HOUSING UNITS (July 29, 2011), *available at* http://www.bop.gov/policy/progstat/5270_010.pdf (“Special housing units help ensure the safety, security, and orderly operation of correctional facilities, and protect the public, by providing alternative housing assignments for inmates removed from the general population.”).

³ *Id.*

⁴ *Id.*

⁵ *Id.*

⁶ Status when placed in the SHU, 28 C.F.R. § 541.22 (2013), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2012-title28-vol2/xml/CFR-2012-title28-vol2-part541-subpartB.xml>.

When placed in the SHU, you are either in administrative detention status or disciplinary segregation status.

(a) *Administrative detention status.* Administrative detention status is an administrative status which removes you from the general population when necessary to ensure the safety, security, and orderly operation of correctional facilities, or protect the public. Administrative detention status is non-punitive, and can occur for a variety of reasons.

(b) *Disciplinary segregation status.* Disciplinary segregation status is a punitive status imposed only by a Discipline Hearing Officer (DHO) as a sanction for committing a prohibited act(s).

⁷ Administrative detention status, 28 C.F.R. § 541.23 (2013), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2012-title28-vol2/xml/CFR-2012-title28-vol2-part541-subpartB.xml>.

You may be placed in administrative detention status for the following reasons:

(a) *Pending Classification or Reclassification.* You are a new commitment pending classification or under review for Reclassification.

(b) *Holdover Status.* You are in holdover status during transfer to a designated institution or other destination.

(c) *Removal from general population.* Your presence in the general population poses a threat to life, property, self, staff, other inmates, the public, or to the security or orderly running of the institution and:

(1) *Investigation.* You are under investigation or awaiting a hearing for possibly violating a Bureau regulation or criminal law;

(2) *Transfer.* You are pending transfer to another institution or location;

(3) *Protection cases.* You requested, or staff determined you need, administrative detention status for your own protection; or

(4) *Post-disciplinary detention.* You are ending confinement in disciplinary segregation status, and your return to the general population would threaten the safety, security, and orderly operation of a correctional facility, or public safety.

⁸ Inmates and facilities are classified according to Medical Care Level. Inmate classifications are based on the medical history and health condition of the inmate, while facility classifications are based on the inmate care level that the facility is staffed and equipped to handle.

Inmates with Care Level 1 needs are generally healthy, under 70 years of age, and may have limited medical needs requiring clinician evaluation and monitoring. Examples of such conditions are mild asthma, diet-controlled diabetes, and patients with human immunodeficiency virus (HIV) who are stable and do not require medications.

Inmates with Care Level 2 needs are those who are stable outpatients, requiring at least quarterly clinician evaluation. Examples of such conditions are medication-controlled diabetes, epilepsy, and emphysema.

Inmates with Care Level 3 needs are fragile outpatients who require frequent clinical contacts, and/or who may require some assistance with activities of daily living, but do not require daily nursing supervision. This Care Level may include stabilization of medical or mental health conditions that may require periodic hospitalization. Other examples of this Care Level are patients with cancer in remission less than a year, advanced HIV disease, severe mental illness in remission on medication, severe congestive heart failure, and end-stage liver disease.

Inmates with Care Level 4 needs are severely impaired, and may require daily nursing care. Examples of such conditions are those with cancer in active treatment, dialysis, quadriplegia, stroke or head injury patients, major surgical patients, acute psychiatric illness requiring inpatient treatment, and high-risk pregnancy.

The DSCC designates those inmates with Care Levels 1 and 2. For those inmates with Care Levels 3 and 4, the designation decision will be made by the OMDT, as the medical need of the inmate is the primary factor in the designation decision.

FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, LEGAL RESOURCE GUIDE TO THE FEDERAL BUREAU OF PRISONS (2014), *available at* http://www.bop.gov/resources/pdfs/legal_guide.pdf.

⁹ A "cop-out" is the standard form for an inmate to submit a request to staff or a specific department. A specific form for medical issues can also be submitted. The medical cop-out form is not publicly available, while all other requests are filed on Form BP-A0148 ("Inmate Request to Staff"). FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, FORM BP-A-148, INMATE REQUEST TO STAFF (June 2010), *available at* http://www.bop.gov/policy/forms/BP_A0148.pdf.

¹⁰ Fees for Health Care Services, 28 C.F.R. § 549.70 (2009), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2009-title28-vol2/pdf/CFR-2009-title28-vol2-part549-subpartF.pdf>. The co-payment provision applies to "[a]ny individual incarcerated in an institution under the Bureau's jurisdiction." Inmates affected, 28 C.F.R. § 549.71 (2009), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2009-title28-vol2/pdf/CFR-2009-title28-vol2-part549-subpartF.pdf>. Inmates are not charged the co-payment fee for:

- (a) Health care services based on staff referrals;
- (b) Staff-approved follow-up treatment for a chronic condition;
- (c) Preventive health care services;
- (d) Emergency services;
- (e) Prenatal care;
- (f) Diagnosis or treatment of chronic infectious diseases;
- (g) Mental health care; or
- (h) Substance abuse treatment.

Services provided without fees, 28 C.F.R. § 549.72 (2009), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2009-title28-vol2/pdf/CFR-2009-title28-vol2-part549-subpartF.pdf>. Indigent inmates are also exempt from the health care service fee. Inmates without funds, 28 C.F.R. § 549.74 (2009), *available at*

<http://www.gpo.gov/fdsys/pkg/CFR-2009-title28-vol2/pdf/CFR-2009-title28-vol2-part549-subpartF.pdf>. Indigent inmates are determined according to FBOP policy, which defines indigence as a balance of less than \$6.00 in an inmate's commissary account for the last 30 days. *See* FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 6031.02, INMATE COPAYMENT PROGRAM (Aug. 15, 2005), *available at* http://www.bop.gov/policy/progstat/6031_002.pdf.

¹¹ In 2014, the FBOP defined the Mental Health Care Levels used in the FBOP system, as well as the treatment requirements for each level.

(1) CARE1-MH: No Significant Mental Health Care. An individual is considered to meet CARE1-MH criteria if he/she:

- Shows no significant level of functional impairment associated with a mental illness and demonstrates no need for regular mental health interventions; and

- Has no history of serious functional impairment due to mental illness or if a history of mental illness is present, the inmate has consistently demonstrated appropriate help-seeking behavior in response to any reemergence of symptoms.
- (2) CARE2-MH: Routine Outpatient Mental Health Care or Crisis-Oriented Mental Health Care. An individual is considered to meet CARE2-MH criteria if he/she has a mental illness requiring:
- Routine outpatient mental health care on an ongoing basis; and/or
 - Brief, crisis-oriented mental health care of significant intensity; e.g., placement on suicide watch or behavioral observation status.
- (3) CARE3-MH: Enhanced Outpatient Mental Health Care or Residential Mental Health Care. An individual is considered to meet the criteria for CARE3-MH if he/she has a mental illness requiring:
- Enhanced outpatient mental health care (i.e., weekly mental health interventions); or P5310.16 5/1/2014 9
 - Residential mental health care (i.e., placement in a residential Psychology Treatment Program).
- (4) **CARE4-MH: Inpatient Psychiatric Care.** A mentally ill inmate may meet the criteria for CARE4-MH and require acute care in a psychiatric hospital if the inmate is gravely disabled and cannot function in general population in a CARE3-MH environment.

FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5310.16, TREATMENT AND CARE OF MENTAL ILLNESS (May 1, 2014), *available at* http://www.bop.gov/policy/progstat/5310_016.pdf.

¹² Prescription medication is the most common treatment for federal prison inmates. DORIS J. JAMES & LAUREN E. GLAZE, BUREAU OF JUSTICE STATISTICS, U.S. DEP'T OF JUSTICE, MENTAL HEALTH PROBLEMS OF PRISON AND JAIL INMATES (2006), *available at* <http://www.bjs.gov/content/pub/pdf/mhppji.pdf> (reporting that 19.5% of inmates in federal prisons received medication for mental health needs, while 15.1% received professional mental health therapy).

¹³ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5324.08, SUICIDE PREVENTION PROGRAM (Apr. 5, 2007), *available at* http://www.bop.gov/policy/progstat/5324_008.pdf.

¹⁴ *Id.*

¹⁵ *Id.*

¹⁶ *Id.*

¹⁷ *Id.*

¹⁸ *Id.*

¹⁹ Federal law mandates that the FBOP administer RDAP and defines eligible prisoners as those “determined by the Federal Bureau of Prisons to have a substance abuse problem.” 18 U.S.C. § 3621(e)(5)(B)(1). The FBOP has full discretion to set its own admission standards. For admission into RDAP, the FBOP requires that inmates have a verifiable substance abuse problem, which is usually established via a presentence report, and focuses on eligible inmates whose substance abuse was at least contributing factor to their current incarceration. *See* FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5330.11, PSYCHOLOGY TREATMENT PROGRAMS (Mar. 16, 2009), *available at* http://www.bop.gov/policy/progstat/5330_011.pdf

²⁰ DORIS J. JAMES & LAUREN E. GLAZE, U.S. DEP'T OF JUSTICE, BUREAU OF JUSTICE STATISTICS, MENTAL HEALTH PROBLEMS OF PRISON AND JAIL INMATES (rev. Dec. 14, 2006), *available at* <http://www.bjs.gov/content/pub/pdf/mhppji.pdf>. Based on the most recent comprehensive study of mental health and drug abuse concerns, 82.3% of inmates with a mental health problem and 75.4% of inmates without one have regularly used drugs, with most of them having used drugs in the month prior to their offense. *Id.* Additionally, 63.5% of federal inmates with a mental health problem had a substance abuse or dependence problem, as well as 49.5% of inmates without a mental health problem. *Id.* Individuals with a history of drug abuse or dependence are more likely to recidivate, and completion of substance abuse treatment can significantly lower the rates of recidivism. *See* BETH M. HUEBNER, DRUG ABUSE, TREATMENT, AND PROBATIONER RECIDIVISM (2006), *available at* <http://www.icjia.state.il.us/public/pdf/ResearchReports/Drug%20Abuse%20Treatment%20and%20Probationer%20Recidivism.pdf>; *see also* MATTHEW R. DUROSE ET AL., U.S. DEP'T OF JUSTICE, BUREAU OF JUSTICE STATISTICS, RECIDIVISM OF PRISONERS RELEASED IN 30 STATES IN 2005: PATTERNS FROM 2005 TO 2010 (Apr. 2014), *available at* <http://www.bjs.gov/content/pub/pdf/rprts05p0510.pdf>.

²¹ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5330.11, PSYCHOLOGY TREATMENT PROGRAMS (Mar. 16, 2009), *available at* http://www.bop.gov/policy/progstat/5330_011.pdf.

²² *Id.*

²³ *Id.*

²⁴ *Id.*

²⁵ *Id.*

²⁶ *Id.*

²⁷ Inmates must be eligible for RRC placement to participate in RDAP. *Id.* Inmates who did not volunteer for RDAP but have a documented drug abuse problem may be required to participate in TDAT as a condition of participation in a community-based program. *Id.*

²⁸ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5330.11, PSYCHOLOGY TREATMENT PROGRAMS (Mar. 16, 2009), *available at* http://www.bop.gov/policy/progstat/5330_011.pdf.

²⁹ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5330.11, PSYCHOLOGY TREATMENT PROGRAMS (Mar. 16, 2009), *available at* http://www.bop.gov/policy/progstat/5330_011.pdf.

³⁰ *Id.*

³¹ *Id.*

³² *See* FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, A DIRECTORY OF BUREAU OF PRISONS' NATIONAL PROGRAMS (May 21, 2014), *available at* http://www.bop.gov/inmates/custody_and_care/docs/BOPNationalProgramCatalog.pdf.

³³ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5350.28, LITERACY PROGRAM (GED STANDARD) (Dec. 1, 2003), *available at* http://www.bop.gov/policy/progstat/5350_028.pdf.

³⁴ *See* JAKE CRONIN, UNIV. OF MO., INST. OF PUB. POLICY, THE PATH TO SUCCESSFUL REENTRY: THE RELATIONSHIP BETWEEN CORRECTIONAL EDUCATION, EMPLOYMENT AND RECIDIVISM (Sept. 2011), *available at* http://ipp.missouri.edu/wp-content/uploads/2014/06/the_path_to_successful_reentry.pdf. The study concluded that "[e]mployment proves to be the strongest predictor of not returning to prison in each of our models." *Id.*

³⁵ Form 583 is used to report significant incidents to the FBOP Central Office. The form is an electronic version of the Report of Incident form. Issues reported to the Central Office generally include deaths, suicides, escapes, serious assaults and other serious acts of misconduct by inmates, and uses of force, chemicals, or restraints by staff.

³⁶ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 1330.18, ADMINISTRATIVE REMEDY PROGRAM (Jan. 6, 2014), *available at* http://www.bop.gov/policy/progstat/1330_018.pdf. Inmates may only submit a request or appeal on behalf of themselves, although other inmates may assist the inmate with preparing a request or an appeal, and former inmates may use the program to address their former issues during *Id.* Certain issues have specific statutorily-mandated procedures, including sexual abuse, tort claims, Inmate Accident Compensation claims, and Freedom of Information Act (FOIA) requests. *Id.*

³⁷ Administrative remedy requests and appeals are also referred to as grievances. Unless an inmate is in a contract facility or has been granted an individual exception, inmates are first required to attempt informal resolution by presenting an issue of concern, or grievance, to staff. FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 1330.18, ADMINISTRATIVE REMEDY PROGRAM (Jan. 6, 2014), *available at* http://www.bop.gov/policy/progstat/1330_018.pdf. Except for certain telephone-related issues, inmates have 20 days to complete the informal resolution and submit the initial request (BP-9) for formal review of the issue. *Id.* Requests can be rejected for incorrectly filling out the provided form, including multiple unrelated issues on the form, writing the request in obscene or abusive manner, or failing to meet any other requirement in the FBOP policies. *Id.* FBOP policy notes that facilities should be flexible in deciding whether to reject a submission, especially if it raises sensitive or problematic issues. *Id.* If an inmate's request is not rejected at the institution but the inmate is not satisfied with the Warden's response, the inmate may file an appeal to the Regional Office (BP-10) within 20 days of the date the Warden signed the response. *Id.* Inmates may submit initial requests directly to the Regional Office for DHO appeals or sensitive issues that the inmate believes would cause danger if known at the institution. *Id.* An inmate who is unsatisfied with the response from the Regional Director may file an appeal with the Central Office (BP-11) within 30 days of the date the Regional Director signed the response. *Id.* Inmates may be granted an extension for the filing times if they demonstrate a valid reason for the extension, including submission of a written verification from staff. *Id.* After a request or appeal is accepted and filed, the facility, Regional Office, and Central Office have specific time frames to answer the filing. *Id.*

³⁸ For most issues, inmates must exhaust their administrative remedy options prior to being able to pursue a complaint in court. FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 1330.18, ADMINISTRATIVE REMEDY PROGRAM (Jan. 6, 2014), *available at* http://www.bop.gov/policy/progstat/1330_018.pdf.

³⁹ FBOP regulations direct inmates to submit initial appeals of DHO decisions to the Regional Office level (BP-10) instead of the facility level (BP-9). FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO.

1330.18, ADMINISTRATIVE REMEDY PROGRAM (Jan. 6, 2014), *available at* <http://www.bop.gov/policy/progstat/1330.018.pdf>.

⁴⁰ Hope House is a nonprofit, community-based organization led by Carol Fennelly, who was named a White House Champion of Change for the Children of Incarcerated Parents. *See Champions of Change: Carol Fennelly*, WHITE HOUSE, <http://www.whitehouse.gov/champions/champions-for-the-children-of-incarcerated-parents/carol-fennelly>.

⁴¹ The content and other material in the envelope of special mail correspondence may not be read or copied by prison staff if the sender is adequately identified on the envelope and the front of the envelope is appropriately marked as “Special Mail.” Special mail, 28 C.F.R. § 540.18 (2009), *available at* <http://www.gpo.gov/fdsys/pkg/CFR-2012-title28-vol2/pdf/CFR-2012-title28-vol2-part540-subpartB.pdf>. The confidentiality of legal mail is protected by numerous court decisions as well as FBOP policy. *See, e.g.*, *Lemon v. Dugger*, 931 F.2d 1465 (11th Cir. 1991); *Davidson v. Scully*, 694 F.2d 50 (2d Cir. 1982); *Jensen v. Klecker*, 648 F.2d 1179 (8th Cir. 1981); *Ramos v. Lamm*, 639 F.2d 559 (10th Cir. 1980); *Smith v. Shimp*, 562 F.2d 423 (7th Cir. 1977); *Taylor v. Sterrett*, 532 F.2d 462 (5th Cir. 1976); *Abu-Jamal v. Price*, No. 95-618 1996 U.S. Dist. LEXIS 8570 (W.D. Pa. Jun. 6, 1996); *Proudfoot v. Williams*, 803 F. Supp. 1048 (E.D. Pa. 1992); *see also* FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 5800.16, MAIL MANAGEMENT MANUAL (Apr. 5, 2011), *available at* http://www.bop.gov/policy/progstat/5800_016.pdf; FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 5265.14, CORRESPONDENCE (Apr. 5, 2011). For legal mail to be processed under the special mail procedures, FBOP policy requires three forms of identification on the envelope: the attorney must be adequately identified on the envelope as an attorney by two means (e.g., use of “Esquire” after the attorney’s name, the inclusion of “Attorney-At-Law” on the envelope, or having the attorney’s name included in the return address of a law office), and markings must indicate that correspondence may only be opened in the presence of the inmate (e.g., “Special Mail — Open only in the presence of the inmate,” “Attorney-Client — Open only in the presence of the inmate,” “Legal Mail — Open only in the presence of the inmate,” or similar markings). FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 5800.16, MAIL MANAGEMENT MANUAL (Apr. 5, 2011), *available at* http://www.bop.gov/policy/progstat/5800_016.pdf.

⁴² *See* U.S. DEP’T OF JUSTICE, FY 2016 PERFORMANCE BUDGET CONGRESSIONAL SUBMISSION: FEDERAL PRISON SYSTEM: SALARIES AND EXPENSES (Feb. 2015), *available at* http://www.justice.gov/sites/default/files/jmd/pages/attachments/2015/02/02/27_federal_bureau_of_prisons_bop_se.pdf.

⁴³ *Id.*

⁴⁴ *Id.*

⁴⁵ *Id.*

⁴⁶ FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 4500.11, TRUST FUND/DEPOSIT FUND MANUAL (APRIL 9, 2015), *available at* http://www.bop.gov/policy/progstat/4500_11.pdf.

⁴⁷ FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 5325.07, RELEASE PREPARATION PROGRAM (Dec. 31, 2007), *available at* http://www.bop.gov/policy/progstat/5325_007.pdf. The FBOP reorganized their internal structure to include a Reentry Services Division at Central Office. The Assistant Director of the Reentry Services Division reports directly to the Director of the FBOP.

⁴⁸ Inmates must participate in the Release Preparation Program to receive placement time at an RRC.

⁴⁹ The Fairview is the only RRC for females in DC. For male DC inmates, the FBOP contracts with Hope Village RRC, located in Southeast DC, while the DOC contracts with Hope Village, Extended House, and Efforts from Ex-Convicts.

Appendix A: Demographics Overview

SFF Hazelton Facility*		
Total inmates	659	
DC inmates ¹	76 (11.5% of total population)	
Rated capacity	612	
Percent of capacity	107.7%	
Inmate-to-staff ratio*	4.51	
FCC Hazelton Complex		
Race (n=2,280)**		
	Number of Inmates	Percentage of Population
Black	1,297	56.9%
White	929	40.7%
Other	54	2.4%
Ethnicity (n=2,280)		
Hispanic	352	15.4 %
Non-Hispanic	1,928	85.6%
Sentence Information (n=2,267)		
Average sentence	147.1 months	
Average time remaining (new law / old law)	88.3 / 283.1 months	
Offense Information (n=2,250)		
	Number of Inmates	Percentage of Population
Violent offenders ²	743	33.0%
Drug offenders	772	34.3%
Sex offenders	32	1.4%
Months Remaining to Release (n=2,063)		
	Number of Inmates	Percentage of Population
4 months or less	135	6.5%
5-8 months	152	7.4%
9-12 months	142	6.9%
13-24 months	309	15.0%
25-60 months	512	24.8%
61-120 months	394	19.1%
121 months or more	419	20.3%

Source: Federal Bureau of Prisons. Statistics dated May 2014.

*CIC received SFF Hazelton specific information on the below five items only. All subsequent data relate to the entire FCC Complex.

**The "n" refers to the number of inmates in the population for which data was available.

¹The phrase "DC inmates" refers to inmates at the facility who are sentenced under the DC Code.

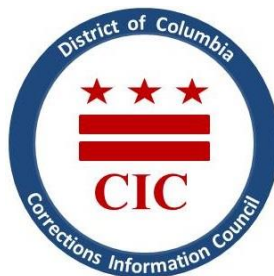
² For the purposes of violent offenders, inmates with the following offense categories are included: Weapons, Explosives, Arson, Homicide, Aggravated Assault, and Kidnapping.

Appendix B: FCC Hazelton Complex Medical Indicators

Diseases		
HIV	Inmates diagnosed with HIV	32
	Highest number of HIV-positive inmates indicated in ACA audit	32
	Inmates on highly active antiretroviral treatment (HAART)	30
	Inmates who have been on antiretroviral treatment for at least six months with a viral load of less than 50 cps/ml	13
Tuberculosis	Inmates tested for TB outside of intake screening in the prior 12 months	1,272
	Inmates diagnosed with active TB in the prior 12 months	0
	Inmates who are new converters on a TB test indicating new infection within the prior 12 months	33
	Inmates treated for latent TB in the prior 12 months	4
	Inmates who completed treatment for latent TB in the prior 12 months	3
Diabetes	Diabetic inmates reviewed by ACA audit	30
	Diabetic inmates under treatment for at least six months with hemoglobin A1C level measuring less than 9%	12
Hepatitis C	Inmates diagnosed with Hepatitis C	222
MRSA	Inmates diagnosed with MRSA within the prior 12 months	28
Mental Health		
Inmates diagnosed with an Axis I disorder (excluding sole diagnosis of substance abuse) ³		501
Deaths by suicide		0
Suicide attempts		182
Other Indicators		
Completed dental treatment plans during the prior 12 months		15
Inmates transported off-site for treatment of emergency health conditions		181
Inmate admissions to off-site hospitals		52
Specialty consults ordered		732
Specialty consults completed		633

Source: ACA Audit conducted August 9, 2009. Statistics dated July 7, 2011.
Total inmates at time of audit: 1,839. Average daily population: 1,839.

³ Under the fourth version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), Axis I disorders included all psychological diagnoses except personality disorders and intellectual disability. Common Axis I disorders included depression, bi-polar disorder, post-traumatic stress disorder, anxiety disorders, alcohol and substance abuse disorders, eating disorders, and schizophrenia. The DSM-5 removed the multi-axial system for diagnostic classification and combined all diagnoses from Axis I, Axis II, and Axis III into a single axis.



**District of Columbia
Corrections Information Council**

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



U.S. Department of Justice

Federal Bureau of Prisons

Washington, DC 20534

OCT 18 2016

Michelle R. Bonner, Esq.
Executive Director
DC Corrections Information Council
2901 14th Street, NW
Washington, DC 20009

Dear Ms. Bonner,

This letter is in response to the draft inspection report received on July 20, 2016, regarding the August 26, 2014, visit to SFF Hazelton. The Bureau of Prisons (Bureau) recognizes the value of the Corrections Information Council (CIC) inspections of its facilities and the voice it provides the D.C. Superior Court inmates. We hope to continue working closely to improve the Bureau facilities and raise awareness with regard to those inmates' needs. Unless otherwise noted, all dates reflected in this response are current as of October 17, 2016. I offer the following response to the questions and/or statements in the report:

Follow Up Questions:

General

1. For the 2014 inspection, we received inmate information that pertained to the FCC Hazelton complex as a whole. Please send us the SFF Hazelton inmate information (e.g., occupancy, number of DC inmates, average age of DC inmates, average sentence of DC inmates).

The current population at SFF Hazelton is 682 inmates. There are 57 DC inmates. The average age is 40 years. The median sentence is 10 years.

Special Housing Unit

2. What is the capacity of the SHU?

The SHU capacity is 32.

3. Number of all inmates in the SHU; number of DC inmates in the SHU?

There are currently 25 inmates in the SHU; six of them are DC inmates.

4. Number of all inmates in the SHU in administrative segregation who are not awaiting disciplinary action; and number of DC inmates in the SHU in administrative segregation who are not awaiting disciplinary action?

There are currently 10 inmates in SHU not awaiting disciplinary action, six of them are DC inmates.

5. Number of inmates who have been in SHU for over a year?

There is one inmate who has been in the SHU over 12 months. She was convicted of Assault and is awaiting sentencing.

6. How many inmates currently in the SHU have been diagnosed with a mental health issue?

There are two inmates in the SHU that have previously been identified as a Mental Health Care level two. One has been diagnosed with an antisocial personality disorder and the other with schizophrenia.

7. How long is the average stay in the SHU?

The average length of stay in the SHU between March 24, 2016, and September 24, 2016, was 25 days.

Health Services

8. How many total staff members are employed by Health Services, and how many current vacancies exist? How many of the employed staff are contract employees?

There are a total of 55 employees in the Health Services department with six of these being contract employees. There are currently 10 vacancies.

9. Are inmates required to pay for mammograms, or is it apart of the routine preventive care provided for women after age 40?

There is no charge for mammograms. They are considered part of routine medical care.

Psychology Services

10. How many current vacancies exist in Psychology Services?

There are currently six vacancies in Psychology Services.

11. How many inmates are on psychiatric medication?

There are currently 319 inmates on psychiatric medication at SFF Hazelton.

12. How many inmates participate in group therapy? Individual therapy?

There are 242 inmates participating in group therapy and 16 participating in individual therapy.

RDAP

13. How many DC residents are currently participating in RDAP?

There is one DC inmate participating in the RDAP.

Resolve Program

14. Is the Resolve Program currently running? If so, how many dedicated staff are assigned to the Resolve Program?

The Resolve Program is currently active. There are two staff members assigned to the program.

15. What is the treatment capacity of the Resolve Program?

The treatment capacity in the Resolve Program is 25 inmates.

16. How many DC inmates are currently enrolled? Total inmates?

There aren't any DC inmates participating at this time.

The Resolve Program has 25 inmates participating. There are currently three DC inmates on a waiting list for the Resolve program.

Education and Programming

17. Please provide the Education Profile for the facility.

There were 31 GED completions in fiscal year 2016. There are currently 88 inmates enrolled in GED and 16 enrolled in English as a Second Language.

18. What vocational training programming is provided?

SFF Hazelton has vocational training programs in Microsoft Office and Culinary Arts.

19. What are the apprenticeship programs that are offered? How many of the apprenticeships are certified, and what entity certifies them (e.g. U.S. Department of Labor)?

SFF Hazelton offers apprenticeships in Culinary, Electric, HVAC, Maintenance, and Plumbing. These are all certified through the U.S. Department of Labor.

20. How many women are enrolled in college correspondence courses? Do SFF inmates have access to college correspondence courses offered at USP or FCI Hazelton?

There are currently eight inmates at SFF Hazelton enrolled in college correspondence courses. Inmates at SFF have access to the same college correspondence courses offered at the USP and FCI.

21. Is the Pierpont College Administrative Skills program still offered at the SFF Hazelton?

The Pierpont College Administrative Skills program is no longer offered at SFF Hazelton.

22. Is the Inside Out Program still being offered at the SFF Hazelton?

The Inside Out program is still being offered at SFF Hazelton.

23. What are the topics for some of the one-day classes taught by community members?

Examples of one-day classes include Courage to Change and Seven Areas of Life Training (S.A.L.T.). They are classes taught by

community members.

Disciplinary Hearing Officer (DHO)

24. What is the average wait time to see the DHO for a hearing?

The average wait time for a DHO hearing at SFF Hazelton is 14 days.

25. How often does DHO staff facilitate hearings with women in SFF Hazelton?

The DHO facilitates hearings at SFF Hazelton as needed, based on alleged inmate misconduct.

26. Is there shared DHO staff for the female facility and the two male facilities?

The DHO conducting hearings at the SFF also conducts hearings at the USP and FCI.

Daily Living

27. Does the institution provide sanitary napkins and tampons to women?

The institution provides sanitary napkins and tampons to inmates at the SFF.

28. How often are feminine hygiene products distributed?

Feminine hygiene products are distributed monthly and as needed or requested at SFF Hazelton.

29. Are these available on commissary; if so, at what cost?

Feminine hygiene items are also available in commissary. Pads are sold for \$5.00 per package, tampons are \$5.30 per package and panty liners are \$2.40 per package.

30. Is SFF Hazelton locked down when USP or FCI Hazelton is locked down?

SFF Hazelton is not locked down when the USP or FCI are locked down. Each institution is run individually from one another.

Recreation

31. Has yarn been replaced on Commissary?

Yarn is available via a special purchase order.

Email, Phone and Visitation

32. What is SFF Hazelton's capacity for providing video conferencing for mothers and children in collaboration with Hope House, DC?

There are no capacity issues.

33. What is the cost for a 15-minute phone call to DC?

The cost of a telephone call to DC is 21 cents per minute.

Threshold Program

34. How many dedicated staff are assigned to the Threshold Program?

There is one staff member assigned to the Threshold program.

35. How many DC inmates are currently participating in the program? Total inmates?

There are currently five DC inmates and 28 other inmates participating in the Threshold Program.

Daily Life

36. Is there a "women's menu," with reduced portions?

SFF Hazelton does not have a "women's menu".

37. When is the library available for inmate use?

Inmates may use the library from 7:30 a.m. to 8:30 p.m. Monday through Friday, and 8:00 a.m. to 4:00 p.m. on Saturdays and Sundays.

Release Preparation

38. How many DC inmates are enrolled in RPP? Total inmates?

There are a total of 92 inmates at SFF Hazelton participating in the RPP. Nine of those participating are DC inmates. There are 74 who have completed the RPP. Nine of them are DC inmates.

Employment

39. What percentage of inmates is employed on the compound at a minimum of 20 hours a week?

Forty five percent of the inmates at SFF Hazelton are working 20 hours a week.

Factual Clarification:

The draft report indicates at the time of the inspection the number of DC inmates was 76. The current number of DC inmates is 57.

Footnote 55 of the draft report indicates the Reentry Affairs Coordinator is a dedicated position within the Executive Staff. This is not accurate; the position is not an executive position.

The draft report indicates the Reentry Affairs Coordinator (RAC) along with the Case Manager, coordinates placement in a Residential Reentry Center (RRC). The Case Manager prepares the referral for the inmate to be placed in an RRC during the last 12 months or less of their term of incarceration. The RAC coordinates programs and services available in the community to partner with the facility for the benefit of releasing inmates.

The draft report indicates during a follow up survey, a DC inmate reported she had been charged a co-pay even though she requires chronic care treatment. If an inmate was charged and disagreed with the charge, she could use the administrative remedy process to either get her funds returned or explained in accordance with policy why they were not returned.

The draft report indicates "The library is open [six days a week and four nights a week]." The library is open from 7:30 a.m. to 8:30 p.m. on Mondays through Fridays and 8:00 a.m. to 4:00 p.m. on Saturdays and four hours on Sundays.

The draft report goes into detail regarding the Reentry Resource Center. According to inmates interviewed during the inspection, and recent follow-up surveys, the Reentry Resource Center was closed and later reopened with very limited hours. The Reentry

Resource Center is available during the same time frames the Education department is open (7:30 a.m. to 8:30 p.m. on Mondays through Fridays and 8:00 a.m. to 4:00 p.m. on Saturdays and four hours on Sundays).

The Draft report mentions an inmate's concern with waiting more than a year for a pap smear. Based on the Bureau's preventive health clinical practice guidelines, if an inmate is under 30 years old a pap smear is offered every three years (if the pap smear is normal). If a pap smear were to have abnormal results, follow up will be completed and more frequent pap smears may be warranted. If an inmate is over 30 years old and have normal pap smear results as well as HPV testing that is negative, they are not required to have a pap smear more frequent than every 5 years in accordance with the Bureau's Female Preventive Health Care Clinical Practice Guidelines. If there is no HPV testing, and the pap smear results are normal the inmate will have a pap smear offered every 3 years. If an inmate refuses a pap smear, they are offered it again the following year until they consent and receive a pap smear. The Bureau parallels community standards.

The draft report mentions several chaplain vacancies. These positions have been filled.

The draft report mentions the use of a "women's menu" with reduced portions being introduced in November 2014. The Bureau has a Women's Menu with smaller portions based on USDA Nutritional recommendations for women, however, the Women's Menu was never implemented at SFF Hazelton.

Recommendations by CIC:

Ensure that 14-person cells ("bus stops") are not used:

The draft report mentions several concerns from DC inmates regarding the use of 14 person cells.

Response: Due to fluctuations in population, multi-purpose rooms are used to accommodate up to 14 inmates at a time. These are typically necessary for inmates initially arriving. As cell space becomes available, inmates are moved out of the multi-purpose rooms. Bunks, mattresses, and lockers are provided when these accommodations are necessary.

Monitor staff conduct to ensure respectful and fair treatment of DC inmates: According to the draft report, DC inmates have reported concerns regarding staff retaliation, intimidation, and

racist comments from staff. The CIC further recommends the Executive Staff monitor staff treatment of inmates and ensure there is no disparate treatment based on race, ethnicity, or locality.

Response: The draft report does not provide any specific incidents or examples to demonstrate a claim of disrespectful or disparate treatment of DC inmates. The draft report eludes to a general consensus that DC inmates receive unfair treatment. The Bureau is unaware of any allegations or incidents of such disparate treatment of DC inmates. If an inmate believes her rights have been violated in any way they can follow the Administrative Remedy Process and or bring their concerns to supervisory or Executive Staff in a variety of capacities. Sustained claims against staff for disparate treatment or any other violation against an inmate would result in the staff member being disciplined according to Program Statement 3420.11 Standards of Employee Conduct.

Take all necessary steps to eliminate male officer voyeurism of female inmates: The draft report states, "The CIC is highly concerned about the reports of male officers viewing female inmates in states of undress within their cells, SFF Hazelton should immediately address this issue to ensure there are practices in place to give women a warning (i.e. knocking and waiting a few moments) to get dressed absent any exigent circumstances. All acts of voyeurism must immediately end."

Response: According to the Special Investigative Agent at SFF Hazelton, there haven't been any reports of staff voyeurism this past year. The Bureau agrees that acts of voyeurism have no place in its facilities and adheres to Program Statement 5324.12 Sexually Abusive Behavior Prevention and Intervention Program. This requires the following protocols:

(d) The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

Inmates should only shower, perform bodily functions, and change clothing in designated areas (e.g. cells, shower rooms, bathrooms). Housing unit officers of the opposite gender, or

any other cross-gender staff, may view breasts, buttocks, or genitalia only in an exigent circumstances, or when incidental to security checks of these designated areas of the housing unit.

Staff are not required to make announcements when responding to temporary and unforeseen circumstances that require immediate action in order to combat a threat to the security or institutional order of a facility, or when incidental to routine cell checks, to include circumstances such as responding to alarms, contraband detection, or detecting behavior that would constitute an inmate prohibited act, for example.

Inmates will be notified of the presence of opposite-gender staff members in several ways:

- Inmates are advised of the requirement to remain clothed, and the presence of cross-gender staff generally, during the Intake Screening process and the Admission and Orientation process.
- The following notice must be posted on inmate bulletin boards and signs within housing units, including segregated housing areas: "NOTICE TO INMATES: Male and female staff routinely work and visit inmate housing areas."
- For housing unit officers, an announcement is made at the beginning of primary shifts, or other appropriate time to be determined locally (e.g., 10:00 count instead of morning watch). The verbal announcement to each housing unit, including segregated housing areas, will be "Notice: Opposite-gender staff will be in housing units during this shift." This announcement is made using the general public address system (e.g., from Control or Lieutenants' Office). If the public address system does not cover these areas, an individual announcement in each housing area, including segregated housing areas, is made.
- For staff members with offices in the housing units; e.g., the Unit Team, the most recent schedule is posted in the unit so inmates are aware when opposite-gender staff are present.

As the agency has provided at least four ways to notify inmates that opposite-gender staff are present in the housing units, the only time an announcement is made is if a public address system is not working, or an opposite-gender staff member comes into a unit area who is not the assigned housing unit officer, or unit team member working there, and must go into individual cells,

showers, or bathroom areas.

The Bureau recognizes that addressing inappropriate sexual behavior by inmates towards staff furthers the objectives of Prison Rape Elimination Act by increasing the overall security and safety of institutions. The Bureau also has zero tolerance for sexual abuse of a staff member by an inmate, detainee, or resident.

Improve medical quality of care and decrease wait time by evaluating the time medical staff (specifically physicians, mid-level practitioners, and dentists) spend at the SFF:

The draft report states FCC Hazelton should ensure female inmates have sufficient access to physicians.

Response: The SFF has two full time Mid-level Providers and is in the process of hiring an OB/GYN Physician. The SFF also has a full time dentist.

Hire a physician who specializes in women's health.

The draft report states, "To better address female-specific medical needs, SFF Hazelton should hire a physician who specializes in women's health. This women's health physician could then alleviate the workload of the general physician (who serves the entire FCC Hazelton complex) such that both are coordinated to more efficiently address the urgent and chronic medical concerns of all the inmates."

Response: SFF Hazelton now has two full time Mid-level Providers at the SFF and are in the process of hiring a OB/GYN Physician for the SFF.

Hire a psychiatrist qualified to provide mental health care and oversee mental health medication given that SFF Hazelton is a Mental Health Care Level I, II, and III facility:

The draft report points out the uniqueness of SFF Hazelton since it houses Mental Health Care Levels I, II, and III inmates. It would be beneficial to have a Psychiatrist provide care and oversee mental health medication.

Response: Health Services at SFF Hazelton contracts with a local Psychiatrist to monitor the medication regimen of inmates that require this type of treatment.

Implement strict patient confidentiality protocols:

The draft report makes a comment that "As a general practice, medical personnel are responsible for safeguarding the medical

records of their patients."

Response: The Bureau concurs with this recommendation and adheres to the Privacy Act. If an inmate believes her rights have been violated, the Administrative Remedy process should be pursued or they could bring it to the attention of the Executive Staff.

Implement additional educational, vocational, and employment programming while also facilitating new employment opportunities: The draft report points out inmate concerns that there is little to no programming.

Response: SFF Hazelton offers 74 different classes or programs regularly throughout the year. These include the courses already listed in the response. Unit staff encourage inmates to participate in programming several times a year during their official program review.

Implement a gender-specific parenting program (e.g. developing communication skills, realistic family life goal setting, and parenting behind bars): The CIC states that "FBOP education and programming are standardized across facilities and are not tailored to the needs of women."

Response: The parenting program currently offered at SFF Hazelton is called "How to be a Responsible Mother."

Develop and track performance measures related to education, including reducing the GED waitlist, increasing the number of classes offered, and increasing overall inmate productivity: The draft report emphasizes the importance of education in reducing recidivism.

Response: The Bureau recognizes the importance of inmates receiving their GED and places a majority of its efforts available emphasizing this program. The Bureau places a significant emphasis on educational courses (vocational trades, A.C.E., etc.) in an effort with reentry and preventing recidivism efforts.

Recruit and utilize volunteers to provide classes to inmates: The draft report suggests volunteers be used from the community as providing low-cost educational opportunities.

Response: The Bureau has long recognized the significant value

of volunteers and the beneficial impact they can have on inmates. Various volunteers are utilized throughout the year. SFF Hazelton, like many other Bureau facilities is always recruiting volunteers to enhance programs. SFF Hazelton currently has a total of five volunteers assisting in the Education department regularly.

Eliminate staff use of chewing tobacco in the meal hall:

The draft report emphasizes this issue as a primary concern of the SFF population.

Response: SFF Hazelton is a tobacco free facility with designated smoking areas outside of the perimeter. Staff using tobacco inside the SFF Hazelton are in violation and subject to disciplinary action. Inmates can follow the administrative remedy process or bring this issue to the attention of the Executive staff.

Ensure that women are provided with new and unused undergarments: The draft report recommends SFF Hazelton should ensure inmates don't receive used and stained undergarments.

Response: All clothing issued at SFF Hazelton is either clean or new.

Provide women with a sufficient allowance of feminine hygiene products: The draft report recommends each inmate consistently receive a sufficient amount each month.

Response: SFF Hazelton provides sanitary napkins, tampons and toilet paper to inmates monthly and as needed or requested. Feminine hygiene items are also available in the commissary.

Stop plans to provide smaller "women's portions" and ensure existing portions are adequate: The draft report mentions plans to implement the Women's National Menu.

Response: SFF Hazelton utilizes the Regular National Menu. They are subject to the same portion sizes and the 2446 calorie a day average.

Expand the length and content of the Release Preparation Program: The draft report states the current length of the program is insufficient.

Response: Inmates are encouraged to enroll in the RPP from the first day they begin their term of incarceration. The Unit Team

monitors and encourages RPP participation throughout all inmates' terms of incarceration. SFF Hazelton offers numerous programs that would allow inmates with relatively short sentences to complete the RPP within 18 months of release. The Bureau is currently reviewing many of the RPP aspects to make it more effective and encourage more participation.

Ensure that all DC residents released from SFF Hazelton have all vital documents, including birth certificates and social security cards: The draft report states it has heard from women at SFF Hazelton who received all vital documents upon release.

Response: The Bureau has strongly emphasized the importance of these documents in recent years and is currently developing a tracking system to ensure they are obtained. Inmates with U.S. citizenship complete an application for a replacement Social Security Card prior to their release. Not all inmates receive them and are instructed to report to their nearest Social Security office upon release in order to apply in person. The Social Security Administration (SSA) determines who they issue cards to. A Memorandum of Understanding the Bureau has with the SSA lists conditions where they don't issue the cards from the applications the Bureau sends them. In most cases they will not process the applications if the individual is a naturalized citizen. Those cases require an in-person visit to the SSA office. Emphasis is placed on inmates obtaining their birth certificates prior to release as well. Applications are provided to inmates and assistance is provided in order to fill them out. Despite the assistance with the forms and the emphasized importance of having it prior to release, many inmates are unwilling to pay the \$23.00 to have it processed. The Bureau is also attempting to develop an agreement with the District of Columbia to issue district identification cards to inmates upon release.

Ensure all eligible women receive a minimum of six months of Residential Reentry Center (RRC) time and consistently track the amount of time case managers spend on coordinating RRC placement:

Response: Every inmate in Bureau custody is reviewed for placement in a Residential Reentry Center (RRC) when they are within 17-19 months from their projected release date. The purpose of the review is to determine what the releasing inmate's needs are and how much time in an RRC would lead to the least likelihood of recidivism. This is an individual evaluation process and the Bureau sees no reason to summarily

limit the DC inmates to any specific minimum amount of RRC placement or grant RRC placement to inmates longer than determined by the evaluation. It also sees no reason to track the amount of time staff spend on securing RRC time for inmates. The Bureau attempts to obtain the maximum amount of placement time as possible according to the inmates individual evaluation.

SFF Hazelton currently has 16 inmates scheduled to release in the next 12 months. Of the 16, there are two with detainers lodged against them by other agencies which would preclude them from RRC placement. There are five that have already been approved for RRC placement. There are two more cases that have recently been routed for RRC placement approval. There are three not being submitted due to pending charges, two that were initially committed to SFF Hazelton within the last two months or less and don't have enough time to be placed in an RRC, and two that refused RRC placement. The average time approved for RRC placement of those already scheduled, is three months. These terms were based on the individual assessments.

Summary of other inmate concerns:

This draft report didn't include an Inmate Feedback section specifically listing inmate concerns and comments.

I appreciate the opportunity to review and provide comments to your inspection report of SFF Hazelton. I hope to continue working closely with the CIC to improve the operations of Bureau facilities and ensure we are meeting the needs of the inmate population.

Please contact me at (202)353-3646 if I can be of further assistance.

Sincerely,

A handwritten signature in cursive script, appearing to read "Scott Finley".

Scott Finley, Administrator
Correctional Programs Branch