Virtual Public Meeting Series: Responding to COVID-19 and the Call for Racial Justice

Session One: A Conversation with the Department of Corrections and Bureau of Prisons

Panel
Quincy Booth: Director, Department of Corrections
Alix McLearen: Senior Deputy Assistant Director, Federal Bureau of Prisons
Dr. Jeffery Allen: Medical Director, Federal Bureau of Prisons
Moderator
Halim Flowers: Artist, Activist, & Ambassador, Represent Justice

CRIMINAL JUSTICE COORDINATING COUNCIL
Background
The 2020 COVID-19 pandemic has wreaked havoc on our nation and the District of Columbia. Notwithstanding the challenges and hardships presented to citizens, the economy, and government, the responsibility of ensuring the fair administration of justice has remained, with an added charge of avoiding the spread of COVID-19 among persons involved in the justice system.

In addition to the pandemic crisis, heightened calls for racial justice followed the police-involved killings of George Floyd in Minneapolis, MN, and Breonna Taylor of Louisville, KY. These incidents led to demonstrations in cities across the country (including the District of Columbia) and around the world, focused on criminal justice reform generally and police reform specifically.

CJCC is required to convene public meetings to enable the public to engage with the District’s criminal justice system leaders on critical justice system issues. This year, CJCC is hosting a virtual public meeting series, which consists of four sessions where leadership from the District’s corrections, juvenile justice, courts and prosecution, and community supervision agencies will discuss their responses to these two issues that have been at the center of the national discourse during 2020: the COVID-19 pandemic and the call for racial justice.

Introduction
On August 19, 2020, from 5 pm–7 pm, CJCC convened Session 1 of the virtual public meeting series via WebEx, where approximately 80 persons participated. The theme was, “Responding to COVID-19 and the Call for Racial Justice: A Conversation with the Department of Corrections and Bureau of Prisons.” The panelists included Halim Flowers, moderator; Quincy Booth, Director, Department of Corrections (DOC); Dr. Alix McLearen, Senior Deputy Assistant Director, Reentry Services Division, Federal Bureau of Prisons (BOP); and Dr. Jeffery Allen, Medical Director, BOP.

Mannone Butler, CJCC Executive Director, set the stage by addressing the reason for convening the session and how CJCC is uniquely positioned to host this discussion due to the agency’s role in facilitating collaboration and data-driven decision-making across the District’s justice system agencies to address systemic issues. After sharing the rules of engagement for the virtual meeting, Ms. Butler introduced the program’s moderator, Halim Flowers.

Prior to introducing the speakers and kicking off the panel discussion, Mr. Flowers shared his firsthand experience with the criminal justice system and the expertise he brings to this important discussion. At the age of 16 he was prosecuted as an adult and convicted and sentenced to 22 years in federal prison. Mr. Flowers was released in 2019 pursuant to the 2016 Incarceration Reduction Amendment Act. Mr. Flowers, an artist, author, and spoken word performer, expressed a philosophy that our penal and criminal
justice systems do not foster processes that encourage persons convicted of crimes and sentenced to imprisonment to become better versions of themselves.

COVID-19 Panel Discussion
The moderator posed the following two questions regarding COVID-19 to the panelists to set the stage for discussion:

- How has the pandemic impacted your agencies and the individuals in your care?
- What have you done in response to the pandemic and the challenges in providing care?

Department of Corrections (DOC)
Quincy Booth, Director, DOC, explained that the pandemic presented profound challenges that affected his staff and residents on many levels. He prefaced his remarks by emphasizing that he and his staff subscribe to a philosophy that recognizes the humanity of the residents in his care and they attempt to support, not rehabilitate them. He offered the following.
Fundamentally, the pandemic forced the DOC to radically alter its protocols and implement procedures to protect the mental and physical welfare of staff and residents alike. The Department’s top priority focused on providing health and safety for all at DOC. Director Booth emphasized that unlike some government agencies, his staff worked their regular shifts and could not telework. He highlighted that the work and residential environments at his facilities were fraught with high anxiety about COVID-19. To ease anxieties and promote safety, operational protocols were restructured to include: sheltering-in-place for residents, maintaining social distance, and providing routine medical evaluations and testing. If an inmate or employee exhibited symptoms, they were required to quarantine. He also offered that DOC adheres to and exceeds CDC guidelines and protocols and responds to sick calls within 24 hours. A negative consequence of the pandemic is that residents are forced to spend more time in their cells to promote social distancing and minimize disease spread. Procedurally, COVID-19 presented numerous challenges, including transitioning to operate in a virtual environment in light of the DC Courts virtual operating posture. DOC has navigated a range of facilities- and information technology-related issues. The pandemic necessitated the elimination of in-person family and legal visits. However, residents were granted enhanced free cell phone use to speak with their loved ones and counsel. Since April 2020, 10,000 calls have been facilitated to legal counsel. Further, the use of tablet technology enabled partners who provide educational services to reach 1,100 residents weekly to support educational requirements. Further, through the use of tablets, DOC has expanded its educational services beyond offering GED coursework and is collaborating with local universities to provide degree and non-degree coursework. The DOC is also exploring expanded use of tablets to facilitate virtual visits with family members in lieu of in-person visits. To date, DOC has facilitated over 300 virtual court hearings in addition to videoconferences with the Court.

**Federal Bureau of Prisons (BOP)**

Dr. Alix McLearen, Senior Deputy Assistant Director of the Reentry Services Division, BOP, explained that at the beginning of the pandemic in March, BOP began modifying prison facility operations and limiting inmate interactions and program participation. She offered BOP’s temporary changes in policies are available for review on its website and that their primary focus is on maintaining critical services and ensuring safety in a modified environment.

Dr. McLearen highlighted the implementation of First Step Act statutory provisions that direct the BOP to implement institutional and program changes across the organization. She cited statutory requirements imposed on the BOP that require it to perform prisoner needs assessments to ascertain the viability of...
offering early release opportunities to inmates if they successfully complete personal development benchmarks that can aid in preparing them for reentry to their communities. Dr. McLearen offered that it is critical to understand that calculating risk factors is an essential determinant to tailoring programs that will foster inmate success and minimize recidivism, and that the Bureau administers over 70 evidence-based programs, including the Evidence Based Recidivism Reduction Program (EBRP).

In an effort to mitigate the harmful consequences presented by COVID-19, wardens across the country instituted policies to reduce the potential spread of the virus by limiting and reducing interactive programs, reducing group class size and recreational activities, and facilitating opportunities for inmates to social distance in open space. Further, the BOP issued guidance to all prison facilities relative to modifying protocols to mental wellness, crisis intervention and religious worship needs of their populations.

Dr. McLearen cited the CARES Act for contributing to the release of more than 5,000 individuals to home confinement and community placement in halfway homes in response to the pandemic. She also mentioned that the Bureau endeavors to balance reentry programming with measures that will ensure community safety for persons returning home and reentering society.

Dr. Jeffery Allen, Medical Director, BOP, offered that prisons reflect a microcosm of society and that the virus has affected the prison community as well, similar to the outbreak of a flu epidemic in the society in general. He acknowledged the virus has been widespread in some prisons. Dr. Allen noted that facilities adhere to all CDC guidelines and directives. However, ensuring social distancing is a challenge in a clustered prison setting, especially in an open barracks configuration. Additionally, transferring prisoners to court appearances and relocating inmates to alternate sites presents challenges.

The medical director offered that 40% of all cases and 50% of all transmissions occur before individuals present symptoms. Further, testing has shown promise in providing a barometer of spread; but increased transmission required more testing, resulting in bottlenecks and protracted intervals of time before results are available. In that regard, the BOP utilizes Abbott machines to test residents for COVID, and the technology can deliver results within 15 minutes. However, the technology can deliver false positive results.
Racial Injustice/Systemic Racism

DOC
Director Booth noted DOC is working with Howard University to engage in conversations related to equity and race and is surveying inmates. He stated that the majority of employees at the DOC are Black and Brown, and institutionally the DOC is examining its policies and procedures to identify any that may contribute to racist behaviors or attitudes. Further, he and his staff are striving to reengineer procedures and eliminate any unintentional negative behaviors.

In response to a follow up question posed by Mr. Flowers regarding alternatives to incarceration that could offer benefits, Director Booth commented that criminal justice partners need to look at this issue collectively and use data to inform their responses.

BOP
Dr. McLearen indicated that BOP’s population is majority white but that it is diverse. She emphasized that BOP has no discretion regarding the inmates it receives; rather, the Court determines BOP’s population, and incarceration is mandated based on the sentence received. Additionally, staff receive training on diversity, micro-aggression and discrimination, and particular emphasis is placed on the fair and equitable treatment of inmates, and allegations of mistreatment are investigated thoroughly.

Mr. Flowers offered a clarifying position that African Americans are disproportionately represented per their percentage of America’s population, and the lack of home ownership due to redlining is also an impediment that reduces the potential for some inmates to be granted home confinement status.

Quincy Booth offered additional insights by emphasizing that in dealing with systemic racism, it is important to focus on the lived experiences of residents; and that immediately upon reentering society resources must be available to support them, including providing housing or residential reentry centers.
Questions & Answers

Are there guidelines to reopening based on data and CDC guidance?

❖ DOC responded that their guidance is based on DC Health Department guidance and that they work with the District’s medical director and comply with CDC guidelines.

Can you identify specific programs that DOC has to train staff on implicit bias which is different from diversity training?

❖ DOC responded yes, and that they partner with local universities to offer this training and have hired a new staff member to offer this training regularly. This training is not “off-the-shelf,” it is tailored to the correctional environment.

❖ BOP indicated that its diversity and inclusion training includes specific training on implicit bias.

Are individuals being tested routinely upon entry, and quarantined until results are received?

❖ DOC explained that residents remaining for an extended period of time are quarantined before returning to the general population, and that they are quarantined during the testing period.

Can you provide data on the number of DC residents who have been granted home confinement?

❖ BOP panelists stated that they did not have that information on hand at the time. This summary will be updated with information received from BOP.

How often are men and women in outdoor recreation at BOP and DOC?

❖ BOP explained that the process varies depending on the state of the existing outbreak, and the emphasis is placed on promoting safety first. Efforts are ongoing to accommodate programing suited for outdoors.

❖ DOC stated their procedures are guided by their medical team and the DC Director of Health.

How do the approaches of European counties differ from the approaches of BOP/DOC?

❖ Director Booth explained cultural factors and values drive the humanizing approach to criminal justice philosophies employed in Europe, and it is a matter of philosophy that drives DOC’s approach to detention. Further, the European social and racial construct is radically different than the social/racial construct in the U.S.

Mr. Flowers cited the quandary and paradox presented when high rates of recidivism exist absent the rehabilitation of returning citizens, thereby presenting the likelihood that persons will return to crime and pose a threat to public safety. He observed that these individuals are being failed institutionally, and inquired what can be done to facilitate their reentry, as well as the elimination of systemically racist barriers presented by government institutions and policies.

❖ BOP responded that DOJ leads an interagency re-entry council at the federal level, and an agreement exists with Department of Labor (DOL) that allows certification on a national level so that their certifications are portable. Additionally, there are 100,000 incarcerated individuals who are veterans, and BOP and DOL collaborate to educate that demographic and support the needs of those residents.
  o The Bureau also assists their residents in obtaining peer support jobs.

❖ DOC commented it is part of the community and offers gender-specific programming at DOC.
What are the existing cleaning procedures at your facilities?
❖ BOP routinely disinfects phones after use by inmates; physical distancing is enforced when using phones and computers; and showers are cleaned routinely, including limiting cohabiting persons in a unit to shower as a single cohort.

Is it possible for BOP to certify persons during custody?
❖ BOP offered that it does some certifications (soft and technical skills). Additionally, it was noted that they provide welding apprenticeships.

What type of consideration is given to trauma resulting from COVID-19?
❖ DOC was aggressive in assessing and providing care before the pandemic and has been working with its staff on this for some time. They also help clients connect to care once they depart. Further, there is an awareness that the work can be stressful and taxing, much more so now after the onset of COVID-19.
❖ BOP commented that it offers annual staff training on trauma-informed care. Additionally, female residents also receive special trauma care, and they have added capacity to their trauma treatment program which includes physicians and mental health practitioners. The Bureau has also activated a staff support line during the pandemic which is operational every day around-the-clock.

CLOSING

Dr. McLearen expressed her concern for residents in BOP care and offered an unwavering commitment to serving their needs. Special emphasis was on the fact that the pandemic is forcing them to learn and adapt like everyone else and that they strive to offer great medical care. Director Booth offered that he and his staff care deeply for their residents and encouraged the public to check in with them regarding their progress in providing care. Further, he expressed that he wants what’s best for his brothers and sisters, because some of them live right down the street from him. Lastly, he offered that it is crucial for partners to work together to improve the delivery of services and care.

Mr. Flowers’ parting comment was “the biggest room is room for improvement” and suggested that attendees look at this scenario in new ways and not from anger. Lastly, he urged everyone to strive to reduce the number of people entering the system for the first time, as well as returning to it.

Director Butler thanked everyone in attendance, in addition to her planning staff and The Clearing, who assisted with the design of the meeting. She indicated the next virtual public meeting would focus on juvenile justice and take place on September 2, 2020.