

# United States Department of Justice



## Federal Prison System

**FY 2022 PERFORMANCE BUDGET  
Congressional Submission**

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## I. Overview for the Bureau of Prisons (BOP), Salaries and Expenses (S&E) Appropriation

### A. Introduction

The FY 2022 Congressional budget request for the BOP S&E Appropriation totals **\$7,670,393,000**, with 35,262 FTEs and 38,884 positions (20,446 Correctional Officers). Electronic copies of the Department of Justice’s Congressional Budget Justifications and Capital Asset Plan and Business Case exhibits can be viewed or downloaded from the Internet using the Internet address: <https://www.justice.gov/doj/fy-2021-CJ>.

The FY 2022 current services level funds necessary requirements in FY 2022. It funds increases in employee salaries and benefits and addresses increases in medical, utilities and food costs. The current services level also includes essential funding for staffing, equipment, vehicles, office and medical supplies, food, and inmate clothing, among other necessities.

Current services also includes base funding of \$409.5 million for programs related to the implementation of First Step Act (FSA) initiatives. This includes expansion of Medication Assisted Treatment (MAT), Inmate-Focused IT Improvements, RRCs and Home Confinement Expansion, Reentry Programs Expansion, Evaluating Programs and Services, and Innovations in Corrections. The full implementation of the FSA remains a priority for the BOP.

In response to the Coronavirus Disease 2019 (COVID-19) pandemic, the BOP has taken, and will continue to take, aggressive steps to protect the safety and security of all staff and inmates, as well as the members of the public. The BOP developed and implemented an action plan that addresses our modified institution operations, Continuity of Operations Program, Information Technology Readiness, supply management, inmate movement, inmate visitation, and official staff travel, as well as other important aspects of our operations. At the same time, we continue to find ways to provide inmate programming to assist inmates with reentry.

As the pandemic grew more widespread, the BOP began aggressively screening the inmate population for inmates who were appropriate for transfer to Home Confinement for service of the remainder of their sentences. The CARES Act (P.L. 116-136) further expanded BOP’s ability to place inmates on Home Confinement during the course of the pandemic. Directly pursuant to the CARES Act, roughly 7,000 inmates have been placed on Home Confinement as of March 25, 2021. The total number of inmates placed on Home Confinement from March 26, 2020 to March 29, 2021 (including inmates who have completed service of their sentence) is 23,340. While the BOP continues to make robust strides in these placements to reduce the risk of spread to the inmate population and staff, public safety will remain our highest priority.

The First Step Act allows eligible inmates to begin earning credits toward time in prerelease custody or supervised release when they complete recommended evidence-based recidivism reduction programs and productive activities. The BOP will be able to increase our offerings of these important programs as we enter into the next action phase of FSA implementation.

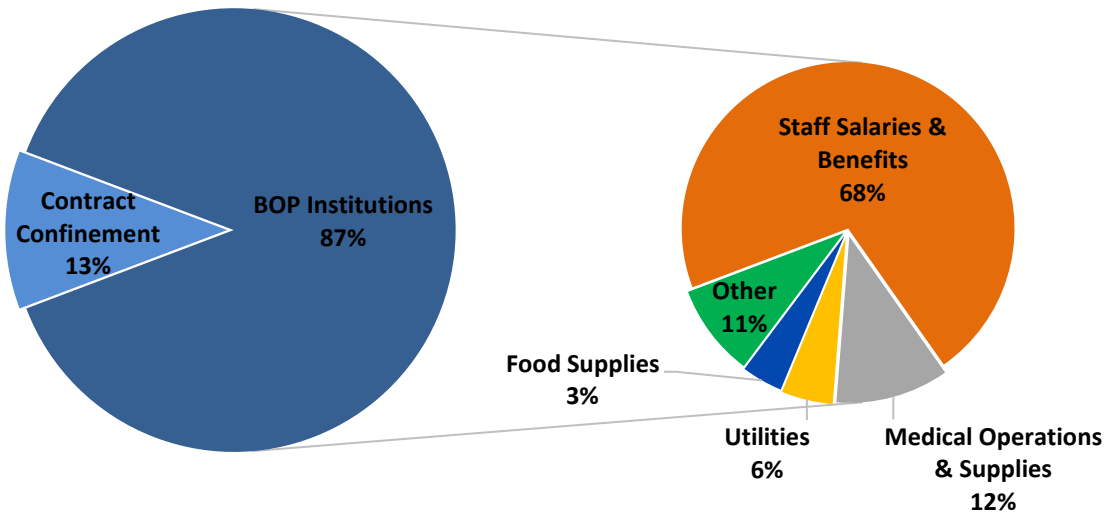
# Federal Bureau of Prisons



The BOP is a critical part of the federal criminal justice system. Arresting authorities, prosecutors, judges, and community members count on the BOP’s staff to ensure that the over 152,000 individuals in our custody are accounted for at all times, treated humanely and with dignity, and returned to their communities with the training and skills they need to be productive, law-abiding citizens. The BOP must carry out its duties while ensuring its staff work in a safe environment and have the tools, training, and support they need.

The chart below shows how the BOP’s funds are used:

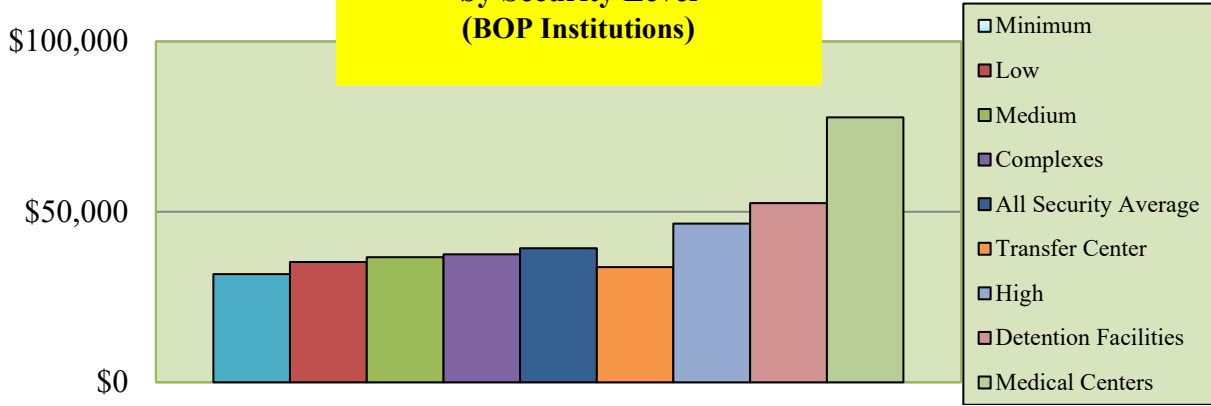
## BOP Funding Allocations



The BOP’s budget proposal emphasizes efficiency, effectiveness, and quality while focusing on meeting the changing needs of the American justice system. The budget request represents the level of funding needed to fulfill its mission. Operating the nation’s largest prison system, the BOP’s top priority is to focus on the safety and security of staff, inmates, and communities. The following chart shows the BOP’s cost per inmate each year.



## FY 2019 Per Capita Costs by Security Level (BOP Institutions)



***About the BOP:*** The BOP was established in 1930 to provide more progressive and humane care for federal inmates, to professionalize the prison service, and to ensure consistent and centralized administration of the 11 federal prisons in operation at that time. Today, the BOP includes 122 institutions, six regional offices, a Central Office, and residential reentry offices that oversee residential reentry centers and home confinement programs. The Central Office and regional offices provide administrative oversight and support to the institutions and residential reentry offices.

The BOP protects public safety by ensuring federal offenders serve their sentence of imprisonment in institutions that are safe, humane, cost-efficient, and appropriately secure. The BOP also helps reduce future criminal activity by encouraging inmates to participate in a range of programs that help them adopt a crime-free lifestyle upon their return to the community.

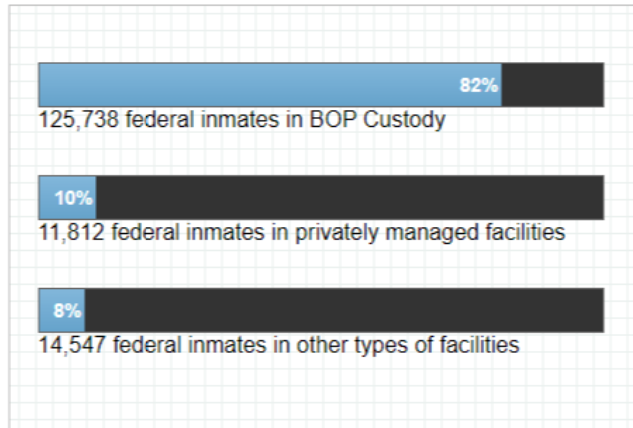


The BOP is responsible for the custody and care of over 152,000 federal offenders as of

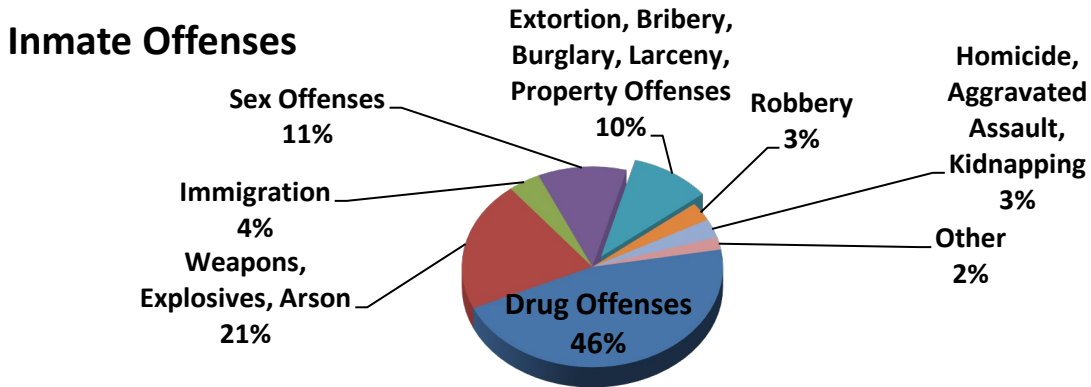
# Federal Bureau of Prisons



March 25, 2021. Over 82 percent of these inmates are confined in BOP operated correctional institutions or detention centers.



The remainder are confined in secure privately managed or community-based facilities and local jails. The following chart shows the breakdown of the current BOP population by inmate's offense category as of March, 2021:



The BOP operates federal prisons at four security levels – minimum, low, medium, and high. In addition, there are administrative facilities which have special missions, such as the detention of pretrial offenders (the BOP operates a number of metropolitan detention centers and jail units); the treatment of inmates with serious or chronic medical problems; or the containment of extremely dangerous, violent, or escape-prone inmates. Minimum security institutions are known as Federal Prison Camps (FPCs), low and medium security facilities are called Federal

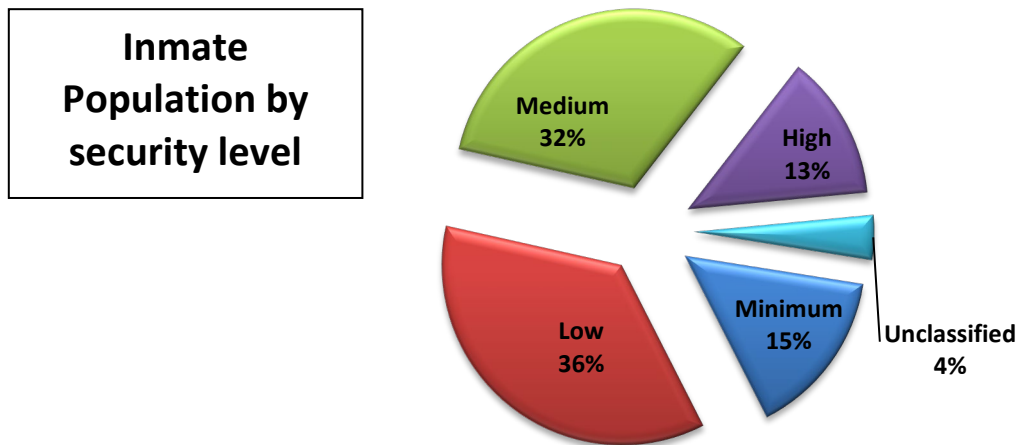


# Federal Bureau of Prisons



Correctional Institutions (FCIs), and high security institutions are called United States Penitentiaries (USPs).

The following chart shows our population by prison security level as of March, 2021:



The BOP also uses privately operated facilities, bed space secured through Intergovernmental Agreements with state and local entities, Residential Reentry Centers (RRCs or halfway houses), and home confinement, as appropriate.

The BOP's most important resource is its staff. The approximately 36,000 employees of the BOP ensure the security of federal prisons, provide inmates with needed programs and services, and model mainstream values. The BOP's employees help the agency meet its obligation to protect public safety and provide security and safety to the staff and inmates in its facilities. All BOP staff in its facilities are correctional workers first and are committed to the highest level of performance.

### **BOP Fundamentals:**

**MISSION:** The Federal Bureau of Prisons protects society by confining offenders in the controlled environments of prisons and community-based facilities that are safe, humane, cost-efficient, and appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.

**CORE VALUES:** *Correctional Excellence:* "We are Correctional workers first, committed to the highest level of performance. *Respect:* We embrace diversity and recognize the value and dignity of staff, inmates, and the general public. *Integrity:* We demonstrate uncompromising ethical conduct in all our actions".



## **Core Ideologies:**

The Bureau is committed to providing:

- A safe environment for both staff and inmates;
- Secure institutions to confine offenders and protect the public;
- Those skills building programs we can afford, to offer inmates the opportunity to live crime-free lives;
- Service and stewardship to the public and a continued tradition of excellence; and,
- Staff who are ethical, professional, well-trained, and diverse.

**VISION STATEMENT:** The Federal Bureau of Prisons, judged by any standard, is widely and consistently regarded as a model of outstanding public administration, and as the best value provider of efficient, safe, and humane correctional services and programs in America.

## **B. Population – Past and Present**

During the first five decades of the Bureau's existence, the number and type of inmates the BOP housed remained stable. Beginning in the 1980s, however, federal law enforcement efforts and new legislation dramatically altered sentencing in the federal criminal justice system, bringing about a significant increase in the number and types of persons incarcerated for federal offenses. Largely as a result, the BOP's population doubled in the 1980s and doubled again in the 1990s. In the late '90s, the BOP began absorbing the DC inmate population due to the National Capital Revitalization Act. The aftermath of September 11<sup>th</sup> also brought more inmates – individuals who presented very unique security concerns – as the nation's law enforcement efforts were targeted toward international terrorism. By 2013, the Bureau's population climbed to almost 220,000, its highest level ever with system-wide crowding at 36 percent.

With the tightening federal budgets in the 2000s, it became increasingly difficult to fund all of the capacity that was needed to house the increasing population. The Bureau was required to provide care for more and more inmates – many of whom arrived with costly health care needs and educational and vocational skills deficits. This crowding contributed to episodes of inmate frustration and anger, which increased the risk of harm to staff and other inmates. The BOP addressed these challenges through enhanced population management and inmate supervision strategies, improved architectural design, and improved security technologies. The BOP also began to rely upon private corrections to provide additional capacity, primarily for the low security criminal alien population.

The sentencing changes in the 1980s and 1990s not only affected the number of inmates the BOP housed, but also the type of inmates who began coming into the system. For nearly five decades, the federal inmates the Bureau housed were largely bank robbers and white-collar inmates.



However, changes in interdiction and sentencing changed the population’s composition. Currently, almost half of the population is serving sentences for drug offenses. The remainder predominantly includes inmates convicted of weapons offenses, immigration offenses, and sex offenses.

Inmates at higher security levels present additional challenges. For example, at the medium security level, approximately 79 percent of the inmates have a history of violence, 60 percent have been sanctioned for violating prison rules, and over half of the inmates in this population have sentences in excess of 8 years. At the high security level, 90 percent of inmates have a history of violence, 81 percent of the inmates have been sanctioned for violating prison rules, and 54 percent have sentences in excess of 12 years. Almost one third of all inmates at high security institutions are gang affiliated.

Since FY 2014 the total inmate population has declined every year. Between FY 2014 and FY 2019, the BOP population declined by 42,084 inmates. This decline has continued into FY 2020 and FY 2021: From the beginning of FY 2020 to March 25, 2021, the population has declined by 25,117 inmates. The reduction in the inmate population has decreased overall crowding in BOP’s prisons to negative crowding of 6 percent, but it is important to note that our Medium and High Security institutions still remain over capacity.

The size of the federal prison population and its related cost is a function of many factors, including the nation’s crime levels, federal sentencing laws, and law enforcement policies, many of which are beyond the control of the BOP.

Due to the First Step Act, which was enacted in December of 2018, the BOP inmate population declined in FY 2019, and the decline in FY 2020 is attributed to the COVID-19 pandemic. Due to the pandemic, the population projection for FY 2021 and FY 2022 remains uncertain.

## Projected Population, Capacity, and Crowding

	2017	2018	2019	2020	2021	2022
	(Actual)	(Actual)	(Actual)	(Actual)	(Estimate)	(Estimate)
<b>BOP Facilities</b>						
Starting Capacity	135,232	135,898	135,175	134,133	134,404	135,614
Additional Approved/Planned	666	-723	-1,042	271	1,210	0
Subtotal Capacity	135,898	135,175	134,133	134,404	135,614	135,614
Pop. Projection	154,055	153,291	149,701	126,744	124,624	120,287
Percent Overcrowded	13%	13%	12%	-6%	-8%	-11%
Contract	31,562	28,407	27,513	28,818	21,752	22,465
Percent Contract	17.0%	15.6%	15.5%	18.5%	14.9%	15.7%
<b>Total Federal Prison Population</b>	<b>185,617</b>	<b>181,698</b>	<b>177,214</b>	<b>155,562</b>	<b>146,376</b>	<b>142,752</b>



## **C. Inmate Programs**

The BOP has a responsibility to provide inmates with opportunities to participate in programs that can afford them the skills they need to lead crime-free lives after release. The BOP's philosophy is that release preparation begins the first day of imprisonment. Accordingly, federal prisons offer a variety of inmate programs to address reentry needs, including work, education, vocational training, substance abuse treatment, observance of faith and religion, psychological services and counseling, release preparation, and other programs that impart essential life skills. The BOP also provides other structured activities designed to teach inmates productive ways to use their time.

With the First Step Act, the BOP looks forward to further enriching these programs which will provide inmates with the education and skills that will assist them as they reenter into their communities upon release.

Each year, nearly 44,000 federal inmates return to their communities. Most need job skills, vocational training, education, counseling, and other assistance such as treatment for substance use disorders, anger management, parenting skills, and linkage to community resources for continuity of care for successful reentry into society.

### **Substance Abuse Treatment**

The BOP's substance abuse strategy includes a required drug education course, non-residential drug abuse treatment, residential drug abuse treatment, and community transition treatment. The Violent Crime Control and Law Enforcement Act of 1994 requires the BOP to provide residential drug abuse treatment to all inmates who volunteer and are eligible for the program. Inmates are strongly motivated to participate because certain non-violent offenders who successfully complete all components of this recidivism-reducing program are eligible for a sentence reduction of up to one year. The BOP was able to provide appropriate substance abuse treatment to 100 percent of eligible inmates in FY 2020, with 11,556 inmates participating in Residential Drug Abuse Treatment. Separately, the BOP is also in the process of expanding its medication assisted treatment (MAT) program for treating inmates with opioid use disorder as a part of the BOP's FSA implementation.

### **Work Programs**

Prison work programs teach inmates occupational skills and instill in offenders sound and lasting work habits and a work ethic. All sentenced inmates in federal correctional institutions are required to work (with the exception of those who for security or medical reasons are unable to do so). Most inmates are assigned to an institution job such as food service worker, orderly, painter, warehouse worker, or groundskeeper.

In addition to these BOP work assignments, Federal Prison Industries (FPI or trade name UNICOR) provides inmates the opportunity to gain marketable work skills and a general work ethic -- both of which can lead to viable, sustained employment upon release. It is one of the



BOP's most successful correctional programs, as it has been proven to reduce recidivism by 24 percent. FPI also keeps inmates productively occupied and reduces the likelihood of misconduct.

## **Education, Vocational Training, and Occupational Training**

The BOP offers a variety of programs for inmates to enhance their education and to acquire skills to help them obtain employment after release. Institutions offer literacy classes, English as a Second Language, adult continuing education, and vocational training. The BOP requires inmates without a high school diploma to enroll in a literacy program. The BOP also provides curriculums to attain a General Educational Development credential.

## **Life Connections**

The Life Connections Program is a residential multi-faith-based program that provides the opportunity for inmates to deepen their spiritual life and assist in their ability to successfully reintegrate following release from prison.

Inmates who are not eligible for the residential Life Connections Program may volunteer to participate in a modified version of the program called Threshold. This is a non-residential spiritual/values based program taught by chaplains and volunteers over a six to nine month time period. This program is designed to strengthen the inmate's reentry to the community.

## **Specific Release Preparation Efforts**

In addition to the wide array of inmate programs described above, the BOP provides a Release Preparation Program that inmates participate in toward the end of their sentence. The program includes classes in resume writing, job seeking, and job retention skills. It also includes presentations by officials from community-based organizations that help ex-inmates find employment and training opportunities after release from prison.

The BOP has established employment resource centers at most federal prisons to assist inmates with creating release folders to use in job searches; soliciting job leads from companies that have participated in mock job fairs; identifying other potential job openings; and identifying points of contact for information on employment references, job training, and educational programs.

## **Residential Reentry Centers**

The BOP uses Residential Reentry Centers (RRCs) -- also known as community corrections centers or halfway houses -- to place inmates in the community prior to their release from custody in order to help them adjust to life in the community and find suitable post-release employment. These centers provide a structured, supervised environment and support job placement. As part of this community-based programming, some inmates are also placed on home confinement, which is statutorily limited to 10 percent of an inmate's sentence or 6



months, whichever is shorter. Individuals confined to their homes are given strict schedules to maintain, adherence to which is telephonically or electronically monitored.

## **D. Challenges**

For more than 80 years, the BOP has earned many accomplishments and faced extraordinary challenges. The challenges that can positively affect or impede progress toward achievement of agency goals are complex and ever changing. Factors that impact BOP include: general economic conditions, legislation, investigative and prosecutorial initiatives, health care, mental - health, technology, and crime rates. The BOP continues to streamline operations and increase efficiency in order to operate as inexpensively and effectively as possible.

### **Technology**

The BOP uses security technology to enhance safety and security in its prisons. Scanning technology and advanced metal detectors are used to help detect contraband (prohibited items not authorized to be brought into the prison) and prevent assaults on staff and inmates. Emerging technology like drones poses a unique threat to the BOP, in addition to other contraband technologies like cellphones.

As required by the Joint Explanatory Statement accompanying the Consolidated Appropriations Act, 2021 (P.L. 116-260), the BOP identifies resource requirements of between approximately \$40 million and \$50 million to implement mail scanning technology across the BOP. This budget request does not request such funding.

### **Crisis Management**

The potential for emergencies, from influenza epidemics to natural disasters like Hurricanes Michael and Florence, is always present. Each institution has emergency response plans in place (developed in cooperation with local, state, and Federal public safety agencies) that are practiced regularly and updated. Natural disasters are always unpredictable to a certain extent, so additional resources may be needed when a crisis arises. In response to recent hurricanes, the BOP activated the government's Emergency Support Function (ESF), providing staff and resources to assist with public safety and security. The BOP deployed more than 65 staff to the institutions affected as part of this effort. This deployment included two 25-person Quick Reaction Teams (QRT) from two of the BOP's regions, two Mobile Command Vehicles, and Mobile Bunk Houses. The BOP staff were deputized, and they provided security to multiple law enforcement agencies and thousands of families affected by the storm and responded to medical emergencies.

### **Activation Challenges**

The Fiscal Year 2018 Spend Plan included \$80 million for the continued activation of USP Thomson facility. In June 2018, the BOP announced the planned activation of USP Thomson, as a high security prison with several specialized missions. The BOP then moved the Special



Management Unit (SMU) from the USP Lewisburg, to USP Thomson. USP Thomson has a high security work cadre, a transitional unit for inmates who have completed the SMU program, and other specialized missions. As of March 25, 2021, the Thomson facility has 1,331 inmates.

## **Medical Staffing**

Providing medical care to inmates continues to be a major portion of the BOP's overall spending, and is an area that the BOP monitors closely to contain overall cost. As described in the Department of Justice, Office of Inspector General report issued in March 2016, recruitment of medical professionals was one of the BOP's greatest challenges, and these challenges (a) limit inmate access to medical care, (b) result in an increased need to send inmates outside the institution for medical care, (c) contribute to increases in medical costs, and (d) can affect prison safety and security. However, given recruitment, hiring, and retention efforts, the BOP has experienced medical staffing increases across the agency since issuance of that report. In a review of seven (7) medical staffing disciplines beginning in 2016, the onboard staff was noted at 85.8% with a vacancy rate of 14.2%, versus the current 2021 review that reflects an onboard rate at 90.0% with a vacancy rate of 10%.

Factors that contribute to medical staffing challenges are myriad, but three factors are notable. First, the majority of medical school graduates choose medical specialty fields over primary care careers; however, the Bureau overwhelmingly needs primary care physicians and is competing with the broader health care industry for a small pool of new primary care graduates. Medical specialists have higher earning potential, and this results in a diminished pool of practicing primary care physicians. Second, sister federal agencies (i.e., the Veterans Health Administration, Department of Defense, National Institutes of Health, etc.) apply Title 38 compensation standards for higher salaries. The Bureau applies Title V compensation standards for all professions other than psychiatrists, and consequently cannot compete with market salaries. However, the Bureau was recently approved to utilize Title 38 pay authority for physicians, dentists, and psychiatrists and the Bureau's Human Resource Management Division (HRMD) is currently working through the necessary steps to make this occur. Third, the rural locations of many Bureau institutions results in limited local markets of health care professionals and a "hard sell" to attract these professionals to move their families to these remote locations. Even contracting medical services in remote communities is challenging, and can result in higher costs due to the need for transporting inmates with serious medical and mental health problems a further distance from the parent institution.

The Bureau is constantly developing strategies to meet its medical staffing needs. Examples include increasing the number of U.S. Public Health Service health care professionals detailed to the Bureau, establishing correctional health care residency and student clinical rotation opportunities, and exploring the application of Title 38 to additional professional categories.

## **Crowding at High Security Facilities**

As the nation's largest correctional agency, the BOP is responsible for the incarceration of over 152,000 inmates. As of March 25, 2021, system-wide, the BOP was operating at 6 percent



below rated capacity; however, crowding remains a special concern at high security facilities, which are 20 percent over rated capacity. Rated capacity is the baseline used to calculate prison crowding, and is essential to managing the BOP's inmate population to distribute the population throughout the system efficiently and equitably. The calculation for determining rated capacity involves stratified double bunking across all security levels and includes the following formulas: minimum and low security institutions at 100 percent double bunking; medium security institutions at 50 percent double bunking; and high security institutions at 25 percent double bunking.

There is a much higher incidence of serious assaults by inmates on staff at high and medium security institutions than at the lower security facilities.

The Government Accountability Office (GAO) released a report on the BOP titled *Growing Inmate Crowding Negatively Affects Inmates, Staff, and Infrastructure* (GAO-12-743), September 2012. GAO states, "According to BOP and our observations, the growth of the federal inmate population and related crowding have negatively affected inmates housed in BOP institutions, institution staff, and the infrastructure of BOP facilities, and have contributed to inmate misconduct, which affects staff and inmate security and safety."

## Staffing

***The BOP staff work around the clock, seven days a week.*** The BOP is a family and career-oriented agency, offering a broad range of exciting career opportunities in a work environment that promotes integrity, diversity, and professional development.

The BOP is committed to the goal of 100% staffing at its facilities nationwide. In an effort to achieve this goal, the BOP has recently put into place several recruitment and retention incentives to attract new applicants for the correctional officer position as well as retain retirement eligible staff. Agency-wide there have been over 4,000 selections made since October 2019. BOP has established 10% recruitment, relocation, and retention incentives at our hard-to-fill locations, and a 5% nationwide retention incentive for retirement-eligible employees. BOP has also put in place a higher entry pay scale for newly-hired Correctional Officers for individuals who have relevant experience. With these efforts, the BOP has seen a net increase of 1,324 staff since the start of FY 2020 through February 27, 2021.

### MEDIUM SECURITY INMATES

- 79% have a history of violence;
- 60% have been sanctioned for violating prison rules; and
- 56% have sentences in excess of 8 years.

### HIGH SECURITY INMATES

- More than 90% have a history of violence;
- 81% have been sanctioned for violating prison rules; and
- Almost one third of all inmates (30%) is affiliated with a gang.



# Federal Bureau of Prisons



The BOP suffered tragic losses in FY 2013 with the murders of two staff members. Officer Eric Williams, a Correctional Officer at the USP in Canaan, Pennsylvania, was working in a housing unit when an inmate stabbed him to death. Lieutenant Osvaldo Albarati was shot and killed while driving home from the Metropolitan Detention Center in Guaynabo, Puerto Rico.

These losses underscore the challenges the dedicated men and women working for the BOP face daily. While there are many facets to the BOP's operations, the foundation for it all is the safe, secure, and orderly operation of its institutions, and each and every staff member in the BOP is critical to this mission.

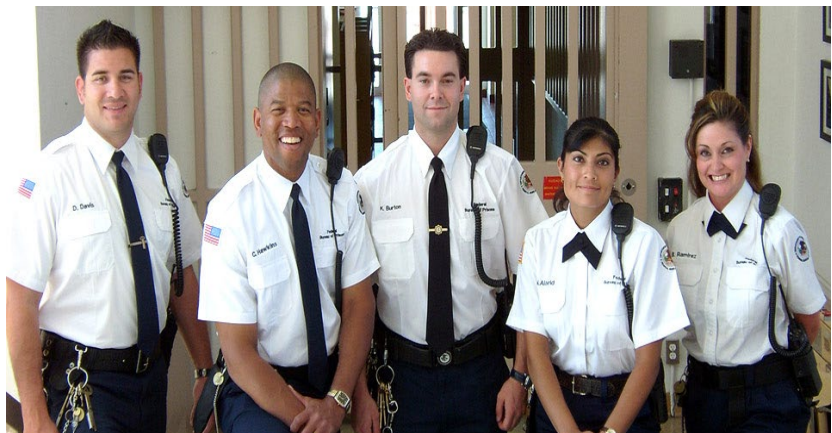
BOP employees are considered "correctional workers first," regardless of the position to which they are assigned. Because all non-custody staff are correctional workers and receive the same correctional officer training, they can perform programmatic functions (such as those of an educational instructor) without the added presence of a Correctional Officer. The BOP's operational maxim also allows non-custody staff to assume the duties of Correctional Officers during inmate disturbances, or because of long or short-term custody staff shortages.

All BOP staff are trained to work with inmates, respond to emergencies, and follow security procedures. The situational awareness and diligence of BOP staff are the foundation of safety and security within BOP institutions, and are key to protecting the public. When an insufficient number of Correctional Officers is available to cover an institution's mission critical custody posts on any given day, institution staff make up the difference by assigning non-custody officers (a practice termed "augmentation"), authorizing overtime, or, if no other alternative exists, leaving posts vacant. When BOP institution managers use augmentation, the normal duties performed by the augmenting staff may be curtailed or delayed, thereby interfering with the BOP's ability to provide some inmate programs. The BOP tries to limit the use of augmentation as much as possible.

## **High Profile Inmates and Radical Ideologies**

In the years following September 11, 2001, the government's focus turned toward expanding its efforts to safeguard the American public from terrorism and increasing its national security intelligence and enforcement capabilities.

The BOP's work has taken on significantly greater risks with the incarceration of high-profile terrorists inmates and suspects such as: Naser Abdo, Umar Abdulmutallab, Nazih al Raghie (Anas al-Libi), Waad Alwan, Mohanad Hammadi, Lawal Babafemi, Khalid al-Fawwaz, Adel Bary, Mostafa Mostafa (abu Hamza al Masri), Rezwan Ferdous,





Sulaiman Ghaith, Adis Medunjanin, Aafia Siddiqui, and Dzhokhar Tsarnaev. In addition, the BOP is charged with the care and custody of high-profile domestic terrorists such as Dylann Roof, Brandon Russell, and James Alex Fields, Jr.

The BOP has taken several steps to ensure that federal prisons are not used to recruit terrorists or spread extremist ideologies within the U.S. prisons. The BOP staff monitor and record all telephonic and mail/email communication of inmates who have a history or nexus to terrorism, both international and domestic, and they work closely with the FBI, the National and Local Joint Terrorism Task Forces, and other agencies to exchange intelligence with our law enforcement partners.

## **Cost Containment**

While the Department faces the challenge of maintaining safety and security in the federal prison system, it must also look for ways to contain ballooning costs. As the costs to operate and maintain the federal prison system continue to grow, less funding will be available for the Department's other critical law enforcement and national security missions, making effective management of the federal prison system a significant challenge for the Department.

The Department must isolate the chief drivers of these costs and consider innovative solutions that might help to contain them. As mentioned in the FY 2016 OIG management challenges report, inmate medical costs are a major factor in the BOP's overall rising costs, and thus the BOP continues to monitor the area closely.

## **E. First Step Act (FSA)**

The implementation of the First Step Act, enacted on December 21, 2018, remains a priority for the BOP.

### ***THE RISK AND NEEDS ASSESSMENT TOOL – PATTERN***

The Attorney General's publication of a risk and needs assessment system was a key requirement of the FSA. The new tool, called the Prisoner Assessment Tool Targeting Estimated Risk and Needs (PATTERN), is designed to predict the likelihood of general and violent recidivism for all BOP inmates. As required by the FSA, PATTERN contains static risk factors (e.g. age and crime of conviction) as well as dynamic items (i.e. participation or lack of participation in programs like education or drug treatment) that are associated with either an increase or a reduction in risk of recidivism. The PATTERN assessment tool provides predictive models, or scales, developed and validated for males and females separately.

### **FSA Time Credits and Assessment of Inmates' Risk to Recidivate**

Under the FSA, an eligible inmate in BOP custody who successfully completes Evidence-Based Recidivism Reduction programming or Productive Activities may earn FSA Time Credits (FTC)



to be applied towards pre-release custody or supervised release under 18 U.S.C. § 3624(g). As of January 1, 2020, BOP had completed assessments of all inmates. As of March 31, 2021, the BOP had completed the following number of FSA inmate assignments:

- FTC Eligible: 63,058
- FTC Ineligible: 60,270
  
- Minimum Risk of Recidivism: 16,501
- Low Risk of Recidivism: 35,979
- Medium Risk of Recidivism: 23,096
- High Risk of Recidivism: 47,826

## Recidivism Data

In FY 2020, the BOP, the International Justice and Public Safety Network (Nlets), and the FBI Criminal Justice Information Services Division entered into an Interim Agreement to provide for a limited exchange of statistical information between the BOP and the DOJ Office of Attorney General (OAG) to assist the DOJ OAG in fulfilling its requirements under the FSA to track and evaluate the recidivism of federal inmates as well as report on the effectiveness of the BOP's Risk and Needs Assessment system in reducing recidivism. The Interim Agreement provides access to FBI criminal history record information necessary to track recidivism outcomes. The DOJ also began a pilot program to publish recidivism data and other First Step Act updates on a quarterly basis. A final memorandum of agreement covering the use of data for analyses and research under the FSA is nearing completion.

Tracking the recidivism of individuals released from prison under the FSA is a critical part of measuring the success of evidence-based recidivism reduction programs and of validating the risk assessment tool, PATTERN. “Recidivism” is defined as a return to BOP custody or a re-arrest within three years of release from BOP custody. It includes Driving Under the Influence (DUI) and Driving While Intoxicated (DWI) offenses, but excludes other traffic offenses.

The recidivism data below is cumulative through October 31, 2020, from a total of 7,548 inmate releases.

- There have been 856 inmates arrested for some offense.
- A total of 300 individuals were arrested for one or more violent offenses. These arrests include: homicides (19); sexual assaults (12); robberies (49); domestic violence and other assaults (467); weapons offenses (204); and other violent offenses (60).
- The majority of recidivists were Good Conduct Time Releases (483) with the second group being Fair Sentencing Act offenders (332).
- The overall recidivism rate is 11.5%.



Due to the relatively short period from an inmate's release (only 11 months on average), no final conclusions can or should be drawn from this data about the overall recidivism rate of those released early due to the FSA. BOP provides an annual Second Chance Act report to Congress on the recidivism outcomes of released inmates. These reports use a rolling three-year period of recently released inmates. The Fiscal Year (FY) 2019 report presented recidivism information for 124,239 releases during FY 2012 through 2014. For FY 2014, the overall recidivism rate was 44.4%

### PATTERN Re-Validation

The FSA requires the Department to review and re-validate PATTERN on an annual basis. An annual revalidation timeline presents a potential research and theoretical challenge. PATTERN was developed using a seven-year dataset of BOP releases, and it was validated as an effective predictor of recidivism over the inmates' subsequent three-year period in the community. In a research setting, a researcher would normally gather data to re-validate a risk and needs assessment tool approximately three years after a large group of inmates were released from custody. Following this schedule, PATTERN and any new items would not be formally re-validated until after a large enough sample of offenders are released from BOP custody. Until this time, the most appropriate and rigorous analytic plan will be developed to meet the annual FSA re-validation requirement. While this will cause an incongruence in the re-validation processes, the results can serve as an interim estimate of PATTERN's predictive performance. The analytic plan and subsequent results will be documented in DOJ's annual report to Congress as required.

On February 10, 2020, the Office of Justice Programs (OJP), Department of Justice, released a competitive funding opportunity to hire external, independent consultants to review and revalidate PATTERN on an annual basis for up to five years. The deadline for submitting submissions was April 24, 2020. Following an extensive peer review process, the Department selected two individuals as the top candidates to perform this work.

The independent consultants are currently undergoing DOJ security investigations. Once they have successfully completed this process, the Department will announce the team of consultants selected to complete this important work. The consultants will collaborate with BOP's Office of Research and Evaluation to acquire data for the review and revalidation of the risk assessment tool. The members of the Independent Review Committee (IRC) will serve as advisors to the consultants on an as-needed basis.

As stated in the January 2020 FSA report, DOJ will continue to monitor the use and implementation of PATTERN, conduct the annual review and revalidation of the risk assessment tool, and consider any improvements and adjustments that should be made for future assessments as needed.

### ***STATUS OF NEEDS ASSESSMENT SYSTEM UPGRADE***

The Department has continued to implement the plan set forth in the July 2019 FSA Risk and Needs Assessment System report to identify and to make enhancements to BOP's Needs Assessment System. Earlier this year, the BOP formalized the Needs Assessment System to include thirteen unique need areas. The need areas are anger/hostility, antisocial peers, cognitions, dyslexia, education, family/parenting, work, finance/poverty, medical, mental health, recreation/leisure/fitness, substance abuse, and trauma. Some of the needs were already assessed using psychometric instruments. For example, the mental health need is assessed by the diagnoses and frequency of services identified via the Psychology Services Intake Questionnaire (PSIQ), a structured interview tool developed by BOP.

Other additions to the Needs Assessment System include:

- For needs that rely on historical data, information is drawn from the comprehensive legal and social history contained in the Presentence Investigation Report completed by the United States Probation Office. Guidance on how to obtain this information is included in the Needs Assessment System.
- The Measures of Criminal Attitudes and Associates (MCAA; Mills & Kroner, 2001) assessment was added to address both antisocial peers and cognitions needs.
- The dyslexia need must be assessed with measures that meet specifications outlined in the FSA. The BOP instituted a two-phase screening process. First, all inmates complete a screening instrument that examines symptoms across functional domains. Inmates who reach the threshold are then administered the Woodcock Johnson IV, a psychometrically robust test capable of formal diagnosis.

Other important steps undertaken and completed to improve the Needs Assessment System involved technology and tracking to ensure proper recording of information collected. Unique identifiers were created within the agency's database for each of the approved FSA evidence-based recidivism reduction programs and productive activities. These identifiers are used when an inmate signs up for, participates in, and completes a program; this information is recorded and historized.

Additionally, the BOP case management tool has been modified to display needs assessment information. Now, program and needs assessment information entered into the BOP database or the case management system are configured to cross-populate so that information entered into either system will display in both systems. These assignments allow BOP to run nationwide rosters of every need, for the evaluation of both staffing resource needs and program capacity.



In September 2019, BOP engaged the MITRE Corporation (MITRE) to assist with a variety of FSA-related tasks. MITRE is a non-profit organization that operates federally funded research and development centers (FFRDCs). FFRDCs are unique organizations that assist the United States government with scientific research and analysis; development and acquisition; and systems engineering and integration. MITRE also has an independent research program that explores new and expanded uses of technologies to solve customer problems. BOP utilized an existing advisory and assistance contract, writing a specific task order to engage MITRE for this important work.

MITRE issued an RFI regarding suggestions for enhancing the needs assessment tool used by BOP. Responses were extremely limited; however, BOP conducted its own reviews and was able to continue enhancing the system by adding improved assessment measures and by improving technology infrastructure supporting its use. BOP has drafted policies to codify the system and the program statement is pending negotiation with the union.

MITRE also developed a framework to conduct independent evaluation of programs submitted by external entities for consideration as evidence-based recidivism reducing programs or productive activities. Submitted programs are reviewed for evidence demonstrating effectiveness in reducing recidivism, as well as additional BOP criteria. The BOP will ultimately decide which programs are included on their approved list using the information from the independent reviews. External entities can submit their application electronically from the BOP public website. As of April 12, 2021, 11 external entities have submitted programs for review. MITRE is completing reviews on a rolling basis, and one program has been added to BOP's Directory of FSA programs.

Additionally, MITRE has worked on making an assessment of and recommendations regarding the possible use of tablets within BOP institutions to improve portions of the needs assessment data collection process, making it easier and more efficient for both inmates and staff. MITRE provided reports in these areas in late 2020, and the BOP is reviewing MITRE's recommendations and how best to implement them in the BOP to support the needs assessment data collection process.

Finally, MITRE has begun work on an evaluation of the Federal Prison Industries (FPI) program; this evaluation will assess FPI's overall impact on recidivism. The FPI evaluation will be conducted during fiscal year 2021.

## ***CURRENT SERVICES FUNDING PROVIDES FOR CONTINUED FIRST STEP ACT IMPLEMENTATION***

The BOP will utilize \$409.5 million in Current Services funding for First Step Act implementation to continue and build on FY 2021 FSA program expansions and implementation. Funding will include continued expansion of evidence-based recidivism reduction programs,



expanded provision of Medication Assisted Treatment (MAT) to inmates, inmate-focused Information Technology (IT) improvements, expansions of Residential Reentry Center (RRC) and Home Confinement capacity as needed, evaluations of the BOP's programs and services, and innovative approaches to corrections and reentry.

As part of the BOP's FSA implementation, the FY 2022 budget requests an appropriations language change to transfer not less than two percent of the BOP's \$409.5 million in FSA funding to the National Institute of Justice (NIJ), for the NIJ to use in performing evaluations of programs and activities related to the FSA.

## Effect of COVID-19 on Programs

- The COVID-19 global pandemic presented the BOP with unforeseen challenges, including ensuring inmate access to important programs. The BOP's top priority has been life safety of staff and inmates; thus, the agency made the difficult decision to suspend some programming, particularly at institutions most affected by the virus.
- BOP issued regular guidance to Wardens stressing the need for continued programming whenever possible. Emergency services such as crisis mental health contacts and suicide prevention, as well as religious worship, have continued unabated.
- BOP is currently under modified operations; these may differ from institution to institution, as each facility faces unique circumstances. Some may not be able to program for a few days, while others may need to suspend programming for a longer period.
- Key EBRR programs that are residential in nature may be able to continue, as inmates live together in the same housing units. Efforts have also been made to continue literacy programming, particularly GED testing.
- Some examples of successful program modifications that allow interventions to continue under COVID-19 include:
  - Reducing group size to allow for social distancing;
  - Utilizing space in creative ways (an inmate TV room for a treatment group);
  - Holding groups on the housing unit; and,
  - Modifying programming so material can be delivered in a self-guided format.

## Residential Reentry Centers

The BOP operates 195 separate Residential Reentry Center (RRC) locations under 150 competitive contracts and 24 Intergovernmental Agreements to provide RRC services. Since the passage of the FSA, BOP has increased our contractual capacity by 1,148. Additional growth in



this area will occur over time as inmates become eligible to accumulate more program credits towards time in community placements.

## Transfers Closer to Home

From January 1, 2019 through March 31, 2020, BOP approved 2,241 nearer release transfers to place inmates in facilities nearer to their intended communities of release. Over these 15 months, BOP made an average of 149 transfers each month. From April 1, 2020, through March 28, 2021, a total of 1,235 nearer release transfers were reviewed, with 322 approved and 913 denied. Although COVID-19 has impacted BOP operations, we anticipate the number of nearer release transfers will continue to increase as we move toward resuming normal operations and movement.



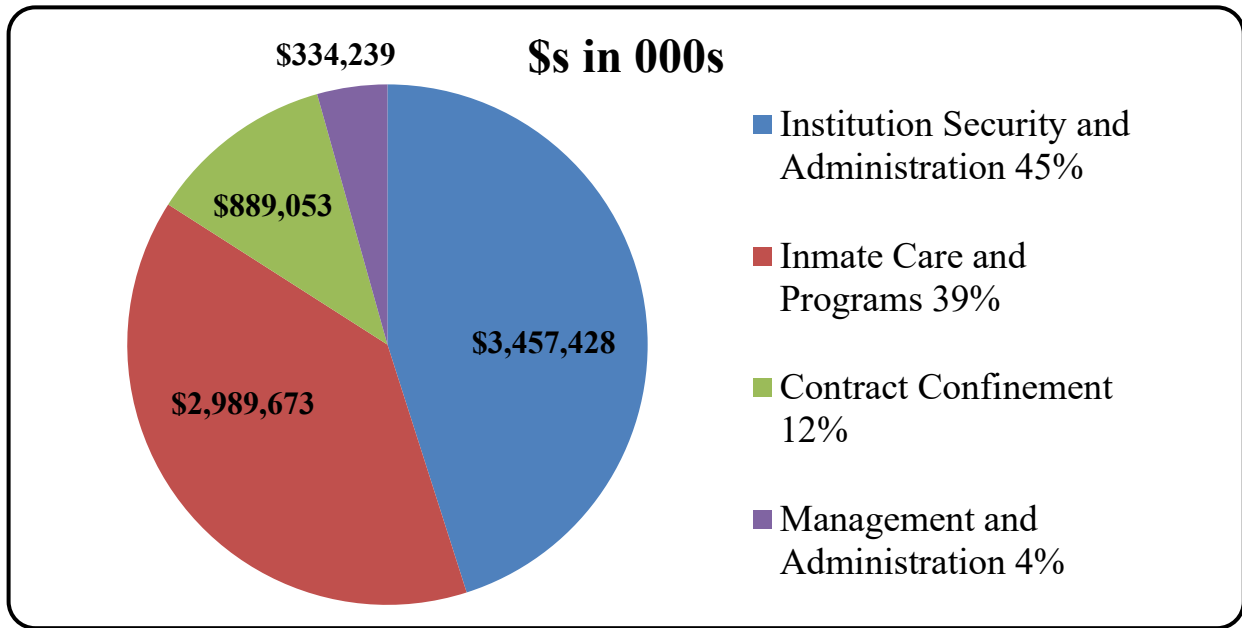


## F. Full Program Costs

### **FY 2022 Total Bureau of Prisons Request by Decision Unit**

In FY 2022, the BOP is requesting a total of \$7,670,393,000 with 38,884 positions and 35,262 FTEs for its S&E appropriation.

### **FY 2022 Budget Request by Decision Unit**



The total costs include the following:

- The direct cost of all activities;
- Indirect costs; and
- Common administrative systems costs.

Both performance and resource tables within each decision unit justification define the total costs of achieving the strategies the BOP will continue in FY 2022.

**Inmate Care and Programs:** \$2,989,673,000

**Institution Security and Administration:** \$3,457,428,000

**Contract Confinement:** \$889,053,000

**Management and Administration:** \$334,239,000

# Federal Bureau of Prisons



## **II. Summary of Program Changes**

The BOP does not request any program changes in its S&E appropriation for FY 2022.

### III. Appropriations Language and Analysis of Appropriations Language

#### Appropriation Language

The FY 2022 budget estimates include proposed changes in the appropriation language listed and explained below. New language proposed for FY 2022 is italicized. The language proposed for deletion is bracketed.

#### Federal Prison System

#### Salaries and Expenses

For necessary expenses of the Federal Prison System for the administration, operation, and maintenance of Federal penal and correctional institutions, and for the provision of technical assistance and advice on corrections related issues to foreign governments, [\$7,708,375,000] *\$7,670,393,000* [, of which]: *Provided, That* not less than \$409,483,000 shall be for the programs and activities authorized by the First Step Act of 2018 (Public Law 115–391): *Provided further, that the Director of the Federal Prison System shall transfer not less than 2 percent of the funds in the preceding proviso, to be merged with the appropriation for “Research, Evaluation and Statistics” for the National Institute of Justice to carry out evaluations of programs and activities related to the First Step Act:* *Provided further, That* the Attorney General may transfer to the Department of Health and Human Services such amounts as may be necessary for direct expenditures by that Department for medical relief for inmates of Federal penal and correctional institutions: *Provided further, That* the Director of the Federal Prison System, where necessary, may enter into contracts with a fiscal agent or fiscal intermediary claims processor to determine the amounts payable to persons who, on behalf of the Federal Prison System, furnish health services to individuals committed to the custody of the Federal Prison System: *Provided further, That* not to exceed \$5,400 shall be available for official reception and representation expenses: *Provided further, That* not to exceed \$50,000,000 shall remain available until expended for necessary operations: *Provided further, That, of the amounts provided for contract confinement, not to exceed \$20,000,000 shall remain available until expended to make payments in advance for grants, contracts and reimbursable agreements, and other expenses:* *Provided further, That* the Director of the Federal Prison System may accept donated property and services relating to the operation of the prison card program from a not-for-profit entity which has operated such program in the past, notwithstanding the fact that such not-for-profit entity furnishes services under contracts to the Federal Prison System relating to the operation of pre-release services, halfway houses, or other custodial facilities.

#### Analysis of Appropriation Language

The new language will provide funding for the National Institute of Justice to evaluate the BOP’s programs and activities. For the \$409,483,000 First Step Act funding amount, the transfer equates to not less than approximately \$8.2 million.



## IV. Program Activity Justification

### A. Inmate Care and Programs

Inmate Care and Programs	Direct Pos.	Estimate FTE	Amount
2020 Enacted	13,828	12,221	2,894,685
2021 Enacted	14,002	12,628	3,075,199
Adjustments to Base and Technical Adjustments	0	84	-85,526
2022 Current Services	14,002	12,712	2,989,673
2022 Program Increases	0	0	0
2022 Request	14,002	12,712	2,989,673
<b>Total Change 2021-2022</b>	<b>0</b>	<b>84</b>	<b>-85,526</b>

#### 1. Program Description: Inmate Care and Programs

The BOP is committed to effectively using its resources to provide maximum benefit to society. Thus, the BOP relies upon empirical research to determine which programs are effective in accomplishing their objectives. The BOP’s inmate programs and services are geared toward helping inmates prepare for their eventual release.

This activity covers the cost of inmate food, medical care, institutional and release clothing, welfare services, transportation, gratuities, staff salaries (including salaries of U.S. Public Health Service commissioned officers), and operational costs of functions directly related to providing inmate care. This decision unit also represents costs associated with inmate programs (Education and Vocational Training, Drug Treatment, Life Connections, Religious and Psychological Services).

The following chart provides estimated funding (dollars in thousands) amounts for key programs funded in Inmate Care and Programs decision unit:

Program Area	FY 2019 Actuals	FY 2020 Actuals	FY 2021 Estimates	FY 2022 Estimates
Food	\$408,209	\$446,035	\$408,209	\$414,417
Medical	\$1,276,919	\$1,372,701	\$1,349,345	\$1,353,638
Unit Management	\$452,029	\$504,869	\$485,741	\$431,921
Drug Treatment	\$115,829	\$122,250	\$155,017	\$200,422
Education	\$143,281	\$150,894	\$210,481	\$210,481
Psychology Services	\$74,260	\$82,122	\$118,632	\$118,632
Chaplaincy Programs	\$44,545	\$48,428	\$44,545	\$47,440



The purpose of inmate programs is to improve inmate self-control, provide educational opportunities and pre-release programs to facilitate reentry and transition, and establish healthy relationships between staff and inmates by dividing the large institution population into smaller, more manageable groups. A team of multi-disciplinary staff (i.e., Unit Manager, Case Manager, Correctional Counselor and a Unit Officer) who have administrative and supervisory authority are permanently assigned and located in housing units to work with the inmates. This places services closer to the users, and permits decision-making by those who are most knowledgeable about inmates and their program needs. Regular and consistent interaction between inmates and staff provides better communication and understanding of inmate needs.

**a. Medical Services (Inmate Health Care)**

Medically Necessary Care. The BOP delivers medically necessary health care to all offenders housed in BOP-managed facilities. Each BOP facility has a health services clinic that offers a standardized scope of services to meet basic health needs and a supplemental comprehensive medical services contract to deliver specialized care at community facilities. Onsite services include:

- Health screening on admission to identify infectious conditions, urgent medical and mental health needs including suicide risk, and medications to be continued for ongoing conditions
- Comprehensive medical history and physical exam to identify underlying infectious, chronic and behavioral health needs including risk assessment, diagnostic testing and treatment plans
- Sick call triage and episodic visits to assess, diagnose and treat short-term health problems (e.g., respiratory infections, musculoskeletal pain, headaches, etc.)
- Chronic care clinics to manage long-term diseases (e.g., diabetes, asthma, and congestive heart failure) through recurring assessments and long-term therapeutic regimens
- Preventive health visits to screen for underlying chronic conditions and immunize against transmission of preventable infectious diseases
- Long-term nursing care to manage seriously ill offenders needing help to perform activities of daily living
- Rehabilitative care to regain or maintain optimal physical and mental health function
- Oral health care to assess, diagnose, treat and prevent dental cavities and oral diseases that interfere with proper nutrition or manifest as complications of underlying medical conditions

Seven BOP facilities are medical centers that house both seriously ill and general inmates. Specialty services provided include:

- Dialysis services for offenders having chronic renal failure
- Oncology (cancer) treatment services, i.e. chemotherapy and radiation therapy
- Inpatient and forensic mental health



- Surgery services, i.e. limited orthopedic and general surgery procedures
- Prosthetics and orthotics
- Long-term ventilator-dependent management
- Dementia care
- End-of-life care

Health Care Personnel. The BOP employs or contracts licensed and credentialed health care clinicians, technicians, health administration experts and ancillary support staff to deliver its scope of services. Employees emanate from two personnel systems: The majority of employees are civil servants, and the remaining are Commissioned Corps Officers in the U.S. Public Health Service detailed to the BOP per an interagency agreement. All BOP employees and contractors meet OPM standards for qualifying education and experience as well as continuing education requirements.

Health Care Challenges. The BOP has a statutory mandate to provide basic medical and mental health care funded through its annual Congressional budget allocation. Determining what constitutes medically necessary care requires a constant review of evidence-based prevention and treatment practices, and delivery of services that balance efficacy of care and quality of life both during incarceration and in preparation for release to the community. Some of the more urgent and impactful challenges facing the BOP are listed below.

- **Treatment of Offenders Having Chronic Hepatitis C Infection.** The BOP has nearly 20,000 offenders with hepatitis C virus (HCV) infection, most of whom have not had HCV treatment. In the past, the cost for a standard 48-week treatment regimen had been approximately \$6,600 per inmate. However, in 2014, new drugs were developed that allowed HCV to be essentially cured, but drove the cost of treatment up exponentially. The BOP treated 240 inmates in FY 2015 for a total cost of \$13.6 million, an average of \$57,000 per inmate. In FY 2016, the BOP treated 327 inmates for a cost of \$14 million, an average of \$43,000 per inmate. In FY 2017, the BOP treated 904 inmates for a cost of \$28 million, an average cost of \$31,000 per inmate. In 2016 and 2017 new pan-genotypic medications were approved for treatment, which created more price competition within these medications and continued to drive costs down and enabled further expansion of treatment. In FY 2018, the BOP treated 1,683 inmates for a cost of \$25 million, an average cost of \$14,700 per inmate; and in FY 2019 the BOP treated 3,107 inmates for a cost of \$32 million, an average of approximately \$10,500 per inmate. The BOP has expanded efforts to test and treat all inmates for HCV. The most recent update to hepatitis treatment guidance recommends treatment of all inmates testing positive for HCV. The BOP's treatment goal was 3,200 inmates for FY 2020; however, the COVID-19 pandemic has reduced our treatments to 2,382 inmates for a cost of \$25 million. The FY 2021 and FY 2022 treatment goal is 2,500 inmates at a cost of approximately \$25 million.
- **Treatment of Offenders Having HIV Infection.** The BOP has over 1,400 inmates being treated for HIV infection. The cost to provide these patients with antiretroviral



medications is responsible for 28 percent to 30 percent of BOP medication expenditures, \$31.1M in FY 2017, \$33.7M in FY 2018, \$32.8M in FY 2019, \$32.3M in FY 2020, and estimated \$33.4M in FY 2021, and \$35.8M in FY 2022. The Department of Health and Human Services Panel of Antiretroviral Guidelines recommends that all patients with HIV infection receive antiretroviral therapy. Newer medications are continually being developed in order to provide treatment regimens with fewer side effects, a lower pill burden, and a higher barrier to developing viral resistance. The diversity of genotypes and resistance patterns along with rapidly changing treatment recommendation creates a challenge for the BOP to provide cost-effective care to this population.

- **Management of Offenders with Transgender Needs.** Offenders who self-identify as transgender are individually assessed for psychosocial and medical needs. Areas of concern include appropriate housing, clothing, grooming, showering, and access to gender-appropriate general store (commissary) items as well as targeted psychological and medical care. The BOP has over 1,000 self-identified transgender offenders.
- **Continuity of Care during Community Reintegration.** Health Services Division provides inmate services that develop social competency and meet basic social and health needs during incarceration, but also provides transitional links that bolster successful reintegration into the community. This includes assisting offenders to enroll in government benefit programs, find appropriate housing, identifying provider networks that offer needed health services, coordinating care with the United States Probation Office, and developing discharge plans that document continuity of care needs. In 2020, the BOP released approximately 25,000 inmates, out of which approximately 1,000 were classified as Care Level 3 or 4. These inmates, who have significant medical and mental health issues, were all identified at least 90-days prior to release and were offered release planning services by social workers. Additionally, all inmates have access to either an institution or regional social worker who provide additional services to other care levels and populations based on inmate request or referral.
  - *Social Work Services.* BOP acts as a health and social services safety net for a subpopulation of federal offenders who may lack the knowledge and skills to navigate community resources and access basic life-sustaining services. The variation in community systems and programs make it difficult to standardize training for releasing offenders. The BOP continues its professional social work services to link offenders to government benefit programs (e.g., Social Security Disability Insurance, veterans' benefits, Medicare and Medicaid programs, etc.) and health care networks to continue requisite medications and treatment plans.
  - *Medication Assisted Treatment for Offenders Having Opioid Use Disorder.* Medication Assisted Treatment (MAT) for offenders at risk for opioid use



disorder reintegrating into the community has been a focus of the BOP, and in 2020 the BOP initiated expansion of its MAT Program to include all FDA-approved medications currently available in the United States (i.e., buprenorphine, methadone, naltrexone). The BOP has expanded MAT to offenders who enter BOP custody with existing MAT regimens, and to offenders who demonstrate a clinical need for MAT at any point in their sentences. Specialized MAT Program positions (e.g., MAT Psychologists, Health Services staff) have been allocated to the field to support expansion. Finally, the BOP has implemented a program to allow access and administration of naloxone by all BOP staff in situations involving possible opioid overdoses. Mandatory naloxone administration training has been developed and is a part of this program.

- *Participation in the National HIV/AIDS Strategy.* DOJ is designated as one of six executive agencies responsible for implementing the National HIV/AIDS Strategy at the federal level. The Strategy focuses on three overarching goals: reducing the number of new HIV infections, increasing access to care for people living with HIV, and reducing HIV-related health disparities. The BOP has expanded efforts to test and treat HIV-infected offenders during incarceration, and is engaged with other federal agencies to sustain successful management by having pharmacy and social work professionals connect releasing offenders to community programs that provide expensive life-saving medication regimens.
- **Compassionate Release of Terminally Ill, Debilitated, or Elderly Offenders with Medical Conditions.** The BOP, through the United States Attorney's Office (USAO), is authorized to file a motion for compassionate release with the sentencing court in extraordinary or compelling circumstances. BOP criteria for Compassionate Release/Reduction in Sentence (RIS) is based on medical or mental health conditions to include "terminal medical condition," "debilitated medical condition," and "elderly (65 or older) inmates with medical conditions". These criteria are defined in BOP Program Statement No. 5050.50, Compassionate Release/Reduction in Sentence: Procedures for Implementation of 18 U.S.C. §§ 3582 and 4205(g). In addition to meeting specific medical criteria, offenders must have detailed discharge health plans outlining continued care in the community and must not pose a danger to the community in order to be approved for a RIS. In calendar year 2020, the BOP's Director approved 43 RIS requests and, through the USAO, filed 39 RIS motions. Of the 43 approved requests, 31 involved a terminal medical condition, 11 involved a debilitated medical condition, and 1 involved an elderly inmate with medical conditions. Thus far in calendar year 2021, the BOP's Director has approved 9 RIS requests and, through the USAO, filed 10 RIS motions. Of the 9 approved RIS requests, 7 involved a terminal medical condition and 2 involved a debilitated medical condition.

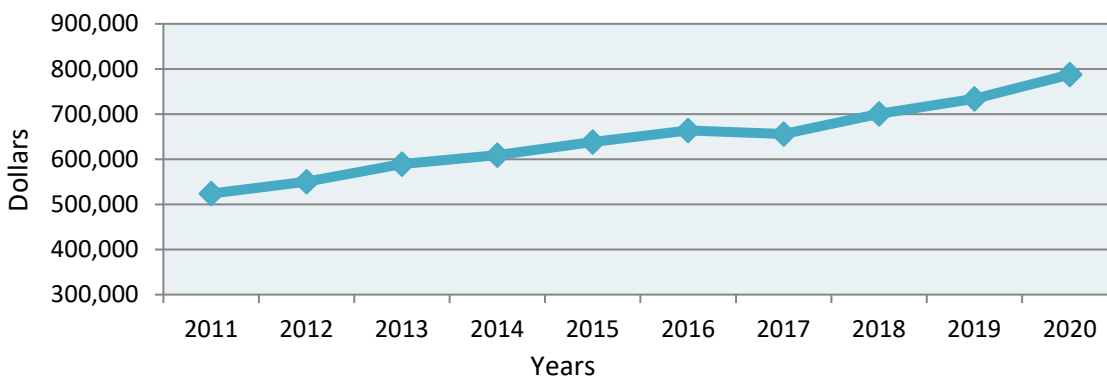




- **Aging Offender Population.** The average age of offenders in BOP-managed facilities is 39 years and average length of sentence is 128 months. The average age of offenders in BOP facilities has increased by 8 percent over the past decade. Approximately 45 percent of offenders have multiple chronic conditions that, despite management with medications and other therapeutic interventions, will progress and may result in serious complications. As offenders age in place, demands on health resources will likely increase proportionately. Also, the FSA expands a pilot program for eligible elderly and terminally ill offenders to be transitioned to home confinement as part of a pilot program. Currently, there are 329 inmates in this program.
- **Continued transformation of pharmacy services.** Over the past few years, pharmacist clinical programs have expanded to provide additional patient care through the use of Collaborative Practice Agreements (CPAs). These services have resulted in significant cost avoidance for the BOP through improved efficiencies of physician services and improved patient outcomes resulting in decreased patient care costs. The BOP has taken steps to institute a centralized fill and distribution (CFAD) site for all Central Processing Pharmacy Services (CPPS) serviced institutions, which will free up time from the six sites that previously served as fill sites, enabling the expansion of clinical pharmacy services. Additionally, initiatives are underway for the expansion of the CFAD system to a full BOP mail order program (BOPMOP) capable of filling all BOP refills and non-urgent first fills and therefore maximizing pharmacists clinical efforts at all BOP facilities.

Health Care Cost Containment. The BOP’s medical care costs have risen steadily over the last decade (see chart below for non-salary medical cost). The BOP has developed several strategic initiatives and operational systems designed to contain health care costs.

**Actual Inmate Medical Costs**  
(Dollars in thousands)



- Strategic Cost Containment Initiatives:



- Medical Contracting Models. The BOP is exploring the feasibility of regional comprehensive medical services contracts that serve a multi-state catchment area. The regional contracts would potentially serve not only BOP facilities, but also Residential Reentry Centers (RRCs) that lack contracted health services. RRC residents often use local emergency rooms in lieu of primary care clinics.
- Prime Vendor Program for Medical/Surgical Supplies. In conjunction with the OMB Strategic Sourcing Leadership Counsel's goal of leveraging cost containment through volume purchasing (Prime Vendor Program), the Veterans Administration added the BOP to its newly awarded contract (i.e. Medline, Inc.) for its medical/surgical supplies Prime Vendor Program. The Bureau now participates in both Prime Vendor Programs for pharmaceuticals and medical supplies.
- Operational Cost Containment Systems:
  - Pharmacy Management. Pharmaceutical costs in the United States rise yearly as new drugs are developed and market forces favor manufacturers. The BOP contains costs through several best practices:
    - The BOP participates in strategic sourcing initiatives by leveraging the combined purchase requirements with the Department of Veterans Affairs (DVA), Department of Defense, and Indian Health Service. These initiatives include joint procurement of pharmaceutical standardization contracts. Additionally, the BOP seeks opportunities to acquire voluntary price reductions from manufacturers below statutory Federal Supply Schedule pricing.
    - The BOP uses a tightly controlled National Drug Formulary that favors generic drugs.
    - The BOP leverages the DVA Prime Vendor Program to purchase medications at the current discount of 12%.
    - The BOP adheres to recommendations of the National Pharmacy & Therapeutics Committee, which researches drug efficacy and safety.
  - Telehealth Services. The BOP leverages telehealth services to deliver specialty medical services to remote locations. Delivery of health services through the BOP's Wide Area Network (WAN) takes many forms.
    - BOP medical centers contract large hospital vendors to conduct specialty medicine clinics via telehealth, reducing cost and security risks associated with escorted trips to community facilities.
      - FMC Lexington contracted with the University of Kentucky Medical Center for 26 specialty telemedicine clinics.
      - USMCFP Springfield contracted with Mercy Hospital, Springfield, MO for more than 30 specialty telemedicine services.
    - Through telehealth services, BOP providers are able to deliver specialty medical services to remote locations.
      - BOP psychiatrists remotely manage psychotropic medications for inmates at BOP-managed institutions.
      - BOP dietitians and diabetes educators consult with all institutions.



- BOP Regional Medical Directors conduct chronic care visits in their regional institutions.
  - BOP Pharmacists conduct chronic care visits to assist in managing patients with chronic conditions such as psychiatric and diabetes.
  - BOP clinicians working at complexes conduct chronic care and follow-up visits across facilities via telehealth to optimize efficiency.
    - BOP Health Services Division (HSD) added a National Health Technology Branch to expand the use of telehealth and other health technologies that improve the efficiency of health care delivery. In FY 2018, HSD announced and selected a National Health Technology Administrator to manage the new branch. The National Health Technology administrator is working closely with the Office of Information Technology to expand telehealth services to all facilities with a goal to have all sites capable of delivering services by the end of FY 2022.
- Health Information Technology. The BOP continues to develop and deploy automated health information management systems that meet interoperability and security requirements issued by the Office of the National Coordinator (ONC) for Health Information Technology. The BOP recently launched a laboratory information system that helps reduce medical errors and expedites availability of lab results for timely clinical decisions and care. BOP needs continual investment in automated health information management systems to facilitate the exchange of information as inmates transfer within the BOP and transition to the community.
- Levels of Care. The BOP assigns each inmate and each BOP facility a care level (i.e., care level 1 is essentially healthy; care level 2 is stable chronic conditions; care level 3 is chronic conditions with manageable complications; care level 4 is need for continuous nursing care). This medical classification system enables BOP to allot its resources to better manage inmates' medical and mental health needs.
- Catastrophic Care Management. The BOP monitors hospitalized inmates and tracks catastrophic costs to closely manage care and expedite transfers to BOP medical centers when feasible. A single catastrophic case can easily account for 20 to 30 percent of a typical institution's annual outside medical budget. This strategy will allow the BOP to better understand the impact of catastrophic health care events on the health care budget and decision making.
- Medical Claims Adjudication (MCA). The BOP contracts with a medical claims adjudication vendor to review claims for duplicate billing, claims for services not requested or not appropriate for the stated diagnoses, and validates local market rates for physician and facility charges. Contracting for medical claims adjudication enables the BOP to identify patterns of fraud, waste, and abuse. The BOP awarded a new claims adjudication contract in 2019. The new system redesign will deliver a MCA solution scheduled to be implemented in September 2021. The pilot institutions will



launch for a 30 day test and learn period followed by a roll-out plan to onboard four to five institutions per month with the goal to be in all of the BOP institutions 24 months after launching the new system.

- Utilization Review. The BOP requires every institution to implement a utilization review process to assure that only medically necessary care is provided. Health care staff uses an automated utilization review program to provide a clinical decision-making system of criteria that differentiates what is medically necessary from what is potentially elective care.
- Data Analytics. The Health Services Division is investigating strategies for harvesting and structuring organizational data and using the data to empower executive decision making to improve health and financial outcomes. The Health Services Division awarded an Advisory Assistance (A&A) Service (external consultant) contract on October 1, 2018. The A&A will examine the organization's data integration requirements for medical, financial and staffing systems and recommend ways to improve the data integration for clinical trends and outcomes; healthcare financial modeling; and staffing models. The five volume report prepared by the A&A contract team has been shared with executive leadership and key work groups. Recommendations under consideration will help prioritize HSD initiatives across BOP divisions. Establishing initiatives is an iterative and collaborative process (e.g., Executive Staff Meetings, informal discussions, HSD Governing Body Meetings, advisory groups and other key meetings to engage all BOP stakeholders). Volumes III, IV and V address the data governance, strategy, integration and cost-modeling specifically.

## **b. Food Services**



Since 2008, the BOP has used a national menu, approved by BOP Executive Staff, to be served agency-wide for standardization of food service operations. The national menu, which includes the approved menu, standardized recipes, and product specifications, is used for food procurement, preparation and meal service at all institutions. The national menu is reviewed at least annually to assess responsiveness to eating preferences, operational impact, product pricing, and

nutritional content. Following the annual menu update and before implementation, a nutritional analysis is conducted by a registered dietitian to ensure the menus consider the Dietary Reference Intakes for groups published by the Food and Nutrition Board of the National Academy of Sciences.

Meal preparation is accomplished primarily by inmate workers (about 12 percent of the population) under the supervision of staff. The BOP estimates in FY 2022 it will serve



approximately 124 million meals, which is nearly 339,000 meals per day and over 2.38 million meals per week.

c. **Education and Occupational Training**

Inmate education programs include literacy, English-as-a-Second Language (ESL), occupational education, advanced occupational education (AOE), release preparation courses, and a wide-range of adult continuing, wellness, and structured and unstructured leisure time activities. Education programming provides inmates with an opportunity to learn the functional skills that support their reintegration into the community. As of September 2020, 26 percent of the designated inmate population was enrolled in one or more education/recreation programs. The BOP's Office of Research<sup>1</sup> has found that participation in education programs leads to a 16 percent reduction in recidivism by inmates who participate in these programs.



With few exceptions (i.e., pretrial inmates and sentenced deportable aliens with confirmed orders of deportation), the BOP requires inmates without a verified high school diploma or high school equivalency credential to enroll in a literacy program. There are approximately 11,349 inmates enrolled in high school equivalency programs. Curriculums are designed to teach the knowledge and skills needed for

inmates to progress from basic literacy through attainment of the high school equivalency credential. The implementation of the Violent Crime Control and Law Enforcement Act (VCCLEA) and the Prison Litigation Reform Act (PLRA), mandates that inmates with needs must participate and make satisfactory progress in the literacy program to vest their good conduct time (VCCLEA), or be eligible to earn the full amount of good conduct time. Since the implementation of these acts in November 1997, the demand for literacy program instruction has increased, leading to a wait list of approximately 13,086 U.S. citizens and 3,361 non-U.S citizen inmates. In FY 2020, 1,877 inmates attained the high school equivalency credential. The Crime Control Act of 1990 requires that non-English speaking federal prisoners participate in ESL until they function at the equivalence of the eighth grade level. Occupational and Advanced Occupational Education (AOE) programs serve to enhance inmates' post-high school equivalence skills

<sup>1</sup> Prison Education Program Participation and Recidivism: A Test of the Normalization Hypothesis (1995).

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during incarceration and increase the employment opportunities of offenders upon release, particularly those who lack solid employment history or a marketable skill.

Other work preparation activities are also offered, including mock job fairs and resume preparation courses. In FY 2020, education and institution staff at most institutions conducted mock job fairs with representatives from local communities.



Adult Continuing Education courses are designed for inmates who have a desire to learn about a special area or address skill deficits (computer skills, English, mathematics, financial literacy, etc.). Recreation, wellness, and leisure programs reduce inmate idleness, promote healthy life styles, and encourage the development of positive leisure time skills.



The BOP's Post Release Employment Study demonstrates that occupational training programs decrease recidivism. In FY 2020, nearly 7,476 inmates completed an occupational training program. The BOP has developed and established national standards for apprenticeship programs through partnership with the U.S. Department of Labor. These standards are being used to promote apprenticeship programs,

agency-wide. Standardized apprenticeship programs afford inmates the opportunity to obtain nationally recognized certificates that will increase post-release employment opportunities. Studies show that inmates who participate in these programs are 33 percent less likely to recidivate<sup>2</sup>. Federal inmates can choose a vocation, through instruction, work experiences, and career orientation; acquire or improve productive work skills and habits; and gain practical knowledge essential to working and functioning in a complex industrial technical world of work.

#### **d. Psychology Services**

Psychology Services staff are an integral part of correctional treatment. They conduct needs assessments, group and individual psychotherapy, suicide risk assessments, crisis intervention, residential treatment programs, and staff consultation and training. BOP policy requires every inmate admitted to a BOP facility be given an initial psychological

<sup>2</sup> The Differential Effect of Industries and Vocational Training on Post release Outcomes for Ethnic and Racial Groups: Research Note. *Corrections Management Quarterly*, 5(4), 17-24. W. Saylor and G. Gaes (2001).



screening, which consists of a psychological interview, social history review, and behavioral observations. The purposes of the screening are to identify special treatment or referral needs; provide information useful in future crisis counseling situations; identify strengths as well as potential adjustment problems to imprisonment; and discuss programing needs and how they can be addressed with inmates. In addition, BOP psychologists have traditionally provided the courts, parole officials, and prison administrators with comprehensive psychological evaluations of offenders.

Inmates with mental health needs are offered a range of evidence-based services, including crisis counseling, individual and group psychotherapy, clinical case management, psychiatric treatment, and specialized residential treatment programs. Acutely mentally ill inmates may receive these services within the BOP's Psychiatric Referral Centers. However, most mental health treatment is provided in regular institutions. In addition to the treatment of mental illnesses, Psychology Services provides specialized drug abuse treatment and sex offender treatment programs. BOP psychologists also offer treatment services designed to reduce recidivism and develop inmates' living skills, such as anger management, problem solving, and social skills training.

Additionally, with the implementation of the First Step Act, Psychology Services staff are tasked with the assessment and intervention of six unique needs areas (Anger, Antisocial Peers, Criminal Cognitions, Mental Health, Substance Abuse, and Trauma.) There are currently 20 Evidence-Based Recidivism Reduction (EBRR) Programs and 13 Productive Activities (PA) available that require facilitation by Psychology staff.

## e. *Drug Abuse Treatment*

The BOP continues to develop evidence-based treatment practices to manage and treat offenders with histories of substance abuse. The BOP's strategy includes early identification through a psychology screening, drug education, non-residential drug abuse treatment, intensive residential drug abuse treatment, and community transition treatment.

**Drug Program Screening and Assessment.** Upon entry into a BOP facility, an inmate's records are assessed to determine if there is a history of drug use, a judicial recommendation for drug abuse treatment, a violation due to drug use, or if the instant offense is related to drug use. If so, the inmate is required to participate in the Drug Abuse Education course.

**Drug Abuse Education.** Participants in the Drug Abuse Education course receive factual information on the relationship between drug use and crime -- the impact substance abuse has on the inmate psychologically, biologically and socially, while also motivating inmates to volunteer for the appropriate drug abuse treatment programs. In FY 2020, 14,666 inmates participated in Drug Abuse Education and it is projected that a total of 17,500 inmates will participate in Drug Education in FY 2021. It is further projected that 22,000 will participate in Drug Education in FY 2022.



**Medication Assisted Treatment.** Medication assisted treatment (MAT) is the use of medications in combination with evidence-based psychosocial interventions to treatment opioid use disorders. BOP is developing and implementing treatment protocols designed specifically for MAT Program participants, and 15 MAT Psychologist positions have been allocated to the field to ensure the full range of assessment, diagnostic, and treatment services are available. Psychology Services and Health Services staff work collaboratively to provide MAT to offenders who meet any of the following criteria:

- An ICD or DSM diagnosis of Opioid Use Disorder (OUD), active or in remission
- Entrance into Bureau custody as an active MAT patient
- History of problematic opioid use prior to incarceration
- Positive urinalysis history for opioids during incarceration

**Nonresidential Drug Abuse Treatment.** Unlike residential programs, inmates are not housed together in a separate unit; they are housed with the general inmate population. Nonresidential treatment was designed to provide maximum flexibility to meet the needs of the offenders, particularly those individuals who have relatively minor or low-level substance abuse problems. These offenders do not require the intensive level of treatment needed by individuals with moderate to severe (substance abuse or dependence) diagnoses and behavioral problems.

A second purpose of the program is to provide those offenders who have a moderate to severe drug abuse problem with supportive treatment opportunities during the time they are waiting to enter the RDAP, or for those who have little time remaining on their sentence and are preparing to return to the community. In FY 2020, 15,632 inmates participated in Nonresidential Drug Abuse Treatment Program. In FY 2021, it is projected that 21,500 inmates will participate, with a similar number of participants in FY 2022.

**Residential Drug Abuse Treatment.** The Violent Crime Control and Law Enforcement Act (VCCLEA) of 1994 requires the BOP, subject to the availability of appropriations, to provide appropriate residential substance abuse treatment for 100 percent of inmates who have a diagnosis for substance abuse or dependence and who volunteer for treatment. More than half of the BOP's facilities operate a Residential Drug Abuse Program (RDAP), which are located in a separate unit, away from the general population. The RDAP is based on Cognitive Behavioral Therapy (CBT), wrapped into a modified therapeutic community model of treatment. CBT and therapeutic communities are proven-effective treatment models with inmate populations. In FY 2020, 11,556 inmates participated in Residential Drug Treatment Program. In FY 2021, 14,000 participants are projected, and 15,000 participants are projected for FY 2022.

In coordination with the National Institute on Drug Abuse, the BOP conducted a rigorous three year outcome study of the residential drug abuse treatment program beginning in 1991. The results indicated that male participants are 16 percent less likely to recidivate



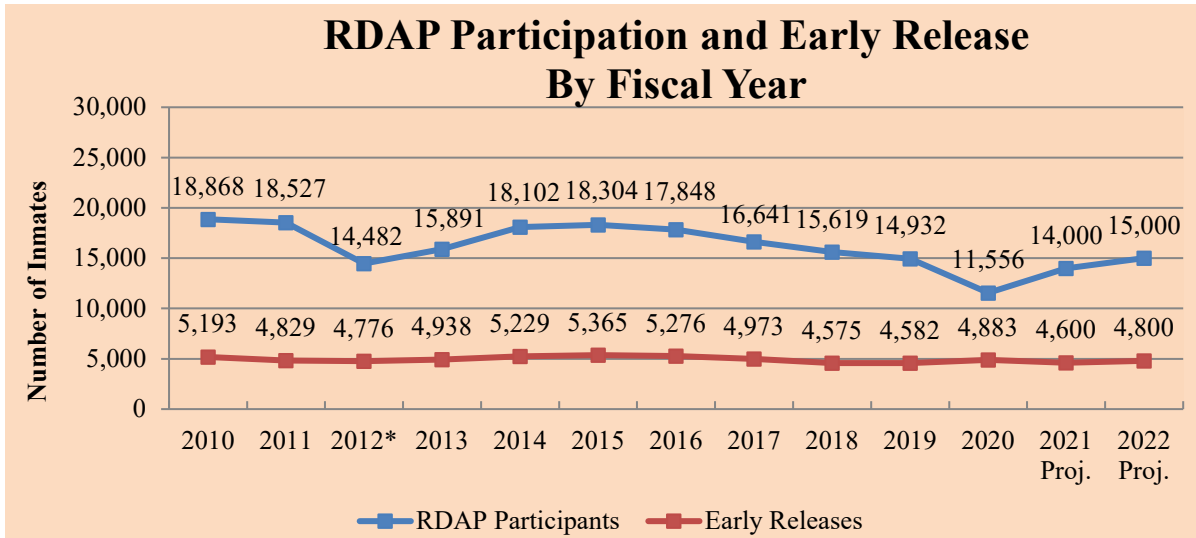


and 15 percent less likely to relapse than similarly situated inmates who did not participate in RDAP. Female inmates are found to be 18 percent less likely to recidivate than inmates who did not participate in treatment. In addition, female inmates had higher rates of success than male inmates in maintaining work, acquiring educational degrees, and caring for children.

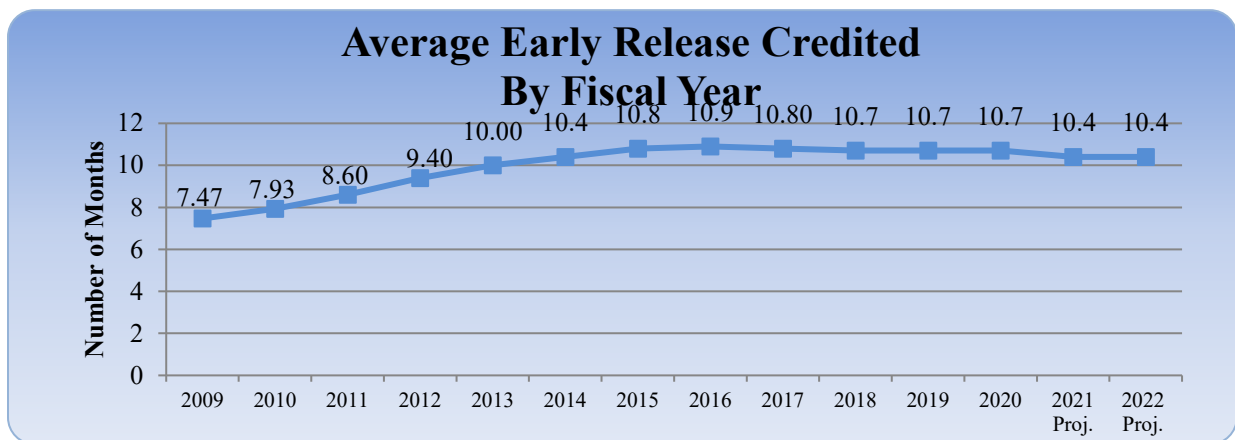
**RDAP Follow-up Treatment** If an inmate has time to serve in the institution after completing the RDAP, he or she must participate in “follow-up” treatment in the institution. Follow-up treatment ensures the inmate remains engaged in the recovery process and is held to the same level of behavior as when he or she was living in the treatment unit. This program reviews all the key concepts of the RDAP and lasts for one year or until the inmate is transferred to a Residential Reentry Center (RRC).

**Community Treatment Services (CTS) (formerly Transitional Drug Abuse Treatment)** CTS provides a nationwide comprehensive network of 240 contracted community-based treatment providers, screens over 2,500 inmates for services monthly, and provides clinical oversight for over 3,900 offenders in treatment every day. This network of professionals consists of licensed individuals (e.g. certified addictions counselors, psychologists, psychiatrists, social workers, professional counselors, medical doctors, certified sex offender therapists, etc.) and specialized agencies resulting in a variety of behavioral health treatment services available throughout the country. In addition to providing drug treatment to Residential Drug Abuse Program participants, the BOP expanded services to include treatment for offenders with mental illness and sex offenders, including oversight for the final phase of the Sex Offender Treatment Program (SOTP) and Medication Assisted Treatment (MAT). Moreover, crisis intervention counseling for situational anxiety, suicidality, depression, grief/loss, and adjustment issues is also available to offenders placed in Residential Reentry Centers (RRCs) and on home confinement. CTS also oversees all of the Prison Rape Elimination Act (PREA) referrals for allegations reported in the community. CTS recognizes the release from the institution is stressful for the offender as well as for the family members. As a means to facilitate successful reentry, CTS offers family therapy for the offender and his/her family members. In addition to extensive clinical oversight of the offenders progress in treatment, CTS staff provide contract oversight for all community-based treatment providers. It is projected that CTS will provide services to 4,100 offenders in FY 2022.

The following charts show participation and early release information:



\*Note: Residential Drug treatment – In FY 2012 the methodology used to calculate RDAP participants was recalculated, with significantly less potential for duplication. Thus, while this change resulted in the number of participants during FY 2012 being less than the target number, it is a preferred method to report inmate participation in RDAP. Additionally, in the last half of FY 2013, the BOP phased in several new programs and expanded others. The impact of adding the new programs was fully realized in FY 2014.





**Residential Drug Abuse Treatment Programs and Locations (83):**

**NORTHEAST REGION**

FCI Allenwood –L (PA)  
FCI Allenwood – M (PA)  
USP Canaan (PA)  
FCI Danbury (CT)  
FCI Elkton (OH)  
FCI Fairton (NJ)  
FCI Fort Dix 1 (NJ)  
FCI Fort Dix 2 (NJ)  
FPC Lewisburg (PA)  
FPC McKean (PA)  
FCI Schuylkill (PA)

**MID-ATLANTIC REGION**

FPC Alderson 1 (WV)  
FPC Alderson 2 (WV)  
FCI Beckley (WV)  
USP Big Sandy (KY)  
FCI Butner 1 (NC)  
FCI Butner 2 (NC)  
FCI Cumberland (MD)  
FPC Cumberland (MD)

FMC Lexington 1 (KY)  
FMC Lexington 2 (KY)  
FCI Memphis (TN)  
FCI Morgantown 1 (WV)  
FCI Morgantown 2 (WV)  
FCI Petersburg - M (VA)  
FCI Petersburg - L (VA)

**SOUTHEAST REGION**

FCI Coleman –L (FL)  
USP Coleman II (FL)  
FPC Edgefield (SC)  
FSL Jesup (GA)  
FCI Marianna (FL)  
FCI Miami 1 (FL)  
FCI Miami 2 (FL)  
FPC Miami (FL)  
FPC Montgomery 1 (AL)  
FPC Montgomery 2 (AL)  
FPC Pensacola (FL)  
FCI Tallahassee (FL)  
FCI Yazoo City (MS)

**NORTH CENTRAL REGION**

FPC Duluth (MN)  
FCI Englewood (CO)

FPC Florence (CO)  
FCI Florence (CO)  
FPC Greenville (IL)  
FCI Leavenworth (KS)  
FPC Leavenworth (KS)  
USP Marion (IL)  
FCI Milan (MI)  
FCI Oxford (WI)  
FCI Sandstone (MN)  
MCFP Springfield (MO)  
FCI Terre Haute (IN)  
FCI Waseca (MN)  
FPC Yankton 1 (SD)  
FPC Yankton 2 (SD)

**SOUTH CENTRAL REGION**

FCI Bastrop (TX)  
FPC Beaumont (TX)  
FCI Beaumont – L (TX)  
FCI Beaumont – M (TX)  
USP Beaumont (TX)  
FPC Bryan (TX)  
FMC Carswell 1 (TX)  
FMC Carswell 2 (TX)  
FCI El Reno (OK)  
FMC Fort Worth 1 (TX)  
FCI Forrest City - M (AR)  
FCI Forrest City - L (AR)  
FCI La Tuna (TX)  
FCI Seagoville 1 (TX)  
FCI Seagoville 2 (TX)  
FPC Texarkana (TX)

**WESTERN REGION**

FCI Dublin 1 (CA)  
FCI Dublin 2 (CA)  
FCI Herlong, (CA)  
FCI Lompoc (CA)  
FCI Phoenix (AZ)  
FPC Phoenix (AZ)  
FCI Safford (AZ)  
FCI Sheridan (OR)  
FPC Sheridan 1 (OR)  
FPC Sheridan 2 (OR)  
FCI Terminal Island 1 (CA)  
FCI Terminal Island 2 (CA)



## **Additional Residential Psychology Treatment Programs**

All residential psychology treatment programs utilize empirically supported interventions, including cognitive-behavioral techniques delivered in a modified therapeutic community environment. These programs have been demonstrated to significantly reduce misconduct among program participants.

**The BRAVE Program.** The BOP Rehabilitation and Values Enhancement (BRAVE) Program, a program for young offenders serving lengthy sentences, addresses institutional adjustment, antisocial attitudes and behaviors, and motivation to change. Currently BRAVE programs are located at FCI Beckley and FCI Victorville - Medium. Research results covering the first two years of the BRAVE program found inmates who completed the program reduced misconduct by 52 percent, when compared to similar inmates who did not participate in the BRAVE program.

**The Challenge Program.** The Challenge Program is a residential cognitive-behavioral treatment program for high security inmates with a history of substance abuse and/or mental illness. Inmates may participate in the program at any point during their sentence; however, they must have at least 18 months remaining on their sentence. The duration of the program varies based on inmate need, with a minimum duration of nine months. Challenge Programs are located at 13 BOP penitentiaries.

**Mental Health Treatment Programs.** The BOP offers a variety of specialized mental health treatment programs dedicated to the assessment diagnosis, treatment and management of inmates with serious mental illnesses and complex behavioral problems. Specifically, these programs are designed to reduce distress, improve adaptive functioning, facilitate institutional adjustment, reduce the frequency and seriousness of misconduct, decrease inpatient psychiatric hospitalization, improve interpersonal functioning and increase reentry success. These programs provide intensive, evidence-based mental health services utilizing a cognitive-behavioral treatment model embedded in structured and supportive environments conducive to social modeling, community feedback and physical and psychological safety.

- **Mental Health Step Down Programs.** Mental Health Step Down Programs provide intensive treatment for inmates transitioning from inpatient psychiatric settings or diverting inmates before they require hospitalization. These residential programs are located at FMC Fort Worth (males), FCI Butner (males), USP Allenwood (males), and USP Atlanta (males).
- **Transitional Care Unit.** This residential program supports high security inmates with extensive history of serious mental illness and behavioral dysregulation as they transition from secure treatment settings to a less restrictive environment. It is located at USP Allenwood (males).
- **The Skills Program.** The Skills Program is designed for inmates with significant cognitive limitations and social skills deficits that create adaptive and safety problems in prison and in the community. These residential programs are located at FCI Coleman (males) and FCI Danbury (males).



- **The STAGES Program.** The Steps Toward Awareness, Growth, and Emotional Strength (STAGES) Program is designed to treat inmates who have a diagnosis of Borderline Personality Disorder and have a history of serious behavioral problems and/or self-directed violence. These residential programs are located at FCI Terre Haute (males) and USP Florence (males).
- **The FIT Program.** The Female Integrated Treatment (FIT) Program is a treatment program designed to be responsive to the gender-specific needs of women. It uses an integrated treatment model to address trauma related disorders, mental illness, and substance use disorders. Special emphasis is placed on job skills and reentry. They are located at FSL Danbury (females) and SFF Hazelton (females).
- **The Resolve Program.** The Resolve Program is a non-residential trauma treatment program for inmates. The program was originally developed to address the needs of female inmates with trauma-related mental illnesses, such as post-traumatic stress disorder. This program is located in 13 of the BOP's female institutions and recently expanded to 14 male institutions.

**Sex Offender Management Program.** The BOP's psychology staff also provide Sex Offender Management Programs (SOMPs) for sex offenders during confinement. SOMP is a multi-component program that includes the Sex Offender Treatment Program (SOTP), assessment, specialized correctional management, and population management.

The BOP's sex offender treatment programs are stratified into two program levels: the high-intensity Residential (SOTP-R) and the moderate intensity Non-Residential Sex Offender Treatment Programs (SOTP-NR).

- **The Residential Sex Offender Treatment Program (SOTP-R)** is a high intensity program designed for high risk sexual offenders (ordinarily, inmates with multiple sex offenses, or a history of contact sexual offenses). The SOTP-R is offered at FMC Devens and USP Marion.
- **The Non-residential Sex Offender Treatment Program (SOTP-NR)** is a moderate intensity program designed for low to moderate risk sexual offenders. Many of the inmates in the SOTP-NR are first-time offenders serving a sentence for an internet sex crime. SOTP-NR is available at 8 male institutions and 1 female institution.
- Inmates completing the SOTP-NR and the SOTP-R are expected to participate in community treatment services (if they receive community placement) provided by the Community Treatment Services Section of the National Reentry Affairs Branch.

Since the implementation of the current program model in 2005, 1,690 inmates have completed a Sex Offender Treatment Program. The current program capacity is 348 and 3,558 inmates are awaiting placement in treatment. At the end of FY 2020, approximately 188 inmates were participating in Sex Offender Treatment Programs. To maximize public safety and taxpayer value, the Bureau ensures that programming slots are available for sexual offenders with a moderate-to-high risk of re-offending.



**Commitment and Treatment Program (CTP).** The Adam Walsh Child Protection and Safety Act requires the BOP, Sex Offender Certification Review Branch, to review releasing sex offenders for possible certification as sexually dangerous persons. The BOP has designated FCI Butner as the facility where certified, post-sentence persons and civilly committed sex offenders will be transferred for treatment. Presently, there are 57 civilly committed sex offenders in the CTP. Of these, 23 are participating in the treatment program.

## f. Chaplaincy Services

### **Chaplains**

The BOP employs full-time chaplains in all institutions to accommodate the constitutional right to the free exercise of religion, manage religious programs, and provide pastoral care to inmates and staff. Chaplains routinely evaluate the needs of inmates in the institution and facilitate programs which address those needs. Chaplaincy Services departments offer programs directly related to spiritual development, community reentry, family relationships, personal responsibility, and basic religious instruction. Chaplains provide spiritual programs across the spectrum of faiths represented in the inmate population. Chaplains also train and familiarize staff regarding diverse religious beliefs and practices of inmates, while providing guidance for institution compliance with the First Amendment and legal standard established by the Religious Freedom Restoration Act, the Second Chance Act, and the First Step Act. The passage of the Second Chance Act and First Step Act ushered in the opportunity to utilize mentors to assist in the reentry efforts of ex-offenders back to the community. Mentor Coordinator positions have been allocated at several Life Connections and Threshold Program sites to develop and expand the mentoring components of the programs.

### **Religious Volunteers and Contractors**

Volunteers and contractors participate with chaplains in providing support to the many faith-based programs authorized to meet. Prior to any service rendered, religious volunteers and contractors have credentials verified and are screened through a national volunteer/contractor database to enhance institutional security. All religious volunteers and contractors are monitored consistent with their security clearance.

### **Religious Diet**

A religious diet program is available in the BOP. The religious diet program offers religiously certified foods for those whose religious dietary needs necessitate a certification, and a mainline no-flesh component, which allows inmates to self-select from foods to meet their religious dietary needs.

### **Life Connections and Threshold Programs**

The Life Connections and Threshold Programs offer inmates the opportunity to improve critical areas of their life within the context of their personal faith or value system. Both programs are open to inmates of all faith persuasions, including those who do not claim a religious preference, and who meet the participation criteria.



In FY 2002, the BOP established the Life Connections Program (LCP), an 18-month multi-faith residential program in five institutions. The institutions are FMC Carswell (TX), FCI Leavenworth (KS), FCI Milan (MI), FCI Petersburg (VA), and USP Terre Haute (IN).

The LCP provides opportunities for the development of the participating inmates' faith commitment, with a goal of providing the necessary life skills and tools for successful transition back to their respective communities. The LCP consists of a multi-phase program which instills values and character through a curriculum of personal, social and moral development. Two phases of mentoring, incarceration and post-incarceration phase, are also provided to the LCP inmates. In addition, the program is being carried out in partnership with a broad spectrum of faith-based contractors, volunteers, and community organizations.

Inmates not eligible for the residential LCP have the opportunity to participate in the Threshold program. Threshold is a non-residential spiritual and values-based program taught by chaplains and volunteers over a six to nine month period. This program strengthens an inmate's institutional adjustment and community reentry efforts. In FY 2020, approximately forty institutions offered the Threshold program. This will be maintained through FY 2021 and FY 2022.

## Volunteer Services

The Community Reentry Affairs Branch (CRB) in the Reentry Services Division has oversight for the BOP's volunteer program. Reentry Affairs Coordinators manage volunteer services at their local institution, including: local recruitment, clearance and security compliance, training, file management, and recognition of volunteers. Volunteers provide an array of services – from one-on-one intensive mentoring and structured program and service delivery to transition support in the institutions, RRC's, and into the post-release phase. During FY 2020, the BOP had approximately 10,600 volunteers cleared to provide services at facilities during the year. However, due to the COVID-19 restrictions, only 5,700 provided services while the BOP exercised modified operations. The CRB is developing a web-based volunteer recruiting program targeted at recruiting skilled volunteers in hard to recruit locations. This effort will enhance recruitment efforts to expand volunteer partnerships and reentry programming.

## g. Occupational Safety & Health (OSH)

OSH provides national oversight authority and staff assistance in the following program areas:

- **Occupational Safety**  
Providing technical expertise throughout the BOP for all issues and questions concerning compliance with the Occupational Safety and Health Administration regulations. In addition, this Section conducts audits and provides staff assistance to facilities.
- **Environmental Compliance**  
Providing technical expertise throughout the agency for all issues and questions concerning the environmental management system (EMS). Often, this is accomplished by conducting environmental compliance and EMS audits at all facilities.
- **Fire Protection**



Providing technical expertise throughout the BOP for all issues and questions concerning compliance with the National Fire Codes. In addition, this section provides oversight, coordination, evaluation, and monitoring of policy for all facilities fire protection and life safety projects.

- **Industrial Hygiene**  
Providing technical expertise throughout the BOP for all issues and questions concerning: respiratory protection program, hearing conservation program, air quality, mold, asbestos exposure, personal protective equipment (PPE) and industrial processes.
- **OSHA Recordkeeping as it relates to on the job injuries and reporting**
- **Pre-Employment Medical Assessments**  
Provides the medical and psychological review of all Applicants applying for positions with the Agency and provide medical recommendation for their suitability.
- **Medical/Psychological Fitness for Duty**  
Providing technical expertise throughout the BOP for all issues and questions concerning the Agency's staff and their abilities to perform their duties in a safe manner for all. Coordinates the Agency's Independent Medical Examinations (IMEs) of staff to assess their ability to perform their essential duties.
- **Drug Free Work Place program**  
Providing technical expertise throughout the BOP for all issues and questions concerning compliance with the national guidelines set by Department of Health and Human Service (HHS) and Department of Transportation (DOT) as it relates to Agency's law enforcement mission.
- **Centralized Workers' Compensation Unit & Workers' Compensation case management**  
Providing technical expertise throughout the BOP for all issues and questions concerning compliance with the Federal Employee's Compensation Act (FECA) and management of long-term workers' compensation cases across the bureau.
- **Medical issues as it relates to reasonable accommodation and temporary job modifications.**
- **Employee Health to include addressing outbreaks at institutions which would affect BOP employees and Bloodborne Pathogen Program for staff.**
- **Medical input into reasonable accommodation/medical leave/FMLA/LWOP throughout the BOP.**





2. Performance and Resource Tables

PERFORMANCE AND RESOURCE TABLE											
Decision Unit: Inmate Care and Programs											
RESOURCES		Target		Actual		Projected		Changes		Requested (Total)	
		FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Total Costs and FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		34,623	7,570,000	34,281	7,570,000	35,161	8,008,375	101	-337,982	35,262	7,670,393
TYPE	PERFORMANCE	FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Program Activity	Inmate Care and Programs	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		12,345	2,894,685	12,221	2,894,685	12,628	3,075,199	84	-85,526	12,712	2,989,673
Performance Measure	# of Inmates Completing Literacy Program	3,000		1,877		3,000		300		3,300	
Performance Measure	# of Inmates Participating in the Residential Drug Abuse Treatment Program	15,000		11,556		14,000		1,000		15,000	

**Data Definition:** Currently, the Literacy Program measure identifies the number of inmates receiving a certificate for completing the General Educational Development (GED) program. The GED Tests measure high school level skills and knowledge. The GED credential is the most widely accepted high school equivalency credential. The Residential Drug Abuse Program (RDAP) measure is the projected number of BOP inmates who participated in the RDAP within the Fiscal Year.

**Data Validation and Verification:** Institution education staffs verify and record inmates' high school or General Educational Development (GED) attainment in the SENTRY Education Data System when inmates enter BOP custody, or when they pass the GED Tests and obtain a high school equivalency credential. GED completion data is provided by the GED Testing Service, American Council on Education. GED completion information is posted in the BOP's internal Website (intranet) monthly and all agency personnel have access to the information. Data is collected/entered into the BOP's SENTRY data system and the Bureau Electronic Medical Record (BEMR). Data is collected/entered primarily by Case Managers, Drug Abuse Treatment Specialists and Drug Abuse Treatment Coordinators in the institutions. SENTRY data tracks the inmate's status in RDAP. BEMR tracks the inmate's clinical progress, including: treatment plans; 60 day treatment reviews; group contacts; individual contacts; treatment summaries, etc. Current and historical data uploads from SENTRY are provided monthly. (Although weekly data is available for current participants, it is necessary to use the monthly files to match the historical data). A Statistical Analysis Software (SAS) program was written to identify the number of offenders in BOP custody who were identified in SENTRY as DAP PART (Drug Abuse Program Participation) or DAP PART D (Drug Abuse Program Participation Dually Diagnosed – Mental Illness and Drug Abuse) or DAP PART S (Drug Abuse Program Participation Spanish – Non-English speaking US Citizens) assignments for the current Fiscal Year. Both SENTRY and BEMR are stored electronically. Signed documents are inserted in the inmate's Central File and in some cases scanned and digitally stored in BEMR. Completion numbers are monitored by field education staff via monthly GED statistical reports posted on the agency's intranet. Validation is conducted by the Drug Abuse Program Coordinator through regular treatment meetings, supervision and inmate file and data reviews. Data Verification is conducted through SENTRY data which are monitored by Central Office and the Regional Offices no less than monthly. Also verification is done through routine review of BEMR records in the course of daily activities of inmate documentation related to the RDAP. Examples of reviews conducted include, but are not limited to: programs are operating as intended; participant status and progress are documented appropriately; BEMR documentation meets the clinical standard as outlined by policy and training; inmates are interviewed for RDAP appropriately; and to ensure all inmates qualified for the RDAP are receiving the RDAP before their release from BOP custody.

**Data Limitations:** Due to the unpredictable environment in prisons, uncertain funding, and other external factors, there may be discrepancies between projected and actual numbers. Most plans are developed based on historical data, past experience and joint agency efforts to project for the future.

# Federal Bureau of Prisons



PERFORMANCE MEASURE TABLE									
Decision Unit: Inmate Care and Programs									
Performance Report and Performance Plan Targets		FY 2016	FY 2017	FY 2018	FY 2019	FY 2020		FY 2021	FY 2022
		Actual	Actual	Actual	Actual	Target	Actual	Target	Target
<b>Performance Measure</b>	Increase the # of Inmates Completing Literacy Program	6,456	2,667	3,249	2,857	3,000	1,877	3,000	3,300
<b>Performance Measure</b>	# of Inmates Participating in the Residential Drug Abuse Program	17,848	16,641	15,619	14,932	15,000	11,556	14,000	15,000

### 3. Performance, Resources, and Strategies

#### a. Performance Plan and Report for Outcomes

Number of Inmates Completing Literacy Program: This measure identifies the number of inmates enrolled in a high school equivalency program receiving a certificate for successfully completing the General Educational Development (GED) assessment. The GED offers adults who did not complete traditional high school an opportunity to pursue education and career opportunities once released to the community. Additionally, beginning in FY 2017 the Bureau accepted non-GED credentials earned through passing the HiSet and TASC high school equivalency tests.

In January 2014, a new version of the GED test was released with modified content and a computer-based delivery method. As of September 2018, all BOP GED testing centers were converted to computer-based GED testing and the agency saw an increase in computer-based testing completions for that fiscal year. In FY 2020, the agency fell short of meeting the goal of 3,140 high school equivalency credentials obtained by 1,263, due largely to the BOP's declining inmate population. For FY 2021, the BOP is projecting 3,000 completions, and the FY 2022 projection is 3,300 completions.

As part of converting paper-based GED testing to computer-based testing, each BOP institution has been provided with a variety of resource materials designed to assist teachers in guiding students to successful certificate attainment and monitoring their learning progress. The GED Testing Service provides an 8-hour, hands-on training for the new assessment content to all education staff responsible for GED instruction, consistent with funding availability, at the agency's National Corrections Academy in Aurora, Colorado. Training on the modified content is ongoing, and professional development is available through Bureau Learning University (an in-house learning system) intranet posting, as well as in person training sessions. This training takes educators through an overview of the new GED 2014 test standards, instructional practices, and evidence based writing using the BOP's standardized GED 2014 textbooks.

Number of Inmates Participating in the Residential Drug Abuse Treatment Program (RDAP): In FY 2020, the number of inmates participating in RDAP was 11,556. The BOP missed the target by 3,444 inmates, due largely to the BOP's modified operations as a result of the COVID-19 pandemic. The BOP is projecting 14,000 participants in FY 2021 and 15,000 in FY 2022.

## **b. Strategies to Accomplish Outcomes**

The BOP will continue to provide productive work, education, occupational training, and recreational activities that have a clear correctional management purpose to minimize inmate idleness, while preparing inmates for employment opportunities and a successful reintegration upon release. The BOP will develop and provide programs to address inmates' identified needs and target inmates with the highest risk of recidivating.

The agency's strategy includes a strong component of partnership building with community organizations, state, local, and other federal agencies. The partnerships provide inmates with an increased level of continuity of care, as well as access to resources to assist with housing, employment, and medical and mental health care.

### *Drug Abuse Treatment*

The BOP continues to develop evidence based treatment practices to manage and treat drug-using offenders. The BOP's strategy includes early identification through a psychology screening, drug education, non-residential drug abuse treatment, medication-assisted treatment, intensive residential drug abuse treatment, and community transition treatment, as discussed earlier.



## B. Institution Security and Administration

<b>Institution Security and Administration</b>	<b>Direct Pos.</b>	<b>Estimate FTE</b>	<b>Amount</b>
2020 Enacted	23,507	20,864	3,467,547
2021 Enacted	23,507	21,299	3,637,012
Adjustments to Base and Technical Adjustments	0	0	-179,584
2022 Current Services	23,507	21,299	3,457,428
2022 Program Increases	0	0	0
2022 Request	23,507	21,299	3,457,428
<b>Total Change 2021-2022</b>	<b>0</b>	<b>0</b>	<b>-179,584</b>

### 1. PROGRAM DESCRIPTION: Institution Security and Administration

This budget activity covers costs associated with Institution Security and Administration, Institution Maintenance, and Institution Staff Training.

For FY 2022, the BOP is requesting \$1.9 billion for Institution Security, \$733.4 million for Institution Administration, \$750.7 million for Institution Maintenance, and \$41.7 million for staff training.



#### a. Institution Security and Administration

All institutions are assigned a security classification level based in part on the physical design of each facility. There are four security levels: minimum, low, medium, and high. Additionally, there is an administrative category for institutions with a variety of specialized populations, such as pre-trial, medical, mental health, and sex offenders. Based on BOP research, female offenders generally do not require the same degree of security as male offenders. Therefore, a modified classification system is used for female inmates. Females may also be placed in state and local facilities.

Each inmate is tracked through BOP's SENTRY Information System. Offenders are assigned a security and custody status, which relates to the degree of supervision needed and ensures that offenders are placed in the least restrictive and least costly correctional environment appropriate to their custody and security level needs. The result is a grouping of offenders with similar custodial needs in an institution, and a relative reduction in the mixing of aggressive and non-aggressive offenders.

Within each institution, Correctional Officers are assigned to security posts that are primarily established on the basis of structural/visual considerations. The two basic categories of security are external security and internal security. External security consists of a walled or fenced perimeter supplemented by staffed security towers and/or armed mobile perimeter patrols. There is also razor wire strung between a double fence with high mast lighting to illuminate the perimeter, highly technical equipment such as alarm systems, and video surveillance. Entrances



through the perimeter are controlled by a series of gates, electrical and manual, supplemented by metal detection systems and search procedures for weapon and contraband control. BOP has fully incorporated Closed Circuit Television technology in its institutions, which has enhanced supervision and provides valuable intelligence in the management of federal inmates. For practical purposes, all other security measures, processes, and activities can be called internal security, commencing when an inmate is admitted and terminating upon his or her release.

Staff supervise inmates in living units, work areas, visiting areas, dining halls, and any other area where inmates may be located or have access. Regularly scheduled counts are conducted several times a day (five on weekdays, six on weekends) in all institutions to monitor the whereabouts of inmates. Work supervisors and program personnel are held strictly accountable for all inmates under their supervision.

Violations of institution regulations are handled through the Inmate Disciplinary Process. Correctional staff members conduct investigations of the alleged misconduct and forward the findings to the Unit Discipline Committee. Depending on the seriousness of the charge, the Unit Discipline Committee will make a finding, or refer the report to the Discipline Hearing Officer for disposition. When practical, inmates have the opportunity to participate in, and present evidence at a due process hearing before findings are made. Inmates may appeal these decisions using the administrative remedy process.

Administrative Detention provides for the separation of inmates who require closer supervision and monitoring from those in the general population. Such cases include, but are not limited to, protective custody, serious escape risks, and threats to the security and orderly running of the institution. Disciplinary Segregation provides for segregation of offenders found guilty of violations of rules through the Inmate Disciplinary Process.

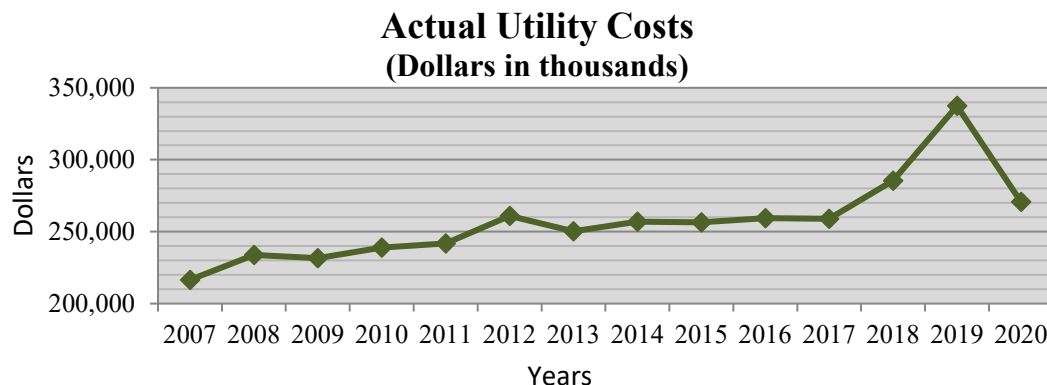
Investigative staff members continue to gather and share a wide variety of intelligence information and products with other law enforcement entities. Staff members are routinely forwarding counter terrorism intelligence data and referrals to the National Joint Terrorism Task Force; local Joint Terrorism Task Force(s); Federal Bureau of Investigation (FBI) Counterterrorism Division; and Central Intelligence Agency liaison personnel. Additionally, a significant amount of data regarding inmate financial transactions, telephone calls, and correspondence is available to law enforcement entities through the Department of Justice's Law Enforcement Information Sharing Program (LEISP).

***b. Institution Maintenance***

The Facility Maintenance program adequately maintains and safely operates the physical plants of BOP institutions. Facilities vary in age from those recently constructed to those 100 or more years old. Thirty-six of the BOP facilities are over 50 years old. As of March 2021, BOP facilities are situated on 46 thousand acres of land and contain approximately 66 million square feet of floor area, all of which must be maintained and furnished with utility services. Each institution maintains communication systems including complete private automatic branch exchange telephone systems, radio systems including base station and mobile units, and several electronic detection and control systems.



Complex heating and air conditioning systems, high pressure steam power plants, sophisticated hospital equipment, emergency electrical power systems and fire protection, and life safety systems all require regular maintenance. The following graph illustrates the obligations for actual non-salary utility costs, with about \$271 million incurred in FY 2020.



Note: Several Energy Savings Performance Contracts were fully paid in Fiscal Year 2019, resulting in the larger than normal difference between FY 2019 and FY 2020.

Physical plant requirements are identified through regular inspections conducted in the on-going preventive maintenance program, formal semi-annual inspections, and requests for specific needs identified by institution staff members. This program finances maintenance and minor improvement projects that normally cost \$10,000 or less. However, there are policy guidelines that allow funding of maintenance projects (work requests) costing more than \$10,000 in certain circumstances. Some exceptions would include emergencies or security threats such as hurricanes or disturbances. Maintenance and repair requirements in excess of \$10,000 are normally included in the "Modernization and Repair" program of the Buildings and Facilities budget.

Inmate crews under staff supervision accomplish the work within the maintenance program almost entirely. Each work crew consists of a staff foreman and 10 to 20 inmates. Each institution must have highly skilled staff with experience and training in every phase of construction and maintenance work including steam fitting, air conditioning, mechanics and/or electronics repair. A few specific jobs are contracted out because special skills or equipment items are required, or because the work may be extremely dangerous. Examples of these jobs include elevator inspection and repair, radio frequency alignment, and water tower painting.

**c. Institution Staff Training**

*The Staff Training Academy (STA) at the Federal Law Enforcement Training Center (FLETC) in Glynco, Georgia, provides introductory and advanced correctional training for BOP law enforcement staff. The Introduction to Correctional Techniques (ICT) program is a five-week program for a total of 184 hours of instruction that is taught in two phases. Phase I consists of two weeks of training at the institution and Phase II consists of a three-week training program at the STA.*





The STA oversees the curriculum development and administration of the three week (104 hours) ICT Phase II course. ICT, Phase II consists of 80 hours of program instruction that covers correctional supervision principles, national policy guidelines, interpersonal communication skills, offender characteristics, principles of diversity and inclusion, legal issues, self-defense techniques, hostage situations, ethics, special offenders, inmate discipline, practical exercises, physical abilities testing, and 24 hours of firearms training and certification with three different weapons. Successful completion of this program (academics, firearms, and the Physical Abilities Test) is required for continued employment of newly hired staff entering into law enforcement positions.

The STA provides advanced correctional skills training in disturbance control, firearms, bus operations, self-defense, baton, marksman/observer, and witness security escort. The Academy also provides training for trainers in cardiopulmonary resuscitation (CPR), automated external defibrillator (AED), disturbance control, firearms, self-defense, baton, and marksman/observer.

*The Management and Specialty Training Center (MSTC)* in Aurora, Colorado, provides senior level training courses, Distance Learning programs and audio visual products for the BOP. The training offered at the MSTC is competency-based, providing participants the opportunity to progressively develop leadership skills and specialty competencies. A wide range of courses are available for institution Executive Staff, Department Heads, Supervisors, and Technical Support Staff. These courses include training for Correctional Services, Correctional Programs, Food Service, Finance, Human Resources, Education, Drug Treatment, Psychology, Religious Services, Trust Fund, and many other training specialties. In addition to preparing staff for position specific responsibilities, the MSTC also provides training in collateral responsibilities such as: Hostage Negotiations, Discipline Hearing Officer, and EEO Counselor, among others. All classes are evaluated for effectiveness, and an analytical review of participant performance is conducted through a critique of pre/post test scores or performance-based evaluations.

The MSTC (part of the National Corrections Academy along with the National Institute of Corrections) serves as host to large scale training events for most BOP disciplines as well as a focal point for collaboration in training development and delivery with other DOJ agencies. The BOP's History Museum, which captures the agency's rich history and traditions through various displays including documents, pictures, and artifacts, is hosted at the National Corrections Academy, under the direction of the MSTC, to increase its availability to approximately 10,000 state, local, and federal correctional professionals that come to the NCA/MSTC annually.

To maximize the use of training funds, the MSTC develops and provides several alternatives to residential courses that include Distance Learning programs via web-based courses on BOP-Learn, video productions, and videoconferencing. With the addition of various new technologies, the MSTC has improved capabilities in audiovisual services, video on demand, versatile classroom configurations, high-definition videoconferencing, and state-of-the-art classroom technologies.

*The Human Resource Services Center (HRSC)* located in Grand Prairie, Texas, is comprised of four components: the Consolidated Processing Unit, the Consolidated Benefits Unit, the

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Consolidated Staffing Unit, and the Security and Background Investigation Section. The HRSC supervises and directs the overall management of Human Resources shared services for the Central Office, 6 Regional Offices, and 122 institutions that employ more than 36,000 staff.



## 2. Performance and Resource Tables

PERFORMANCE AND RESOURCE TABLE											
Decision Unit: Institution Security and Administration											
RESOURCES		Target		Actual		Projected		Changes		Requested (Total)	
		FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Total Costs and FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		34,623	7,570,000	34,281	7,570,000	35,161	8,008,375	101	-337,982	35,262	7,670,393
TYPE	PERFORMANCE	FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Program Activity	Institution Security and Administration	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		21,072	3,467,547	20,864	3,467,547	21,299	3,637,012	0	-179,584	21,299	3,457,428
Performance Measure	Rate of serious assaults in Federal Prisons (Rate/5,000)*	11		6		11		0		11	
Performance Measure	% of staff on-board at BOP Inst.	88%		90%		90%		2%		92%	
Performance Measure	Medium & high security crowding	Med = 20% High = 15%		Med = 8% High = 17%		Med = -2% High = 5%		Med = -3% High = 0%		Med = -5% High = 5%	
Outcome	Escapes from Secure Institutions	0		0		0		0		0	
Outcome	System-wide Crowding	12%		-6%		-13%		-1%		-14%	

\*Due to the time required to adjudicate allegations of assaults, there is a lag between the occurrence and reporting guilty findings. Therefore, the figures reported represent incidents that were reported for the preceding twelve months ending several months before the end of the FY. Beginning with the FY 2007 data, data focused on the rate of serious assaults (inmate on inmate per 5,000), which is a more meaningful safety indicator for BOP facilities.

**Data Definition:** Reported assault rate is based on guilty findings of serious assaults. Serious assaults involve serious physical injury being attempted or carried out by an inmate, as well as armed assaults on the institution's secure perimeter. The crowding levels are based on a mathematical ratio of the number of inmates divided by the rated capacity of the institutions at each of the specific security levels. The percent of crowding represents the rate of crowding that is over rated capacity. For example, if an institution had a number of inmates that equaled the rated capacity, this would represent 100% occupancy, which equals 0% crowding. Any occupancy above 100% represents a percentage of crowding. System-wide: represents all inmates in BOP facilities and all rated capacity, including secure and non-secure facilities, low, medium, and high security levels, as

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well as administrative maximum, detention, medical, holdover, and other special housing unit categories. **Medium security facilities:** strengthened perimeters, mostly cell-type housing, work and treatment programs and a lower inmate-to-staff ratio than low security facilities. **High security facilities:** also known as U.S. Penitentiaries, highly secure perimeters, multiple and single cell housing, lowest inmate-to-staff ratio, close control of inmate movement. All BOP institutions are assigned a security classification level based in part on the physical design of each facility. Additionally, there is an administrative category for institutions that house a variety of specialized populations such as pre-trial, medical, mental health, and sex offenders. Low, medium, and high security levels and administrative institutions are defined as “secure,” based on increased security features and type of offenders designated.

**Data Validation and Verification:** The most senior managers in the agency conduct annual reviews of institution performance including assaults and other misconduct. Additionally, during Program Reviews (which are conducted at least every three years), annual operational reviews, and Institution Character Profiles (which are conducted every three years), reviews of assaults and other misconduct patterns are accomplished. The SENTRY system is the BOP’s operational data system, whereas the Management Analysis Portal (MAP) aggregates the SENTRY data and provides an historical perspective. Subject matter experts review and analyze population and capacity levels daily, both overall and by security level. BOP institutions print a SENTRY report, which provides the count of inmates within every institution cell house. The report further subdivides the cell houses into counting groups, based on the layout of the institution. Using this report, institution staff conduct an official inmate count five times per day to confirm the inmate count within SENTRY. The BOP Capacity Planning Committee (CPC), comprised of top BOP officials, meets quarterly to review, verify, and update population projections and capacity needs for the BOP. Offender data are collected regularly from the Administrative Office of the U.S. Courts by the BOP Office of Research and Evaluation in order to project population trends. The CPC reconciles bed space needs and crowding trends to ensure that all available prison space is fully utilized, both in federal prisons and in contract care. The most senior managers in the agency conduct annual reviews of institution performance including escapes. Additionally, during Program Reviews (which are conducted at least every three years), annual operational reviews, and Institution Character Profiles (which are conducted every three years), reviews of escapes (including attempts) are conducted, along with other inmate misconduct. Data for the rate of serious assaults is collected from the BOP’s operational computer system (SENTRY), specifically the Chronological Disciplinary Record (CDR) module, which records all disciplinary measures taken with respect to individual inmates. This data is maintained and stored in the BOP’s management information system (MAP and the Institution Management Dashboard), which permits retrieval of data in an aggregated manner. The data represents guilty findings of serious assaults on inmates. Data for the escape measure are taken from the Significant Incident Reports submitted by the institution where the incident occurred. This has become an automated process, which went nationwide in August of 2009, known as the TruIntel system. The data is captured in data sets and made available to the Office of Research and Evaluation, which analyzes the data and makes the escape information available through the MAP, specifically the Institution Management Dashboard. Data are gathered from several computer systems. Inmate data are collected on the BOP on-line system (SENTRY). The BOP also utilizes a population forecast model to plan for future contracting and construction requirements to meet capacity needs.

**Data Limitations:** The data represents the number of guilty findings for assaults over a twelve-month period per 5,000 inmates. Due to the time required to adjudicate allegations of assault, there is a lag between the occurrence of the assault and reporting of guilty findings. Due to accelerated reporting requirements (within 15 days of quarter and fiscal year end) and to provide a more accurate assault rate, the BOP is using 12 months of completed/adjudicated CDR data for each quarter and end of fiscal year reporting, showing 12 month periods ending the last month of the previous quarter. Due to the unpredictable environment in prisons and other external factors, there may be discrepancies between projected and actual numbers contained in the performance tables. Most plans are developed based on historical data, past experience and joint agency efforts to project for the future. In addition, budget delays and shortfalls also affect performance results.



PERFORMANCE MEASURE TABLE									
Decision Unit: Institution Security and Administration									
Performance Report and Performance Plan Targets		FY 2016	FY 2017	FY 2018	FY 2019	FY 2020		FY 2021	FY 2022
		Actual	Actual	Actual	Actual	Target	Actual	Target	Target
<b>Performance Measure</b>	Rate of serious assaults in Federal Prisons (Rate /5,000)	7/5,000	6/5,000	6/5,000	6/5,000	11/5,000	6/5,000	11/5,000	11/5,000
<b>Performance Measure</b>	Increase the % of staff on-board at BOP institutions to facilitate programming and maintain safety and security	89%	97%	88%	88%	88%	90%	90%	92%
<b>Performance Measure</b>	Manage medium & high security crowding to assess needs for additional staff and beds	M = 22% / H = 31%	M = 18% / H = 24%	M = 17% / H = 26%	M = 20% / H = 15%	M = 20% / H = 15%	M = 8% / H = 17%	M = -2% / H = 5%	M = -5% / H = 5%
<b>OUTCOME Measure</b>	Escapes from Secure Institutions	0	1	0	0	0	0	0	0
<b>OUTCOME Measure</b>	System-wide Crowding	16%	13%	13%	12%	12%	-6%	-13%	-14%



### 3. Performance, Resources, and Strategies

#### a. Performance Plan and Report for Outcomes

Escapes from Secure Institutions: As illustrated in the preceding Performance and Resource Table, the outcome measure for the Institution Security and Administration decision unit is “Escapes from Secure Institutions.” In FY 2020, the BOP had zero escapes and the performance targets for FY 2021 through FY 2022 will remain at zero. It should be noted that minimum security or camps are not classified as secure institutions.

Rate of Serious Assaults in Federal Prisons: Every reasonable precaution is taken to ensure that inmates are provided with a safe and secure environment in facilities according to their needs. While it is the objective of the Department and BOP to eliminate all serious assaults, the target reflects projections based on historical data and observed trends. These data represent the number of serious assaults over a 12-month period per 5,000 inmates. Due to the time required to adjudicate allegations of assault, there is a lag between the occurrence and reporting guilty findings. Accordingly, the figure reported represents incidents that were reported for the preceding 12 months ending several months before the end of the fiscal year. BOP was within its target for FY 2020 with 6/5,000 serious assaults. For FY 2021 through FY 2022 the target will remain at 11/5,000. To enhance safety, we added a second officer to the housing units at our high-security institutions and issued stab resistant vests for all staff at high-security institutions, detention centers, and jail units. Pepper spray has been issued to all staff at high and medium security institutions, detention centers, medical centers, and jail units, and cut and puncture resistant gloves have been made available to all staff for use when conducting searches. The Bureau also continued deploying new contraband-detecting technologies, including thermal fences, enhanced walk-through metal detectors, and whole-body imaging devices. These changes help keep our staff safe, and that helps keep America safe.

Percentage of Staff On-board at BOP Institutions: This measure provides the percentage of staff on-board compared to the number of positions at BOP facilities. In FY 2020, the BOP’s actual percentage of staff on board at BOP facilities was 90 percent. The BOP’s target for FY 2021 will be 90 percent of authorized positions, and 92 percent for FY 2022.

Medium and High Security Crowding Conditions: BOP facilities continue to have high crowding rates at high security facilities which is a contributing factor to increases in the number of serious assaults. The focus with this measure is to manage overcrowding in prisons and ensure inmate care and safety, as well as the safety of BOP staff and surrounding communities. System-wide crowding is a percentage derived from dividing the number of inmates by the rated capacity (beds) of BOP facilities.



BOP’s medium and high security crowding level projections for FY 2021 through FY 2023 are:

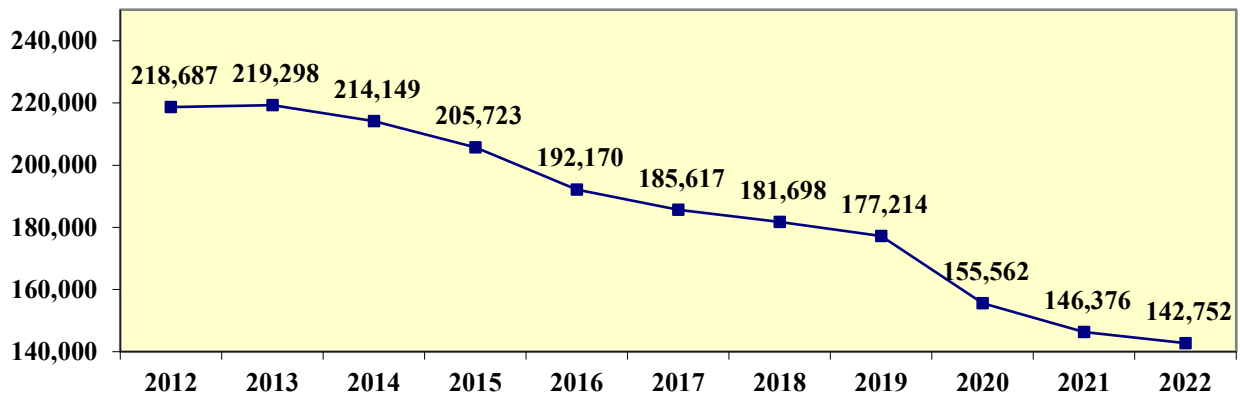
**Medium Security Targets**

FY 2021 – -2 percent  
 FY 2022 – -5 percent  
 FY 2023 – -6 percent

**High Security Targets**

FY 2021 – 5 percent  
 FY 2022 – 5 percent  
 FY 2023 – 3 percent

**POPULATION GROWTH**



Notes on Population Data:

The chart above includes actual population for FY 2012 through FY 2020 and projected population numbers for FY 2021 through FY 2022. The population projections are based on data and information from a variety of sources including the Administrative Office of the U.S. Courts, the U.S. Sentencing Commission, other DOJ components, and the BOP's own information system (SENTRY).

**b. Strategies to Accomplish Outcomes**

The BOP will continue to explore opportunities to add capacity efficiently and cost-effectively through expansions of existing facilities, the acquisition and conversion of military and other properties to prison use, and the use of contract facilities, as funding permits. Through the on-going maintenance program (Modernization and Repair), the BOP maintains the infrastructure of federal prisons to promote the safety of Correctional Officers and inmates. The BOP will continue to monitor staffing ratios, inmate misconduct, and schedule regular American Correctional Association accreditation/re-accreditation for its facilities. The BOP will strive to increase staffing to enhance safety as funding permits.



## C. Contract Confinement

Contract Confinement	Direct Pos.	Estimate FTE	Amount
2020 Enacted	299	268	947,447
2021 Enacted	309	276	968,356
Adjustments to Base and Technical Adjustments	0	5	-79,303
2022 Current Services	309	281	889,053
2022 Program Increases	0	0	0
2022 Request	309	281	889,053
<b>Total Change 2021-2022</b>	<b>0</b>	<b>5</b>	<b>-79,303</b>

### 1. PROGRAM DESCRIPTION: Contract Confinement

This budget activity covers costs associated with BOP inmates in contract care, costs associated with management, and oversight of contract confinement functions (and for the National Institute of Corrections). As of March 25, 2021, 17.3 percent of the BOP inmate population is housed outside of BOP facilities in alternative confinement. This includes private prisons, Residential Reentry Centers (RRCs or halfway houses), state and local facilities, and home confinement. In 2013, the Residential Reentry Management (RRM) Branch implemented a management consolidation from six regions to three sectors. The RRM Branch now provides management oversight to three sector management teams that in turn provide oversight to the 23 RRM field office locations throughout the nation.

The following chart provides estimated funding (dollars in thousands) amounts for key programs funded in the Contract Confinement decision unit:

Program Area	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Residential Reentry Centers	\$377,646	\$411,588	\$342,466	\$352,883	\$357,596
Private Prisons	\$564,912	\$451,922	\$450,904	\$454,560	\$454,330

#### a. Residential Reentry Centers (RRCs)

RRM staff oversee contracted community-based confinement facilities nationwide, as well as provide case management services for inmates and perform liaison activities with the U.S. Marshals Service (USMS), U.S. Probation Office, U.S. Parole Commission (USPC), Federal Courts, other federal agencies, and state and local government agencies.

Since January 1982, the number of inmates managed in contract RRCs and home confinement placement has increased from a daily population of 1,425 to a daily population of 13,736 as of March 25, 2021. The BOP has approximately 195 RRCs throughout the





nation which provide services to federal offenders, all of whom are preparing for their release to the community. These inmates are transferred from federal institutions to RRCs near the end of their sentence for transitional programming. Gainful employment and the reestablishment of family ties are the major aspects of transitional programs. Home confinement is the last phase of incarceration for offenders who have demonstrated personal responsibility and positive programming while in BOP custody. Strict accountability procedures are required for inmates on home confinement to continue the sanction of the sentence.

b. Privatized Facilities

Since the mid-1980s, the BOP has contracted for the confinement of sentenced offenders in secure facilities. This improved BOP's flexibility to manage a rapidly growing inmate population and to help control crowding, especially in the BOP's low security facilities. The BOP has found that contract confinement is particularly suited to low and minimum security offenders. As of September 3, 2020, 96 percent of the inmates housed in the BOP contract facilities are low security, sentenced criminal aliens.

The BOP remains vigilant and continues to monitor, evaluate, and make appropriate changes to the management and oversight of contracts. The centralized oversight and administration of these facilities ensures consistent, cost effective contract administration procedures across various regions and for different types of contracts.

Through the Privatization Management Branch (PMB), the BOP oversees the operation of secure contract facilities. Contracts are with private companies for facility operations. Staff from the PMB ensure that contractors adhere to established performance standards and facilitate communications between contract facilities and the BOP. The BOP is the largest user of secure contract confinement among all correctional jurisdictions in the country, with more than 11,000 inmates in 10 privately managed secure facilities as of March 2021. Additionally, over 14,000 inmates are in RRCs, home detention, short-term detention, juvenile facilities, or long-term boarder facilities operated by state correctional departments.

Consistent with Executive Order (E.O.) 14006, the BOP is not resoliciting any expiring contracts with private detention facilities. The BOP projects to vacate 10 private facilities between January 2021 and September 30, 2022. There will be one private facility remaining under contract at the end of FY 2022, which is projected to be vacated on November 30, 2022. The inmates housed at private detention facilities will be transferred to various BOP facilities throughout the country. The projected savings from E.O. 14006 are \$78 million in FY 2021 and \$75 million in FY 2022.

Several categories of federal offenders (including inmates who are under probation or supervised release but need more intensive services and/or programs than can be provided under probation) are confined in smaller numbers in state, local, and private facilities. There are approximately 13 juveniles who must be separated from adult offenders and are placed as close to their respective residence as possible in state, local, and privately run community-based and secure facilities. Adult offenders whose lives might be endangered in federal facilities (protection cases) are placed in state correctional facilities. Offenders



whose short sentences preclude transfer to a federal facility are placed in local jails to serve their sentences.

Approximately 17 percent of the BOP inmate population are non-U.S. citizens. The BOP, ICE, and the Executive Office for Immigration Review (EOIR) work together to facilitate the Enhanced Institution Removal Programs (IRPs), first implemented in 1997. Fourteen institutions and contract facilities provide either TeleVideo capabilities or courtroom and office space for ICE and EOIR staff to process and complete deportation decisions. The expansion of TeleVideo is progressing within the BOP facilities. The goal of the IRP is to complete removal proceedings for non-U.S. citizen inmates while serving their sentence, thus allowing ICE to remove them from the U.S. immediately upon release from BOP custody. As a result, ICE can minimize the number of non-U.S. citizen inmates detained after expiration of their sentence, and the BOP can manage its inmate population more efficiently by anticipating the needs of inmates who have a current order of deportation.

Following are Central Office functions for the Residential Reentry Management Branch, Privatization Management Branch, and the National Institute of Corrections:

*The Residential Reentry Management Branch (RRMB)* is responsible for the general program, policy development, and monitoring for contractual compliance for the BOP's network of approximately 195 RRCs to include contracted facilities as well as those under agreements with state, county or local governmental agreements. RRMB field office staff also review approximately 50,000 referrals for RRC placement each year and monitor each placement until the offender is released from BOP custody. RRMB also works with the contracting branch to offer technical assistance in the acquisition process for RRC services. The three branch sector management teams provide technical assistance to the BOP's 23 RRM offices in the areas of contract oversight, case management and inmate systems management. Responsibility for the BOP's network of contract confinement facilities for federal juvenile offenders also rests with the RRMB.

In addition, RRMB maintains the Memorandum of Understanding (MOU) with the U.S. Marshals Service and the Administrative Office of the U.S. Courts; and administers the MOU with the DC Department of Corrections regarding DC code violations.

*The Privatization Management Branch (PMB)* has overall responsibility for the administration of privately-operated secure adult correctional facility contracts. The BOP has been contracting with the private sector to help manage its inmate population throughout its more than 75- year history. Contracting with the private sector provides the BOP with the flexibility in managing its inmate population. Activation or cancellation of contract facilities can be relatively quick in response to shifting population pressures.

The PMB coordinates the BOP's efforts in managing a population of more than 11,000 inmates located in contractor operated secure correctional facilities. Staff from this branch oversee the management and operation of facilities, develop new requirements; establish policy and procedures; develop and manage contract budgets; and serve as liaisons between the contractors and the BOP and other members of the federal family.



c. National Institute of Corrections (NIC)

Also included in this decision unit is the National Institute of Corrections, a federal entity that is authorized by statute 18 USC 4351, to provide training, technical assistance, and information services to federal, state, and local correctional agencies, including the BOP. NIC provides technical assistance by sending a technical resource provider and/or staff to the requesting agency, or an individual or team of individuals from the requesting system visits another agency to gain expertise and experience in the specific area of concern.

NIC also provides corrections leaders and staff with information to improve and support their public safety operations. The NIC Information Center is the dedicated information science and curation arm of the agency. It includes the Robert J. Kutak Memorial Library located at the National Corrections Academy and the NIC website at [www.nicic.gov](http://www.nicic.gov). The Center manages over 9,950 corrections and relevant management resources, with additional external sources available directly through the website. These resources were accessed online and through the Help Desk by corrections practitioners approximately 1.1 million times in FY 2020.



**2. Performance and Resource Tables**

PERFORMANCE AND RESOURCE TABLE											
Decision Unit: Contract Confinement											
RESOURCES		Target		Actual		Projected		Changes		Requested (Total)	
		FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Total Costs and FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		34,623	7,570,000	34,281	7,570,000	35,161	8,008,375	101	-337,982	35,262	7,670,393
TYPE	PERFORMANCE	FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Program Activity	Contract Confinement	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		268	947,447	268	947,447	276	968,356	5	-79,303	281	889,053
Workload Measure	#/% of Contract Beds	27,863 / 16%		28,818 / 19%		21,752 / 15%		713 / 1%		22,465 / 16 %	
<p><b>Data Definition:</b> The BOP utilizes privately operated facilities, bed space secured through Intergovernmental Agreements with state and local entities, and community based housing such as Residential Reentry Centers (RRCs or halfway houses) and home confinement.</p> <p><b>Data Validation and Verification:</b> Subject matter experts review and analyze population and capacity levels daily, both overall and by security level. BOP institutions print a SENTRY report, which provides the count of inmates within every institution cell house. The report further subdivides the cell houses into counting groups, based on the layout of the institution. Using this report, institution staff conduct an official inmate count five times per day to confirm the inmate count within SENTRY. The BOP Capacity Planning Committee (CPC), comprised of top BOP officials, meets quarterly to review, verify and update population projections and capacity needs for the BOP. Offender data are collected regularly from the Administrative Office of the U.S. Courts by the BOP Office of Research and Evaluation in order to project population trends. The CPC reconciles bed space needs and crowding trends to ensure that all available prison space is fully utilized, both in federal prisons and in contract care. Data are gathered from several computer systems. Inmate data are collected on the BOP on-line system (SENTRY). The BOP also utilizes a population forecast model to plan for future contracting and construction requirements to meet capacity needs.</p> <p><b>Data Limitations:</b> None known at this time.</p>											



PERFORMANCE MEASURE TABLE									
Decision Unit: Contract Confinement									
Performance Report and Performance Plan Targets		FY 2016	FY 2017	FY 2018	FY 2019	FY 2020		FY 2021	FY 2022
		Actual	Actual	Actual	Actual	Target	Actual	Target	Target
<b>Workload Measure</b>	#/% of Contract Beds	35,904/ 19%	31,562/ 17%	28,407/ 16%	27,513/ 16%	27,863/ 16%	28,818 / 19%	21,752/ 15%	22,465 / 16%



### **3. Performance, Resources, and Strategies**

#### **a. Performance Plan and Report for Outcomes**

The BOP ended FY 2020 with 28,818 inmates in contracted beds, which was 19 percent of the total BOP population. The BOP is projecting 21,752 inmates in FY 2021; and 22,465 inmates in FY 2022 for contracted beds.

#### **b. Strategies to Accomplish Outcomes**

Since the current federal inmate population continues to exceed the rated capacity of the medium and high security BOP facilities, the BOP is taking every possible action to manage institutional crowding and to ensure that federal inmates continue to serve their sentences in a safe and humane environment.



## D. Management and Administration

Management and Administration	Direct Pos.	Estimate FTE	Amount
2020 Enacted	1,046	928	260,321
2021 Enacted	1,066	958	327,808
Adjustments to Base and Technical Adjustments	0	12	6,431
2022 Current Services	1,066	970	334,239
2022 Program Increases	0	0	0
2022 Request	1,066	970	334,239
<b>Total Change 2021-2022</b>	<b>0</b>	<b>12</b>	<b>6,431</b>

### 1. PROGRAM DESCRIPTION: Management and Administration

This budget activity covers costs associated with general administration and provides funding including oversight functions of the executive staff and regional and central office program managers in the areas of: budget development and execution, financial management, procurement and property management, human resource management, inmate systems management, safety, legal counsel, research and evaluation, and systems support.

The BOP is managed from a Central Office in Washington, DC, where the Director, Deputy Director, and Assistant Directors guide the agency's headquarters functions, along with the six regional offices, each led by a Regional Director. The management staff at each institution, including Wardens, Associate Wardens, Executive Assistants, Camp Administrators, and Jail Administrators, provide overall direction and implement policies. Staff training is provided on site at each institution, central office, regional offices, and training centers; and through external training. The BOP sets and enforces high standards of training for personal and professional conduct in its workforce.

#### a. Executive Staff

The Executive Staff is comprised of the Director, Deputy Director, six Regional Directors, nine Program Assistant Directors, and the Director of NIC in the central office, which serves as the policy and decision makers for the BOP, with a span of control across the entire agency. They meet regularly in person and via video-conference and teleconference to establish and update strategic plans, goals and objectives, and to assess achievement and redirect strategies as appropriate and consistent with the President's Management Agenda and the DOJ Strategic Plan. The Executive Staff oversees BOP's resources; guides BOP's staffing, training and management development program; sets inmate and capacity standards; and develops and approves budget initiatives and operating plans.



## b. Central Office

The Central Office serves as the headquarters for the BOP, which is overseen and managed by Director Kathleen Hawk Sawyer. Here, national programs are developed and the following divisions provide functional support:

- Administration
- Correctional Programs
- Health Services
- Human Resource Management
- Federal Prison Industries\*
- Information, Policy, & Public Affairs
- National Institute of Corrections\*
- Office of General Counsel
- Program Review
- Reentry Services\*

**\*Not funded by Management and Administration Program Activity Budget**

### Administration Division

The Administration Division provides the resources and support necessary for the BOP to perform in an effective and efficient manner. This includes the development of budget requests, the stewardship of financial resources, and procurement, property management and coordination, and analysis of information related to capacity planning, which covers such varied areas as female offenders, detention needs, and the need for medical facilities. Also, the selection of sites for new prison construction; the design and construction of new correctional facilities; the renovation and maintenance of existing facilities; the development and maintenance of a system of financial systems/services to ensure accountability of inmate commissary funds and the management of merchandise/services to inmates; and other administrative support services required by the organization.

Branches in the Administration Division include:

- |   |                         |
|---|-------------------------|
| ○ Budget Development                    | ○ Finance               |
| ○ Budget Execution                      | ○ Procurement Executive |
| ○ Construction and Environmental Review | ○ Trust Fund            |
| ○ Facilities Management                 |                         |

### Correctional Programs Division

The Correctional Programs Division (CPD) develops activities and programs designed to appropriately classify inmates, eliminate inmate idleness, and promote the skills necessary to facilitate the successful reintegration of inmates into their communities upon release. Staff are responsible for planning, documenting, monitoring, and providing the delivery of services to inmates such as case management, the agency's Victim and Witness Notification Program, and the collection of court-ordered obligations through the





Inmate Financial Responsibility Program. The CPD also provides national policy direction and daily operational oversight of institution correctional services; intelligence gathering; the management of inmates placed in the Federal Witness Security Program; inmate transportation; receiving and discharge, inmate sentence computations, and the processing of inmate mail; emergency preparedness; inmate discipline; and the coordination of the treaty transfer of inmates to other countries. The Division also has responsibilities for a variety of functions in the areas liaison activities with Immigration Customs Enforcement and the U.S. Marshals Service, and secure privatized prisons. CPD staff are responsible for direct oversight of field staff who monitor contract compliance and coordinate the BOP's privatization management efforts.

Branches in the Correctional Programs Division include:

- Correctional Services
- Intelligence and Counter Terrorism
- Correctional Programs
- Designation and Sentence Computation
- Sex Offender Certification Review
- Privatization Management

### Health Services Division

The Health Services Division has three primary missions relating to its concerns and responsibilities in medical care, safety and environmental health, and food services:

The health care mission of the BOP is to deliver medically necessary health care to inmates effectively in accordance with proven standards of care without compromising public safety concerns inherent to the BOP's overall mission.

The occupational safety and environmental health mission of the BOP is to provide a safe and healthful environment in which staff and inmates can work and live.

The food service mission of the BOP is to provide healthy, nutritionally-sound, and appetizing meals that meet the needs of the general population and those at nutritional risk.

Branches in the Health Services Division Include:

- Dentist
- Nurse
- Pharmacist
- Psychiatrist
- Social Worker
- Therapist
- Drug-Free Workplace
- Financial Management
- Food Service
- Health Informatics
- Health Programs
- Health Services
- Infectious Disease
- Medical Asset Support Teams (MAST)
- Medical Des.& Trans.
- MSP Advisory Board
- Occupational & Employee Health
- Quality Management
- Safety & Environmental Compliance
- Staffing & Recruitment



## Human Resource Management Division

The Human Resource Management Division oversees and administers personnel policy and programs developed to address the needs of BOP employees covering all areas of personnel management. The Human Resource Management Division is a valued essential component of our organizational success, meeting the human resource and developmental needs of the BOP and all its employees. The BOP embraces the human element of our business and invests in the developmental needs of all employees.

Branches in the Human Resource Management Division include:

- Human Resources Office for Central Office Employees
- Human Resource Services Center
- Labor Relations Office
- Learning and Career Development
- Personnel and Staff Development

## Information, Policy and Public Affairs Division

The Information, Policy and Public Affairs Division is committed to furthering the mission of the BOP by collecting, developing, and disseminating useful, accurate, and timely information to BOP staff, DOJ, Congress, other government agencies, and the public.

Branches in the Information, Policy and Public Affairs Division include:

- Advanced Systems
- Computer Services Administration and User Support
- IT Planning and Development
- Legislative Affairs
- National Network Communications
- National Policy and Information Management
- Network Management
- Office of Public Affairs
- Office of Research and Evaluation
- Security Technology
- Systems Development

## Office of General Counsel

The Office of General Counsel provides legal advice, assistance, and representation to BOP officials in the areas of Correctional Law, Commercial Law, Real Estate and Environmental Law, Inmate Civil and Criminal Litigation, Inmate Remedies, Administrative Claims, Employment Law and Ethics, Freedom of Information and Privacy Acts, Administrative Rulemaking, and legislation affecting the BOP.

Branches in the Office of General Counsel include:

- Commercial Law
- Employment Law
- Ethics
- Legal Administrative
- Legislative Correctional Issues Litigation
- Real Estate & Environmental Law



## Program Review Division

The Program Review Division is responsible for analyzing BOP programs and guiding BOP managers in the assessment of their operations. The division assists management in the strategic planning process, coordinates and monitors oversight activities of audit and regulatory authorities, and ensures effective management and operational procedures exist throughout the BOP. Additionally, the division's chief executive officer serves as the BOP's Affirmative Employment Programs Director and EEO Director.

Branches in the Program Review Division include:

- Affirmative Employment Programs Branch
- EEO Office
- External Auditing Branch
- Planning and Analysis Branch
- Program Review



**2. Performance and Resource Tables**

PERFORMANCE AND RESOURCE TABLE											
Decision Unit: Management and Administration											
RESOURCES		Target		Actual		Projected		Changes		Requested (Total)	
		FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Total Costs and FTE		FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		34,623	7,570,000	34,281	7,570,000	35,161	8,008,375	101	-337,982	35,262	7,670,393
TYPE	PERFORMANCE	FY 2020		FY 2020		FY 2021		Current Services Adjustments and FY 2022 Program Changes		FY 2022 Request	
Program Activity	Management and Administration	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000	FTE	\$000
		938	260,321	928	260,321	958	327,808	12	6,431	970	334,239
Performance Measure	Facilities accredited: ACA	100%		100%		100%		0%		100%	
<p><b>Data Definition:</b> Initial American Correctional Association (ACA) is awarded when an institution demonstrates 100% compliance with mandatory ACA standards, and substantial compliance with non-mandatory ACA standards. The BOP's policy requires all institutions, except for newly activated institutions, to maintain ACA Accreditation.</p> <p><b>Data Validation and Verification:</b> On an annual basis, Program Review personnel develop a schedule for initial accreditation and re-accreditation of all eligible BOP facilities to ensure reviews are conducted on a regular and consistent basis. BOP policy requires institutions to initially be ACA accredited within two years of activation. Therefore, non-accredited institutions that have been activated for less than two years are excluded from calculations regarding this performance measure. Subject matter experts review report findings to verify accuracy and develop any necessary corrective measures. The ACA accreditation meeting minutes, identifying the institutions receiving accreditation and re-accreditation, are now on file and maintained by the BOP Accreditation Manager. Once an audit is completed, an electronic report is received from ACA. These reports are maintained in GroupWise shared folders by institutions, and in Word files.</p> <p><b>Data Limitations:</b> None known at this time.</p>											



PERFORMANCE MEASURE TABLE									
Decision Unit: Management and Administration									
Performance Report and Performance Plan Targets		FY 2016	FY 2017	FY 2018	FY 2019	FY 2020		FY 2021	FY 2022
		Actual	Actual	Actual	Actual	Target	Actual	Target	Target
<b>Performance Measure</b>	Facilities accredited: ACA	100%	100%	100%	100%	100%	100%	100%	100%



**3. Performance, Resources and Strategies**

**a. Performance Plan and Report for Outcomes**

In FY 2020, the BOP reached the target of 100 percent ACA accreditation. For FY 2021 and FY 2022, the targets will remain at 100 percent for ACA accreditation.

**b. Strategies to Accomplish Outcomes**

The BOP will continue to monitor staffing ratios, inmate crowding, and inmate misconduct, schedule regular accreditation/re-accreditation for its facilities, and strive to increase staffing and bed space to maintain safety and security, consistent with funding.