

USP 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 USP Hazelton from August 2014 through April 2016, with an onsite inspection occurring on August 25, 2014. Prior to the onsite inspection, the CIC communicated with all incarcerated DC residents at USP Hazelton, informing them of the impending inspection, and offering them the opportunity for a confidential interview with a member of the CIC. 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, and interviews with 25 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 ACA Audit, and administrative remedy filings and responses at the facility, regional, and central office levels.

In addition to onsite interviews, the CIC conducted an interview with a DC inmate who was recently released from USP Hazelton. The interview took place at the CIC office in Washington, DC on February 10, 2016. The CIC also received mail in April 2016 from three DC inmates who reported on conditions of confinement at the facility.

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

USP 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 25, 2014

INSTITUTION PROFILE

Security Level: High
Rated Capacity: 960
May 2014 Occupancy*: 1608 (167.5% capacity)
September 2016 Occupancy: 1331 (137% capacity)
DC Inmates in May 2014: 254 (15.8% of total population)
DC Inmates in September 2016: 221 (17% of total population)
Avg Age of DC Inmates: 31.54 years old
Avg Sentence of DC Inmates: 90 months
May 2014 Inmate-to-Staff Ratio: 4.51 : 1

KEY FINDINGS

- **Overcrowding:** USP Hazelton is overcrowded. The facility was operating at 167.5% occupancy at the time of inspection and at 137% as of September 2016.
- **Safety:** Idle time compounded by overcrowding decreases institutional safety for staff and inmates. The facility had 11 lock downs, 58 assaults on staff with weapon, and 109 use of force instances within the 12-month period prior to the CIC onsite inspection.
- **Warden:** Both inmates and staff spoke positively of the Warden, who has a positive presence around the facility and facilitates innovative ideas.
- **Medical:** USP Hazelton employs one physician, which is not adequate to care for the medical needs of all inmates, especially those who require chronic care. Medical care was the number one concern among DC inmates, who reported poor quality of care, long response times, and lack of medical follow-up after surgeries and/or procedures.
- **Psychology Services:** Psychology Services focuses on preventative care and implements innovative ways to reach inmates. The Challenge Program is a residential treatment program run by Psychology Services designed for inmates with substance abuse and mental illness. Ten to 15 DC inmates were enrolled at the time of the inspection.
- **Programming:** Inmates reported a lack of programming opportunities at the facility.
- **Inside-Out Prison Exchange Program:** The program allows inmates to participate in classes at the facility alongside other students from West Virginia University. Classes are taught by WVU professors, and participants receive college credit.
- **Special Housing Unit:** The SHU is not in full compliance with FBOP protocol related to inmate property, legal mail, and Education Department rounds.
- **Visitation:** USP Hazelton is relatively close to DC, which facilitates visitation. However, the visitation experience has been unpleasant for visitors.
- **Release Preparation Program (RPP):** The facility offers a 10-hour RPP course. The length of the program is inadequate to facilitate successful reentry.

RECOMMENDATIONS

1. Reduce facility overcrowding.
2. Follow FBOP Program Statement 5580.08 for handling of inmate property in the SHU.
3. Education staff does weekly SHU rounds and distributes programming packets and books.
4. Ensure that inmates in the SHU have a sufficient amount of hygiene and cleaning products.
5. Provide staff training on effective forms of communication and monitor staff conduct.
6. Hire additional physician and nurse practitioner.
7. Implement additional educational, vocational, and employment programming while also facilitating new employment opportunities.
8. Use front number of indeterminate sentence to determine programming eligibility.
9. Promote a positive visitation experience.
10. Follow FBOP Program Statement 5265.14 entitled *Correspondence* for legal mail procedures.
11. Develop a website where visitors can check for facility lockdown and better publicize the phone hotline for this purpose.
12. Do not release inmates directly from Penitentiaries to the community.
13. Expand the length of the Release Preparation Program (RPP), and require completion for all inmates within 18 months of release.
14. Ensure that all DC residents released from USP Hazelton have all vital documents, including social security cards.
15. Ensure all eligible men receive a minimum of six months of RRC time, and consistently track the amount of time case managers spend on coordinating RRC placement.
16. Have the *Washington Post* available in the library.

I. Facility Overview

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

A total of 254 DC residents comprise 15.8% of the population at USP Hazelton. The rated capacity of the facility is 960. At the time of the CIC inspection, the total population at USP Hazelton was 1608, which represents 168.5% of capacity. 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 onsite visit: Unit A1 and Unit A2. The facility has 12 housing units with approximately 128 inmates per unit. Each unit contains 64 cells with two inmates per cell. Unit A2 houses the Challenge Program participants.

Each unit is staffed by a counselor, a case manager, and a unit secretary. There is one correctional officer (CO) during the day and two COs in the evening. Each unit also shares a unit manager with the adjoining unit. Each case manager may oversee up to 128 inmates, and each unit manager may oversee up to 256 inmates. Inmates ordinarily meet with the unit team every six months, which increases to every three months when an inmate is within one year of release.

USP Hazelton is unique in its programming because drug treatment is completely unit-based, and psychology staff travels to individual units. Staff ensures that the programming is not scheduled during outdoor recreation time.

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. FBOP policy provides for five hours of recreation time per week, which ordinarily should occur in one-hour periods on separate days.³ Feedback received from FBOP prior to the publication of this report indicates that FBOP recently began an initiative to allow inmates additional time for out of cell activities, such as recreation. 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 Administrative detention may be used for various reasons,

including new arrivals awaiting unit designation, inmates awaiting transfer to another facility, the investigation or protection of an inmate, or other safety or security concerns.⁷

The SHU at USP Hazelton is designed to house 240 inmates. At time of the CIC inspection, 187 inmates were in the SHU, representing 78% capacity. A total of 28 DC inmates were in the SHU. The average stay in the SHU is 36.4 days according to data collected between September 1, 2015 and August 27, 2016.

Staff rotates in the SHU every three months. Unit staff, medical staff, and psychology staff conduct daily rounds in the SHU. Staff from the Education Department makes weekly rounds in the SHU and provides inmates with packets. Inmates in the SHU have access to material from the law and leisure library. Counselors from the unit where the inmate was previously housed come to the SHU once a week to check-in with the inmate.

Inmates receive the standard recreation time of one hour per day, five days per week. Pursuant to FBOP policy, inmates may make one 15-minute phone call per month. Inmates may receive visitors once a month through non-contact visits on the weekend. Inmates may also use the phone in cases of emergency or death.

Inmate Feedback

During the inspection the CIC received a total of nine positive comments about the USP Hazelton warden, who DC inmates reported as “fair,” open to trying new things, and notably present around the facility. DC inmates reported 25 concerns regarding USP Hazelton staff. Inmates informed the CIC that they feel disrespected, and some perceive staff as “racist.” Inmates also indicated that there are tension and poor communication between staff and inmates. There was one report regarding staff retaliation when an inmate submits a grievance against a specific officer.

In addition to the 25 concerns regarding staff conduct, there were 12 comments related to disparate and unfair treatment of inmates from DC. Inmates reported that staff does not know how to handle DC inmates, that they receive poor treatment, and that the compound as a whole treats DC inmates differently.

The CIC received 27 concerns about the SHU, which included poor treatment, property being mishandled, lack of educational materials, and lack of hygiene and cleaning products. The CIC also received 13 inmate concerns regarding institutional safety. Specifically, DC inmates reported that the facility is dangerous and that an inmate was killed. Inmates also indicated that the facility is frequently locked down.

In 2016, all three inmates who wrote to the CIC regarding USP Hazelton provided positive feedback about the housing unit officers. Two provided positive feedback regarding the unit manager, unit counselor, and case manager. One reported staff harassment due to DC residency status. All agreed that DC inmates are treated worse than other inmates by both staff and the other inmates themselves.

Recommendations

- 1. Reduce facility overcrowding:** A reduction in facility overcrowding is connected to a reduction in facility violence and thus increases institutional safety. USP Hazelton is at 137% capacity, and inmates expressed concern over institutional safety. While re-designating inmates, it is important to keep inmates within 500 miles of their release location. [See also recommendation number seven related to inmate employment and programming.]
- 2. Follow FBOP Program Statement 5580.08 for handling of inmate property in the SHU:** The CIC received inmate comments about missing property or property being improperly discarded during their SHU stay. The CIC recommends that the facility ensure compliance with the Special Housing Unit Program Statement 5580.08 for handling of inmate property. Specifically, the facility should ensure no inmate property is improperly discarded and that inmates are provided with legal material in accordance with the program statement.
- 3. Education staff does weekly SHU rounds and distributes programming packets and books:** While onsite, DC inmates reported not receiving education materials and/or books while in the SHU. In the SHU, inmates spend 23 to 24 hours per day in their cells. This time can be best spent through reading and completing programming packets. The CIC recommends that Education Department staff conduct weekly rounds and ensure that inmates have access to education materials, including books, at all times.
- 4. Ensure that inmates in the SHU have a sufficient amount of hygiene and cleaning products:** Due to the inmate concerns related to lack of sanitation and hygiene, the CIC recommends the facility provide inmates with hygiene items, cleaning supplies, and shower shoes in the SHU.
- 5. Provide staff training on effective forms of communication and monitor staff conduct:** DC inmates reported disrespectful staff at USP Hazelton, including tension between staff and inmates and lack of communication. DC inmates also reported disparate treatment. The CIC recommends staff training on effective and respectful communication, which will decrease tension and increase institutional safety. Additionally, the CIC recommends executive staff monitor staff treatment of inmates and ensure there is no disparate treatment based on race, ethnicity, or locality.

II. Health Services

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

Medical Care

USP Hazelton is a Medical Care Level II facility.⁸ At the time of the inspection the Health Services Department included a Clinical Director, one contract physician, and three mid-level practitioners. Health Services had 17 nurses at FCC Hazelton, including two to three nurses that are at the USP during each shift. Staff also included a phlebotomist, an X-ray technician, and a records technician. The facility contracts with an orthopedist, an optometrist, and a prosthetic specialist, all of whom split their time between the facilities at the Hazelton complex. The staff at USP Hazelton reported that medical and dental staff are hard to recruit. As of September 2016, USP Hazelton has two physician positions pending selection and is recruiting for additional nurses.

Health Services can accommodate routine procedures including X-rays, routine examinations, medication, and chronic care concerns. Health Services also includes an exam room, two infirmary beds, and two negative pressure rooms. Medical records are stored electronically. Inmates who require acute or immediate care not available at the facility are stabilized, if necessary, and then sent to local hospitals, including Ruby Memorial Hospital, Monongalia General Hospital, and Preston Memorial Hospital.

Pursuant to FBOP policy, inmates 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 will be seen the same day for triage if they submit their cop-outs by 6:30 AM.

USP Hazelton follows a preventative health initiative established by the Central Office, which has an emphasis on screening. Inmates over 50 years old receive a physical annually, and inmates under 50 years old receive physicals every three years upon request.

Medication

USP Hazelton has three pharmacists and four pharmacy technicians. The pharmacy services the entire FCC Hazelton compound.

Dental Care

Dental care is provided onsite. As a complex, FCC Hazelton has two full-time dentists, one contract dentist, and two dental hygienists. Staff at the facility stated that they did not have

enough dental hygienists and assistants. Approximately sixteen cleanings per day are completed, for a total of 80 per week. The wait time for ordinary procedures, such as check-ups and routine cleanings, is 18 to 24 months. USP Hazelton provides dentures for those with sentences greater than three years, and provision of dentures is considered on a case-by-case basis.

Mental Health Care

USP Hazelton is a Mental Health Care Level III facility.¹¹ Psychology Services includes a Chief Psychiatrist, 10 psychologists, and 13 treatment specialists; specialists include nine drug treatment specialists and four treatment specialists for the Challenge Program.

Staff reported that approximately 10% of inmates are on psychiatric medication.¹² As of September 2016, there were 133 DC inmates participating in group therapy and 32 participating in individual therapy.

The Psychology Services Department puts an emphasis on “dealing with inmates’ issues before they fester.” Every Thursday, Psychology Services hosts an open house, giving inmates the opportunity to come and speak with a staff member without an appointment. In addition to the open house, inmates can contact Psychology Services at any time through email or by speaking with a correctional officer on the unit.

Psychology Services staff conducts rounds in the SHU Monday through Friday, and there is also a designated SHU day. Staff from Psychology Services also makes rounds to all units during lockdown.

Suicide Prevention

FBOP policy requires facilities to implement suicide prevention practices.¹³ A mental health screening is conducted upon intake, 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 taken off Suicide Watch, follow-up evaluation and care are required.¹⁸

The suicide prevention program and Suicide Watch at USP Hazelton operate in accordance with FBOP guidelines. Inmates placed on Suicide Watch are monitored constantly by staff. They are placed in special observation cells and provided with a suicide-proof mattress, smock, and blanket. There are two Suicide Watch rooms, but USP Hazelton can have four rooms available if necessary. After an inmate leaves Suicide Watch, follow-up care is provided. At the time of the CIC inspection, two inmates were on Suicide Watch, including one DC inmate who was designated as Mental Health Care Level III.

USP Hazelton has an inmate companion program that trains inmates to monitor fellow inmates on Suicide Watch. Inmate companions must not have any incident reports and must receive 48 hours of training on a quarterly basis from staff psychologists.

Challenge Program

The Challenge Program is a residential treatment program developed for inmates with substance abuse or mental health needs in high security facilities.¹⁹ Inmates with a history of drug abuse, mental illness, or both may qualify for the program.²⁰ The program is valuable because it can specifically target mental health and co-occurring disorders in addition to substance abuse.

Depending on an inmate's diagnosis, the inmate may participate in the Drug Abuse Track or the Mental Illness Track.²¹ The Drug Abuse Track requires 500 contact hours (face-to-face contact with treatment staff) over at least nine months of half-day programming.²² Programming does not take place on weekends or holidays.²³ The Mental Illness Track calls for a specialized program, with contact hours based on the needs of the particular inmate.²⁴

The Challenge Program takes place on a unit devoted solely to the program, and treatment proceeds in three phases: Orientation Phase, Core Treatment Phase, and Transition Phase.²⁵ Normally, the Orientation Phase lasts one month, the Core Treatment Phase six months, and the Transition Phase two months.²⁶ Treatment progress reviews are conducted every 60 days and recorded in the Psychological Data System (PDS).²⁷

The Challenge Program is similar to the Residential Drug Abuse Program (RDAP), but the Challenge Program is specifically designed for high security facilities and does not qualify inmates for reduced sentences. Completing the Challenge Program, however, may lower an inmate's security point total to a level that qualifies for transfer to a lower security level institution. Inmates may also earn financial awards (generally \$40 for each completed phase of treatment) to make up for time lost from work.²⁸ Individual institutions may offer incentives unique to the particular institutions.²⁹

In addition to the housing unit staff, the Challenge unit staff includes four treatment specialists and a physician who oversees the program. Staff described the program as focusing on life management and effective interpersonal communication. Programming takes place in the afternoon, which allows participants to attend GED and education classes in the morning. Programming begins with larger groups and is followed by phase groups.

At the time of the CIC inspection, 80 inmates were participating in the Challenge Program, including 10 to 15 inmates from DC. An additional 40 to 60 inmates were on the waitlist. To participate in the program, inmates cannot have had any incident reports in the last 90 days and must have a history of drug abuse or mental illness based on self-reporting.

Inmate Feedback

Health Services at USP Hazelton was the number one concern among DC inmates. DC inmates submitted a total of 37 complaints that focused on the poor quality of health services and long wait times. Several inmates reported that they did not receive care for surgeries, post-surgery follow-up, chest pains, and other ailments. Two inmates noted that the medical staff are

overworked. CIC also received three concerns regarding inadequate mental health services and four regarding poor dental care. Conversely, the CIC received one positive comment about Psychology Services staff and spoke with one DC inmate who completed the Challenge Program.

In 2016, all three inmates who responded were on the chronic care caseload. One was receiving timely follow ups, and two were not. Two had trouble accessing mental health care.

Recommendations

- 6. Hire additional physician and nurse practitioner:** At the time of the CIC onsite inspection, USP Hazelton had 1608 inmates, including chronic care patients who require quarterly visits with a physician. Notably, the facility employs many nurses, who are an important part of patient care. However, a nurse cannot be a substitute for a physician, and one physician is not sufficient to serve the medical needs of the USP Hazelton population. Therefore, the CIC recommends USP Hazleton hire another physician and nurse practitioner. The additional staff would allow for improved quality of care, decreased response time, and medical follow-up after a surgery or procedure. Also, this would promote preventative care, which has been shown to reduce overall medical costs by reducing the need for corrective care, which is oftentimes more costly. The CIC also recommends the FBOP increase incentives and provide salaries commensurate to local non-prison health care practitioners to attract more candidates.

III. Education and Programming

Education Services

Education is a significant factor in reducing recidivism.³⁰ The FBOP requires that all inmates who enter FBOP custody without a GED or high school diploma enroll in education classes and participate in 240 hours of instruction towards their GED before they are permitted to withdraw from the programming.³¹ 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.

USP Hazelton offers three education curriculum levels—K-5, pre-GED, and GED—in accordance with FBOP standard curriculum. Inmates receive \$10 for completing the pre-GED program and \$25 if they pass the GED. The “Student of the Month” receives \$5. The facility emphasizes the importance of education and GED completion for inmates within five to 10 years of release. DC inmates also generally receive good time credit for their completion of the GED program.

The facility had 280 inmates enrolled in GED classes at the time of the inspection. Among the DC inmates present at USP Hazelton at the time of the inspection, 89 arrived at the facility with GEDs, 34 obtained their GED at USP Hazelton, and 67 were currently enrolled. Between September 2015 and September 2016, six DC inmates earned their GEDs, and 67 are enrolled in GED classes.

USP Hazelton partners with seven colleges to offer college correspondence courses and partners with West Virginia University (WVU) to host an Inside-Out Prison Exchange Program. Inmates pay for the correspondence courses, which are generally around \$90 to \$300. The Inside-Out Prison Exchange Program hosted at USP Hazelton brings students from WVU into the facility to attend a class alongside the inmates. Inmates are paired with the WVU students, complete the same coursework, and create a final project at the end of the class. The classes are taught by WVU professors every Friday, and the inmates receive college credit just as other WVU students.

USP Hazelton also offers college correspondence classes accredited by Ohio University, Adams State, Blackstone Career Institute, and Straford Institute. There are currently no DC inmates enrolled in college correspondence courses.

USP Hazelton also offers additional educational classes, including English as a Second Language (ESL), Adult Continuing Education (ACE) classes, and parenting workshops.

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.³² USP Hazelton is currently not offering any vocational training classes although there is a vacancy announcement for a VT Microsoft Instructor.

Apprenticeship programs at USP Hazelton that are certified by the US Department of Labor are Electric, HVAC, Plumbing, and Maintenance. The facility also offers Culinary Arts and Building Trades, which are not certified.

USP Hazelton offers workshops on resume writing, finance, dressing for success, and interview skills. It also hosts a mock job fair. Inmates can receive training to work in the law library.

Inmate Feedback

The CIC received positive comments from five DC inmates who were employed at the facility.

DC inmates expressed a total of 22 concerns regarding the lack of education and programming, including a lack of job training classes. The CIC also received concerns about the lack of employment for inmates. One inmate noted that the lack of jobs increases general idleness, which has negative effects on inmates. In addition to these 22 concerns, three DC inmates indicated that they would like to receive *The Washington Post*.

Recommendations

7. **Continue to pursue additional educational, vocational, and employment programming while also facilitating new employment opportunities:** To address inmate concerns regarding little to no programming, USP Hazelton should continue to pursue and provide increased educational and vocational opportunities. This practice would also have the added benefit of reducing overcrowding and increasing institutional safety. The CIC commends the facility for their current efforts to recruit two additional teaching positions and to add a vocational training program. We encourage the facility to continue this process of expanding programming for inmates.
8. **Use front number of indeterminate sentence to determine programming eligibility:** DC inmates sentenced for a crime committed before the year 2000 are given an indeterminate sentence, a front number and back number. The back number is either life or three times the front number (e.g. 10 to 30 years or 25 to life). Because these are all parolable sentences, most inmates will be released prior to reaching their back number and as early as their front number. The CIC recommends USP Hazelton and the FBOP utilize the front number in determining programming eligibility. This will ensure DC inmates have adequate access to educational, vocational, mental health, and reentry programming prior to returning to DC.

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. Staff at USP Hazelton indicated that the average wait time to see the DHO for a hearing is 14 days. 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	11
Inmate suicides	1
Inmate homicides	0
Inmate deaths from natural causes	0
Inmate assault on inmate, with weapon	8
Inmate assault on inmate, without weapon	58
Inmate assault on staff, with weapon	4
Inmate assault on staff, without weapon	21
Inmate attempted assault on inmate, with weapon	0
Inmate attempted assault on inmate, without weapon	1
Inmate attempted assault on staff, with weapon	0
Inmate attempted assault on staff, without weapon	14
Inmate escape from secure facility	0
Inmate escape from non-secure facility	2
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	45
Staff uses of force	109
Staff uses of restraints	62
Form 583 reports filed by staff (reports to Central Office) ³³	279

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.³⁴ 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.³⁵ 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.³⁶ 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 ³⁷	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

In 2014, the CIC received two inmate concerns regarding the ineffectiveness of the administrative remedy system. In 2016, two inmates reported that administrative remedy forms were not available.

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

USP Hazelton is 186 miles from downtown DC. It is three hours by car and 12 hours by bus.

Visitation

The visiting room at USP Hazelton provides vending machines and an area where children can play with toys and watch movies. USP 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 DC. Community-based, faith-based, and municipal partners often accompany ORCA. The purpose of the trip is to assist incarcerated DC residents in maintaining family ties to support successful reentry. ORCA also facilitates Reentry Resource fairs at FCC Hazelton.

Communication

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 USP Hazelton, an email costs \$.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.³⁸ 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.

Inmate Feedback

The CIC received five concerns from inmates regarding mail, specifically that staff is not following legal mail policies by opening legal mail outside of an inmate's presence. One inmate also reported difficulty in making legal calls.

Three inmates informed the CIC that visitors were subject to X-ray inspections and strip searches upon processing. Two inmates also reported that visitors are not made aware of facility lockdowns until they arrive.

In 2016, inmates did not report problems with mail or telephone. One had no issues with visitations, one reported difficulty due to distance and institutional lockdown, and one had issues

with the approval process for visitors. The CIC learned that family can call the facility number, and there is a recording of the lockdown and visitation status of the facility. However, there is nothing on the website that indicates that one should call it to determine if the facility is on lockdown before visiting.

Recommendations

- 9. Promote a positive visitation experience:** Visitation is an important part of maintaining community connections, inmate wellbeing, and successful reentry. Due to the relatively close proximity to DC, inmates often receive visitors. The CIC commends the FBOP for keeping these DC residents close to home and recommends USP Hazelton make the visiting experience a more positive one while ensuring institutional safety. USP Hazelton should treat visitors respectfully and avoid strip searches or visual searches involving removal of clothing beyond outerwear or metal of visitors.
- 10. Follow FBOP Program Statement 5265.14 entitled *Correspondence for legal mail procedures*:** Inmates reported that staff is not following proper legal mail procedures and is opening mail outside of the inmate's presence. The CIC recommends that the FBOP provide all staff training on legal mail procedures and that the executive staff oversee legal mail operations to ensure the system is functioning in accordance with FBOP policy and constitutional guarantees.
- 11. Develop a website where visitors can check for facility lockdown:** Inmates reported that visitors are turned away upon arrival at the facility due to facility lockdown. The CIC recommends that USP Hazelton and the FBOP maintain a website which lists all facilities on lockdown and which will allow visitors to plan accordingly. The CIC also recommends that there be greater publication – via signage in visiting areas and visitor check-ins, website, and Inmate Handbook – of the phone hotline family members can call to receive updates of facility lockdowns.

VI. Daily Life Services

Religious Services

USP Hazelton has three dedicated Religious Services staff, including the Supervisory Chaplain and two additional chaplains. There was one vacancy at the time of inspection. The facility also has many volunteers who provide various programming at the facility. The facility has an indoor chapel and outdoor worship area, and baptisms are offered by an ordained minister. There are 21 different faith groups represented at the facility.

Recreation

USP Hazelton offers a variety of recreation activities, and the Recreation Department is available to inmates between 7:30 AM and 8:30 PM daily. Recreation staff aims to have inmates spend their time positively and with a focus on reentry. Classes that are offered include music, art, leather craft, hobby craft, art, and airplane and ship model building; the facility funds the projects. The Department also offers classes on health, wellness, and fitness, and provides treadmills and a wellness library. The Recreation Director is working to establish a fitness certification program to aid inmates in becoming physical trainers.

Outdoor activities include flag football, softball, handball, soccer, volleyball, and basketball. The yard at the facility is split between two sides, with half the population having access at a time. Additional indoor activities include basketball and treadmills.

Library

USP Hazelton has a library where inmates can watch movies and read magazines, newspapers, and books. The library is open Monday through Friday from 8:00 AM to 8:00 PM and for a total of eight hours on weekends. Inmates may also make copies at the library. USP Hazelton provides access to the interlibrary loan with Morgantown Public Library.

Meals

Food Service at USP Hazelton employs 300 inmates who work in two shifts. The dining hall can seat up to 350 inmates. Staff stands in the main line during lunch to answer questions and address concerns that inmates may have. The approximate expense per inmate for meals is \$3.00/day.

The facility follows standard FBOP menu guidelines, which include offering vegetarian, heart-healthy, and religious diet options. 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. A physician must put in the order for an inmate to be placed on special diets for heart or other medical conditions. Vegetarians are given daily options on the main line that include peanut

butter and jelly sandwiches and a salad bar. 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.

Commissary

Each inmate in the general population is allowed to make purchases at the commissary once a week, with a maximum spending limit of \$320 per month. Per FBOP policy, all products except for religious items are marked up 30%.³⁹

Inmate Feedback

CIC received minimal concerns regarding daily life services, five of which related to poor food quality and one which concerned lack of materials related to an inmate's faith. There was one report of inmates receiving limited hygiene products.

In 2016, inmates reported general satisfaction with meals and that hygiene was generally good.

Recommendations

The CIC commends staff and leadership for the daily services and functioning of the facility and does not have any key recommendations at this time.

VII. Reentry

Release Preparation Program

All FBOP facilities follow a Release Preparation Program (RPP), intended to prepare inmates for community reentry upon release.⁴⁰ The program operates at both the unit and facility level, and institutions are responsible for developing their own curriculum. 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 his sentence.⁴¹ For male DC inmates in FBOP custody, the RRC is Hope Village, in Southeast DC.⁴²

At USP Hazelton, the RPP is based on six separate core categories that include health and nutrition, employment, personal finance/consumer skills, information on community resources, release requirements and procedures, and personal growth and development.

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. 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. USP Hazelton participates to ensure that returning citizens receive the information and connection to services necessary for successful reentry.

Job Search Opportunities

“JOBview 2nd Chance” kiosks allow inmates to search for employment opportunities while incarcerated. These touchscreen stations provide job listings in a user-selected geographic area and field of employment, allowing inmates to search for jobs in DC. Inmates may print out the job listing, use the website provided to contact the employer, and apply for the job. USP Hazelton has one kiosk available for inmates.

Veterans’ Assistance

Representatives for veterans come to USP Hazelton to discuss benefits with inmates who are veterans and will be released soon.

Inmate Feedback

CIC received eight inmate concerns regarding release and pre-release services and focused on the need for better release planning and programming as well as increased RRC time.

CIC also received a total of 15 concerns regarding sentence computation, security designation, and parole. Four concerns were related to difficulty in obtaining good time credit. Other concerns included incorrect sentence computation and classification, difficulty in transferring to a medium security facility, and difficulty in being granted parole.

In 2016, one inmate reported a positive experience with reentry services, including interacting with the RAC and having information about reentry resources in DC.

Recommendations

- 12. Do not release inmates directly from penitentiaries to the community:** The CIC recommends that the FBOP provide time in lower security facilities and halfway houses prior to release. By ensuring that inmates are not released from the penitentiary straight to the community, USP Hazelton will help provide a smoother transition that will facilitate more successful integration into society.
- 13. 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 USP Hazelton. The facility should require all DC inmates to complete the program within 18 months of release.
- 14. Ensure that all DC residents released from USP Hazelton have all vital documents, including social security cards:** The CIC recommends all DC residents depart secure FBOP custody with vital documents as they are an essential component of successful reentry.
- 15. Ensure all eligible men 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 USP Hazelton prioritize efforts to secure a minimum of six months for each returning citizen. To promote this priority, USP Hazelton should also track the amount of time case managers spend on securing RRC time for inmates and track inmate outcomes for each case.
- 16. Have the *Washington Post* available in the library:** DC inmates require information specific to their community to better prepare them for release. By providing the *Washington Post*, the facility would allow inmates to understand events and potential resources available in DC.

Recommendations with respect to sentence computation, security designation, and the US Parole Commission 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.

VIII. Inmate Feedback

The CIC collects inmate concerns and positive comments through a variety of sources, including phone conversations, mail and email correspondence, and inmate interviews during on-site inspections. The inmate concerns and positive comments below are compiled from all these sources. Efforts are made to reproduce concerns and comments in the inmates' own words. However, information may be summarized or paraphrased when comments are too long or convoluted or if they can be tied directly to a particular inmate. All names, identifying information, and confidential information are removed from published concerns and comments. Inmates may submit more than one concern per category. The inmate feedback presented in this section relate to interview data collected in 2014.

Inmate Concerns

Total Concerns Reported: 191

Health Services (Total Concerns: 37)
Medical (30) <ul style="list-style-type: none">• Medical isn't right.• Medical care is exceptionally poor.• Medical care is poor.• Medical will not assist inmates when they have medical issues.• Medical care is a joke; staff members give ibuprofen for everything.• Medical care is not good; there is a super slow response time.• If a medical appointment is canceled, staff will not tell you until you arrive.• Staff is overworked in the Medical Department. [x2]• X-ray machine uses too much radiation.• \$2.00 medical co-pay. [x4]• If any medical problems occur after 10:00 PM on the weekend, there is a 95% chance you may die.• Inmate died from a staph infection.• Seven people have died at USP Hazelton.• Medical staff missed a broken bone.• Inmate has chest problems and is not receiving proper care.• Inmate broke his finger, and it took ten months to see orthopedic.• Inmate couldn't see doctor when needed.• Inmate cannot get necessary X-ray.• Chronic care inmate has ulcerated colitis but has received no follow-up care.• Chronic care patient says Medical staff gets belligerent.• Inmate had heart surgery and currently experiences numbness; he received no follow-up care since the surgery.• Inmate is having issues with a muscle in his chest and has been unable to get an MRI for over a year.• Inmate had to have surgery, but Medical was not prepared for the surgery.

<ul style="list-style-type: none"> • Inmate had acute diarrhea as a result of a medical condition, and the facility would not provide extra toilet paper. • Inmate is allergic to the mattress, which causes breakouts. • Medication is given out without labels.
Mental Health (3) <ul style="list-style-type: none"> • Inmate has depression and told staff members. They did not see his problem as a major issue, and the inmate was brushed off without care. • Inmate has unsuccessfully attempted to see Psychology for his bipolar disorder. • Inmate has PTSD from incarceration and the incarceration system, but he is not receiving mental health care.
Dental (4) <ul style="list-style-type: none"> • Inmate's teeth have been cleaned twice in nine years. • Inmate had a bad filling and had to wait over a year to get another. • Inmate went in for a root canal, and Dental broke his tooth and did not fix it. • An inmate got a mouth infection in 2009 and died.
<p style="text-align: center;">Special Housing Unit and Disciplinary Hearing Officer (Total Concerns: 27)</p>
SHU (25) <ul style="list-style-type: none"> • SHU is terrible. [x2] • SHU is really bad. Staff will not help you out. • SHU is crazy. • The SHU was bad. • There have been reports of officers misusing and abusing restraints while inmates were in the SHU. Marks are visible. • Property was taken when inmates were sent to the SHU. • Property is destroyed when inmates were sent to the SHU. • SHU staff members throw property away. One inmate had both legal and personal property thrown away. • Inmate has been in the SHU for three months and does not have all of his property. He is missing two boxes, including one with legal documents. • There are no hygiene items in the SHU such as toothpaste or shower shoes. • Terrible in the SHU; inmates are given powdered toothpaste and no shower shoes. • There are not enough hygiene items in the SHU. • Mattress is painful in the SHU. [x2] • SHU staff members take away inmates' mattresses and have them sleeping on the floor. [x2] • One inmate is not able to work on his GED in the SHU although he was in general population. The Education Department is supposed to do rounds in the SHU and distribute packets, but they do not. • Staff is supposed to give inmates four books, but inmates do not receive books. • Inmate cannot get study material in SHU. • No rehabilitation in the SHU, only warehousing. • Inmate placed himself in the SHU for protective custody and has been there for about a year. • Inmate has been in the SHU for nine months. His visitation privileges were taken. • Inmate is in the SHU as a result of his response to a disrespectful CO. • Inmates do not receive proper cleaning or hygiene materials in the SHU. For two weeks, things were messed up, and they did not give proper cleaning sanitation or hygiene products. • Many disrespectful staff are in the SHU.
DHO (1)

<ul style="list-style-type: none"> One inmate had to see the DHO for defending himself after he was hit by another inmate.
<p style="text-align: center;">Staff Conduct (Total Concerns: 25)</p>
<p>Staff Overall (20)</p> <ul style="list-style-type: none"> COs are not respectful. [x2] Some staff members are disrespectful. The COs do not give inmates respect; this is the culture. COs have no respect for inmates. A lot of the staff members are a little disrespectful. Many of the staff members are disrespectful and unprofessional. Some staff take advantage of their job, and some respect the inmates. Some staff members are ignorant, incompetent, and unprofessional. Shakedowns are used as a harassment tool. COs cause tension. The problem is bad communication with the staff, and there is a bad atmosphere. Staff also needs to communicate with each other. Movements on the compound are every two hours with a very short window to allow inmates to travel from one destination to the next. Case manager doesn't do his job. Warden is fair, but his staff is bad. Warden is willing to try things, but staff shuts him down. Warden does nothing for inmates. Inmate was written up because he uses a walker, and a staff member claimed he didn't stand when asked. Staff provided inmate with torn clothes and then wrote him up for having torn cloths. Staff is generally unresponsive except in the case of significant incidents and violence.
<p>Staff Retaliation (1)</p> <ul style="list-style-type: none"> If an inmate submits a grievance against a specific officer, the inmate will be targeted.
<p>Staff Racism (4)</p> <ul style="list-style-type: none"> Race is taken into account when it comes to inmates. There are staff racism issues. COs give inmates a hard time, and some are racist. Staff is racist.
<p style="text-align: center;">Education and Programming (Total Concerns: 25)</p>
<p>Programming</p> <ul style="list-style-type: none"> No programming. No programming for inmates. Not enough programming or education. There is neither incentive nor punishment for the decision to program or not to program. No programs and no VT classes. Inmate sought to prepare for the CDL training class, but the books that inmates requested from the DMV were locked in a locker in the VT Department. Staff locked the CDL books from inmates due to retaliation because the inmates took the initiative to send off for the CDL books and study guide. Programming is lacking; no certification programs. No programming that actually rehabilitates. Inmate does all the programs, such as the drug programs, but he feels there is no progress through

<p>the system. No incentives to do well.</p> <ul style="list-style-type: none"> • Inmate cannot participate in the Challenge Program because staff always looks at his back number. • No ACE programming. • No college classes. [x2] • No job training classes. [x2] • The facility needs to offer workforce training. • Inmate had to wait four years to get into GED class. He was told he had too much time left to be enrolled in a GED class.
<p>Jobs (7)</p> <ul style="list-style-type: none"> • There are lot of unemployed guys here. • Staff does not give inmates jobs. • Lack of jobs is causing too much idleness, which is bad for inmates. • No job, but trying to get one. • No job and not enough jobs for inmates. • There aren't enough jobs. • The only job available is Food Service.
<p style="text-align: center;">Communication and Visitation (Total Concerns: 15)</p>
<p>Visitation (8)</p> <ul style="list-style-type: none"> • Staff should have more respect for visitors. • There is a body scan in the "visiting room." • There are a radiation machine, strip search, and X-ray for visitors. • There is a strip search and X-ray for visitation. [x2] • Facility won't tell family and friends when the facility is on lockdown until they arrive. • Visitors turned away frequently because of lockdowns. • Not being able to touch family members and loved ones doesn't make sense. • Inmate has no visitation because of the distance from DC.
<p>Mail (5)</p> <ul style="list-style-type: none"> • Legal mail procedures are not honored. • Legal mail is opened before it is received by inmates. • When inmates received CIC letters, they were already open. • Inmate wrote letter to Eleanor Holmes Norton, but the letter was returned. Inmate feels there is no one to reach out to in DC. • Legal mail policies are not being followed. Staff isn't giving indigent inmates stamps or envelopes. Legal mail is getting opened, but not in front of the inmate as per FBOP policy.
<p>Phone (1)</p> <ul style="list-style-type: none"> • There is a problem with getting legal calls out.
<p style="text-align: center;">Sentence Computation, Security Designation, and Parole (Total Concerns: 15)</p>
<p>Designation (4)</p> <ul style="list-style-type: none"> • Points are not adjusted for programming. • Classification is messed up. • DC inmates have low points. There are at least three here with under 20 points, but none of them have ever seen time in an FCI. • Inmate has 11 points and wants to go to a medium security facility; however, he has a public safety factor, and his case manager won't help him transfer. Mediums have a lot more to offer.
<p>Computation (7)</p>

<ul style="list-style-type: none"> • Sentence computation is not correct. • DC inmates' sentences are turned into federal sentences. • FBOP is screwing up inmate's parole date. • Not getting education good time; only certain college courses get education good time. • Good time credit is not being computed. • Inmate is not getting education good time because only certain courses get education good time. • Good time needs to be considered so inmate can go to halfway house.
<p>Parole (4)</p> <ul style="list-style-type: none"> • The U.S. Parole Commission doesn't want to grant parole to DC inmates. • DC inmates have short time, but parole officers seem to want to send inmates back. • Inmate should have received an initial parole eligibility hearing at 40 years, but he is not scheduled to receive an initial hearing until 50 years. • Judge sentenced inmate to minimum assuming the minimum would be the actual time served at Lorton under DC parole guidelines, but U.S. Parole Commission is now applying guidelines differently.
<p style="text-align: center;">Institutional Safety (Total Concerns: 13)</p>
<ul style="list-style-type: none"> • Inmates can lose their lives quickly in here. • Inmate's life was placed in danger because FBOP staff could not keep him safe. He was stabbed and defended himself. Now he is going to ADX. • There was a murder. • Someone was killed, and the institution was placed on lockdown. • There was a lockdown because inmate was killed. [x2] • There are lockdowns all the time. • When significant incidents take place on a Friday, the facility is locked down for the entire weekend. • It is dangerous here. • There is a lot of tension in federal prison. There is violence there, but it is random • During lockdown, inmates are not allowed to shower. • Inmate doesn't feel safe because the whole compound hates DC. • Inmate felt safe generally in reference to staff interaction, but unsafe in reference to interaction with inmates who were serving sentences much lengthier than his.
<p style="text-align: center;">DC Specific Issues (Total Concerns: 12)</p>
<ul style="list-style-type: none"> • COs don't know how to deal with DC inmates. • DC inmates' sentences are turned into federal sentences. • Treatment is bad for DC inmates. • Staff treats DC inmates differently. • Some staff treat inmates from DC differently. • DC guys don't get transfers to lower securities as much as other inmates. • DC guys are all treated the same, as though they are one unit. • Inmate is treated differently because he is from DC. • The whole compound hates DC people, and DC guys are outcasts. • Inmate wants the <i>Washington Post</i>. [x2] • DC inmates do not have the <i>Washington Post</i> newspaper. • Staff tends to make stereotypical remarks about DC inmates with implications that they are problem inmates.

<p align="center">Release and Pre-Release Services (Total Concerns: 8)</p>
<ul style="list-style-type: none"> • Inmate will be released from USP to street. • Inmate will be released without halfway house time right into the community. • Inmates are not given the tools needed for reentry. There are no job building skills, and inmates need release classes (including social skills, resumes, and job applications).to prepare them to be successful in community, • There is no release planning, and inmates need better halfway house planning. • Inmate is going to Hope Village but does not want to. • Inmate has no place to live upon his release. • Inmate was strip searched in Receiving and Discharge (R&D) when he was released from the facility to return home. He was not releasing to a halfway house. • Inmate was released with no halfway house time. Case managers refused to do his halfway house paperwork because he was incarcerated on a violation.
<p align="center">Daily Life Issues (Total Concerns: 7)</p>
<p>Food and Meals (5)</p> <ul style="list-style-type: none"> • The food is no good. Inmates are not being fed. • Food is served on cardboard trays in small portions. • The hot bar and salad bar is for show. • The breakfast is two years old. • Staff uses food as a control factor.
<p>Hygiene (1)</p> <ul style="list-style-type: none"> • Staff does not provide hygiene products, and inmates who do not have jobs cannot afford to purchase them. A small travel size of toothpaste is provided, but no deodorant.
<p>Religious Services (1)</p> <ul style="list-style-type: none"> • Chaplain said they did not have material available for inmate's faith.
<p align="center">Administrative Remedies (Total Concerns: 2)</p>
<ul style="list-style-type: none"> • Administrative remedies to the Regional and Central offices as well as mail to other agencies are not leaving the institution. • Administrative remedy system is "BS." Nothing ever comes of filed grievances.
<p align="center">Other Issues (Total Concerns: 5)</p>
<ul style="list-style-type: none"> • Fines are taken out of inmates pay. • Money is taken to pay FBOP fine, but not on his Judgment and Commitment Order. • Inmate is being forced to pay fines to FBOP despite there being nothing on his Judgment and Commitment Order. • Inmates are in units 24/7. The recreation area is not being used. • Inmates never have enough time for movement. They only have one move after every meal. Also, men in the housing unit are doing nothing.

Inmate Positive Comments

Total Positive Comments Reported: 24

Staff Conduct (Total Comments: 9)	
<ul style="list-style-type: none"> • Warden is fair. • Warden is willing to try things. • Warden is a fair person. • Warden is pretty cool. He doesn't keep the facility locked down for long. • Warden makes rounds • Warden is okay. He tries. • Warden is hands-on. • Warden is okay. • Warden walks around. He's not bad. 	
Education and Programming (Total Comments: 8)	
<ul style="list-style-type: none"> • The acility started a computer class. • Inmate has a job. • Inmate works in the Recreation Department. • Inmate has been working since he was incarcerated. He currently works in the commissary . • Inmate has a job as a resource clerk. • Inmate works in the safety department. • Staff does not force inmates to work, and the correctional officers do not "trip about petty things." They are focused on safety. • Inmate was issued his social security card upon release along with \$50 gratuity fee. 	
Communication and Visitation (Total Comments: 4)	
Visitation	
<ul style="list-style-type: none"> • Inmate has received visits four times. • Inmate receives visits from his brother twice a year and talks to family on the phone every day. • Inmate gets visitors twice a month. 	
Mail	
<ul style="list-style-type: none"> • Inmate has not experienced problems with the mail. 	
Health Services (Total Comments: 1)	
Mental Health	
<ul style="list-style-type: none"> • Psychology is good. 	
Other Issues (Total Comments: 2)	
<ul style="list-style-type: none"> • The facility puts out a newsletter. • Inmate completed the Challenge Program. 	

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: ~~§ FEDERAL BUREAU OF INVESTIGATION (FBI), 2015, available at~~ 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).

Id.

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.

Id.

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. While FBOP Program Statements do not define the classification levels, other FBOP and DOJ documents describe the four levels.

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.

Care Level 1 inmates are less than 70 years old and are generally healthy but may have limited medical needs that can be easily managed by clinician evaluations every 6 months. Sub-specialty care is limited in that it is not regularly required and is completed in less than 3 months. This care level includes inmates with stable mental-health conditions requiring chronic care appointments and individual psychology or health services contacts no more than once every 6 months. The acute services required, such as crisis intervention, are less than 3 months duration, occur no more than every 2 years, and can be resolved without hospitalization.

Care Level 2 inmates are stable outpatients with chronic illnesses requiring at least quarterly clinician evaluations. These inmates independently perform daily living activities. The care level includes inmates with mental health conditions that can be managed through chronic care clinics or individual psychology or health services contacts no more frequently than monthly to quarterly. The acute services required, such as crisis intervention, are less than 3 months duration, occur no more than every 2 years, and can be resolved without hospitalization.

Care Level 3 inmates are fragile outpatients with medical conditions that require daily to monthly clinical contact. These inmates may have chronic or recurrent mental illnesses or ongoing cognitive impairments that require daily to monthly psychiatric health services or psychology contacts to maintain outpatient status. These inmates may also require assistance in performing some activities of daily living, but do not require daily nursing care. Inmates in this care level may periodically require hospitalization to stabilize the inmate's medical or mental health condition.

Care Level 4 inmates have acute medical or chronic mental health conditions resulting in severe impairments to physical and cognitive functioning. These inmates require services at Medical Referral Centers (MRC), such as the BOP's Federal Medical Centers (FMC), and may require varying degrees of nursing care.

OFFICE OF THE INSPECTOR GEN., U.S. DEP'T OF JUSTICE, THE FEDERAL BUREAU OF PRISON'S EFFORTS TO MANAGE INMATE HEALTH CARE (Feb. 2008), *available at* <http://www.justice.gov/oig/reports/BOP/a0808/final.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>; *see also* 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. 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. Wardens may impose restrictions on an inmate to prevent abuse of the exemption for indigence. *Id.*

¹¹ In 2014, the FBOP publicly 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.

(1) **Mental Health Care Level One.** Inmates classified as CARE1-MH are not required to receive any regular mental health services or to have a treatment plan. When mental health services are provided to these inmates, they are documented in PDS.

(2) **Mental Health Care Level Two.** Required services include, but are not limited to:

- A diagnosis and mental health care level for each inmate will be documented in a Diagnostic and Care Level Formulation note in PDS.
- A rationale for the diagnosis and assigned care level will also be documented in the Diagnostic and Care Level Formulation note in PDS.

- A collaborative, individualized treatment plan that describes the inmate's problems and goals, and the interventions planned to assist with goal attainment will be developed, reviewed, and updated at least every 12 months.
 - Evidence-based psychosocial interventions on at least a monthly basis (if group treatment is offered, it should occur at least every other week, to provide continuity of care).
- (3) **Mental Health Care Level Three.** Required services include, but are not limited to:
- A diagnosis and mental health care level for each inmate will be documented in a Diagnostic and Care Level Formulation note in PDS.
 - A rationale for the diagnosis and assigned care level will also be documented in the Diagnostic and Care Level Formulation note in PDS.
 - A collaborative, individualized treatment plan that describes the inmate's problems and goals, and the interventions planned to assist with goal attainment, will be developed, reviewed, and updated at least every 6 months.
 - Evidence-based psychosocial interventions on at least a weekly basis are provided via enhanced outpatient care or on a scheduled basis consistent with a residential Psychology Treatment Program.
- (4) **Mental Health Care Level Four.** This treatment takes place only in a Medical Referral Center. Required services include, but are not limited to:
- A diagnosis and mental health care level for each inmate will be documented in the Diagnostic and Care Level Formulation note in PDS.
 - A rationale for the diagnosis and assigned care level will also be documented in the Diagnostic and Care Level Formulation note in PDS.
 - A collaborative, individualized treatment plan that describes the inmate's problems and goals, and the interventions planned to assist with goal attainment will be developed, reviewed, and updated at least every 90 days.
 - Evidence-based psychosocial interventions and/or individual mental health contacts will occur on at least a weekly basis.
- At CARE4-MH sites, for inmates too cognitively impaired to engage in traditional psychosocial interventions (i.e., severe neurocognitive disorders), supportive contacts from a broad variety of providers may be the most appropriate care plan. Frequency and type of care will be determined on an individual basis for these cases.

Id.

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 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 For admission into the Challenge Program, an inmate must have either a "history of drug abuse as evidenced by self-report, Presentence Investigation Report (PSR) documentation, or incident reports for use of alcohol or drugs" or a "major mental illness as evidenced by a current diagnosis of a psychotic disorder, mood disorder, anxiety disorder, or personality disorder." *Id.* Inmates may be placed in the program or voluntarily enroll at any time during the course of their sentence, and inmates with mental health needs may be placed directly in the unit after screening. *Id.* In federal prison, 28.5% of inmates have co-occurring mental health problems and substance dependence or abuse. 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>. 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.*

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 *Id.*

²⁸ *Id.*

²⁹ *Id.*

³⁰ Educational programming is both good for an inmate's well-being and decision-making, as well as the inmate's ability to obtain employment upon release, all of which reduce recidivism rates. *See* LOIS M. DAVIS ET AL., RAND CORP., HOW EFFECTIVE IS CORRECTIONAL EDUCATION, AND WHERE DO WE GO FROM HERE?: THE RESULTS OF A COMPREHENSIVE EVALUATION (2014), *available at*

http://www.rand.org/content/dam/rand/pubs/research_reports/RR500/RR564/RAND_RR564.pdf (analyzing available literature on educational programs for incarcerated individuals and concluding that "[i]nmates who participated in correctional education programs had a 43 percent lower odds of recidivating than inmates who did not"); 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; *see also* John M. Nally et al., *The Post-Release Employment and Recidivism Among Different Types of Offenders with a Different Level of Education: A 5-Year Follow-Up Study in Indiana*, 9 Just. Pol'y J. 16 (2012), *available at*

http://www.cjcj.org/uploads/cjcj/documents/the_post-release.pdf; JOHN M. NALLY ET AL., IND. DEP'T OF CORR., THE IMPACT OF EDUCATION AND EMPLOYMENT ON RECIDIVISM (2011), *available at*

http://www.in.gov/idoc/files/Impact_of_Education_and_Employment_on_Recidivism.pdf.

³¹ 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.

³² *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.*; *see also*

John M. Nally et al., *The Post-Release Employment and Recidivism Among Different Types of Offenders with a Different Level of Education: A 5-Year Follow-Up Study in Indiana*, 9 Just. Pol'y J. 16 (2012), *available at*

http://www.cjcj.org/uploads/cjcj/documents/the_post-release.pdf; JOHN M. NALLY ET AL., IND. DEP'T OF CORR., THE IMPACT OF EDUCATION AND EMPLOYMENT ON RECIDIVISM (2011), *available at*

http://www.in.gov/idoc/files/Impact_of_Education_and_Employment_on_Recidivism.pdf.

³³ 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.

³⁴ 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. An inmate may only

submit a request or appeal on behalf of that inmate, 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 incarceration.

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.*

³⁵ 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.*

³⁶ 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.

³⁷ 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>.

³⁸ 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.

³⁹ 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.

⁴⁰ 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 recently 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. Given the importance of reentry preparation for successful transition back into the community, this is an important development at the FBOP.

⁴¹ Inmates must participate in the Release Preparation Program to receive placement time at an RRC.

⁴² While the FBOP only contracts with Hope Village for male DC inmates, the DOC also contracts with Extended House and Efforts from Ex-Convicts. The only RRC for females in DC is The Fairview, located in Northeast DC.

Appendix A: Demographics Overview

USP Hazelton Facility*		
Total inmates	1608	
DC inmates ¹	254 (15.8% of total population)	
Rated capacity	960	
Percent of capacity	167.5%	
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 USP Hazelton specific information on the below five items only. All subsequent data relate to the entire FCC Complex.

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,

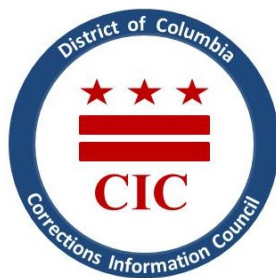
² For the purposes of violent offenders, inmates with the following offense categories are included: Weapons, Explosives, Arson, Homicide, Aggravated Assault, and Kidnapping.

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

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 6 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 6 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)		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.*



**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

SEP 23 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 25, 2014, visit to USP 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 offenders. We hope to continue working closely to improve the Bureau facilities and raise awareness with regard to those offender's needs. I offer the following response to the questions and/or statements in the report:

Follow Up Questions:

Follow-Up Questions for USP Hazelton
General

1. What is the occupancy as of July 1, 2016?

As of July 1, 2016, there were 1,331 inmates at USP Hazelton.

2. What is the average age of DC inmates?

The average age of DC offenders at USP Hazelton is 31.54 years.

3. What is the average sentence of DC inmates?

The average (median) sentence length of DC offenders at USP Hazelton is 7.5 years.

Special Housing Unit

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

For the period between September 1, 2015, and August 27, 2016, the mean days spent in the Special Housing Unit at USP Hazelton was 36.4 and the median was 19 days.

Residential Drug Abuse Program (RDAP)

5. How many total inmates have graduated RDAP since its start in 2010?

USP Hazelton does not have an RDAP.

6. How many DC inmates are currently enrolled? What is the total number of inmates enrolled in the RDAP?

USP Hazelton does not have an RDAP.

Education and Programming

7. Please provide the Education Profile for the facility for the past 12 months.

During the past 12 months, 6 DC offenders earned their GED. There are currently 67 DC offenders enrolled in GED.

8. How many DC inmates are participating in College Correspondence courses?

There aren't any DC offenders participating in correspondence courses at USP Hazelton.

9. Are any of the College Correspondence courses available to inmates facilitated by accredited schools?

There are college correspondence courses available to inmates from accredited schools at USP Hazelton. The inmates determine the courses they take based on various college programs offered. The inmates enrolled, typically use Ohio University, Adams State, Blackstone Career Institute, or Straford Institute.

10. How many DC inmates are in the Flagger's Program?

There aren't any D.C. offenders currently participating in the Flagger's Program.

11. 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)?

Apprenticeship programs at USP Hazelton are certified through the U.S. Department of Labor. The programs include: Electric, HVAC, Plumbing and Maintenance. USP Hazelton also offers Culinary Arts and Building Trades. These courses are not certified.

12. What vocational training programming is provided?

USP Hazelton is not currently offering any vocational training classes. There is a vacancy announcement for a VT Microsoft Instructor listed in USAJOBS. The intent is to offer a Microsoft vocational training program after the instructor position is filled.

Disciplinary Hearing Officer

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

The average wait time to see the D.H.O. for a hearing at USP Hazelton is 14 days.

Visitation and Phone

14. Does the facility use an Ion Scanner?

USP Hazelton uses an Ion Scanner.

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

The cost of a 15-minute phone call to Washington DC, is \$3.15.

Library

16. How often can inmates access the library?

The library is open from 8:00 a.m. to 8:00 p.m., Monday through Friday and eight hours total on weekends. Inmates are permitted to use the library during their non-working hours whenever the library is open.

17. Do inmates have access to the interlibrary loan with Morgantown Public Library?

Yes, inmates are permitted to have access to the interlibrary loan with Morgantown Public Library.

Safety

18. Please provide details regarding the DC inmate who was killed by another inmate in March of 2015? What actions has the facility taken to reduce deaths due to violence?

This is an on-going investigation and the inmate accused of the homicide is pending prosecution. The details are currently outside the scope of public information. USP Hazelton has increased the amount of pat and area searches for weapons and placed an additional staff member in each housing unit.

Mental Health

19. How many DC inmates are currently participating in group therapy?

There are currently 133 DC offenders participating in group therapy at USP Hazelton.

20. How many DC inmates are currently participating in individual therapy?

There are currently 32 DC offenders participating in individual therapy.

Reentry

21. What are the components of the RPP class?

The RPP is a variety of classes and courses varying in length and effort based on six separate core categories. These include:

Health and nutrition, courses include disease prevention, weight management, holistic health, mental health support/counseling groups, eating and shopping nutritionally, stress management, sexuality, AIDS awareness, and physical fitness. During this calendar year, USP Hazelton is offering HIV and Other Infectious Diseases and Nutrition & Wellness courses.

Employment, courses include resume submission/writing skills, mock Job Fairs, aptitude testing, dressing for success, job search techniques, interviewing techniques/skills, career choices, keeping a job, and relationships with co-workers. During this calendar year, USP Hazelton is offering a class titled Resume Writing tips and another titled Job Search & Interview Techniques.

Personal finance/consumer skills, courses include balancing and maintaining a checkbook, developing savings accounts, buying or leasing a car or home, managing money/credit, and living on a budget. During this calendar year, USP Hazelton is offering a class titled, Balancing a Checkbook and another titled, Managing Money/Credit & Living on a Budget.

Information/community resources, courses include the role of the USPO and supervision requirements, Residential Reentry Center regulations, finding and using local social service agencies, Social Security resources, housing availability, legal requirements, and state employment services. During this calendar year, USP Hazelton is offering a class titled Job Fair in addition to visits from the United States Probation Office and Community Corrections staff.

Release requirements and procedures, courses include types of releases, releases to detainers, release gratuities, conditions of supervision, disposition of personal property, release clothing, trust fund account, inmate telephone system accounts, advanced pay requests, Inmate Financial Responsibility Program post-release obligation, and reporting procedures. During this calendar year, USP Hazelton is offering a class titled Release Procedures and Release Process.

Personal growth and development, courses include marriage enrichment, parenting, child development, discipline of children, activities for and with children, interacting with school and child care, the effect of separation on children, positive self-image, anger control, cognitive skills, substance abuse treatment programs, drug education, speech or communication classes, education, victim awareness, life skills information, relapse prevention, and developmental psychology. During this calendar year, USP Hazelton is offering two classes titled Communication/Soft Skills and Stress Management.

Factual Clarification:

The draft report indicates at the time of the onsite inspection, there were 254 DC offenders and the total population was 1608. There are currently 221 DC offenders and the total population is 1331 which is 137% of capacity.

The draft report states inmates in the Special Housing Unit (SHU) are provided five hours of recreation a week. The Bureau recently began an initiative to allow inmates a greater period

of time out of cell activities such as recreation. If the population of the SHU is not at capacity and staffing resources are available, additional time in recreation is permitted.

The draft report indicates Education staff make rounds through the SHU weekly distributing packets. Later in the report, DC offenders interviewed indicated they did not receive packets or books while in the SHU. The CIC goes on to recommend Education staff distribute programming packets and books and make weekly rounds through the SHU. The Bureau has long recognized the need to allow inmates in the SHU an opportunity to program and have access to reading materials provided by the Education department. That is one of the many reasons staff from the Education department make weekly rounds through the SHU at USP Hazelton distributing these materials.

Footnote 42 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 "Three inmates informed the CIC that visitors were subject to X-ray inspections and strip searches." The Bureau's policy governing the searching of visitors is Program Statement (P.S.) 5510.15, Searching, Detaining, or Arresting Visitors to Bureau Grounds and Facilities. This P.S. states the use of X-rays can be used for the searching of personal containers and belongings. X-rays are not used to search inmate visitors themselves. According to the P.S. a visual search of a person involves removing all articles of clothing, including religious headwear, to allow a visual (non-tactile) inspection of body surfaces and cavities. Visual searches of persons may only be conducted when authorized by the Warden upon reasonable suspicion that the subject is engaged, or attempting to engage, in prohibited activities, including possession of prohibited objects. Therefore, unless a visitor is believed to be involved in the previously mentioned activities, they are not routinely subject to a visual search or in any case an X-ray of their body. According to staff at USP Hazelton, there hasn't been a situation where a visitor required

a visual search.

The draft report states "USP Hazelton provides dentures for those with less than eight teeth..." According to Bureau policy, Program Statement 6400.03 Dental Services, the actual process by which an inmate will receive dentures is as follows:

Dental Prostheses. Full dentures, partial dentures, obturators, and splint therapy may be provided if clinically indicated; prosthodontics (full and partial dentures) is a component of the comprehensive dental treatment plan. All prosthetics are to be approved by the RCD.

The replacement of teeth is a lower priority than relief of pain and treatment of active dental/oral disease and should be initiated only after all active disease has been treated and risk is managed. Full and partial dentures will be authorized for inmates with sentences greater than 3 years. Inmates with sentences less than 3 years who may present with unusual circumstances will be considered on a case-by-case basis by the RCD.

A Removable Partial Denture (RPD) must be justified by a lack of teeth for adequate mastication and should be deferred if any of the following conditions are present:

- Poor periodontal health.
- Poor oral hygiene.
- Non-restorable teeth present.
- Chronic infection.
- Active caries.
- Restorations not completed.
- Eight or more posterior teeth in occlusion, including bicuspid occlusion.
- The inmate has less than six months remaining in a BOP correctional facility.

Prosthetics (transitional, temporary, cast, or acrylic) or therapeutic splints are initiated only after periodontal, surgical, and restorative treatment is completed, and the patient maintains a periodontally healthy environment that will help improve clinical outcomes. If the patient does not maintain proper oral hygiene, the treating dentist may discontinue treatment until home care improves. Documentation of oral hygiene evaluation(s) is maintained in EMR, accompanied by specific oral hygiene instructions provided to help the patient improve his/her oral condition.

Recommendations by CIC:

Reduce facility overcrowding:

During the time of the original inspection, the overcrowding rate was 167.5% of the facility's operating capacity.

Response: The current overcrowding rate is 137%. The population of the facility will always fluctuate with the need for beds in a high security facility. Current trends in sentencing, the projection of available high security beds coming on line, and new initiatives to allow high security inmates to transfer to less secure facilities near their release should continue to relieve overcrowding.

Follow FBOP Program Statement 5270.10 for handling of inmate property is SHU:

The draft report states, "the facility should ensure no inmate property is improperly discarded and that inmates are provided with legal material in accordance with the program statement." The Bureau assumes this recommendation was made in relation to four comments made by inmates to the CIC. These comments are found on page 21 of the draft report and are as follows:

- Property was taken when inmates were sent to the SHU.
- Property is destroyed when inmates were sent to the SHU.
- SHU staff members throw property away. One inmate had both legal and personal property thrown away.
- Inmate has been in the SHU for three months and does not have all of his property. He is missing two boxes, including one with legal documents.

Response: Program Statement 5270.10 is the Special Housing Units. It provides guidance on the confiscation of contraband, inmate possession of stolen property, impounding personal property as a disciplinary sanction, and sanctioning inmates for the destruction of government property. This recommendation is not applicable to the comments of the inmates or the recommendation made by the CIC.

There is a policy regarding the handling of inmate property. This is Program Statement 5580.08 Inmate Personal Property. This policy provides instruction on the handling and careful inventorying of inmate personal property. Inmates placed in SHU will have their personal property packed, inventoried and

forwarded to the SHU where the inmate will have an opportunity to go over the inventory and determine if anything is missing. At that time they will be able to file a tort claim if they can establish ownership of any items they claim are missing. The inmate will be permitted to retain legal material in SHU provided their case is ongoing and active. Every effort will be made in order to keep the inmate from being deprived of their access to the court. The inmate's unit team is typically involved with this process. The alleged instances were provided in section VIII "Inmate Feedback" of the CIC report. The Bureau would gladly follow up regarding these allegations if specific information was provided by the CIC (date, inmate names and register numbers).

Education staff does weekly rounds SHU rounds and distributes programming packets and books:

The draft report lists one complaint that states "One inmate is not able to work on his GED in the SHU although he was in the general population. The Education Department is supposed to do rounds in the SHU and distribute packets, but they do not."

Response: The Education department maintains a book cart in the SHU with both leisure reading and GED preparation text books. They also offer Adult Continuing Education (ACE) programs. The Education Technicians take ACE programs to SHU once week to deliver to inmates who requested the material and the next week they collect it. If an inmate is already enrolled in a Post-Secondary Education Program, they may continue the program while in SHU if it meets all security requirements. Students enrolled in GED prior to being placed in SHU, may request work from his/her teacher and the packets will be delivered during the weekly rounds.

Ensure that inmates in SHU have sufficient amount of hygiene and cleaning products:

The draft report lists two complaints regarding SHU staff issuing tooth powder instead of toothpaste and the lack of available shower shoes.

Response: Inmates in the SHU are issued clean sheets, adequate cleaning supplies, soap, toilet paper, toothbrush, and tooth powder weekly. Inmates are permitted to purchase toothpaste from commissary if they choose. Shower shoes are permitted to be retained in SHU if the inmate already owns a pair. There is no policy requiring the Bureau to provide inmates with shower

shoes while they are in SHU.

Provide staff training on effective forms of communication and monitor staff conduct:

The draft report does not point out any specific incidents or examples to demonstrate a claim of disrespectful or disparate treatment of DC offenders. The draft report mentions numerous complaints that staff are disrespectful.

Response: The Bureau believes communication is a vital component to the management of its inmate populations and ultimately its facilities. Communication training is a part of the initial training staff receive when they are hired and during annual refresher training. The Bureau is unaware of any allegations or incidents of disparate treatment of DC offenders. If an inmate believes his/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.

Hire additional physician and nurse practitioner:

The draft report recommends hiring an additional physician and a nurse practitioner.

Response: USP Hazelton currently has two physician positions pending selection and is recruiting for additional nurses.

Implement additional educational, vocational, and employment programming while also facilitating new employment opportunities:

The draft report makes this recommendation based on numerous inmate statements USP Hazelton lacks programming and only allows some inmates to work 20 hours a week. The CIC believes additional vocational programs would cut down on the wait times and provide inmates an opportunity to work more than 20 hours a week.

Response: USP Hazelton is looking at adding a vocational training program to its curriculum after hiring a new VT instructor. They are also hiring two additional teaching positions. In reviewing the work detail quotas and hours worked

by inmates per week at USP Hazelton, the majority of the inmates are working 35 hours a week which is considered a normal work week. There are inmates only working 20 hours a week. With the closing of the Unicor operation at USP Hazelton, the facility is doing what it can to develop additional work opportunities.

Use front number of indeterminate sentence to determine programming eligibility:

According to the draft report, DC offenders with a parole eligible date should be eligible for programming based on their earliest eligibility date. The draft report implies these inmates are being denied adequate access to educational, vocational, mental health, and reentry programming prior to returning to DC.

Response: The Bureau doesn't deny access to programs based on release dates. Regardless of parole eligibility, all inmates meet with their Unit Team every six months to develop a program plan for the inmate during their incarceration. This plan includes work and programming activities to develop skills to make a successful transition back into the community. As the inmate serves their sentence they should be building on these program accomplishments. Inmates eligible for parole will have a parole hearing in advance of their first parole eligibility date. The examiner will set programming requirements for the inmate to complete prior to them being granted parole. The Unit Team will meet with the inmate to prioritize these programming requirements and have them enrolled to increase the inmate's chances of being approved for the earliest parole date.

Promote a positive visitation experience:

The draft report very bluntly states "USP Hazelton should treat visitors respectfully and avoid strip searching visitors." This recommendation appears to be based on several comments made by DC offenders to the CIC during the inspection. These comments include:

- Staff should have more respect for visitors.
- There is a body scan in the "visiting room."
- There are a radiation machine, strip search, and X-ray for visitors.
- There is a strip search and X-ray for visitation [x2]

Response: The Bureau does not "strip search" or X-ray visitors. There are no radiation machines in the facility and no body scan

device in the Visiting Room. All visitors are subject to Program Statement 5510.15, Searching, Detaining, or Arresting Visitors to Bureau Grounds and Facilities. The Bureau recognizes the significance of a positive visiting experience and the beneficial affects it has on the inmates' wellbeing. The Visiting Room at USP Hazelton provides adequate seating for inmates and visitors. There are vending machines and an area where children can play with toys and watch movies. The draft report indicates a complaint that they are not permitted to "touch family members and loved ones". In accordance with Program Statement 5267.09, Visiting Regulations, visitors and inmates are permitted limited physical contact, such as handshaking, embracing, and kissing and only within the bounds of good taste and only at the beginning and at the end of each the visit.

Follow FBOP Program Statement 5265.14 entitled Correspondence for legal mail procedures:

The draft report notes five inmate complaints that legal mail procedures were not followed.

Response: The Correctional Systems staff at USP Hazelton have been trained in the handling of legal mail and legal mail procedures. Recent audits have not revealed any mishandling of legal mail. Inmates dissatisfied with Mail Room functions have an opportunity to utilize the Administrative Remedy Program and or bring their concerns to the Executive Staff.

Develop a website where visitors can check for facility lockdown:

The draft report lists two inmate concerns as:

- Facility won't tell family and friends when the facility is on lockdown until they arrive.
- Visitors turned away frequently because of lockdowns.

Response: USP Hazelton recognized this as an issue and included a voice message as an option when anyone calls the facility. If a visitor calls the institution telephone number, they are able to hear the visiting status for the upcoming visiting days. The inmate population is made aware of these procedures during their Admission and Orientation lecture shortly after their arrival at the facility.

Do not release inmates directly from penitentiaries to the community:

The draft report recommends the Bureau allow inmates in penitentiaries be allowed to transfer to lower security facilities prior to their release.

Response: In accordance with Program Statement 5100.08, Inmate Security Designation and Custody Classification, the goal is to place each inmate in the most appropriate security level institution that also meets their program needs and is consistent with the Bureau's mission to protect society. The Bureau will continue its efforts in ensuring appropriate inmates are placed in the least restrictive institutions and referred for RRC placement.

Expand the length of the Release Preparation Program(RPP), and require completion for all inmates within 18 months of their release:

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. USP 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 USP Hazelton have vital documents, including birth certificates and social security cards:

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 offenders upon release.

Ensure all eligible men receive a minimum of six months of 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 offenders 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.

USP Hazelton currently has 84 inmates scheduled to release in the next 12 months. Of the 84, there are 23 with detainers lodged against them by other agencies which would preclude them from RRC placement. There are 19 that have already been approved for RRC placement. Five inmates have been submitted and are currently waiting RRC placement. There are eight more cases that have recently been routed for RRC placement approval. There are 11 not being submitted due to pending charges, eight that were initially committed to USP Hazelton within the last two months or less and don't have enough time to be placed in an RRC, and eight that refused RRC placement. One inmate was denied placement by the Residential Reentry Manager due to his violent sex offense, and one the Warden denied due to a recent escape from an RRC in 2015. The average time approved for RRC placement of those already scheduled, is 4.3 months. These terms were based on the individual assessments.

Have the Washington Post available in the library:

Response: Several copies of the Washington Post are delivered to

USP Hazelton via the mail.

Summary of responses to other inmate concerns:

The Bureau does not find credibility in many of the inmate concerns listed in the draft report. The mission of the Bureau is to protect society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, appropriately secure, and provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens. All Bureau policies are centered on this mission. Without providing specific examples to reference, the Bureau attempted to follow up on several of the concerns brought forth by the DC offenders interviewed.

- Inmate died of a staph infection.
- Seven people have died at USP Hazelton.
- Inmate has chest problems and is not receiving proper care.
- Inmate had heart surgery and currently experiences numbness; he has had no follow up care.

The Health Services department at FCC Hazelton follows all protocols and policies according to Patient Care program statement 6031.04. All inmate health concerns are treated with care and followed through to the resolution of the issue. If the health care issue requires advanced care, inmates are always sent to the local hospital or outside physician office for treatment.

- COs don't know how to deal with DC inmates.
- Treatment is bad for DC inmates.
- Staff treats DC inmates differently.
- Some staff treat inmates from DC differently.
- DC guys don't get transfers to lower securities as much as other inmates.
- DC guys are all treated the same, as though they are one unit.
- Inmate is treated differently because he is from DC.
- The whole compound hates DC people, and DC guys are outcasts.
- Staff tends to make stereotypical remarks about DC inmates with implications that they are problem inmates.

DC offenders at USP Hazelton make up the largest demographic of any other area of residence or court of jurisdiction. They make up over 16% of the institution's population. That is more than double any other group of inmates. The "DC Specific Issues" brought to the attention of the CIC are broad statements and in several cases contradictory. The Bureau has not found any evidence to support this statement.

I appreciate the opportunity to review and provide comments to your inspection report of USP 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