

Pandemic Response
Accountability Committee



KEY INSIGHTS: COVID-19 IN CORRECTIONAL AND DETENTION FACILITIES

May 12, 2021



After 9PM
Use 4th Street
Entrance

Key Insights: COVID-19 in Correctional and Detention Facilities

The Pandemic Response Accountability Committee's [recent update](#) to its Top Challenges for the Pandemic noted that while federal agencies have always prioritized health and safety, the COVID-19 pandemic has created several unique challenges—such as limiting the transmission of the virus in correctional and detention facilities maintained and operated by the Departments of Justice, Homeland Security, and the Interior. This report summarizes oversight work from those Offices of Inspectors General related to the steps these federal agencies have taken to prevent the spread and mitigate the impact of COVID-19 on their staff and the individuals housed in federal correctional and detention facilities.

Throughout this report you will see reference numbers that align to references in Appendix B, which lists corresponding reports. Click on the corresponding link for more information about a particular finding or example.

Facilities Were Not Designed for Social Distancing, Quarantine, or Medical Isolation

Correctional and detention facilities implemented a variety of strategies to promote social distancing, such as increasing space between people in lines,¹ staggering recreation or mealtimes,² pausing or modifying group activities,³ limiting inmate movement outside of housing units,⁴ and creating makeshift housing

Correctional and detention facilities present unique challenges in preventing and controlling the spread of COVID-19. When compared to the general population, a disproportionate number of COVID-19 outbreaks and deaths occur in jails, prisons, and detention facilities across the country. The [Centers for Disease Control and Prevention](#) (CDC) has noted that the confined nature of correctional and detention facilities, combined with their congregate environments, heightens the potential for COVID-19 to spread once introduced into a facility. Individuals typically eat, sleep, and participate in activities in close proximity to one another in these facilities, which can include custody, housing, healthcare, food service, education, recreation, and workplace components in a single physical setting. Considering the increased risk presented by these congregate settings, several Offices of Inspectors General have published reports on how federal agencies have handled the COVID-19 pandemic in correctional and detention environments. Common issues identified across this oversight work include challenges of physical layout, capacity, staffing, guidance, consistency in mitigation efforts across facility types, and safe transport of inmates and detainees.

areas to allow for more space.⁵ However, **social distancing in these facilities is often limited by the physical layout of the facilities themselves.** For example, the minimum and low security facilities in the Federal Bureau of Prisons (BOP) tend to have open dormitory housing, which often **consists of a large room with rows of bunk beds, with or without partitions, and shared restrooms and common areas.**⁶

Social Distancing

The practice of increasing the space between individuals and decreasing their frequency of contact to reduce the risk of spreading a disease (ideally to maintain at least six feet between all individuals).

Medical Isolation

Separating an individual with confirmed or suspected COVID-19 to prevent contact with others and to reduce the risk of transmission.

Quarantine

Separating individuals who have had close contact with someone with COVID-19 to determine whether they develop symptoms or test positive for the disease.

Similarly, detainees in U.S. Immigration and Customs Enforcement (ICE) facilities are housed together in dorm-like pods of as many as 50 to 75 detainees.⁷ U.S. Customs and Border Patrol (CBP) facilities, which have a limited number of holding cells meant to accommodate multiple individuals segregated by age, gender, or family status, also have challenges maintaining social distancing.⁸ The Department of Homeland Security (DHS) Office of Inspector General (OIG) found that 30% of Border Patrol stations (38 of 136 surveyed) and 5% of Office of Field Operations ports of entry (16 of 307 surveyed) reported they were not able to implement social distancing among detained individuals due to limited space in holding areas.⁹ Even if the physical layout of facilities allowed for social distancing, it was sometimes difficult to enforce social distancing policies among individuals. In one ICE detention facility, the OIG observed

several instances of detainees grouped together in close proximity.¹⁰

At some correctional and detention facilities, there are **concerns surrounding the ability to quarantine or medically isolate inmates and detainees.**^a DHS OIG found that the largest concern for Border Patrol station staff was the physical limitation of their facilities to quarantine or isolate detained individuals.¹¹ DHS OIG further noted that 11% of ICE detention facilities reported that they did not have capacity to medically isolate detainees with suspected COVID-19 symptoms.¹² The Department of Justice (DOJ) OIG's inspections also observed similar challenges in this area. For example, as COVID-19 spread throughout two facilities in the Butner Federal Corrections Complex, these facilities were not able to quarantine all inmates meeting the criteria for quarantine, which was largely due to space availability issues.¹³



Photos: Left: An open dormitory housing unit at Lompoc Federal Correctional Complex. Right: A partitioned open dormitory housing unit at Coleman Federal Correctional Complex. Source: BOP, with DOJ OIG enhancement.

^a The Centers for Disease Control and Prevention guidance recommends that facilities have three separate physical areas to (1) isolate individuals with confirmed COVID-19,

(2) isolate individuals with suspected COVID-19, and (3) quarantine close contacts of those with confirmed or suspected COVID-19.

COVID-19 INMATES & DETAINEES BY THE NUMBERS

Active cases include inmates with a lab-confirmed and open case of COVID-19 who have not recovered or died. **Recovered cases** do not include those inmates who recovered but were released or moved to another facility.

Total inmates and detainees align with those totals identified in Appendix A (from January and February 2021).

BUREAU OF PRISONS 151,700 inmates	852	46,926	225
	Active Cases	Recovered	Deaths
<i>(As of March 7, 2021)</i>			
U.S. MARSHALS SERVICE 64,300 inmates	949	10,877	30
	Active Cases	Recovered	Deaths
<i>(As of March 7, 2021)</i>			
BUREAU OF INDIAN AFFAIRS 336 inmates	145	1,005	0
	Positive Tests	Tested	Deaths
<i>(As of March 13, 2021)</i>			
U.S. IMMIGRATION & CUSTOMS ENFORCEMENT 14,300 detainees	359	9,840	9
	Active Cases	Total Cases	Deaths
<i>(As of March 10, 2021)</i>			

CBP does not maintain publicly available information regarding undocumented aliens in custody.

Varied Agency Efforts to Reduce the Population in Custody

The size of the inmate or detainee population can limit a facility’s ability to implement COVID-19 mitigation efforts, and several **federal programs sought options to alleviate the total number of individuals assigned to congregate custody settings**. The Department of the Interior (DOI) OIG’s survey of Indian Country detention facilities found that 24% of responding facilities (14 of 59) reported overcrowding; one way these facilities tried to reduce overcrowding during the pandemic was by working with tribal courts to amend sentences or grant early release or home confinement for inmates charged with certain nonviolent crimes.¹⁴ CBP, ICE, and the BOP also took steps to decrease their detained or incarcerated populations during the pandemic. Under the Coronavirus Aid, Relief, and Economic Security (CARES) Act and Attorney General authorization, the BOP transferred some of the eligible inmates from prison to home confinement, although DOJ OIG inspection reports found that the BOP could have leveraged these authorities more than it did. CBP expelled inadmissible migrants back to their home countries under Title 42, Section 265 of the U.S. Code, which allowed the Government to suspend the introduction of individuals from foreign countries to prevent the spread of communicable disease.¹⁵ ICE reported releasing detainees for reasons related to COVID-19, as well as temporarily adjusting its enforcement posture to focus on public safety risks and individuals subject to mandatory detention for criminal violence.¹⁶

The Pandemic Has Exacerbated Longstanding Staffing Challenges

Longstanding staffing shortages at correctional and detention facilities, which were exacerbated by the pandemic, impeded the ability of some facilities to respond to COVID-19. **Healthcare and correctional staffing shortages made it difficult** for some BOP institutions to fully implement strategies to mitigate the spread of COVID-19 while also providing routine medical care to inmates.¹⁸ DOI OIG similarly found that COVID-19 exacerbated already low staffing levels at Indian Country detention facilities and limited staff's ability to focus on security measures.¹⁹ In addition, DHS OIG reported decreases in staff availability as a result of COVID-19 related staff absences at Border Patrol Stations, Office of Field Operations (OFO) Ports of Entry, and ICE detention centers.²⁰ Although the BOP, CBP, and ICE reported the use of strategies such as overtime and temporary assignment of staff from other facilities to alleviate staffing challenges,²¹ **staff survey respondents from these agencies expressed concern about continued shortages.**²²

Transporting Inmates and Detainees Presented Risk

In response to the pandemic, correctional and detention facilities operated by the BOP, U.S. Marshals Service (USMS),²³ Bureau of Indian Affairs (BIA),²⁴ and ICE²⁵ limited inmate facility transfers. However, BIA staff survey responses found that fewer Indian Country detention facilities implemented screening for

transferred or released inmates compared to screenings for incoming inmates and staff.²⁶ Additionally, DOJ OIG inspection reports identified incidents at two BOP institutions in which staff transported sick inmates to local hospitals **without wearing the appropriate personal protective equipment (PPE)**, which potentially contributed to the spread of COVID-19 at one of these institutions.²⁷ BOP inmates in residential reentry center (RRC) custody also present risk of exposure concerns, as they must rely on the use of public, commercial, or personal transportation when they first report to RRC custody or attend outside appointments for purposes including medical care.²⁸ The DOJ OIG found that **prior to transporting prisoners out of a facility, the USMS generally did not test prisoners for COVID-19**, and consequently could not be sure that a prisoner being moved was COVID-19 free.²⁹ The USMS later implemented a program to test prisoners prior to transfer and continues to work to expand testing.³⁰ The DOJ OIG also found that, particularly at the onset of the pandemic, the BOP had limited testing capacity that affected its ability to address COVID-19 outbreaks at some of its facilities but increased its capabilities beginning in summer 2020.^b

Guidance and Oversight Vary by Facility Type

Some facilities housing federal prisoners and detainees are controlled directly by the federal agencies themselves; however, many others are operated by tribal governments, private contractors, and state or local

^b PRAC, *Federal COVID-19 Testing Report: Data Insights from Six Federal Health Care Programs*, January 14, 2021.

entities operating under intergovernmental agreements (IGA). Due to the terms of the contracts and agreements, **agencies have different levels of guidance and oversight, depending on the type of facility.** This results in some variance in governing guidance and COVID-19 protocols affecting those in federal custody and limits the ability of federal agencies to identify areas of concern, propose changes, and implement corrective actions.

DHS OIG reported that some COVID-19 guidance from ICE is only applicable to dedicated facilities (i.e., detention facilities that house only ICE detainees) and facilities with ICE Health Services Corps staff, while non-dedicated facilities and those without ICE Health Services Corps staff are not required to comply.³¹ Similarly, DOJ OIG reported that USMS IGA facility agreements do not

grant the USMS authority to manage the operations or policies of IGA facilities, nor impose consequences if any USMS requests or recommendations are not implemented. However, if a facility fails to take corrective actions and the deficiency persists, the USMS can reduce or cease its use of the facility depending on the nature of the deficiency.³² DOJ OIG's inspections of two residential reentry centers found that the BOP guidance was often silent on key issues for RRCs, and often deferred to the RRC contractors for operational decisions related to COVID-19.³³ In contrast, DOI OIG found that the BIA provided guidance and COVID-19 screening tools to all Indian Country detention facilities, including those owned and operated by tribal governments.³⁴

Acronyms

BIA	Department of the Interior, Bureau of Indian Affairs
BOP	Department of Justice, Bureau of Prisons
CARES Act	Coronavirus Aid, Relief, and Economic Security Act
CBP	Department of Homeland Security, Customs and Border Protection
DHS	Department of Homeland Security
DOI	Department of the Interior
DOJ	Department of Justice
ICE	Department of Homeland Security, Immigration and Customs Enforcement
IGA	Intergovernmental Agreement
OFO	Office of Field Operations
OIG	Office of Inspector General
PRAC	Pandemic Response Accountability Committee
USMS	U.S. Marshals Service

Appendix A: Summary of Corrections and Detention Programs Included in Relevant Offices of Inspectors General Work

<i>Agency</i>	<i>Type of Facilities</i>	<i>Number of Facilities</i>	<i>Inmate or Detainee Population</i>
Department of Homeland Security (DHS), U.S. Customs and Border Protection (CBP)	Short-term holding facilities housing inadmissible migrants pending release, removal, or transfer to ICE or U.S. Department of Health and Human Services for long-term detention or supervision of unaccompanied children	<ul style="list-style-type: none"> • 136 Border Patrol Stations • 311 Office of Field Operations ports of entry 	Approximately 850 (January 2021)
DHS, U.S. Immigration and Customs Enforcement (ICE)	Detention facilities that house exclusively ICE detainees (dedicated facilities) or both ICE detainees and other individuals such as state or local inmates (non-dedicated facilities)	<ul style="list-style-type: none"> • 165 non-dedicated facilities • 31 dedicated facilities 	Approximately 14,300 (February 2021)
Department of the Interior, Bureau of Indian Affairs (BIA)	Detention facilities funded and operated by BIA; operated by tribal governments with BIA funding provided under Pub. L. No. 93-638 contracts or self-governance compacts; or funded and operated by tribal governments, that house individuals sentenced in tribal court	<ul style="list-style-type: none"> • 23 BIA operated and funded facilities • 63 tribally operated and BIA funded facilities • 10 tribally operated and funded facilities 	336 (February 25, 2021, BIA operated and funded facilities)
Department of Justice (DOJ), Bureau of Prisons (BOP)	Federal institutions operated by BOP; contract prisons; and residential reentry centers (also known as halfway houses) housing individuals sentenced in federal court	<ul style="list-style-type: none"> • 122 federal institutions • 11 contract prisons • 159 residential reentry centers 	Approximately 151,700 (February 2021)
DOJ, U.S. Marshals Service, (USMS)	State and local government facilities under intergovernmental agreements, BOP facilities, and contract facilities housing individuals ordered into custody by a U.S. District Court pending acquittal or conviction and transfer to BOP	<ul style="list-style-type: none"> • 165 non-dedicated facilities • 31 dedicated facilities 	Approximately 64,300 (February 25, 2021)

Appendix B: Relevant COVID-19 Oversight Work

The Department of Homeland Security (DHS), Office of Inspector General (OIG) reviewed detention programs of the Customs and Border Protection (CBP) and Immigration and Customs Enforcement (ICE); the Department of the Interior (DOI) OIG reviewed detention programs of the Bureau of Indian Affairs (BIA); and the Department of Justice (DOJ) OIG reviewed correctional and detention programs of the Federal Bureau of Prisons (BOP) and the U.S. Marshals Service (USMS). The information below provides a list of the reports reviewed for the purposes of preparing this insights report. In addition, the list below includes a reference number that corresponds to a finding or example highlighted in the report. For example, DOJ OIG's Remote Inspection of Brooklyn House Residential Reentry Center includes reference numbers of 2, 28, and 33. These numbers correspond to the reference numbers in the body of this report that can be found at the end of the sentence. While not all OIG reports were cited directly in this insights report, all of the reports listed below helped to inform the trends and issues discussed. (The links below navigate to PDFs).

Agency	Dept.	Report (PDFs)	Related References
DOJ OIG	BOP	Remote Inspection of Contract Correctional Institution Dalby	1
DOI OIG	BIA	The Bureau of Indian Affairs' Coronavirus Response at Indian Country Detention Facilities	1, 2, 3, 14, 19, 22, 24, 26, 34
DOJ OIG	BOP	Remote Inspection of Brooklyn House Residential Reentry Center (RRC)	2, 28, 33
DOJ OIG	BOP	Remote Inspection of Federal Correctional Institution (FCI) Milan	3, 6, 18
DOJ OIG	BOP	Remote Inspection of Federal Correctional Complex (FCC) Tucson	4, 6
DOJ OIG	BOP	Remote Inspection of FCI Terminal Island	5, 6
DOJ OIG	BOP	Remote Inspection of FCC Coleman	6
DOJ OIG	BOP	Remote Inspection of FCC Lompoc	6, 18
DHS OIG	ICE	Early Experiences with COVID-19 at ICE Detention Facilities	7, 12, 20, 21, 22, 25, 31
DHS OIG	CBP	Early Experiences with COVID-19 at CBP Border Patrol Stations and OFO Ports of Entry	8, 9, 11, 15, 20, 21, 22
DHS OIG	ICE	Violations of Detention Standards Amid COVID-19 Outbreak at La Palma Correctional Center in Eloy, AZ	10
DOJ OIG	BOP	Remote Inspection of FCC Butner	13
DOJ OIG	BOP	Remote Inspection of Metropolitan Detention Center Brooklyn	18, 21
DOJ OIG	BOP	Remote Inspection of FCC Oakdale	18, 21, 27
DOJ OIG	BOP	Remote Inspection of Federal Medical Center Fort Worth	21
DOJ OIG	USMS	Review of USMS's Response to the COVID-19 Pandemic	23, 29, 30, 32
DOJ OIG	BOP	Remote Inspection of Toler House RRC	28
DOJ OIG	BOP	Remote Inspection of Contract Correctional Institution McRae	
DOJ OIG	BOP	Remote Inspection of Contract Correctional Institution Moshannon Valley	
DOJ OIG	BOP	Remote Inspection of FCC Pollock	
DOJ OIG	BOP	Remote Inspection of Metropolitan Correctional Center Chicago	
DHS OIG	ICE	Violations of ICE Detention Standards at Pulaski County Jail	

Appendix C: Methodology

The purpose of this insights report is to identify key themes or common challenges found during oversight activities completed by Offices of Inspectors General related to correctional and detention facilities. The list of reports reviewed by the PRAC for inclusion in this report can be found in Appendix B. All work completed for this insights report complies with the Council of the Inspectors General on Integrity and Efficiency's Quality Standards for Federal Offices of Inspectors General, which require that the work adheres to the professional standards of independence, due professional care, and quality assurance to ensure the accuracy of the information presented.

The Offices of Inspectors General at the Departments of Justice, Homeland Security, and the Interior completed the following steps, among other oversight activities, to conduct their reviews of the correctional and detention facilities.

Examples of Oversight Techniques Used

- Surveys
- Phone Interviews
- Document Reviews
- Data Analysis
- Photograph Reviews



Survey
Invitations

43,493



Survey
Responses

12,598



Facilities
Reviewed

1,763

POINTS OF CONTACT

PRAC

Brooke Holmes, Associate Director of Oversight and Accountability
Brooke.Holmes@cigie.gov

Department of Justice, Office of Inspector General
Stephanie Logan, Senior Public Affairs Specialist
Stephanie.Logan@usdoj.gov

Department of Homeland Security, Office of Inspector General
Anthony Sanganetti, COVID-19 Program Manager
Anthony.Sanganetti@oig.dhs.gov

Department of the Interior, Office of Inspector General
Chris Stubbs, Director, Office of Financial and Contract Audits
Christopher_Stubbs@doioig.gov

REPORT FRAUD, WASTE, ABUSE, AND MISMANAGEMENT

To report allegations of fraud, waste, abuse, or misconduct regarding funds or programs covered within the following Acts, please go to the PRAC website at PandemicOversight.gov.

[CARES Act](#)

[Paycheck Protection Program and Health Care Enhancement Act](#)

[Families First Coronavirus Response Act](#)

[Coronavirus Preparedness and Response Supplemental Appropriations Act](#)

[Coronavirus Response and Relief Supplemental Appropriations Act, 2021](#)

[American Rescue Plan Act of 2021](#)



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