

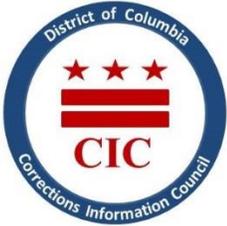
USP Terre Haute Inspection Report



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District of Columbia Corrections Information Council

June 15, 2017



CIC | DC Corrections Information Council

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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 DC inmates 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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Executive Summary

USP Terre Haute

Date of Inspection: September 15, 2016

Location: Terre Haute, Indiana

Distance from DC: 673 Miles from DC

Transportation: 10.5 Hours by Car; No Public Transportation

INSTITUTION PROFILE

Security Level: High

Rated Capacity: 1126

Occupancy: 1481 (131.53 % capacity)

DC Inmates: 74 (5% of total population)

Average Age of DC Inmates: 44.4 years old

Average Sentence of DC Inmates: 29.75 years

Inmate-to-Staff Ratio: 4 to 1

FINDINGS

Safety: Inmates reported that the most positive aspect of USP Terre Haute is the low and continuously decreasing level of violence.

Residential Programs: Five of the 75 inmates enrolled in the Life Connections Program were from DC. Five of the 80 inmates enrolled in the Challenge Program were from DC.

Meals: Inmates reported that the food is insufficient and undercooked.

Medical: Nearly two-thirds of inmates interviewed on the chronic care caseload reported receiving timely care.

Suicide: Two of the 18 serious suicide attempts between June 2015 and July 2016 were by DC inmates.

Grievances: The most common reason for not filing administrative remedies was fear of staff retaliation.

SHU: Of the inmates interviewed who had been in the SHU, more than 75% stayed in SHU for over 30 days at one time.

Reentry: USP Terre Haute offers a “Reentry Simulation” program that trains inmates on navigating social services agencies in the community.

UNICOR: Five inmates from DC were employed in UNICOR. Inmates reported that UNICOR jobs are very difficult to obtain.

Ion Scanner: USP Terre Haute utilizes Ion Scanners, which tests for drugs but often produces false positives that prevent loved ones from visiting.

DC Specific Issues: Approximately 80% of DC inmates reported that staff treats them worse than other inmates. Inmates were nearly unanimous in expressing their desire to move closer to DC.

RECOMMENDATIONS

- 1.** Ensure that inmates are receiving adequate meal portions.
- 2.** Increase Chapel availability and religious programming.
- 3.** Improve care and reduce wait times for inmates who require mental health services.
- 4.** Ensure that suicide companions receive support after witnessing suicide attempts.
- 5.** Stress the importance of zero tolerance of staff retaliation or intimidation of inmates who wish to file an administrative remedy, with meaningful personnel consequences for staff that violate the FBOP's objectives.
- 6.** Reduce maximum penalties for disciplinary segregation and impose a sanction of disciplinary segregation only as necessary and only after determining, in writing, that other available sanctions are insufficient to serve purpose of punishment.
- 7.** Implement a cultural diversity sensitivity training program for all staff.
- 8.** Establish a standardized curriculum for the Release Preparation Program (RPP) across all FBOP facilities.
- 9.** Examine existing procedures for UNICOR employment to ensure fair access for DC inmates.
- 10.** Increase the number of Adult Continuing Education (ACE) courses.
- 11.** Move DC inmates to a facility within 250 miles of DC.

I. Facility Profile

United States Penitentiary (USP) Terre Haute is an all-male, high security level facility located in Terre Haute, Indiana. It is 673 miles from DC and ten hours and 25 minutes from DC by car. The institution has six general population housing units, a Special Housing Unit (SHU), and a Special Confinement Unit (SCU) which houses Death Row inmates.

USP Terre Haute was activated in 2005. According to an American Correctional Association (ACA) audit conducted in June 2016, the rated capacity of USP Terre Haute is 1126 with an average daily population of 1481. At the time of the CIC inspection, the facility had a total of 74 DC inmates with 18 in the SHU.

II. Inmate Feedback Summary

As a part of the interviews with incarcerated DC residents, the CIC asked participants to provide what they thought were the best and worst aspects of USP Terre Haute. With regards to the most positive aspects of USP Terre Haute, the top two responses included safety and quality programming. Many commented on the general lack of violence, and two inmates noted a decrease in violence at the facility (“no serious violence anymore” and “violence is down”). Inmates indicated that USP Terre Haute has more programming than other facilities, and some reported that the Challenge Program and the Life Connections Program are the most positive aspect of the facility. Other positive aspects reported by inmates include recreation, academic programs, cleanliness of the facility, certain helpful and respectful staff, employment opportunities, church services, medical (“slow but okay”), and the experiences with outside guests and motivational speakers.

When incarcerated DC residents were asked to share the most negative aspects of USP Terre Haute, nearly half of all respondents reported problems with staff, particularly with regards to unprofessionalism and disrespect towards inmates. Several inmates reported that DC inmates in particular are stereotyped and treated poorly (“007 stigma”). Other participants commented that USP Terre Haute is considered a “drop out yard” which houses inmates who have renounced gang affiliation; as such, these inmates are more likely to be bullied by staff because they “cannot go anywhere else.” Other negative aspects include poor quality of food, racism, medical and psychology services, mice, and recreation (“isolated rec yards”).

The CIC also asked DC inmates who have been incarcerated at other high security institutions (35 inmates) to compare USP Terre Haute to these institutions. USP Terre Haute ranked higher than other high security institutions for safety, education, and programming; the same for visitation, communication, and staff; and worse for employment, SHU, health services, and treatment of DC inmates.

III. Methodology

The CIC conducted an onsite inspection of USP Terre Haute on September 15, 2016. Prior to the onsite inspection, the CIC communicated with all DC inmates at USP Terre Haute, 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 executive staff. The onsite inspection consisted of confidential interviews with 46 DC inmates, a tour of the facility, limited dialogue with facility staff, and a closing session with executive staff.

Both before and after the onsite inspection, the CIC reviewed general inmate and DC inmate data, significant incidents, urine surveillance, and disciplinary records. The CIC also reviewed an education report, menus, the most recent American Correctional Association (ACA) Audit, and administrative remedy filings and responses at the facility, regional, and central office levels.

After conducting a formal inspection of USP Terre Haute, the CIC visited FCI Terre Haute on September 16, 2016 for inmate interviews and a brief tour. The CIC spoke with five incarcerated DC residents at FCI Terre Haute who provided information on the conditions of confinement at the facility. In addition to the inmate interviews, the CIC was given the opportunity to tour the RDAP unit and the STAGES Program unit. The summary of interviews and unit tours are included in this addendum.

A draft of this report was provided to the Federal Bureau of Prisons for a response, which attached to the final published CIC inspection report.

IV. Housing

USP Terre Haute has 768 cells among six housing units. Each building consists of two housing units that are staffed by two Unit Managers, two Correctional Officers, two Case Managers, and two Counselors during the day Monday through Friday. During evenings and weekends, each building has one Unit Manager and one Correctional Officer.

Regarding hygiene, the majority of inmates reported that their units are clean, that they have enough clean clothes for the week, that they are normally able to shower five days a week, and that they normally have cleaning supplies. One inmate commented that inmates only receive two sets of clothing in the SHU and that there are not enough supplies to clean the shower.

V. Residential Unit Programs

Life Connections Program

Life Connections Program		
	Overall	DC Inmates
Number Enrolled	75	5
Number On Waiting List	27	0

USP Terre Haute offers the Life Connections Program (LCP), a residential faith-based program to inmates of all faiths. The LCP is an 18 month program with an aftercare component and involves 15 hours of programming per week. At USP Terre Haute, the LCP facilitates programming for individuals from 16 religious categories. The LCP utilizes mentoring to help inmates with reentry planning, life skills, normative values, and accountability. There are 18 peer mentors who facilitate groups and serve as peer mentors. The mentor coordinator facilitates networking opportunities and mentors from faith-based communities for inmates in the pre-release phase of LCP.

The LCP hosts 36 men per cohort. There have been 360 LCP graduates at USP Terre Haute and 50 of those graduates have been released. Six of the graduates were serving life sentences and have received clemency. Four LCP graduates have recidivated.

To qualify for the LCP, inmates must have a minimum of 24 months left to serve. However, staff at USP Terre Haute indicated that individuals serving lengthy sentences, including life in prison, are still eligible for the LCP. Additional eligibility requirements include possession of a GED or enrollment in GED classes, compliance with fee payments, and U.S. citizenship. One incentive for DC inmates to enroll in the LCP is the opportunity to transfer closer to Washington, DC. The Mentor Coordinator expressed an interest in connecting with faith based mentors in DC to work with men who are returning to DC.

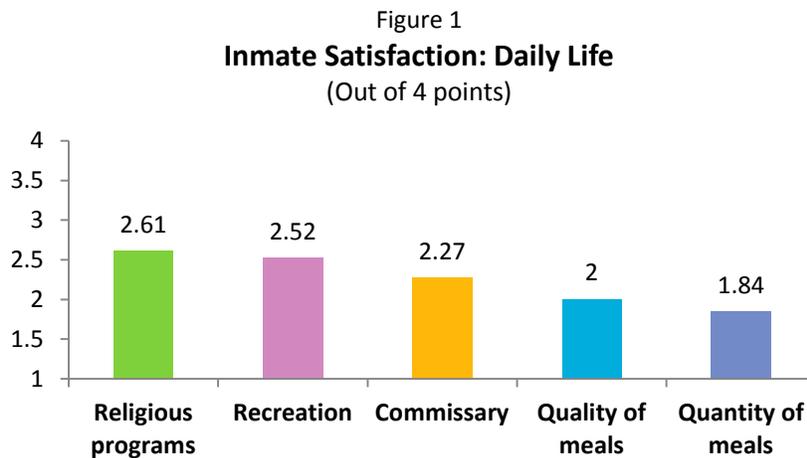
Challenge Program

Challenge Program		
	Overall	DC Inmates
Number Enrolled	80	5
Number On Waiting List	5	2

USP Terre Haute facilitates the Challenge Program, a residential therapeutic program for high security inmates with substance abuse and/or mental illnesses. The Challenge Program includes 500 hours of treatment within a minimum of nine months; however, inmates have the flexibility to vary the length of the program based on their needs and progress. The Challenge Program focuses on developing positive relationships, reducing criminal thinking errors, and violence prevention. To qualify for the Challenge Program inmates must have diagnosed mental health and substance abuse problems. The Challenge program is designed for offenders serving a range of sentences including long term offenders seeking a therapeutic, rehabilitative environment.

VI. Daily Life

The CIC asked DC inmates to rate their satisfaction regarding the quality of meals, recreation, and religious services at USP Terre Haute (Figure 1). From a scale of 1-4 (“1” as “very unsatisfied” and “4” as “very satisfied”), religious programs was ranked highest at 2.61. The quantity of meals was ranked lowest at 1.84.



A. Religious Services

The Chaplain Department in USP Terre Haute facilitates worship services for individuals from over 16 various religious affiliations. USP Terre Haute contracts with several religious leaders including a Muslim Imam, and a Jewish Rabbi. The Chaplain also provides grief counseling, and spiritual counseling to inmates in the SHU, SCU and CMU as well as local hospitals when necessary.

Negative commentary regarding religious programs centered largely around the lack of religious programming. One inmate stated, “We need more classes so that we can learn religion more.” Another commented that the hours for religious services are insufficient, specifically for watching religious videos. Another inmate reported that his meals were given late during Ramadan.

B. Commissary

Each inmate, whether in general population or Special Housing Units, is allowed to make purchases at the Commissary once a week during the noon meal and after the 4:00 P.M. count clears. The maximum spending limit is \$360 per month for inmates in general population.

The Commissary employs a limited number of inmates and has a separate pay scale than that of most job assignments falling under the parameters of the Inmate Performance Pay (IPP) System. Typically, Commissary job assignments have a higher pay rate. At the time of CIC's inspection, zero DC inmates were employed in the Commissary.

DC inmates were largely unsatisfied with the limited commissary items and lack of input into the items offered. Inmates also reported that hygiene items in particular are limited and that commissary prices are too high. Two inmates expressed concern about the removal of mackerel from the commissary list.

C. Recreation

The Recreation Department in USP Terre Haute includes a recreation yard, hobby craft classrooms, a gymnasium, and a music room. Indoor activities include: art, fitness through stationary machines, and basketball and fitness classes. Outdoor activities include softball, flag football, soccer, handball/racquetball, track, basketball, and horseshoes.

The Recreation Department encourages the use of inmate support. Inmates with expressed interest may seek employment in the Recreation Department to assist with coordinating recreation activities. Inmates may submit a request to staff indicating interest in becoming a recreation employee.

Inmates provided mixed reviews regarding recreation. Four inmates expressed satisfaction with the recreation options, including the hobby craft program and yoga. Other inmates expressed concerns regarding limited recreation time, few recreational options, and lack of equipment and games.

D. Meals

USP Terre Haute follows standard FBOP menu guidelines¹ and offers heart-healthy, vegetarian, kosher, and halal diet options. Inmates in the SHU eat the same meals as inmates in general population. Inmates are provided with one serving of main entrée, one serving of starches, one serving of dessert (when served), and one piece of fruit (when served). Breakfast is served at 6:30 a.m., and lunch is served at 10:30 a.m. Dinner is served at 5:00 p.m. No food items may be removed from food service.

¹ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, NATIONAL MENU FY 2016.

The majority of commentary from DC inmates about daily life focused on both the quality and quantity of meals. Regarding quality, inmates were concerned not only about the taste and nutritional value of the food, but also about the food being undercooked. Several inmates reported that the food is often cold and “half raw.” Regarding quantity, inmates reported that meals are too small and would “leave even a kid still hungry.” One inmate reported receiving seven tater tots as a meal and commented that meals do not meet caloric requirements. Another inmate was concerned that there are limited substitutions for non-meat eaters. Two inmates reported being satisfied with the food at USP Terre Haute.

E. Other

Other concerns included the lack of microwaves on the units, lack of care for inmates in wheelchairs, and “segregated communities” that prevent DC inmates from engaging with inmates from other states. Several inmates expressed general satisfaction about daily life.

Recommendations

1. Ensure that inmates are receiving adequate meal portions.

- DC inmates reported insufficient meal portions and limited options for non-meat eaters. The CIC understands the budget constraints a correctional facility faces in ensuring that all inmates are provided with nutritionally adequate meals meeting the objectives under the FBOP’s Program Statement.² The CIC encourages USP Terre Haute to review the food portions provided to inmates and also to address concerns regarding undercooked food.

2. Increase Chapel availability and religious programming.

- DC inmates shared an interest in more access to religious video viewing and overall religious learning. Although the facility offers the residential Life Connections Program (LCP), the CIC recommends that USP Terre Haute seek out additional volunteers from the community to provide more insight regarding religious instructions and increase the hours of operation in the chapel library for all inmates.

² FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, PROGRAM STATEMENT NO. 4700.06, FOOD SERVICE MANUAL (Sept. 13, 2011).

VII. Health Services

The CIC asked DC inmates to rate their satisfaction with both the quality of health services at USP Terre Haute and the wait times. More than half reported being “very satisfied” or “satisfied” with the quality of dental and mental health care, and more than half reported being “unsatisfied” or “very unsatisfied” with medical care (Figure 2). DC inmates were least satisfied with wait times for medical care and most satisfied with wait times for mental health care (Figure 3). [Note: responses of “N/A” were not included in the analysis to ensure that levels of satisfaction refer only to those who have used these services. For instance, analysis of mental health perceptions is based only on responses from inmates who require mental health services.]

Figure 2
Quality of Care

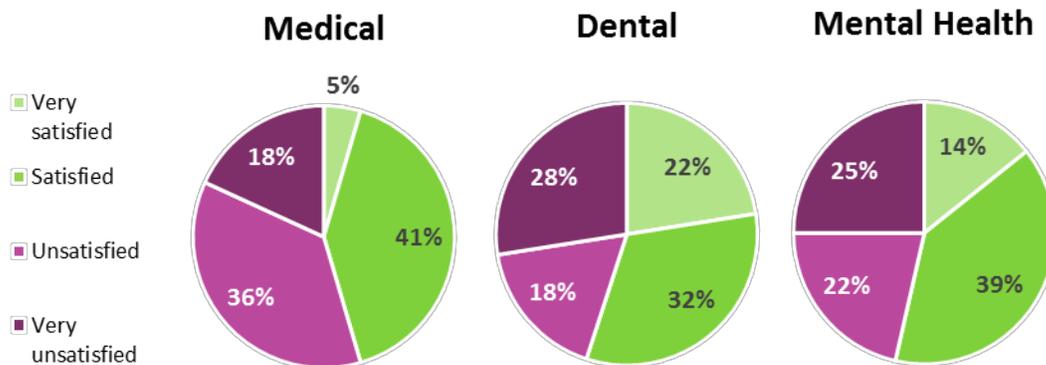
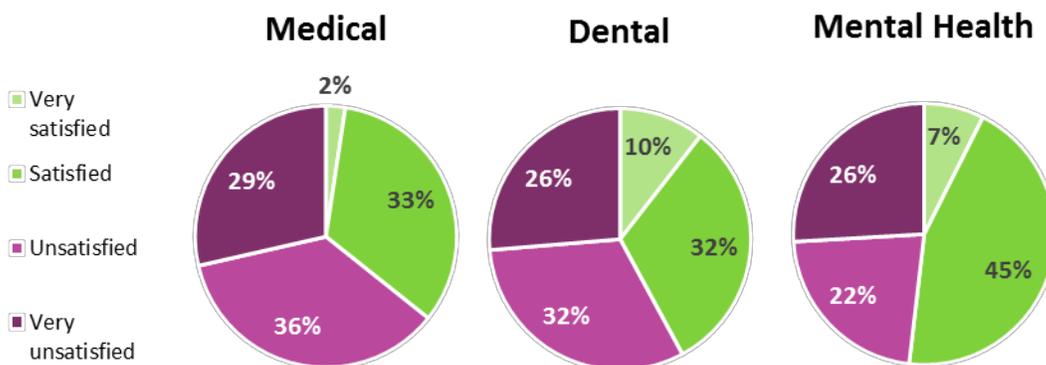


Figure 3
Wait Times



A. Medical Care

USP Terre Haute is a Medical Care Level III facility. At the time of inspection, there were 66 DC inmates on the chronic care caseload, one with physical disabilities, and one with cognitive disabilities. FCC Terre Haute Health Services reported spending \$18,172,386 in 2016.³

FCC Terre Haute Health Services has 63 positions available.⁴ During the CIC investigation, 55 staff positions in the medical department were filled; vacancies at the time of inspection included two doctors, two mid-level physician's assistants, two nurses, and other staff. Staff turnover was reported to be 30 to 40 percent per year.⁵ All medical staff at USP Terre Haute are trained in CPR. The facility also contracts with an optometrist who sees patients weekly every Wednesday and again every other Friday at USP Terre Haute to evaluate inmates.⁶

According to the staff in the medical department, physical exams and medical assessments take place within 24 hours of an inmates' arrival. Inmates also have access to routine Sick Call, which operates under a triage system. Inmates submit their sick call requests and are seen within 24 hours under normal operations.⁷ An average of 15 to 20 inmates are seen per day for sick call. In the case of an emergency, the nearest hospital to USP Terre Haute is seven minutes away by ambulance. The nearest emergency room is two minutes away in the case of a "true life or death emergency." USP Terre Haute has a contract with the hospital's emergency room.

USP Terre Haute is ADA-accessible. Staff reported that handicapped (e.g., wheelchair bound) individuals at FCI are placed in USP because it is more accessible. However, the CIC met a DC inmate at FCI who was wheelchair-bound and was not transferred to the USP.

A total of 34 inmates interviewed were on the chronic care caseload, 21 of whom receive timely follow-up care and 13 who do not. One inmate reported that he receives regular follow-up care for HIV every six months. Another stated that his chronic care medication was changed after he requested it. Other chronic care inmates expressed concern about delays in treating chronic care conditions and being taken off certain medications. One inmate reported not being provided a breathing machine because staff informed him there were not enough machines available.

Regarding general medical care, DC inmates provided largely negative feedback. In particular, inmates expressed concern regarding long wait times, especially when an inmate is in the SHU. Inmates also reported poor quality of care and an inability to see specialists or receive necessary treatments (e.g., for pain, bone injuries, cataracts, heart problems, and glaucoma)

³ FBOP Response to CIC USP Terre Haute Draft Inspection Report, dated 6/14/17.

⁴ Id.

⁵ While staff onsite during the inspection reported turnover rate of 30-40 percent, FBOP in its official response to this report stated that during the past 12 months the turnover rate for Health Services has been 5%.

⁶ Id.

⁷ Id.

Several inmates provided positive feedback regarding medical services, including one inmate who praised “wonderful medical staff – the best [he’s] ever seen.” One inmate indicated that the doctor is responsive and another that “staff and doctors have been great to [him].”

B. Dental Care

Dental care is provided onsite at USP Terre Haute. The Dental Department operates under a triage system. Inmates may be seen by a dentist between the hours of 8:00 AM and 8:45 AM Monday through Friday at USP Terre Haute. In the case of dental emergency, inmates are seen between 6:30 AM and 7:00 AM. The Dental Department provides full-service treatment including instructional hygiene care, diagnosis of dental disease, restorations, extractions, dental prostheses, and other treatment.

Two inmates provided positive feedback regarding dental care, including one who described it as “fair” and another as “professional.” Two inmates expressed concerns regarding the lack of teeth cleanings, one reported not being able to see the dentist unless inmates need to have teeth pulled, and one indicated that he has a broken tooth and could not chew after his wisdom tooth was pulled.

C. Mental Health Care

USP Terre Haute is a Psychology Care Level III facility. At the time of the inspection, there were 38 DC inmates diagnosed with mental health issues.

The Psychology Department at FCC Terre Haute has 11 psychologists, 11 treatment specialists, 4 pre-doctoral interns, and one psychology technician.⁸ Inmates are assessed by psychology staff during the intake phase. Psychology staff at USP Terre Haute is on 24 hour call. Crisis intervention and biblio-therapy courses are facilitated in the psychology department. The psychology department also oversees the therapeutic communities including the Challenge Program and the Life Connections Program (LCP). These modified therapeutic programs include morning community meetings and programming focused a range of cognitive and behavioral skills development. Detailed explanations regarding the Challenge Program and the LCP are included in the “Residential Unit Programs” portion of this report.

The psychology department is responsible for providing comprehensive psychological services, as well as Employee Assistance counseling as needed. According to a 2016 ACA audit, psychological services at USP Terre Haute include: intake and diagnostic screening interviews, individual and group psychotherapy, crisis intervention, Prison Rape Elimination Act (PREA) related cases, a suicide prevention program, and management of the mentally ill. Group therapy sessions are one hour long and includes topics such as drug education, anger management, coping skills, safety, and more. Individual therapy sessions occur about once a month for 30 to 45 minutes.

⁸ Id.

Between June 2015 and July 2016, psychology staff at USP Terre Haute conducted over 400 suicide risk assessments. There were 18 “serious” suicide attempts at USP Terre Haute within a single year, two attempts of which were made by a single inmate from DC.⁹ Suicide attempts are designated as “serious” if they are of moderate to high lethality, if inmates have a genuine desire to die, and/or if there is no opportunity for rescue or intervention. Inmates on suicide watch are under 24 hour surveillance. They are observed by inmates who are trained by psychology staff. Suicide watch companions are required to observe inmate behavior and track observations every 15 minutes. Suicide watch companions have direct access to staff and can contact them by telephone. Staff is in the close proximity to the suicide observation area. Suicide watch companions receive four hours of initial training and eight additional hours of training annually. There are at least 15 suicide watch companions who observe those on suicide observation in four hour intervals. Staff seeks to select suicide watch companions from the therapeutic communities within the facility. Suicide watch companions are required to have at least one year clear conduct.

At the time of the CIC inspection, one non-DC inmate was on suicide watch. During the inspection, the CIC observed cracked windows in two of the suicide observation rooms. At the time of the inspection, one of the suicide observation rooms was undergoing renovation to repair the cracked windows. When asked if inmates who serve as suicide watch companions receive support after observing suicidal behavior, no clear answer was given. However, it was suggested that the initial training that inmates receive along with the annual training is sufficient.

Of the 32 DC inmates interviewed who required mental health services, 13 felt they had adequate access to these services, and 19 felt they did not. Several inmates expressed concerns regarding long wait times, including one who has a class action lawsuit for being denied mental health treatment for more than a decade. Another inmate stated that it could take “two to three weeks to get seen unless [he] threatens to kill [him]self.” Other inmates expressed concern over mental health staff not taking concerns seriously and that they “tell everyone the same thing” regardless of the issues.

Recommendations

3. ***Improve care and reduce wait times for inmates who require mental health services.***
 - More than half of DC inmates interviewed who require mental health services reported that they do not receive adequate care. The CIC recommends that USP Terre Haute remain proactive in caring for and treating mental health patients and continuously monitor wait times for inmates who require mental health care.

4. ***Ensure that suicide companions receive support after witnessing suicide attempts.***
 - Inmates who witness suicide attempts may experience secondhand trauma from the experience. The CIC recommends that USP Terre Haute provide the necessary counseling services to suicide companion inmates to ensure that they are not negatively affected by what they witness while on the job.

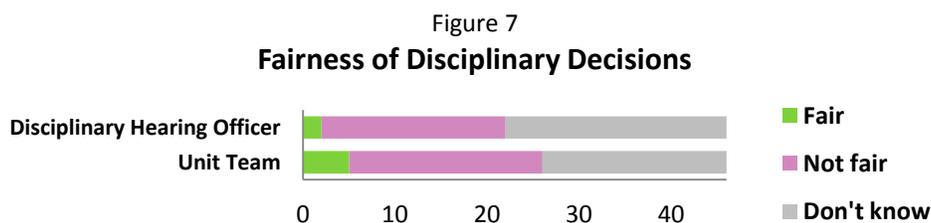
⁹ Id.

VIII. Discipline and Administrative Remedies

A. Discipline

Violations of Bureau of Prisons rules and regulations are addressed by the Unit Discipline Committee (UDC) or the Discipline Hearing Officer (DHO). An incident report is made if a staff member observes or believes an inmate has breached rules and/or regulations. Avenues for the incident report include an informal resolution, an initial hearing with the UDC for low moderate or moderate offenses, or a disciplinary hearing with the DHO for high severity offenses. The Unit Team conducts hearings for 300-400 level disciplinary sanctions and may impose sanctions. Alternatively, 100-200 level disciplinary infractions are automatically referred to the DHO. Initial hearings must be given within five work days of the staff becoming involved, and the UDC must provide its decision by the close of business the next work day. The DHO conducts hearings weekly, but, at the time of inspection, zero DC inmates had cases currently pending. The facility reported fighting, assaults, and narcotics as the three most frequent issues brought before the DHO.

The CIC asked DC inmates about the fairness of disciplinary decisions by Disciplinary Hearing Officer (DHO) and the unit team (Figure 7). In many cases, disciplinary actions are first handled by the inmate's unit team before referral to the DHO. Five inmates responded that the unit team's decisions are fair, 21 that they are unfair, and 20 did not know. Two inmates responded that the DHO's decisions are fair, 20 that they are unfair, and 24 did not know.



B. Administrative Remedies

The Administrative Remedy Program allows inmates to seek formal review of issues related to their confinement. 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. 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.

The tables below provide an overview of the categories with the most numerous administrative remedy filings submitted at each level regarding USP Terre Haute between February 2015 and January 2016.¹⁰

Facility Level (BP-9s)					
	Submitted	Rejected	Filed	Answered	Granted
Staff	142	21	121	113	0
Medical - Exc. Forced Treatment	132	27	105	101	1
UDC/RRC Actions	83	44	39	36	1
Classification Matters	63	35	28	27	0
Regional Office (BP-10s)					
	Submitted	Rejected	Filed	Answered	Granted
DHO Appeals	105	48	57	56	3
Medical - Exc. Forced Treatment	87	26	61	59	0
Staff	80	56	24	22	0
Classification Matters	37	22	15	12	0
Central Office (BP-11s)					
	Submitted	Rejected	Filed	Answered	Granted
Medical - Exc. Forced Treatment	52	20	32	25	0
Staff	32	21	11	9	0
DHO Appeals	31	12	19	3	0
Jail Time Credit	14	4	10	9	1

Approximately 39% of DC residents surveyed have used the grievance process at USP Terre Haute (Figure 4). Among all DC inmates surveyed, four reported that informal complaints are treated fairly, four that grievances are treated fairly, and three that grievance appeals are treated fairly (Figure 5). A large number of DC inmates reported not knowing about how fairly complaints, grievances, and appeals are addressed at USP Terre Haute.

Top reasons for reporting that the process is unfair include that there is no response and/or investigation into complaints, that staff protect each other even when they are wrong, and that staff “take retaliatory measures” for complaints. According to one inmate, there is a “conflict of interest if [he has] to informally resolve an issue that involves the same person who has to answer it.” Two inmates reported that the process is unfair because staff is “racist.” One inmate

¹⁰ Please refer to Appendix Section E for all categories of administrative remedy filings and appeals at USP Terre Haute during this time frame.

reported a positive experience: “Any grievance that I’ve had here in the past year, I’ve talked to someone [and] it was resolved.”

Figure 4
Have you ever used the grievance process at this facility?

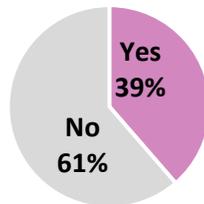
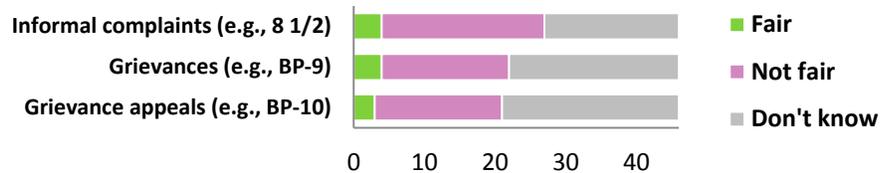
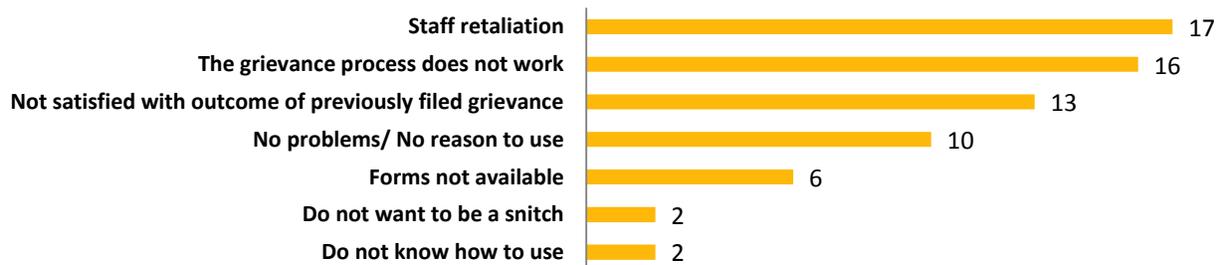


Figure 5
Fairness of Administrative Remedy Process



The number one answer to why DC inmates have chosen not to use the grievance process was staff retaliation (Figure 6). The next most common reasons include that the grievance process does not work and that inmates were not satisfied with the outcome of previously filed grievances. Ten inmates reported that they had no problems or reason to use the grievance process. Others indicated that forms are not available, inmates do not want to be snitches, and inmates do not know how to use the grievance process.

Figure 6
If you have chosen not to use the grievance process, why?



Recommendations

5. ***Stress the importance of zero tolerance of staff retaliation or intimidation of inmates who wish to file an administrative remedy, with meaningful personnel consequences for staff that violate the FBOP’s objectives.***

- Over a third of all DC inmates interviewed reported that grievances of met with threats by staff and staff retaliation. The FBOP should stress the importance of zero tolerance of staff retaliation or intimidation of inmates who wish to file an administrative remedy, with meaningful personnel consequences for staff that violate the FBOP’s objectives. Such measures will increase transparency and improve efforts

to deter staff retaliation and promote the availability for inmates to use the Administrative Remedy process.

IX. Special Housing Unit

The Special Housing Unit (SHU), often referred to as segregated housing, is designed to securely separate inmates from the general inmate population. In the FBOP, inmates placed in SHU are housed in two-person cells. The two categories of Special Housing are administrative detention¹¹ and disciplinary segregation¹². According to FBOP policy, an inmate may be placed in administrative detention for the following reasons:

- a) Pending Classification or Reclassification¹³;
- b) Holdover Status¹⁴;
- c) Investigation¹⁵;
- d) Transfer¹⁶;
- e) Protection Cases¹⁷; or
- f) Post-Disciplinary Detention¹⁸.

Staff assignments in the SHU are rotated quarterly. The unit staff, religious services, and education staff conduct rounds weekly. Psychology staff conducts mental health rounds daily even though only weekly rounds are required. While there is no formally designated psychology unit in the SHU, the CIC did observe a wing that contained several inmates with mental health

¹¹ Administrative detention is a status which removes an inmate from general population when deemed necessary to ensure the safety, security, and orderly operation of the facility or to protect the public. FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5270.10, SPECIAL HOUSING UNITS (August 1, 2011)

¹² Disciplinary segregation is imposed as a sanction for violations of FBOP rules and regulations.

¹³ If an inmate is a new commitment pending classification or under review for Reclassification.

¹⁴ If an inmate is in holdover status during transfer.

¹⁵ If an inmate's 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 is under investigation or awaiting a hearing for possibly violating a Bureau regulation or criminal law.

¹⁶ If an inmate's 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 is pending transfer to another institution or location.

¹⁷ If an inmate's 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 inmate requested, or staff determined the inmate needs, administrative detention status for the inmate's own protection.

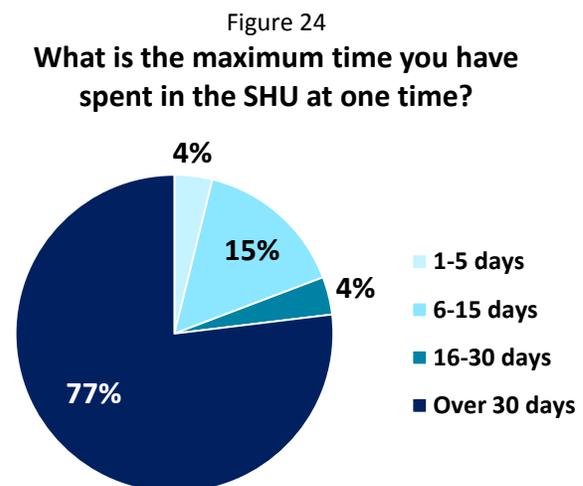
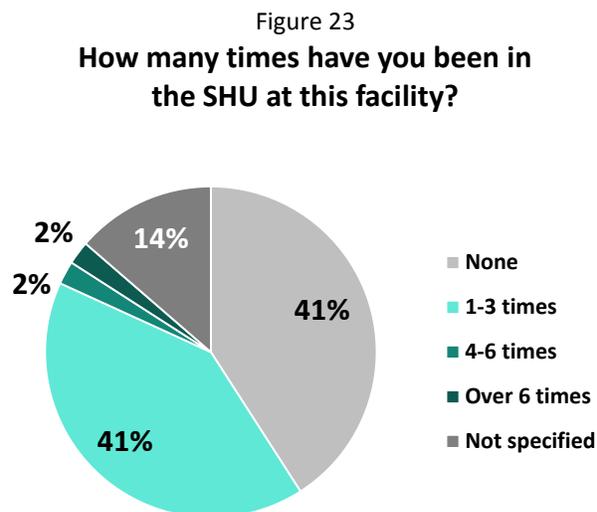
¹⁸ If an inmate's presence in the general population poses a threat to life, property, self, staff, other inmates, the public or to the security or orderly running of the institution and the inmate is ending confinement in disciplinary segregation status, and the inmate's return to the general population would threaten the safety, security, and orderly operation of a correctional facility, or public safety.

issues. Medical staff conducts rounds usually twice daily. General population education classes are available in the SHU, and books are provided via book carts on the ranges. Inmates also have access to the law library on a first come first serve basis. Priority is given to inmates with cases pending.

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.¹⁹ Inmates are also permitted to receive one non-contact visit per month and make one 15-minute phone call per month. Inmates may be allowed to make additional calls in the event of an emergency or death. At USP Terre Haute, inmates in the SHU are currently receiving five hours a week for recreation and may receive up to five visits per month and one phone call every 30 days.

At the time of the inspection, there were 20 DC inmates in the SHU, 18 of whom were in disciplinary segregation and two in administrative segregation and not awaiting disciplinary action. According to staff, there were no DC inmates who had been in the SHU for over a year nor were there any DC inmates in the SHU who had been diagnosed with a mental health issue.

Over half of all DC inmates surveyed have been in the SHU at USP Terre Haute (Figure 23). Approximately 41% had been in the SHU between one and three times, 2% between four to six times, and 2% over six times. Fourteen percent of inmates surveyed indicated having been in the SHU but did not specify the number of times. Of these 26 inmates who reported having been in the SHU, 77% spent over 30 days in SHU at one time, 4% between 16 and 30 days, 15% between six and 15 days, and 4% between one and five days (Figure 24).



¹⁹ FED. BUREAU OF PRISONS, U.S. DEP'T OF JUSTICE, PROGRAM STATEMENT NO. 5270.11, SPECIAL HOUSING UNITS (November 23, 2016)

The majority of inmates reported that medical staff and the chaplain conduct regular rounds in the SHU, and less than half reported that mental health staff and the education department make regular rounds. All but one inmate reported having access to the shower. The majority of inmates reported having access to recreation and reading materials. The least accessible resources were the telephone and writing materials, each of which received 10 reports regarding lack of access.

The most common complaint from DC inmates regarding the SHU was the general lack of staff response and poor treatment by staff. Inmate comments included “staff are punitive, abusive, and dangerous” and “staff put [inmates] in paper clothing when they feel [inmates] won’t work for them.” Inmates also commented that cells are unclean and that there is no psychology unit in the SHU. One inmate reported that he will “end up going on hunger strike about [his] leg injury.”

Recommendations

In January 2016, President Barack Obama formally adopted the Department of Justice’s (DOJ) recommendations to safely reduce the overuse of restrictive housing, including increasing the minimum amount of time that inmates in restrictive housing spend outside their cells and housing inmates in the least restrictive setting necessary to ensure their own safety as well safety of staff, other inmates, and the public.²⁰ The DOJ issued a report concluding that the practice of restrictive housing should be used rarely, applied fairly, and subject to reasonable constraints.²¹ Following the “Guiding Principles” as well as the policy recommendation changes directed to the FBOP from the DOJ report, the CIC provides the following recommendation:

6. *Reduce maximum penalties for disciplinary segregation and impose a sanction of disciplinary segregation only as necessary and only after determining, in writing, that other available sanctions are insufficient to serve purpose of punishment.*

- Seventy-seven percent of DC inmates who reported having been in the SHU spent over 30 days in SHU at one time. Reducing the maximum penalties and requiring that the DHO determine, in writing, that other available sanctions are insufficient to serve the purpose of punishment would help ensure USP Terre Haute safely reduces the overuse of restrictive housing.

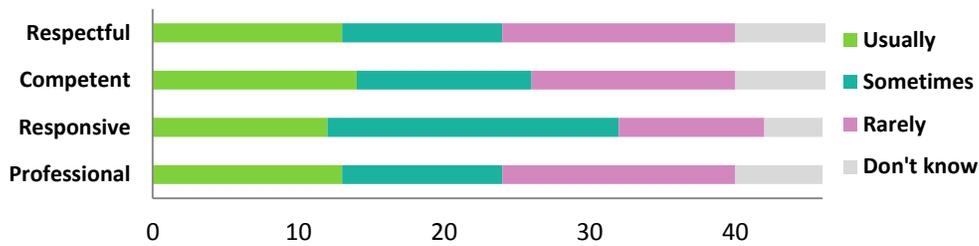
X. Staff

The CIC received mixed feedback from DC inmates about the staff at USP Terre Haute (Figure 8). The majority of inmates (32 out of 46) indicated that housing unit officers are “usually” or “sometimes” responsive. Approximately half of respondents reported that staff is “usually” or “sometimes” respectful, competent, and/or professional.

²⁰ Available at <https://www.whitehouse.gov/the-press-office/2016/01/26/fact-sheet-department-justice-review-solitary-confinement>

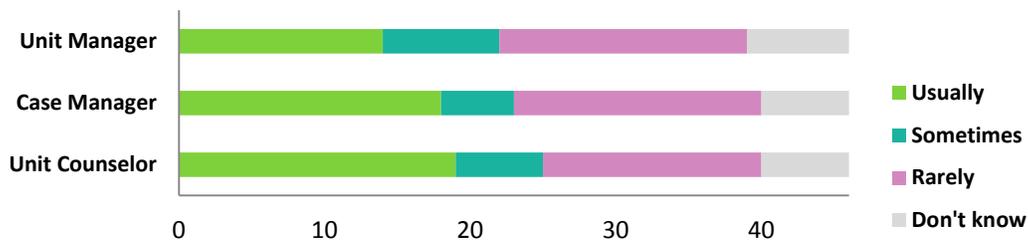
²¹ U.S. DEP’T OF JUSTICE, EXECUTIVE SUMMARY, REPORT AND RECOMMENDATIONS CONCERNING THE USE OF RESTRICTIVE HOUSING (Jan. 2016) (“After extensive study, we have concluded that there are occasions when correctional officials have no choice but to segregate inmates from the general population, typically when it is the only way to ensure the safety of inmates, staff, and the public. But as a matter of policy, we believe strongly this practice should be used rarely, applied fairly, and subjected to reasonable constraints.”)

Figure 8
Are Housing Unit Officers...?



DC inmates were also asked how often their unit managers, case managers, and unit counselors are helpful. Unit counselors received the most positive feedback, followed by case managers and then unit managers (Figure 9).

Figure 9
Do you feel that the following are helpful?



Commentary from DC inmates included specific examples of staff disrespect, lack of professionalism, and unwillingness to help. In one particular instance, an inmate reported that his unit counselor told another inmate that he is “a piece of s****” because the inmate was “from DC.” Another inmate indicated that he is regularly shaken down by a particular correctional officer and told to “get up against the wall mother*****.” One inmate cited physical violence and staff instigating responses from inmates to have a reason to “jump on [inmates],” and two inmates expressed concerns that staff is racist towards black inmates. Several inmates also noted that staff are often inaccessible and “slow with everything,” including not helping an inmate in a wheelchair with his handicapped cell.

Positive feedback included that certain staff members are respectful and will try to help inmates. One DC inmate reported that his unit manager helps him set up calls with his attorney and another that his case manager helps him with the point system. One inmate stated that he has had “better and more positive results with staff here than anywhere else” and another that “some staff are very disrespectful but few are respectful.”

Recommendations

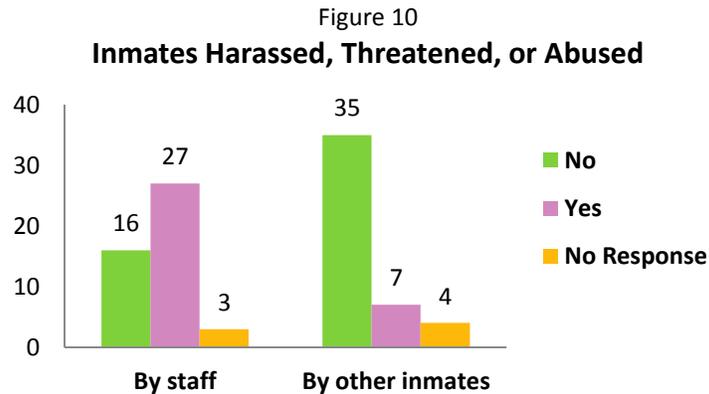
7. *Implement a cultural diversity sensitivity training program.*

- Nearly 97% of all inmates in FBOP from DC are Black or African American, resulting in race and geography being closely intertwined for DC inmates in this and other

facilities. In response to reports regarding racist and unprofessional behavior from staff, USP Terre Haute should work with the National Institute of Corrections to identify training needs and implement a cultural diversity sensitivity training program for staff members to increase awareness of cultures different from their own. Providing staff with such training would further the FBOP’s mission “to protect society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, and appropriately secure....”²²

XI. Institutional Safety

More than half of all DC inmates surveyed reported being harassed, threatened, or abused by staff. Seven reported by harassed, threatened, or abused by other inmates (Figure 10).



Regarding staff harassment, the top three types were insulting remarks, discrimination due to DC residency status, and discrimination based on race or ethnic origin (Figure 11). Fourteen DC inmates indicated that they have reported harassments, threats, or abuse by staff, and three were satisfied by how the reports were handled. Regarding harassment from other inmates, the top three types were insulting remarks, physical abuse, and discrimination due to DC residency status (Figure 12). Of the four DC inmates who reported these incidents, none were satisfied with how the reports were handled.

²² FED. BUREAU OF PRISONS, U.S. DEP’T OF JUSTICE, [HTTPS://WWW.BOP.GOV/ABOUT/AGENCY/AGENCY_PILLARS.JSP](https://www.bop.gov/about/agency/agency_pillars.jsp).

Figure 11

Types of Staff Harassment	
TYPE	# REPORTS
Insulting remarks	22
DC residency status	19
Race or ethnic origin	15
Physical abuse	8
Religion/religious beliefs	6
Offense/crime	5
Sexual orientation	2
Sexual Abuse	1
Gang related issues	0
Other	3

Figure 12

Types of Inmate Harassment	
TYPE	# REPORTS
Insulting remarks	7
Physical abuse	5
DC residency status	5
Race or ethnic origin	2
Offense/crime	2
Gang related issues	2
Sexual abuse	1
Religion/religious beliefs	0
Sexual orientation	0
Other	0

Positive commentary from DC inmates focused largely on USP Terre Haute as a safe institution (e.g., “It’s pretty safe here – no gangs” and “compound isn’t unsafe as a whole”). Other inmates provided contrasting views and alerted the CIC about physical retaliation from staff when inmates file grievances against them (“do not report staff because they will get you and beat you up”). One inmate noted that these instances are filmed on camera and that staff are more of a threat than inmates. Another reported that threats of physical harm from other inmates are not taken seriously by staff. Other reports include a staff member grabbing an inmate by the genitals as retaliation for filing a grievance against him and the lack of safety in the chow hall because inmates are locked in until everyone is finished eating.

As for sexual abuse, the majority of inmates were aware of how to report incidents to staff, to outside service agencies or rape crisis centers, and through hotlines. Less than half knew how to report through family members or anonymously. Approximately 15% responded that they were not told how to report sexual abuse.

XII. Reentry

In compliance with FBOP requirements, USP Terre Haute offers a Release Preparation Program (RPP) that prepares inmates for community entry upon release. FBOP requires RPP courses to cover six broad categories: Health and Nutrition, Employment, Personal Finance and Consumer Skills, Information and Community Resources, Release Requirements and Procedures, and Personal Growth and Development. USP Terre Haute offers an array of RPP classes to address 15 subject areas, including those listed above. Workshops on the following subject matters are facilitated: Understanding the Affordable Care Act (ACA): How to sign up for Medicaid, Child Support, Public Housing, CODA: Healthy Relationships, WorkOne: Ask an Employment Specialist, Free Application for Federal Student Aid (FAFSA), Understanding PTSD, and Basics of Budgeting. The Goodwill Industries also facilitates a Job Expectations seminar.

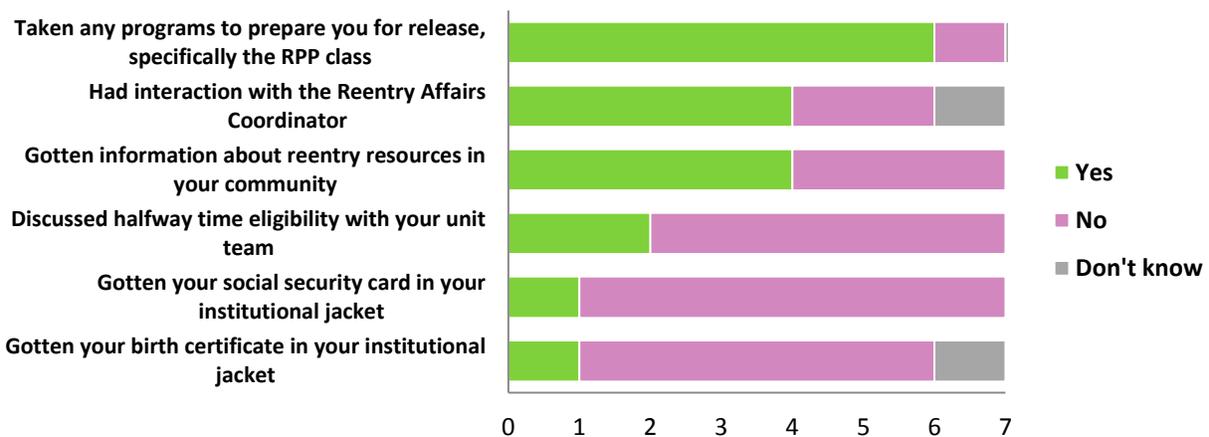
Reentry programming at USP Terre Haute also includes “Reentry Simulation” in which tables are arranged to represent a makeshift town with stations labeled as agencies (e.g., a bank, social security office, parole office). Participants spend 15 minutes at each station to accomplish simulated tasks. Additionally, USP Terre Haute invites staff from the Indiana halfway house to talk to participants about rules and expectations. The business office staff at the USP Terre Haute also facilitates a component of the RPP that involves release funds and bank account information. Most of the programs are facilitated using outside volunteers. All inmates housed at USP Terre Haute are encouraged to apply for their birth certificates and social security cards two years prior to release. Because birth certificates are not free, inmates are encouraged to save to purchase them. The facility also has the JOBview 2nd Chance kiosk to assist those preparing for release with job searching.

Inmates receive reentry support both from facility staff (such as the Reentry Affairs Coordinator and unit management staff) and from DC government agencies. The DC Court Services and Offender Supervision Agency (CSOSA) provides a quarterly Community Resource Day videoconference for DC inmates in FBOP facilities, including those at USP Terre Haute. Through videoconferencing, CSOSA staff and representatives from other organizations provide information on housing, healthcare, employment, education, and other resources in the DC area to DC inmates who are within 90 days of release. Inmates also receive an informational package with the contact information of providers who participate in the event. This service ensures that returning citizens receive the information about district services that can assist with successful reentry.

Of the DC inmates the CIC surveyed, seven were within 18 months of release. All but one have taken Release Preparation Program (RPP) classes, and more than half have had interaction with the Reentry Affairs Coordinator and have gotten information about reentry resources in their community. Two have discussed halfway house eligibility with their unit teams, one has a social security card, and one has a birth certificate (Figure 13).

Figure 13

If you are within 18 months of release, have you:



The majority of these DC inmates reported not knowing how to access education, employment, state IDs, food, medical care, disability assistance, therapy, or housing. None reported knowing how to access drug treatment. During the interviews, one inmate reported seeing “a lot of information on the computer system regarding reentry” and another that he would like to receive “proper information.” One inmate indicated that he currently works in the education department and helps others prepare for reentry.

Recommendations

8. *Establish a standardized curriculum for the Release Preparation Program (RPP) across all FBOP facilities.*

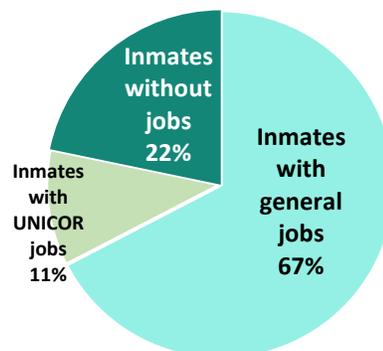
- The CIC commends the FBOP for initiating plans for a standardized RPP curriculum across all FBOP facilities. According to the FBOP Reentry Services Division’s Senior Deputy Assistant Director, Patti Butterfield, as of September 2016, RPP did not have a standardized curriculum. The CIC understands that the FBOP is in the process of rolling out an agency-wide RPP curriculum at the time of this report publication. The FBOP should establish a standardized curriculum for the RPP across all FBOP facilities to ensure inmates receive successful preparation for reentry and community resource transition.

XIII. Employment, Education & Programming

A. Employment

At the time of the CIC inspection, 83 DC inmates were employed at USP Terre Haute, five of whom worked in the UNICOR factory. Additionally, approximately 67% of DC inmates surveyed had general jobs at USP Terre Haute, and 11% had UNICOR jobs (Figure 14). Positive comments included that an inmate’s job allows him to take care of himself and that the culinary job is “okay.” Negative comments included that pay is low, that jobs are difficult to obtain, that “a lot of jobs are given to white inmates,” that UNICOR staff is “racist,” and UNICOR jobs are “difficult for blacks [to obtain].”

Figure 14
DC Inmate Employment



USP Terre Haute employs 195 inmates in the UNICOR factory. The UNICOR in USP Terre Haute is a textile factory, and the employees are responsible for sewing shirts for various branches of the military. Those who work in UNICOR have an opportunity to develop work ethics and learn valuable job skills such as how to work with a team. There are over 150 inmates on the waiting list to gain access to employment through the UNICOR factory, none of whom are from DC. The three waiting lists include a list for those who have imposed fine obligations, those who have prior experience, and those who have neither.

B. Education

Education Profile of DC Inmates (FY16)

Adult Basic Education (ABE)		Number of DC Inmates
Enrolled		0
Completed		0
On Waiting List		0
Dropped or Refused Program		0
GED Program		Number of DC Inmates
Enrolled		17
Completed		0
On Waiting List		9
Dropped or Refused Program		5
College Classes		Number of DC Inmates
Enrolled		0
Correspondence Classes		Number of DC Inmates
Enrolled		0

Source: Federal Bureau of Prisons.

USP Terre Haute offers a General Educational Development (GED) preparation course in accordance with FBOP curriculum standards. The Education Department in USP Terre Haute is fully staffed with 12 GED teachers. One of the GED instructors is a Special Education instructor who serves the entire FCC Terre Haute complex.

USP Terre Haute is not currently utilizing the computerized GED system. The computerized GED testing system was activated in January of 2015, but staff continues to utilize paper-based GED testing. The staff at USP Terre Haute reported that, “honestly it is not a big difference or huge benefit to switching to computer-based GED testing.” CIC staff was informed that one DC inmate recently passed the GED test.

In addition to GED testing classes offered by the Education Department in USP Terre Haute include English as a Second Language (ASL) and a range of Adult Continuing Education (ACE) courses. There is one bilingual staff member in the education department at USP Terre Haute.

The results of the CIC interviews reveal that many DC inmates believe that more educational programs are needed at USP Terre Haute. One inmate, who has a high school diploma, indicated that morale is low among inmates because GED preparation is at a “bare minimum” while another indicated that the facility should offer more ACE classes.

C. Vocational Training

USP Terre Haute offers eight certified apprenticeship training programs, one of which is a small appliance repair program certified through Ivy Tech at the Indiana Community College. The Indiana Department of Labor also certifies apprenticeships in baking, barbering, and tutoring. Additionally USP Terre Haute offers a 360 hour credit course in Diesel Technology and Building Trades that include the basics of framing, finishing, wiring, plumbing, and carpentry. Staff reported that approximately five DC inmates were enrolled in the building program. USP Terre Haute also facilitates a 120 hour Computer Application course, which includes a combination of classroom and technical instruction. To enroll in vocational training programs, participants must have a GED or a high school diploma.

Recommendations

9. Examine existing procedures for UNICOR employment to ensure fair access for DC inmates.

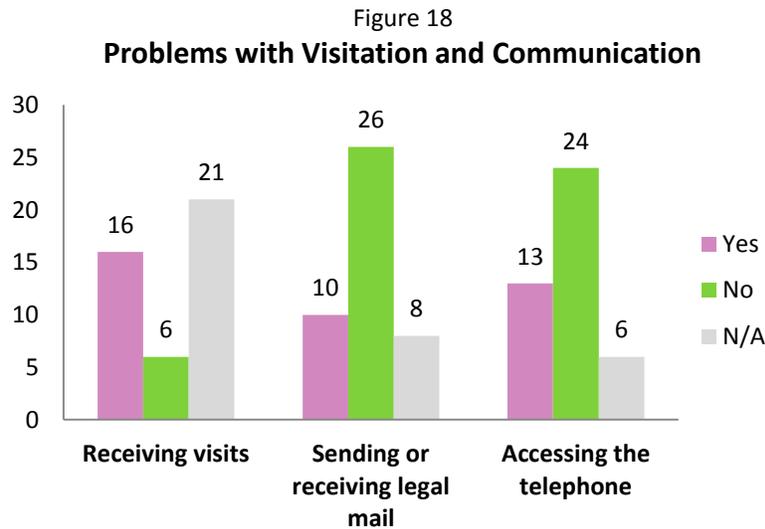
- Employment in the UNICOR factory provides benefits that include higher wages and an opportunity to build work ethics. Of the 195 employees in UNICOR, only five are from DC. Additionally, inmates reported that of all areas of employment, education, and programming, the UNICOR program was the most difficult in terms of enrollment. The CIC encourages an assessment of the current UNICOR selection process to ensure that DC inmates are not disadvantaged.

10. Increase the number of Adult Continuing Education (ACE) courses.

- The CIC commends USP Terre Haute for offering creative and lucrative vocational training programs. In addition to vocational programming, the facility should offer additional ACE courses to meet inmates’ interests. ACE courses are an effective, cost saving form of education, and the facility can utilize inmates with more advanced education to lead classes.

XIV. Communication & Visitation

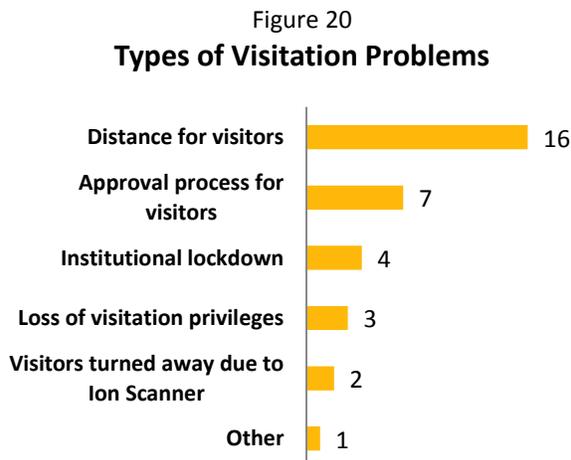
DC inmates experienced varying levels of difficulty regarding visitation and communication (Figure 18). Receiving visits was the most difficult (16 inmates), followed by accessing the telephone (13 inmates), and then sending or receiving legal mail (10 inmates).



A. Visitation

Visiting hours at USP Terre Haute are between the hours of 8:00 A.M and 3:00 PM on Saturday, Sunday, and Monday. Special visiting is available on a case by case basis. Inmates must submit a visiting list for approval, and immediate family are ordinarily placed on the list after appropriate verifications and checks. All visits begin and end in the visiting room.

The most common type of visitation problem was the distance for visitors (Figure 20). Inmates also noted problems with the approval process for visitors, institutional lockdown, loss of visitation privileges, and visitors being turned away due to a positive result from the Ion Scanner, (which tests for possible contact with (not usage of) illegal substances). One inmate commented that visitors need to have known him before his date of incarceration to be admitted. Other comments included that officers treat visitors poorly, that staff “go out of their way to deny DC



prisoners their visits,” that “visitation forms are way too much for friends to be approved,” and that many DC people have crime convictions and cannot get on the visitors’ list.

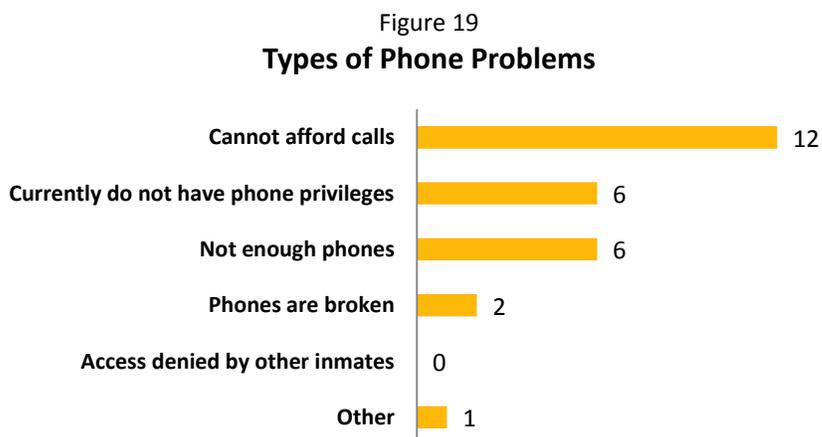
B. Communication

Mail: Mail correspondence is permitted without prior approval. Mail is distributed Monday through Friday by the Evening Watch Officer in each housing unit. Legal and “Special Mail” is distributed by the unit staff as soon as possible after it is received. Legal and “Special Mail” is recorded in a log book to monitor correspondence. Inmates are also permitted to receive publications such as books, newspapers, and magazines with some exceptions. Inmates do not have a limit on the amount of mail they receive. There is no mail service on weekends and holidays. Ten inmates reported problems with sending or receiving legal mail while one inmate reported that the legal mail problem has been fixed.

Email: Inmates may send and receive email at a rate of \$0.05 per minute.

Telephones: Inmates may use the telephone through the Inmate Telephone System (ITS), which allows for up to 30 approved numbers an inmate may call. Telephone calls are restricted to 15 minutes or less at the discretion of the Warden. Unit phones are available from 6:00 AM until lock down every day. At the time of the CIC inspection, staff reported that a 15-minute phone call to DC costs an inmate \$3.15.

Most common problems reported by DC inmates regarding the telephone were that inmates cannot afford calls, that inmates currently do not have phone privileges, and that there are not enough phones (Figure 19). One inmate reported not being able to reach his attorney because staff will not allow him to receive legal calls.



Attorney-Client Communication

As stated in the FBOP Program Statements, FBOP provides each inmate with several ways to access confidential communications with his attorney, including the opportunity to place an occasional unmonitored call to his attorney. Inmates at USP Terre Haute are permitted to have unmonitored phone calls with an attorney, but the inmate must demonstrate to the Unit Team a valid reason why the phone call should be unmonitored, such as an imminent court deadline. Mail from attorneys is treated as Special Mail if it is marked “Legal Mail - Open Only in the Presence of Inmate” and has the attorney’s name and an indication that she/he is an attorney. In order to visit, attorneys should make an appointment in advance. Meetings with an attorney will be visually monitored but not audio monitored. While the transfer of legal material from an attorney to an inmate is permitted, it is also subject to a search for contraband.

XV. DC Specific Issues

The majority of DC inmates (83%) expressed their desire to move closer to home if given the opportunity. The most common reason cited was connecting with family, as more visits will allow family bonds to stay intact during an inmate’s incarceration. Another key reason for wanting to move closer to DC was the ability to access better reentry resources, such those for employment and housing. In response to why he wished to be located closer to DC, one inmate commented, “To reestablish family ties.... I will also have access to resources that’ll enable me to become familiar with all the changes in society so I can adapt to them, making my transition smoother.”

Regarding how staff treats DC inmates in comparison to other inmates, 80% reported worse treatment, 20% reported equal treatment, and none reported better treatment (Figure 21). When asked whether DC inmates are treated better or worse by other inmates, 53% reported worse treatment, 42% reported equal treatment, and 5% reported better treatment (Figure 22).

Figure 21
Compared to other inmates, how are DC inmates treated by staff?

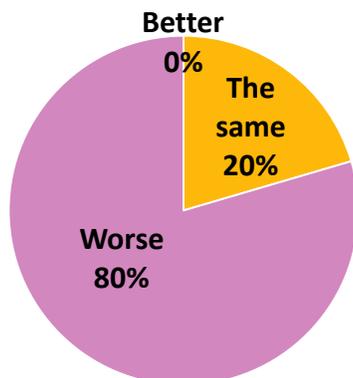
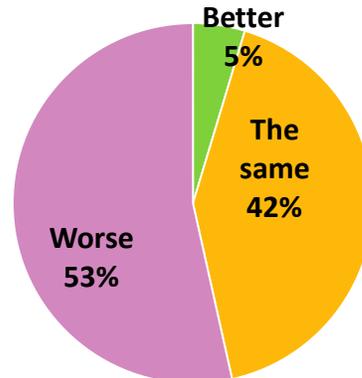


Figure 22
Compared to other inmates, how are DC inmates treated by other inmates?



Generally, DC inmates reported discriminatory treatment by both staff and other inmates, including one inmate who stated that “a lot of staff and inmates don’t like us because [of] our no nonsense mentality.” DC inmates also are “considered as a gang” because they “stand up for each other” (a phrase used by several inmates) and are “leaders and don’t tolerate mistreatment.” One inmate stated that DC inmates are “singled out and harassed” because they “speak out for [their] rights.” Other comments include that DC inmates are perceived as violent and abusive, that stereotypes cause DC inmates to be “subjected to punishment and denied opportunities for no reason,” and that DC inmates are treated “like dirt.”

Respondents also reported that DC inmates are frequently passed over for jobs, and that there are implicit quotas for hiring DC inmates; for instance, staff told an inmate he was not going to hire him “because he had too many DC inmates working under him.” Inmates also expressed concerns about being passed over for transfers to the FCI while inmates in similar situations (but not from DC) are given priority. One inmate stated that DC inmates are denied certain privileges because they have a front and back number in their sentence and that the lack of good time leaves them “between a rock and a hard place.”

The CIC received several positive comments about the treatment of DC inmates, including from one inmate who stated that DC inmates “are treated with a little more respect here” and that “staff have simply done their jobs as best and fair as they could.” Another stated that although “certain staff have issues,” he “does not feel discriminated” against. One inmate commented that inmates at USP Terre Haute have been helpful to him and another that he has received better treatment here than at USP Tucson.

Recommendations

12. *Move DC inmates to a facility within 250 miles of DC.*

- In January 2016, the Colson Task Force released its recommendations for improving reentry in federal corrections. The recommendations included developing greater opportunities for family engagement by housing individuals as close to home as possible.²³ With USP Terre Haute located over 600 miles away from DC, to the extent possible, the FBOP should move DC inmates to a facility within 250 miles of DC.

²³ Transforming Prisons, Restoring Lives: Final Recommendations of the Charles Colson Task Force on Federal Corrections (January 2016).



U.S. Department of Justice

Federal Bureau of Prisons

Washington, DC 20534

JUN 14 2017

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 May 12, 2017, regarding the September 15, 2016, visit to USP Terre Haute. The Bureau of Prisons (Bureau) recognizes the value of the Corrections Information Council (CIC) inspections of its facilities and the voice it provides the D.C. Superior Court inmates. We hope to continue working closely to improve the Bureau facilities and raise awareness with regard to those inmates' needs. I offer the following response to the questions and/or statements in the report:

Throughout the report, unsubstantiated allegations are made without direct observation of the CIC or supported by facts that can be corroborated. The Administrative and Supervisory Staff at USP Terre Haute ensure all staff conduct themselves in a professional manner and in accordance with all laws and policies which govern the Bureau. The Bureau takes allegations of misconduct seriously. If provided with specific case information, the Bureau will assist in any assessment and investigate.

Factual Clarification:

The draft report was prepared and submitted to the Bureau eight months after the inspection was conducted.

The draft report indicates: *"...nearly half of all respondents reported problems with staff, particularly with regards to unprofessionalism and disrespect towards inmates. Several inmates reported that DC inmates in particular are stereotyped and treated poorly ("007 stigma")."*

Response: Throughout the report, unsubstantiated allegations are made without direct observation of the CIC or supported by facts that can be corroborated. Program Statement 3420.11, Standards of Employee Conduct, provides standards to all Bureau employees regarding conduct towards inmates including, "Employees may not allow themselves to show partiality towards" an inmate. Furthermore, mistreatment of inmates to include insulting remarks, physical abuse, sexual abuse or discrimination based on residency status, race, ethnicity, religious preference, gender, sexual orientation, etc. is not tolerated. An environment of respect is practiced and taught from the top down.

The draft report indicates: *"...USP Terre Haute is considered a "drop out yard" which houses inmates who have renounced gang affiliation; as such, these inmates are more likely to be bullied by staff because they "cannot go anywhere else."*

Response: USP Terre Haute is not the only institution in the Bureau housing inmates who have disassociated from groups and gang-related activity. There are other institutions in which inmates may be placed so that they can program in general population.

The draft report indicates: *"Other negative aspects include poor quality of food, racism, medical and psychology services, mice, and recreation ("isolated rec yards")."*

Response: Meals provided by Food Service are sampled daily by line staff, supervisory staff and administrative staff from the same serving line as used by inmates. Any concerns raised by inmates or identified during the staff sampling are addressed and rectified immediately by Food Service Staff. They put forth every effort to ensure the meals meet the amount of calories and portion sizes as set forth in Program Statement 4700.06, Food Service Manual. The menu follows the National Menu as set forth by Central Office as closely as possible.

There is zero tolerance for racism by staff. Diversity training is provided to staff in a number of ways, including special emphasis programs and activities throughout the year. Additionally, all staff are required to participate in Ethics and Standards of Employee Conduct training on an annual basis. The Bureau actively recruits minorities for positions at FCC Terre Haute to increase the diversity of staff.

All concerns related to pest issues are swiftly dealt with and

resolved. As evidenced by the high sanitation levels at FCC Terre Haute, they pride themselves by providing a clean and safe environment for staff and inmates alike.

A Program Review of Terre Haute's Health Services Department was conducted January 6-8, 2015. The Health Services operation was rated as Good.

The Program Review report stated:

FCC Terre Haute is a Care Level 3 complex, including Care Level 3 mental health patients. At the time of the review, almost 65% of the inmate population was enrolled in at least one chronic care clinic. The Health Services staff takes ownership of their programs and provides excellent clinical care to the inmate population.

FCC Terre Haute continues to manage many difficult missions, including the Special Confinement Unit (SCU), Communication Management Unit (CMU), Stages unit, and a bus center. Provision of medical care to the many units is challenging and requires a large number of staff; however, it is well managed and runs efficiently.

FCC Terre Haute is now accredited by the Accreditation Association for Ambulatory Health Care, Inc. (AAAHC). Previously, accreditation was through JCACHO, Joint Commission of the Accreditation of Healthcare Organizations. Terre Haute will be the first institution to go through an audit with AAAHC July 13-24, 2017.

The draft reports states, *"At the time of inspection, there were 66 DC inmates on the chronic care caseload, one with physical disabilities, and one with cognitive disabilities."*

Response: As of June 1, 2017, there were 4 DC inmates designated to FCI Terre Haute:

Care Level 1 = 1
Care Level 2 = 2
Care Level 3 = 1
Care Level 4 = 0

There were 70 DC inmates designated to USP Terre Haute:

Care Level 1 = 30
Care Level 2 = 31
Care Level 3 = 8

Care Level 4 = 1

The FCC Terre Haute Psychology Services Department underwent a Program Review July 19-21, 2016. The Psychology Services operation was rated as Superior.

The Program Review report stated:

A comprehensive review was conducted of the Psychology Services Department. The rating is based on the performance of vital functions, the status of internal controls, and the quality of programs and clinical documentation. There is strong clinical and administrative leadership within the department. Additionally, there is a positive atmosphere with collegial and supportive relationships amongst the departmental staff. Multiple missions are accomplished, to include fulfilling critical clinical and administrative functions that are efficient and demonstrate strong clinical competence. As a whole, the Psychology Services staff are visible, responsive, and well-respected within the institution.

Overall, there is strong emphasis placed on suicide prevention. Suicide prevention posters are present in the housing units. Inmates placed on suicide watch had daily visits, conducted by a psychologist, and documented. All suicide risk assessments are timely and included detailed and relevant clinical information. The clinician's follow-up plan was adhered to and documented in instances when a rationale for changes to the follow-up plan were indicated, or justified if there were no follow-up services.

Terre Haute's Recreation Department underwent a Program Review March 21-23, 2017. The Recreation operation was rated as superior with zero deficiencies.

The Program Review report stated:

"Recreation provides active and passive programming opportunities commensurate to the needs and interests of a diverse inmate population. Leagues and tournaments are offered in a variety of sport activities. Structured exercise programs and wellness activities promote active lifestyles. Hobbycraft activities are also provided with very good inmate participation throughout the complex."

The FCC Terre Haute Recreation Department meets the mandatory hours of operation standard of eight (8) hours daily, Monday

through Friday and twelve (12) hours daily on the weekend, as required by Program Statement 5370.11, Inmate Recreation. All inmates are provided time for hobby craft, leisure, wellness, and sports in the Recreation Center and Recreation Yard.

Within the housing units, In-Cell Hobby Craft is available to inmates, as are board games, checkers, cards and chess clubs which culminate in a tournament facilitated by outside volunteers from the Indiana Chess Federation. The Recreation Department conducts Health Fairs and Seminars twice a year, utilizing students of the Indiana State University School of Nursing, who educate and interact with the inmates.

The Recreation Department in USP Terre Haute includes recreation yards, hobby craft classrooms, a gymnasium, and a music room. Indoor activities include: art, fitness through stationary machines, and basketball and fitness classes. Outdoor activities include softball, flag football, soccer, handball/racquetball, track, basketball, and horseshoes.

The Recreation Department encourages the use of inmate support. Inmates with expressed interest may seek employment in the Recreation Department to assist with coordinating recreation activities. Inmates may submit a request to staff indicating interest in becoming a recreation employee.

The inmates have access to recreational equipment for pool tables, basketball, soccer, handball, flag football, volleyball, softball, painting, drawing, leathercraft, and ceramics. Board games, checkers, chess are available; as well as, a library containing books on health, wellness, sports, and coaching. There are organized sports during all seasons. There are special holiday events held for the ten federal holidays. For television viewing, inmates are provided a cable package with multiple channels to meet the diverse interests of the inmate population, as well as newly released movies shown on the weekends.

The draft reports indicates: "*Staff at USP Terre Haute report spending \$20 million in healthcare in 2016.*"

Response: FCC Terre Haute Health Services spending for 2016 was \$18,172,386.00

The draft reports indicates: "*55 of the 66 staff positions in the medical department were filled; vacancies included two doctors, two mid-level physician's assistants, two nurses, and other staff.*"

Response: FCC Terre Haute Health Services has 63 positions available and has filled 56 position for a total of 7 vacancies and is currently 89% staffed. Vacant positions are two doctors, one dentist, three Mid-Level Practitioners (MLP), and one Emergency Medical Technician (EMT).

The draft reports indicates" *"Staff turnover was reported to be 30 to 40 percent per year."*

Response: Staff turnover in the last 12 months has been 5% for the Health Services Department.

The draft reports states, "The facility also contracts with an optometrist who sees patients two times a week at USP Terre Haute."

Response: A Contract Optometrist evaluates patients weekly every Wednesday, 7:30 a.m. through 3:00 p.m. and again every other Friday (twice a month), same times, to evaluate inmates. This Optometrist availability has increased from four times per month to six times per month, thus reducing the waiting list significantly from a one year to three months. When eyeglasses are prescribed, the mandatory-sourced orders are sent to FCC Butner, North Carolina and filled through the UNICOR Optics operation.

The draft reports indicates: *"According to the staff in the medical department, physical exams and medical assessments take place within 24 hours of an inmates' arrival. Inmates also have access to routine Sick Call, which operates under a triage system. Inmates submit their cop out requests and are seen within 24 hours. An average of 15 to 20 inmates are seen per day for sick call."*

Response: Intake Screenings occur within 24 hours of arrival to FCC Terre Haute. Routine Sick Call is available and the Triage system is utilized. Patients are examined and treated the same day they sign up for Sick Call under normal operations. Emergent and Urgent needs would be referred to the Physician immediately. An average of 15-20 inmates are seen for Sick Call at the USP daily.

The draft reports indicates: *"USP Terre Haute is ADA-accessible. Staff reported that handicapped (e.g., wheelchair bound) individuals at FCI are placed in USP because it is more accessible. However, the CIC met a DC inmate at FCI who was*

wheelchair-bound and was not transferred to the USP."

Response: FCC Terre Haute Health Service staff do not transfer inmates based on handicapped needs from FCI to USP. The Office of Medical Designations is aware that the FCI and FPC are not handicapped accessible. Inmates can be housed at the FCI or FPC who are in a wheelchair for short periods of time (example would be an inmate who has a broken leg might be confined to a wheel chair for 4-6 weeks) but inmates who are totally confined to a wheelchair for long term use would be referred for a transfer to an appropriate facility to meet their handicapped needs. Without specific information regarding the mentioned inmate, the Bureau is not able to comment.

The draft report indicates: *"More than half reported being "unsatisfied" or "very unsatisfied" with medical care (Figure 2). DC inmates were least satisfied with wait times for medical care and most satisfied with wait times for mental health care."*

Response: The following policy excerpts provide guidance regarding access to care. Staff at FCC Terre Haute make every effort possible to schedule inmates for appointments in an expeditious manner based on the presenting symptoms and patient history.

Program Statement 6031.04 Patient Care, Section 15. Chronic Care Clinics, Chronic Care Clinics (CCCs) are a means for inmates with ongoing medical needs to be tracked and seen by a health care provider at clinically appropriate intervals. A physician will see all inmates assigned to a CCC every 12 months, or more often if clinically indicated. The frequency of CCC follow-up care will be determined based on clinical need and communicated to the inmate's primary MLP, who will provide this care. The physician will review the health records of all CCC follow-up encounters the MLPs perform. High risk or medically complex chronic care inmates will be seen more frequently in accordance with good clinical judgment, in addition to or in conjunction with regular visits with their primary provider.

All treatment and management decisions a physician or MLP make will be communicated to the inmate's assigned primary provider for continuity of care. The CD or staff physician will:

- Initially examine all new arrivals from other institutions that have a CCC assignment, within 14 days of arrival, to establish a treatment plan and follow-up intervals appropriate for the inmate's medical needs.

■ Personally examine and approve all additions and deletions of inmates to a CCC.

The CD retains overall professional responsibility for managing CCC inmates. The CD is expected to provide consultation to the MLPs as needed.

Program Statement 6031.04 Patient Care, 17. TRIAGE/ACCESS TO CARE, Triage is defined as the classification of patients according to priority of need for examination and/or treatment. Triage allows truly urgent conditions to be addressed adequately on the same day, while also allowing more routine conditions or concerns to be addressed at a scheduled appointment. During triage the following will occur:

- The inmate will provide a brief history.
- Vital signs will be taken, if indicated.
- An appointment will be scheduled with the appropriate provider within a time frame appropriate for the inmate's condition and medical needs.
- If no follow-up appointment is warranted, the inmate will be advised of other options (e.g. obtaining over-the-counter medications from the Commissary, submitting an Inmate Request to Staff (BP-A0148), etc.

The draft report indicates: *"A total of 34 inmates interviewed were on the chronic care caseload, 21 of whom receive timely follow-up care and 13 who do not. One inmate reported that he receives regular follow-up care for HIV every six months. Another stated that his chronic care medication was changed after he requested it. Other chronic care inmates expressed concern about delays in treating chronic care conditions and being taken off certain medications. One inmate reported not being provided a breathing machine because staff informed him there were not enough machines available."*

Response: Throughout the report unsubstantiated allegations are made without direct observation of the CIC or supported by facts that can be corroborated. The Bureau takes allegations of misconduct seriously. If provided with specific case information, the Bureau will assist in any assessment and investigate.

Inmates who are assigned to a Chronic Care Clinic or diagnosed with a chronic disease/illness requiring monitoring are seen at least yearly by a physician. Once the physician completes the examination, the physician then determines an appropriate time frame for follow up. Inmates who do not require another

physician visit will be scheduled for a MLP CCC Follow-Up visit within 6 months to discuss and renew any medications. If the physician determines an inmate requires more frequent examinations by a physician, then this is documented and scheduled as such.

Program Statement 6031.04 Patient Care, Section 15. Chronic Care Clinics provides guidance that is strictly followed by all clinical staff at FCC Terre Haute pertaining to scheduling guidelines.

Program Statement 6031.04 Patient Care, Section 15. Chronic Care Clinics provides guidance that is strictly followed by all clinical staff at FCC Terre Haute pertaining to scheduling guidelines.

Inmates who are assigned to a Chronic Care Clinic or diagnosed with a chronic disease/illness which requires monitoring are seen at least yearly by a physician. Once the physician completes the examination, the physician then determines an appropriate time frame for follow up. Inmates who do not require another physician visit will be scheduled for a MLP CCC Follow-Up visit within 6 months to discuss and renew any medications. If the physician determines an inmate requires more frequent examinations by a physician, then this is documented and scheduled as such.

Without knowing the specifics regarding the claim that inmates are taken off certain medications, a thorough response cannot be communicated.

Inmates are not issued breathing machines for their own personal use. Inmates report to the pill line and are issued the breathing treatment medication; as well as, a machine to be used in the waiting area of Health Service. After use, the machine is collected by the Health Service Department. If an inmate arrives while all the machines are being used (3 current machines are available for use at the USP, 2 machines are available for use at the FCI, and 1 machine is available for use at the FPC) they would be instructed to wait until the next machine became available for use. Each breathing treatment takes approximately 10-15 minutes to complete.

In the event the inmate is referencing equipment such as an C-PAP machine, the following procedures, outlined in the FCC Terre Haute General Patient Care Policy and Procedure Manual (page 19), are utilized to issue durable medical equipment. Inmates

are not denied equipment, any prescribed items would be purchased and provided in a reasonable amount of time.

Wheelchairs/Canes/Crutches/Other Adaptive Devices

Inmates who require adaptive devices will require a medical examination by either their Primary Care Provider, Physical Therapist or the Clinical Director, to determine the medical indication to issue the device. This can include but not limited to:

- Wheelchairs
- Canes
- Crutches
- Hearing aids
- Prosthetic Limbs
- Glasses
- Rollator Walkers
- CPAP/BiPAP Machines
- Orthotic/ Special Medical Shoes

Once it has been clinically determined that an inmate will require an assistive/adaptive device for clinical purposes, the inmate will be issued the device through the Health Services Department.

Once an inmate receives the adaptive device, it will be denoted on his property list. If an inmate departs the institution either for release, RCC placement or transfer to another facility, the device will go with the inmate. This includes canes, crutches, glasses, wheelchairs, orthotics/prosthetics, C-PAP machines, etc.

The draft report indicates: *"Inmates expressed concern regarding long wait times, especially when an inmate is in the SHU."*

Response: Throughout the report, unsubstantiated allegations are made without direct observation of the CIC or supported by facts that can be corroborated. The Bureau takes allegations of misconduct seriously. If provided with specific case information, the Bureau will assist in any assessment and investigate. More information is needed so this issue can be addressed.

Health Service has a Registered Nurse (RN) assigned to the SHU seven days a week for medical rounds, sick call, pill lines, and for emergency response. A staff physician and MLP are assigned

two days a week to evaluate inmates on sick call, for Chronic Care Clinics, and other assigned duties. Specialists are scheduled to evaluate inmates in the SHU based upon their complaints and needs of the inmate population.

The draft report indicates: *"Inmates also reported poor quality of care and an inability to see specialists or receive necessary treatments (e.g., for pain, bone injuries, cataracts, heart problems, and glaucoma)."*

Response: Throughout the report, unsubstantiated allegations are made without direct observation of the CIC or supported by facts that can be corroborated. The Bureau takes allegations of misconduct seriously. If provided with specific case information, the Bureau will assist in any assessment and investigate. Each individual issue would need to be investigated to determine the exact issue and the circumstances surrounding the specific issue.

The draft report indicates: *"Two inmates expressed concerns regarding the lack of teeth cleanings, one reported not being able to see the dentist unless inmates need to have teeth pulled, and one indicated that he has a broken tooth and could not chew after his wisdom tooth was pulled."*

Response: Inmates are provided instruction during A&O and the information is also contained in the A&O Handbook provided to all inmates. In order to seek routine dental care, inmates are instructed to complete a Request to Staff Member (hard copy or electronic) to be placed on the waiting list. Services are provided as follows based on the complaint and presentation of symptoms. Treatment for emergency and routine situations are handled as noted below per Institutional Supplement THX 6031.04 Patient Care:

Inmate Medical and Dental Care.

1. Requests for routine dental care (e.g., prophylactic cleaning, routine dental care, etc.) will be through written Inmate Request to Staff Member (cop-out). When the request is received, the inmate will be placed on the waiting list for treatment.
2. Treatment for routine care will ordinarily be provided on a first-come, first-serve basis. The waiting list entry date will determine priority. If an inmate is placed into the SHU, he will lose his place on the waiting list and will be required,

upon release, to resubmit an Inmate Request to Staff Member. Only Emergency Dental Care will be available to inmates while housed in the SHU.

3. Dental Sick-Call Triage will be available to all inmates requiring emergency dental care and inmates should report to the Health Services Department between 6:30 a.m. to 7:00 a.m., on routine sick call days. If an emergency occurs at times other than those listed, the inmate's Detail Foreman or Unit Officer must contact the Dental Clinic to set up an appointment. Emergency dental care includes those procedures directed toward the immediate relief of pain, treatment of traumatic injuries, and acute infections.

4. After normal working hours and on weekends and holidays, the on-call MLP will consult with the Dental Officer. When the emergency situation is beyond the scope of the MLP's expertise, the on-call Dentist will return to the institution and/or refer to an appropriate dental facility for care.

The draft reports indicates: *"At the time of the inspection, there were 38 DC inmates diagnosed with mental health issues."*

Response: As of June 1, 2017, there were eight DC inmates designated to FCI Terre Haute (7 Care 1-MH, 1 Care 2-MH, 0 Care 3-MH). There are 75 DC inmates designated to THP (62 Care 1-MH, 8 Care 2-MH, 5 Care 3-MH).

The draft reports indicates: *"The Psychology department in USP Terre Haute has 11 psychologists, 11 mid-level practitioners, and one technician."*

Response: The Psychology department at FCC Terre Haute has 11 psychologists, 11 treatment specialists, 4 pre-doctoral interns, and 1 psychology technician.

The draft reports indicates: *"There were 18 "serious" suicide attempts at USP Terre Haute within a single year, two of which were by inmates from DC."*

Response: All serious suicide attempts at FCC Terre Haute were reviewed from September 15, 2015, through September 15, 2016. There were no serious suicide attempts at FCI Terre Haute by DC inmates during this time period. Of the 18 "serious" suicide attempts at USP Terre Haute, two were made by a single DC inmate. In both cases, the inmate reported he had ingested a number of OTC medication.

The draft report indicates: "...observed cracked windows in two of the suicide observation rooms. At the time of the inspection, one of the suicide observation rooms was undergoing renovation to repair the cracked windows."

Response: The windows were replaced and both rooms are functional at this time.

The draft report indicates: "Of the 32 DC inmates interviewed who required mental health services, 13 felt they have adequate access to these services, and 19 felt they did not. Several inmates expressed concerns regarding long wait times, including one who has a class action lawsuit for being denied mental health treatment for more than a decade."

Response: The FCC Terre Haute Psychology Services Department underwent a Program Review July 19-21, 2016. The Psychology Services operation was rated as Superior.

The Program Review report stated:

A comprehensive review was conducted of the Psychology Services Department. The rating is based on the performance of vital functions, the status of internal controls, and the quality of programs and clinical documentation. There is strong clinical and administrative leadership within the department. Additionally, there is a positive atmosphere with collegial and supportive relationships amongst the departmental staff. Multiple missions are accomplished, to include fulfilling critical clinical and administrative functions that are efficient and demonstrate strong clinical competence. As a whole, the Psychology Services staff are visible, responsive, and well-respected within the institution.

Overall, there is strong emphasis placed on suicide prevention. Suicide prevention posters are present in the housing units. Inmates placed on suicide watch had daily visits, conducted by a psychologist, and documented. All suicide risk assessments are timely and included detailed and relevant clinical information. The clinician's follow-up plan was adhered to and documented in instances when a rationale for changes to the follow-up plan were indicated, or justified if there were no follow-up services.

Psychology staff adhere to the following policies which govern the frequency of encounters required for patients. Program

Statement 5310.17, Psychology Services Manual, Chapter 4, Psychological Services For Inmates states, "Inmate requests for services are responded to immediately for crisis situations or potential suicide risk, and ordinarily within three (3) working days for routine requests. Responses for routine requests may include an appointment, an invitation to the department's open house hours, placement on a waiting list for the desired services, clarification, or redirection.

Program Statement 5310.16, Treatment and Care of Inmates With Mental Illness, Chapter 5, Mental Health Care Levels states:

(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.

There are a number of ways to contact Psychology Services at this institution that are listed in the A&O Handbook given to inmates upon arrival that states: Speak with a Psychology Services staff member during mainline each day or as they make rounds in the unit. Submit an electronic or written Inmate Request (cop-out) to Psychology Services. In the case of a crisis situation, notify the unit officer, Unit Team, or any other staff member of an urgent need to speak with Psychology Services.

Psychology Services staff conduct an intake screening with all new or transferred inmates. Clinically significant treatment needs, identified at intake, are addressed to include the delivery of appropriate follow-up services (intervention with victims and perpetrators of sexual assault, crisis intervention, suicide risk assessment, mental health counseling, drug treatment, sex offender treatment and psychiatric consultation).

Psychology Services continues to remain proactive in caring for and treating mental health patients and continuously monitor wait times for inmates who require mental health care.

The draft report indicates: *"Another inmate stated that it could take two to three weeks to get seen unless [he] threatens to kill [him]self."*

Response: There are a number of ways to contact Psychology Services at this institution that are listed in the A&O Handbook given to inmates upon arrival: Speak with a Psychology Services staff member during mainline or as they make rounds in the unit. Submit an electronic or written Inmate Request (cop-out) to Psychology Services. In the case of a crisis situation, notify the unit officer, Unit Team, or any other staff member of an urgent need to speak with Psychology Services.

Psychology Services will continue to remain proactive in caring for and treating mental health patients and continuously monitor wait times for inmates who require mental health care.

The draft report indicates: *"Other inmates expressed concern over mental health staff not taking concerns seriously and that they "tell everyone the same thing" regardless of the issues.*

Response: Inmates have the opportunity to collaborate with Psychology staff to create an individualized treatment plan to address their mental health needs. Inmates interested in programming are also provided the opportunity to participate in proactive and psychoeducational groups. The JSAT (Jail Suicide Assessment Tool) is utilized to individually assess static and dynamic risk factors as well as protective factors for suicide risk when an inmate expresses concerns for his safety. Care2-MH inmates are seen on an at least monthly basis in accordance with policy, and Care3-MH inmates are seen at least weekly."

The draft report indicates: *"...inmates only receive two sets of clothing in the SHU and that there are not enough supplies to clean the shower."*

Response: Inmate clothing issue in the SHU is handled in accordance with Program Statement 4500.11 CN-1, Trust Fund/Deposit Fund Manual, and Program Statement 5270.11, Special Housing Units, Section 12(c), which states, "All inmates will receive adequate institution clothing, including footwear, while housed in the SHU. Inmates will be provided necessary opportunities to exchange clothing and/or have it washed." Likewise, Institution Supplement 4500.11A, Chapter 13, section 7 states, "The SHU Unit Officer will order the required clothing for SHU clothing issue on Monday, Wednesday, and Friday of each week. Clothing will be picked up each Monday, Wednesday, and Friday by arrangement with Laundry staff." Therefore, opportunities exist for each inmate housed in Special Housing to have their clothing and linens laundered three times per week. Inmates are issued two complete sets of clothing while housed in the SHU. Laundry is completed weekly in the SHU. While one set of clothing is being worn, the other set can be laundered.

SHU staff provide inmates with cleaning supplies on a weekly basis during the Evening Watch shift. This allows inmates the ability to thoroughly clean their cells from top to bottom to include the shower. In addition, should the need arise, inmates may request cleaning supplies if there are circumstances which warrant the need.

The draft report indicates: *"Chaplain Department in USP Terre Haute facilitates worship services for individuals from over 16 various religious affiliations."*

Response: USP Terre Haute currently facilitates worship services for 18 various religious affiliations.

The draft report indicates: *"Other concerns included the lack of microwaves on the units."*

Response: Microwaves are being phased out of the housing units, to be replaced by hot water dispensers per Bureau Trust Fund Message 30-16, dated June 30, 2016, wherein microwave funding was eliminated.

The draft report states: *"...lack of care for inmates in wheelchairs..."*

Response: FCC Terre Haute is a Medical Care Level Three facility that continually provides appropriate care for inmates who utilize wheelchairs and other assistive devices in accordance with ACA standards and Program Statement 6031.04, Patient Care. Without knowing the specifics of what care is perceived as lacking, we are unable to address this concern. However, please be assured our staff are sensitive to the special needs of disabled inmates.

The draft report indicates: *..."segregated communities" that prevent DC inmates from engaging with inmates from other states.*

Response: FCC Terre Haute does not promote segregation among inmates of any kind. In a prison setting, inmates often gravitate toward those from similar geographic locations, sentencing districts, or those who have known each other prior to their incarceration. However, there are no barriers which prevent inmates interacting with other inmates from different states. Each housing unit has a consistent ethnic mix.

Recommendations by CIC:

Ensure that inmates are receiving adequate meal portions.

The draft report states: *DC inmates reported insufficient meal portions and limited options for non-meat eaters. The CIC understands the budget constraints a correctional facility faces in ensuring that all inmates are provided with nutritionally*

adequate meals meeting the objectives under the FBOP's Program Statement. The CIC encourages USP Terre Haute to review the food portions provided to inmates and also to address concerns regarding undercooked food.

Response: The Food Service Department at USP Terre Haute receives a budget that adequately provides all inmates with hearty, nutritious meals. The Bureau bases the required daily caloric intake of meals on the Dietary Guidelines for Americans 2015-20 Eighth Edition. The BOP National Menu offers an average of approximately 2,500 calories per day for regular food options and less than 2,000 calories per day for heart healthy options. The caloric intake of all meals is calculated based on inmates partaking of the entire meal as planned with approved portion sizes. Meals range from a daily average of 2443 calories for the regular food options to 1951 calories for the heart healthy food options. The lack of Administrative Remedies regarding nutritionally adequate meals and meal portions indicate this is not a creditable issue at USP Terre Haute.

The No-Flesh option is the alternative to the main entrée being offered. All menu items have been determined and established by Central Office and are standard throughout the Bureau, in accordance with Program Statement 4700.06, Food Service Manual, Chapter 2, National Menu Planning, Section 1., General Policy, and Chapter 4. Religious Diet Program, Section 2., No-Flesh Option which states, "A no-flesh protein option will be provided at both noon and evening meals whenever a main entree containing flesh is offered. No-flesh production requirements will be determined by the FSA. Vegetables and starches seasoned with flesh will have an alternate no-flesh option."

Cooking and serving temperatures and preparation is in accordance with guidelines set forth in various chapters of Program Statement 4700.06, Food Service Manual. All menu items are checked for proper cooking temperatures prior to plating and serving of meals.

If there is a concern with the preparation of a food item, inmates are encouraged to address it with Food Service or other staff who are readily available during each meal. In addition, throughout each meal, staff will sample the meals being served to ensure the food flavor, texture, temperature and appearance meet our high standards.

The lack of Administrative Remedies regarding nutritionally adequate meals and meal portions indicate this is not a

creditable issue at USP Terre Haute.

Increase Chapel availability and religious programming.

The draft report states: *DC inmates shared an interest in more access to religious video viewing and overall religious learning. Although the facility offers the residential Life Connections Program (LCP), the CIC recommends that USP Terre Haute seek out additional volunteers from the community to provide more insight regarding religious instructions and increase the hours of operation in the chapel library for all inmates.*

Response: In accordance with Program Statement 5360.09, Religious Beliefs and Practices, "7. Religious Opportunities and Limitations §548.10 (b) [When considered necessary for the security or good order of the institution, the warden may limit attendance at or discontinue a religious activity...a. Religious Accommodation. The level of scheduled activities is expected to be commensurate with the institution's mission/need." The Religious Services Program Schedule provides each religious preference group with separate time in the department on a weekly basis for congregate worship and group study. Policy only requires providing one worship service, per week, per religious preference group. Even with the increased number of institutional needs, this requirement is met. USP Terre Haute also offers additional study service for each religious preference on a weekly basis. Furthermore, the Religious Services Department utilizes available volunteers and contractors to supply many preference groups with directed study opportunities each month. Religious Services also maintains a growing library at each institution of the Complex with religious preference specific media available to inmates to augment individual self-directed study inside, and outside, the department.

Improve care and reduce wait times for inmates who require mental health services.

The draft report states: *More than half of DC inmates interviewed who require mental health services reported that they do not receive adequate care. The CIC recommends that USP Terre Haute remain proactive in caring for and treating mental health patients and continuously monitor wait times for inmates who require mental health care.*

Response: The Bureau agrees with the recommendation that USP

Terre Haute remain proactive in caring for and treating mental health patients and will continuously monitor wait times for inmates who require mental health care.

Ensure that suicide companions receive support after witnessing suicide attempts.

The draft report states: *Inmates who witness suicide attempts may experience secondhand trauma from the experience. The CIC recommends that USP Terre Haute provide the necessary counseling services to suicide companion inmates to ensure that they are not negatively affected by what they witness while on the job.*

Response: The Psychology staff at USP Terre Haute discuss events with the volunteer suicide companions and provide follow-up care with suicide companions that have experienced traumatic events as a result of their work. In addition, Program Statement 5324.08 Suicide Prevention Program, Chapter 13, INMATE OBSERVERS - INMATE COMPANION PROGRAM, Section d. Meetings with Program Coordinator states, "Observers will meet at least quarterly with the Program Coordinator or designee to review procedures, discuss issues, and supplement training. After inmates have served as observers, the Program Coordinator or designee will debrief them, individually or in groups, to discuss their experiences and make program changes, if necessary."

Psychologists provide opportunities for inmates in initial and quarterly trainings to review procedures, process any concerns/feelings or thoughts related to recent watches and voice any concerns. Psychologists meet with the mentorst to discuss the experience of observing an inmate on watch.

Stress the importance of zero tolerance of staff retaliation or intimidation of inmates who wish to file an administrative remedy, with meaningful personnel consequences for staff that violate the FBOP's objectives.

The draft report states: *Over a third of all DC inmates interviewed reported that grievances of met with threats by staff and staff retaliation. The FBOP should stress the importance of zero tolerance of staff retaliation or intimidation of inmates who wish to file an administrative remedy, with meaningful personnel consequences for staff that violate the FBOP's objectives. Such measures will increase transparency and improve efforts to deter staff retaliation and promote the availability for inmates to use the Administrative Remedy process.*

Response: The Bureau has a zero tolerance policy relating to staff retaliation or intimidation of inmates who wish to file Administrative Remedies. The draft report makes very serious allegations of staff misconduct that are completely unsubstantiated. If the CIC provides any specific information regarding these alleged incidents, the Bureau will investigate them.

Implement a cultural diversity sensitivity training program.

The draft report states: *Nearly 97% of all inmates in FBOP from DC are Black or African American, resulting in race and geography being closely intertwined for DC inmates in this and other facilities. In response to reports regarding racist and unprofessional behavior from staff, USP Terre Haute should work with the National Institute of Corrections to identify training needs and implement a cultural diversity sensitivity training program for staff members to increase awareness of cultures different from their own. Providing staff with such training would further the FBOP's mission "to protect society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, and appropriately secure...."*

Response: Cultural Diversity is emphasized by the Executive Staff and Department Heads to all staff members at Introduction to Correctional Techniques, in Annual Training and throughout the year in less formal settings such as Department Head meetings, staff recalls, departmental meetings, departmental retreats, and specialized training regarding the various minorities at USP Terre Haute.

USP Terre Haute has an Affirmative Employment Committee that meets monthly and hosts numerous events throughout the year promoting diversity inclusion, and equal opportunity. Over 300 staff members participated in the 2016 Diversity and Inclusion Day Program which includes cultural diversity training and education with events designed to further the Bureau's goal of increased staff awareness of cultural differences. Lunch and Learn Programs are hosted by the Affirmative Employment Committee to highlight each commemorative month recognized by the Federal Government. USP Terre Haute strives to bring in valuable members of the community who can speak to the importance of diversity and inclusion as it pertains to their heritage.

Reduce maximum penalties for disciplinary segregation and impose a sanction of disciplinary segregation only as necessary and only after determining, in writing, that other available sanctions are insufficient to serve purpose of punishment.

The draft response states: "Seventy-seven percent of DC inmates who reported having been in the SHU spent over 30 days in SHU at one time. Reducing the maximum penalties and requiring that the DHO determine, in writing, that other available sanctions are insufficient to serve the purpose of punishment would help ensure USP Terre Haute safely reduces the overuse of restrictive housing."

Response: Sanctions of Disciplinary Segregation are imposed as a last resort or if the level of severity substantiates the sanction. The DHO imposes Disciplinary Segregation in conjunction with sanctions warranted and within the guidelines of Program Statement 5270.09, Inmate Discipline. Inmates are permitted to appeal imposed sanctions. All inmates receive written notification and justification of the sanctions imposed at the DHO hearing within ten days of the hearing and may appeal those findings within twenty days of receiving the DHO report to the Regional Office. If necessary, inmates may appeal the regional findings to the Central Office and until their remedy appeals are exhausted. It should be noted, inmates who have Disciplinary Segregation suspended and have repetitive misconduct during the time of suspension, are imposed the sanction based upon violating the rules of misconduct during the time of the suspension. The Bureau is willing to review the allegations made in the draft report, but will need specific information to assist in any assessment or investigation into the matter.

Establish a standardized curriculum for the Release Preparation Program (RPP) across all FBOP facilities.

The draft report states: *The CIC commends the FBOP for initiating plans for a standardized RPP curriculum across all FBOP facilities. According to the FBOP Reentry Services Division's Senior Deputy Assistant Director, Patti Butterfield, as of September 2016, RPP did not have a standardized curriculum. The CIC understands that the FBOP is in the process of rolling out an agency-wide RPP curriculum at the time of this report publication. The FBOP should establish a standardized curriculum for the RPP across all FBOP facilities to ensure inmates receive successful preparation for reentry and community resource transition.*

Response: The Bureau is still in the process of standardizing the curriculum of the Release Preparation Program (RPP). The standardized RPP is expected to include evidence based courses to ensure inmates receive successful preparation for reentry and community resource transition.

Examine existing procedures for UNICOR employment to ensure fair access for DC inmates.

The draft report states: *Employment in the UNICOR factory provides benefits that include higher wages and an opportunity to build work ethics. Of the 195 employees in UNICOR, only five are from DC. Additionally, inmates reported that of all areas of employment, education, and programming, the UNICOR program was the most difficult in terms of enrollment. The CIC encourages an assessment of the current UNICOR selection process to ensure that DC inmates are not disadvantaged.*

Response: The selection process is based on policy, hiring from the established waiting list. All applications are placed in one of the following established sections of the list.

- Prior UNICOR work experience
- Within 36 months to release
- Veterans
- Financial Responsibility obligations greater than \$1000
- General (other inmates wishing to work in Unicor)

SELECTION PROCEDURES: The selection of inmates for consideration of employment in the Industries program shall be made by the Unit Team and in accordance with Industry needs. The inmate shall: (1) request a UNICOR Application for Industries Employment Form from his Counselor and complete the top portion, and (2) return the application to his Counselor. The Unit Team will then complete their section of the application which will approve or deny the inmate's request for UNICOR employment and forward it to the Factory Manager in UNICOR. The inmate's name will be added to the appropriate UNICOR Waiting List (Priority, within 36 months of release, Vets, FRP, or General). Any inmate with prior UNICOR experience shall submit his Application for Industries Employment Form within 90 days of his arrival at FCC Terre Haute. Any application received after this time period will be considered a break in service and all UNICOR benefits shall be lost (including but not limited to longevity, vacation time, etc.).

UNICOR WAITING LIST: The inmate's name shall be placed on the appropriate UNICOR Waiting List in the order in which his application was received. He will be hired in the same sequence, except as noted in Program Statement 8120.03, Work Programs for Inmates, FPI. If an inmate has prior UNICOR experience and; (1) did not quit or was not fired from his last UNICOR employment, (2) was not a Disciplinary Transfer to FCC Terre Haute, and (3) was not sanctioned with Disciplinary Segregation since his last UNICOR employment, he will be placed on the UNICOR Priority Waiting List. If an inmate has financial obligations totaling at least \$1,000.00 and limited outside resources, the Unit Team may recommend him for placement on the UNICOR Financial Responsibility Program (FRP) Waiting List. Inmates not within the above guidelines will be placed on the UNICOR General Waiting List. When a UNICOR Department Head determines additional manpower requirements of a department are warranted, UNICOR will sort the waiting lists for inmates within three years of release and military veterans. 75% of the needed number of inmates will be within three years of release, or military veterans, the remaining 25% will be based upon where an inmate is on the waiting list, the inmate shall be placed on the Call-out Sheet for an interview. If the inmate is hired, a Request for Hire and a PM Approval form shall be forwarded to the Unit Team for placement on the appropriate UNICOR roster. If the inmate is not hired, the Senior Operations Manager, or his/her designee, shall determine, according to the circumstances, whether the inmate shall remain at the top of the Waiting List or be returned to the bottom of the Waiting List. The inmate shall be allowed to refuse a job assignment at the time of the interview; however, he shall not be allowed to submit another application for UNICOR employment until six months have passed. This refusal shall be considered a break in service for inmates with prior UNICOR experience and all UNICOR benefits shall be lost (including but not limited to longevity, vacation time, etc.). If an inmate is in Disciplinary Segregation at the time he is placed on Call-out for an interview, he will be removed from the Waiting List and must re-apply.

Increase the number of Adult Continuing Education (ACE) courses.

The draft report states: *The CIC commends USP Terre Haute for offering creative and lucrative vocational training programs. In addition to vocational programming, the facility should offer additional ACE courses to meet inmates' interests. ACE courses are an effective, cost saving form of education, and the facility can utilize inmates with more advanced education to*

lead classes.

Response: ACE classes are currently offered and are increasing in quality and in number every year. At the time of the audit, there were 21 ACE classes available. By the end of this year there will be 28 ACE courses offered at USP Terre Haute.

Move DC inmates to a facility within 250 miles of DC.

The draft report states: *In January 2016, the Colson Task Force released its recommendations for improving reentry in federal corrections. The recommendations included developing greater opportunities for family engagement by housing individuals as close to home as possible. With USP Terre Haute located over 600 miles away from DC, to the extent possible, the FBOP should move DC inmates to a facility within 250 miles of DC.*

Response: The Bureau has taken initiatives in the last two years to move as many DC inmates, willing to transfer, within 500 miles or less of the District of Columbia. With the population of DC inmates being approximately 5,000, the Bureau would not be able to adequately place them within 250 miles of the District of Columbia and provide the same level of programming.

I appreciate the opportunity to review and provide comments to your inspection report of USP Terre Haute. 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,


Scott Finley, Administrator
Correctional Programs Branch