California Coalition for Women Prisoners, et al.,
v.
U.S. Federal Bureau of Prisons, et al., Consent Decree
Case No. 4:23-cv-04155-YGR

4th Quarterly Status Report
January 1 – March 31, 2026

Submitted by
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U.S. District Court
Northern District Court of California

June 30, 2026

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Introduction & Background

Introduction: This section serves as an introduction to the 4th quarterly report on the status of the United States (U.S.) Federal Bureau of Prisons (BOP) implementation of the *California Coalition for Women Prisoners v. U.S. BOP* Consent Decree. This report includes 15 findings and recommendations that refer to "*a course of action that the Monitor believes would assist the BOP in complying with this Consent Decree*."[1] Additional recommendations may also be included in subsequent reports as additional information and assessments are conducted by the Monitoring Team. Furthermore, while this report is dated June 30, 2026, only information from January 1 – March 31, 2026, is included.

The Senior Monitor extends her appreciation to BOP staff for their cooperation and support in providing information and assistance related to the various Paragraphs of this report. Appreciation is also extended to Class Counsel for their support and continued communication regarding concerns raised by Class Members (CMs).

Monitoring Activities: During this quarter, the Senior Monitor's priorities centered on assessing factual findings related to the various Paragraphs of the Consent Decree. Activities conducted include, but are not limited to, the following:

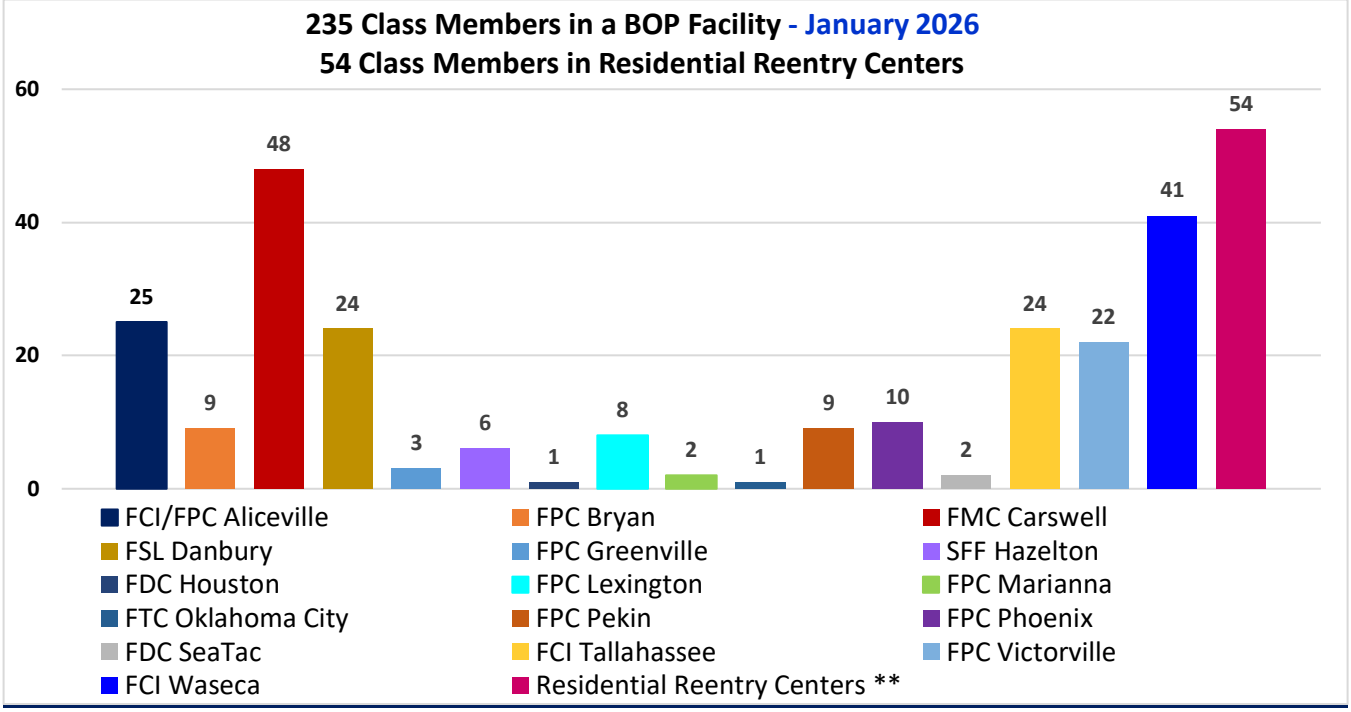
- Review of BOP program statements, records, audits, reports, tracking logs, formal and informal training materials, online training content, the Code of Federal Regulations (C.F.R.), Title 28[2], and other relevant documents;
- Participation in meetings with BOP staff, Class Counsel attorneys, the Assistant United States Attorney (AUSA), and the Court;
- Interviews with BOP staff and CMs;
- Review of Class Counsel Memorandums, dated January 6, 2026, January 9, 2026, February 2, 2026, February 20, 2026, March 2, 2026, March 17, 2026, and March 31, 2026;
- Review of emails from CMs, BOP staff, Class Counsel attorneys, and the AUSA;
- Onsite monitoring tour of FMC Carswell, February 23 – 25, 2026; and
- Interviews of BOP staff and CMs while onsite at FMC Carswell.

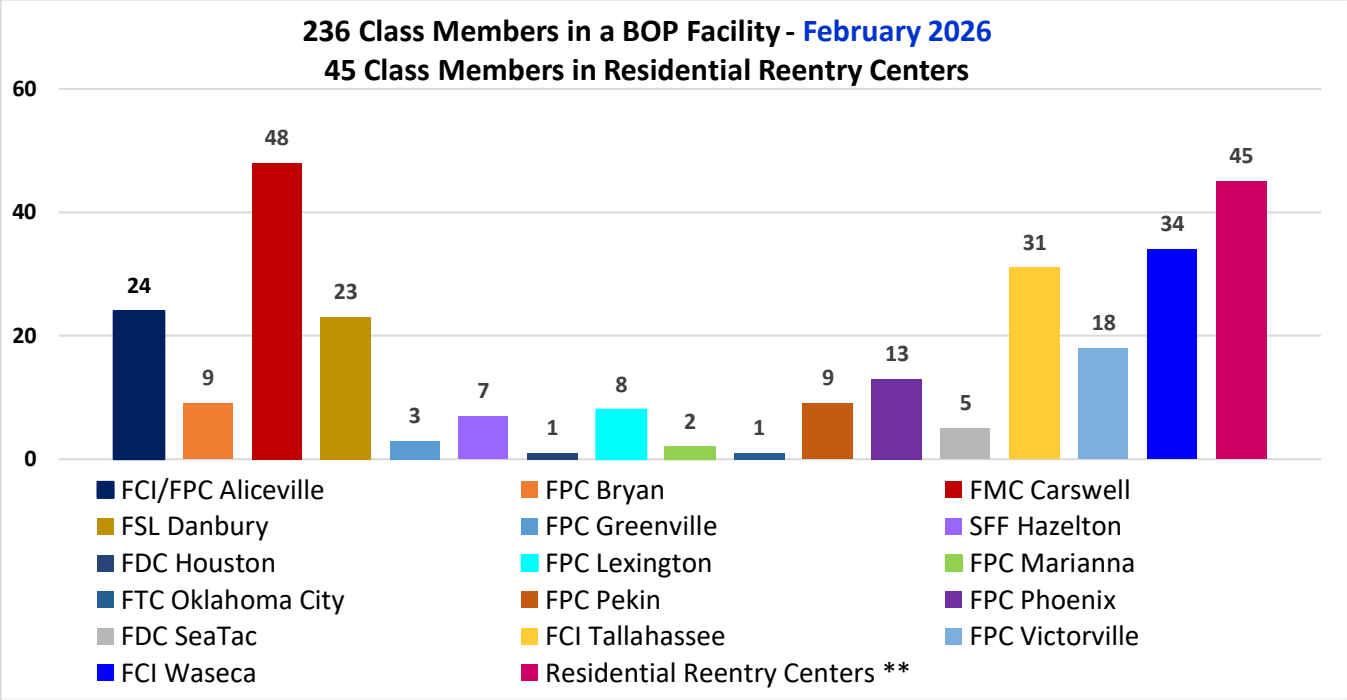
Class Member Population by Month: The following chart reflects the CM population in a BOP facility since the inception of monitoring (March 31, 2025). Population numbers do not include CMs in Residential Reentry Centers (RRCs).

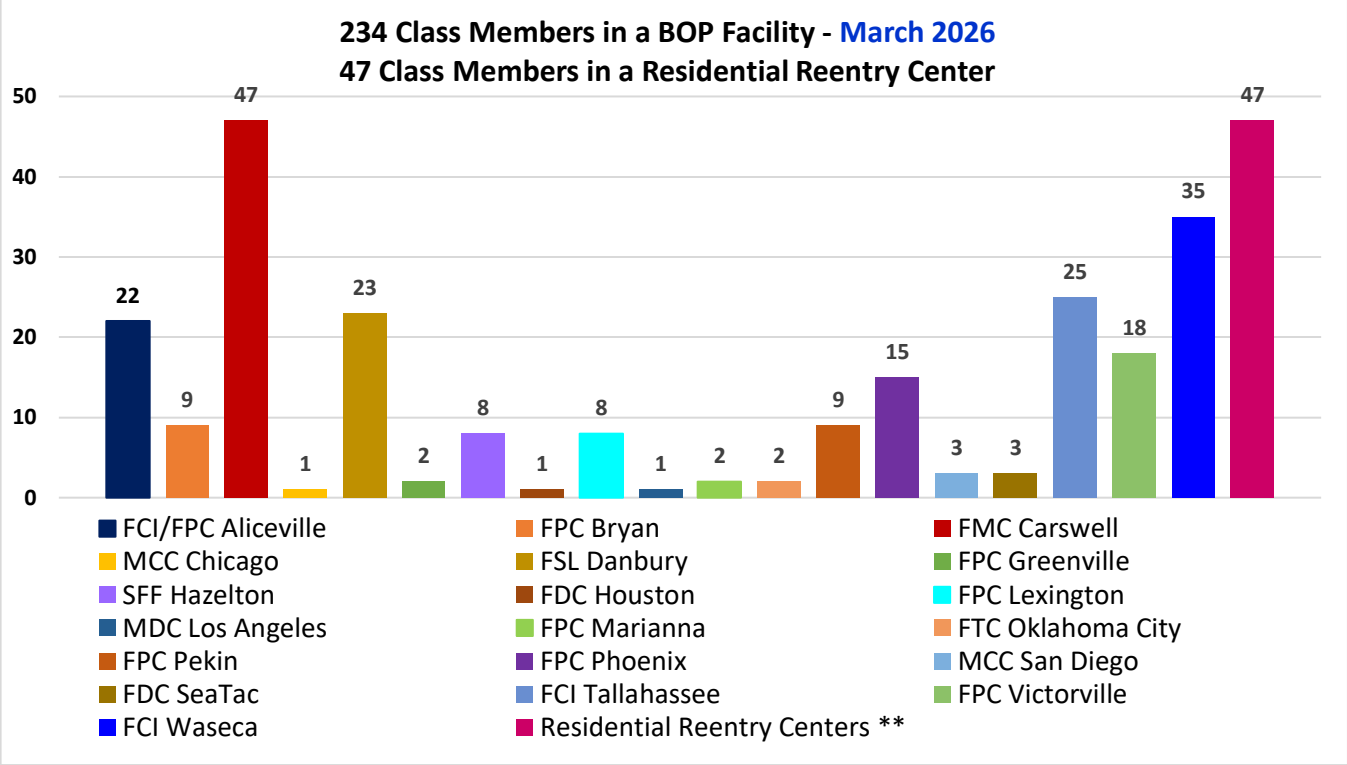
Class Members in BOP Custody -- April 2025 – March 2026											
Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
305	300	291	281	262	262	255	251	239	235	236	234

[1] Paragraph 99, Consent Decree
[2] eCFR :: Title 28 of the CFR -- Judicial Administration

Quarterly CM Data, January – March 2026: The following three charts reflect the number of CMs by BOP facility, including CMs housed in RRCs. **







NOTE: BOP facilities in the *legend* are depicted in the order shown in the *bar chart* (from left to right).

Bureau of Prison Facility Acronyms			
FCI	Federal Correctional Institution	FSL	Federal Satellite Low
FDC	Federal Detention Center	FTC	Federal Transfer Center
FMC	Federal Medical Center	MCC	Metropolitan Correctional Center
MDC	Metropolitan Detention Center	FPC	Federal Prison Camp
SFF	Secure Female Facility		

Summary of Complaints Received, April 1, 2025 – March 31, 2026: In general, the CM population declined from 305 in April 2025[3] to 234 CMs at the end of March 2026, a reduction of approximately 23.3%. Despite this reduction in the population, complaints related to medical issues and retaliation increased, while complaints related to the Prison Rape Elimination Act (PREA), and staff complaints decreased. During this quarter, complaints related to credits are the highest in this quarter since the inception of monitoring on March 31, 2025 (from 59 complaints during the first quarter of monitoring to 73 in the current quarter; a 23.7% increase) See table at the top of the following page.

[3] Includes CMs in BOP custody as of March 31, 2025, given that this was the date of the inception of the Consent Decree.

Class Member Email Complaints Received -- April 1, 2025 – March 31, 2026												
Category	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
** Medical	20	47	18	27	57	48	72	69	69	74	66	79
Retaliation	15	23	23	25	24	12	29	14	25	38	39	58
PREA	13	12	5	9	11	5	10	5	3	11	9	7
Staff Complaints	7	8	13	12	9	5	9	6	13	8	8	0
Credits	22	19	18	15	15	9	14	10	14	29	24	20

NOTE: ** The "*medical*" data category reflects the totality of complaints related to: (1) dentures, (2) eyeglasses, (3) Medication Assisted Treatment (MAT), and (4) general medical and mental health complaints from CMs housed in the general population and in the Special Housing Unit (SHU). It should be noted that the charts on the next two pages capture these five categories of data *separately*, and as such, they will NOT match the "*medical*" category numbers shown on the chart at the top of this page.

Class Member Email Complaints by Type: Complaint numbers below reflect those received from CMs and Class Counsel via email in the time period shown. The numbers do not reflect complaints collected through other methods, to include those received through the BOP Liaison, interviews, letters or telephone calls with CMs.

Class Member Email Complaints by Type -- October 1, 2025 – March 31, 2026[4]						
Complaint Type	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26
Administrative Remedy	3	2	0	0	2	0
Compassionate Release	10	2	1	1	4	2
Conditions of Confinement	23	6	17	16	14	28
Credits	14	10	14	29	24	20
Dentures/Dental	4	0	0	1	2	3
Designation	14	13	10	25	35	30
Disciplinary	21	18	28	29	32	66
Eyeglasses	1	0	1	0	1	2
Immigration Detainer	2	2	0	0	3	0
Interview Request	1	0	0	0	3	0
Legal Calls	0	5	1	2	4	9
Legal Mail	0	0	3	0	6	21
Medication Assisted Treatment	9	12	8	7	7	10
Medical	53	49	56	59	52	52
Mental Health	5	8	4	7	4	12
Physical Abuse	1	1	1	2	0	2

[4] Rows in light blue denote a general overall reduction from the last quarter and dark gray reflects an increase. The medical category consists of related complaints from CMs in the general population and those housed in SHU.

Class Member Email Complaints by Type -- October 1, 2025 – March 31, 2026 (continued)						
Complaint Type	**Oct 25**	**Nov 25**	**Dec 25**	**Jan 26**	**Feb 26**	**Mar 26**
Prison Rape Elimination Act	10	5	3	11	9	7
Program	7	4	1	9	7	14
Property	18	10	6	17	5	9
Religious	2	2	0	0	3	1
Retaliation	29	14	25	38	39	58
Special Housing Unit	10	4	5	8	5	6
Special Housing Unit Property	3	2	1	1	4	9
Staff Complaints	9	6	13	8	8	0
Transfer Request	2	0	0	0	0	0
Transport	2	0	0	0	1	0
Total	**253**	**175**	**198**	**270**	**274**	**361**

From October 2025 to March 2026, total complaints increased by approximately 42.6%.

Category	Complaint Type Definitions
Administrative Remedy	A BOP process where inmates can request the formal review of an issue related to any aspect of their confinement.
Compassionate Release	Under 18 U.S.C. 4205(g), a sentencing court may reduce the minimum term of the sentence to time served.
Conditions of Confinement	Refers to the overall environment and circumstances that individuals experience while incarcerated, i.e., safety, health care, nutrition, access to programs and services.
Credits	Represents time credits (i.e., First Step Act, Federal Time Credit, Second Chance Act) applied toward prerelease custody or early transfer to supervised release (i.e., home confinement or RRC) for successfully completing approved BOP programs.
Dentures	Self-explanatory.
Designation	BOP facility where CM is housed.
Disciplinary	Complaints about the disciplinary process and/or those involved in the process (i.e., sanctions, hearing officer, incident reports, due process issues).
Immigration Detainer	A request from the U.S. Immigration and Customs Enforcement to a law enforcement agency and/or custody facility to hold an individual for a specified period of time after their scheduled release.
Interview Request	Requests from CMs for an interview with the Senior Monitor or Class Counsel.
Legal Calls	Refers to CM access to confidential legal calls with Class Counsel.

Category	Complaint Type Definitions (continued)
Legal Mail	Refers to an indigent CM's right to have access to postage for legal mail and for CMs, in general, to send and receive legal mail.
Medication Assisted Treatment	A comprehensive approach to treating substance use disorders through approved medications, counseling, and/or behavioral therapies.
Eyeglasses	Self-explanatory.
Medical	General medical complaints, to include medications, treatment, appointments, access to sick call, the provision of medication devices and prescription medications while housed in SHU, etc.
Mental Health	General mental health care complaints, to include prescriptions, access to mental health treatment, counseling, and therapy.
Physical Abuse	CM reports related to physical abuse by staff.
PREA	CM reports related to protections afforded under PREA; a federal law aimed at preventing sexual abuse in U.S. correctional facilities.
Property	Refers to a CM's right to purchase and receive items from the commissary with the same frequency as the general population, including access to reasonable personal property while housed in SHU.
Religious	Refers to CM's right to access religious personal property while housed in SHU, to include a Bible, Quran or other religious scriptures.
Retaliation	CM complaints of staff retaliation.
Special Housing Unit	General complaints related to CMs housed in SHU.
Special Housing Unit Property	Property afforded to CMs housed and/or placed in SHU.
Staff Complaints	CM complaints related to BOP staff and/or contractors.
Transfer Request	Refers to a CM's request to transfer to a BOP facility or other destination, i.e., community release or reentry program.
Transport	Refers to issues related to a CM's transport from FCI Dublin to the receiving BOP facility or other designated location.

NOTE:

- The terms "*facility*" and "*institution*" are utilized interchangeably throughout this document.
- Related Paragraphs have been consolidated in this status report for clarity; however, several may be reported separately in future reports, as needed.
- The section and subsection letters and numbers referenced in the following sections of this report are based on the structure of the Consent Decree.
- The reference to Monitors refers to two or more members of the Monitoring Team, including the Senior Monitor.

- BOP Program Statements, reference documents and metrics for each of the Paragraphs assessed are noted in the attachment titled, *Program Statements and Reference Documents, January - March 2026.* Some metrics may also be mentioned in this report for emphasis.
- This report includes findings and recommendations. Recommendations from previous monitoring reports are denoted by two asterisks.
- Complaints received from Class Counsel and CMs *after* the end of a monitoring period will be reflected in the month/quarter in which the complaints are received by the Senior Monitor. For example, if complaints lodged in December 2025 are not received by the Senior Monitor until March 2026, they will be reflected in the March 2026 public status report or January – March 2026 quarterly status report. Furthermore, BOP actions will be reflected in the month/quarter in which they occur.
- Facility locations noted in the "*Class Member Confidential Key*" refer to the physical location of the CM at the time of the event noted in the report and as such, may differ from the CM's location noted in BOP's "*Population Monitoring Census – Roster"* for the reporting month.

A. Medical & Mental Health Care (Part 1)

2. Monitoring of Staffing Capacity

36. As a daylight provision only, BOP shall provide the Monitor and Class Counsel with monthly reports on the medical and mental health care staffing levels at all BOP facilities where Class Members are designated. The Monitor shall review this information and make quarterly reports on the subject of medical and mental health care staffing levels at all BOP facilities where Class Members are designated. If requested by BOP, the report will include recommendations for addressing low staffing levels.

Metrics:

- BOP Medical and Mental Health Staffing Report, March 2026
- Program Statements and Reference Documents, January - March 2026, Attachment

Assessment: The following table summarizes authorized, filled, and vacant positions for medical and public health staff across BOP facilities housing CMs, along with corresponding vacancy rates for the reporting period. The data was derived from a medical and mental health staffing report provided by the BOP. It was also manually extracted and compiled by the Monitoring Team for analysis and reporting purposes.

Medical Staff Vacancies by BOP Facility

BOP Facilities	Auth. Positions	Total Filled	Total Vacant	Vacancy Rate
FCI/FPC Aliceville	25	17	8	32%
Public Health Service[5]	2	2	0	0%
FPC Bryan	14	8	6	42.9%
Public Health Service	4	3	1	25%
FMC Carswell	126	92	34	27%
Public Health Service	16	12	4	25%
FSL Danbury	16	12	4	25%
Public Health Service	9	6	3	33.3%
FPC Greenville	27	24	3	11.1%
Public Health Service	1	1	0	0%
SFF Hazelton	53	33	20	37.7%
Public Health Service	4	3	1	25%
FDC Houston	17	15	2	11.8%
Public Health Service	8	6	2	25%
FPC Lexington	93	63	30	32.3%
Public Health Service	23	20	3	13%

[5] BOP has over 3,000 health care positions, including approximately 550 Public Health Service Commissioned Officers detailed from the Department of Health and Human Services.

Medical Staff Vacancies by BOP Facility (continued)				
BOP Facilities	**Auth. Positions**	**Total Filled**	**Total Vacant**	**Vacancy Rate**
MDC Los Angeles	20	13	7	35%
Public Health Service	2	2	0	0%
FPC Marianna	20	16	4	20%
Public Health Service	3	2	1	33.33%
MCC Chicago	19	14	5	26.3%
Public Health Service	1	1	0	0%
FPC Pekin	22	18	4	18.2%
Public Health Service	2	2	0	0%
FPC Phoenix	18	12	6	33.33%
Public Health Service	3	1	2	66.7%
FDC SeaTac	15	8	7	46.6%
Public Health Service	6	3	3	50%
FCI Tallahassee	18	10	8	44.4
Public Health Service	8	4	4	50%
FPC Victorville	65	34	31	47.7%
Public Health Service	5	1	4	80%
FCI Waseca	24	18	6	25%
Public Health Service	1	0	1	100%
MCC San Diego	20	11	9	45%
Public Health Service	1	0	1	100%

In general, BOP facilities where CMs are housed continue to experience a substantial workforce shortage related to medical and mental health staff, with an overall vacancy rate of approximately 31.5%, reflecting 224 unfilled positions out of 711 total staffing slots. This vacancy rate indicates that nearly one out of every three authorized positions is currently unfilled, placing sustained pressure on existing staff across service areas related to medical, mental health and public health.

Findings & Recommendations:

Finding 1: Overall, the data suggest systemic staffing challenges for those BOP facilities housing CMs, rather than isolated shortages, with widespread vacancies across nearly every facility -- contributing to operational strain and potential impacts on service delivery and staff retention. The BOP Director has approved the use of various retention incentives to further support their efforts to retain staff. Under this new initiative, group retention incentives have been approved for the following positions: Correctional Officers (Senior Officer Specialist), Lieutenants, Registered Nurses, and Special Education Teachers. In addition, individual retention incentives have been approved for Mid-level Practitioners (Advanced Practice Practitioners/Physician Assistants).

Recommendation 1: To address these staffing challenges, the BOP could consider a multi-pronged strategy focused on both recruitment and retention. Examples include, but are not limited to, the following:

- Targeted recruitment incentives, such as sign-on bonuses, student loan repayment programs, and relocation assistance, could be prioritized for high-vacancy sites, particularly those exceeding vacancy rates over 35%;
- Expanding the use of a wider array of digital/telehealth services—especially in mental health and specialty medical services—could help mitigate immediate care gaps while recruitment efforts are underway to help build internal capacity;
- Strengthening retention through workload balancing, mandatory overtime reduction, and structured career advancement pathways may help stabilize current staffing levels and reduce turnover.
- Evaluating opportunities for operational efficiencies that focus on relieving clinical/licensed staff from performing clerical and other duties that divert them from direct CM care;
- Implementing facility-specific workforce planning dashboards could allow BOP leadership to identify chronic vacancy hotspots in real time and allocate resources more efficiently;
- Partnerships with nursing schools, medical residency programs, and public health training institutions could create a pipeline of candidates better aligned with correctional healthcare needs, helping to address long-term staffing sustainability; and

Note: In general, recommendations within this section also apply to mental health staffing.

A. Medical & Mental Health Care (Part 2)

2. Monitoring of Staffing Capacity

36. As a daylight provision only, BOP shall provide the Monitor and Class Counsel with monthly reports on the medical and mental health care staffing levels at all BOP facilities where Class Members are designated. The Monitor shall review this information and make quarterly reports on the subject of medical and mental health care staffing levels at all BOP facilities where CMs are designated. If requested by BOP, the report will include recommendations for addressing low staffing levels.

Metrics:

- BOP Medical and Mental Health Staffing Report, March 2026
- Program Statements and Reference Documents, January - March 2026, Attachment

Assessment: The following table summarizes authorized, filled, and vacant positions for mental health staff across BOP facilities housing CMs, along with corresponding vacancy rates for the reporting period. This data was derived from a medical and mental health staffing report provided by BOP. The data was also manually extracted and compiled by the Monitoring Team for analysis and reporting purposes. In general, mental health staffing, while comparatively stronger than medical staffing and with an estimated 25.4% vacancy rate, still reflects significant gaps that may impact continuity of care, patient access, and staff workload distribution.

Mental Health Vacancy Rates at BOP Facilities Where Class Members are Housed

BOP Facility	Auth. Positions	Total Filled	Vacant	Vacancy Rate
FCI/FPC Aliceville	13	11	2	15.4%
FPC Bryan	12	11	1	8.33 %
FMC Carswell	35	24	11	31.4%
FSL Danbury	26	22	4	15.38%
FPC Greenville	16	12	4	25%
SFF Hazelton	29	19	10	34.5%
FDC Houston	8	8	0	0%
FPC Lexington	29	24	5	17.24%
FPC Marianna	16	14	2	12.5%
MCC Chicago	21	12	9	42.9%
MDC Los Angeles	13	12	1	7.7%
FPC Pekin	11	7	4	36.4%
FPC Phoenix	16	11	5	31.25%
MCC San Diego	8	7	1	12.5%
FDC SeaTac	10	7	3	30%
FCI Tallahassee	18	17	1	5.56%

Mental Health Vacancy Rates at BOP Facilities Where Class Members are Housed (continued)				
BOP Facility	Auth. Positions	Total Filled	Vacant	Vacancy Rate %
FPC Victorville	33	22	11	33.3%
FCI Waseca	14	5	9	64.29%
MCC San Diego	8	7	1	12.5%

Current staffing data for mental health providers within BOP facilities, where CM are housed, reflects a significant workforce shortage. Of 336 authorized mental health positions, only 245 are currently filled, leaving 84 vacancies, for an overall vacancy rate of approximately 25.3%. Several facilities are experiencing critically low staffing levels. At FCI Waseca, there are two vacant psychiatrist positions in addition to seven other vacant mental health positions. At SFF Hazelton, all five psychologist positions are currently vacant.

Findings & Recommendations:

Finding 2: Mental health staffing shortages raise serious concerns regarding timely access to mental health services for CM's, and BOP's ability to provide adequate continuity of care, crisis response, treatment planning, and routine clinical services. Given persistent concerns expressed by CM's regarding access to mental health care, these vacancy levels warrant immediate attention, as well as targeted recruitment and retention efforts to ensure adequate staffing.

Recommendation 2: To address these issues, BOP should:

- continue efforts related to the utilization of the newly created Masters' Level Mental Health position;
- increase contracted services for mental health providers;
- explore improving the coordination and management of patient care between psychology and medical providers. (For CMs on psychotropic medications in particular, improved coordination and management can lead to a decrease in the demand for psychological support.);
- conduct a system-wide survey to assess retention needs;
- review exit survey data from staff that have departed to determine common factors that result in staff leaving;
- conduct a salary assessment to ensure BOP is competitive with the community and local correctional facilities;
- consider a referral bonus for staff that refer new hires;
- consider a pay differential for those that work with higher risk populations;
- consider a hiring bonus for positions with high vacancy rates;
- consider a hybrid model;
- assess if staff would benefit from a 4 - 10 work week model;
- consider expanding tele-mental health; and
- relocate CMs from facilities that are more difficult to staff and/or which are significantly understaffed.

Note: In general, recommendations within this section also apply to shortages related to medical staffing.

A. Medical & Mental Health Care

3. Third Party Care

37. As a daylight provision only, BOP shall provide the Monitor with monthly reports about the wait times for outside provider care for Class Members after May 1, 2024. The Monitor shall review this information and make quarterly reports on wait times for care. The Monitor may comment regarding whether BOP is managing Outside Provider relationships to promote timeliness of care for Class Members after May 1, 2024. The Monitor shall review BOP's notice posted in English and Spanish regarding the process for securing Outside Provider care. At a Class Member's or at Class Counsel's written request, BOP shall, Consistent with Security, communicate with Class Members regarding the status of their request or referral for Outside Provider Care, including the estimated wait time.

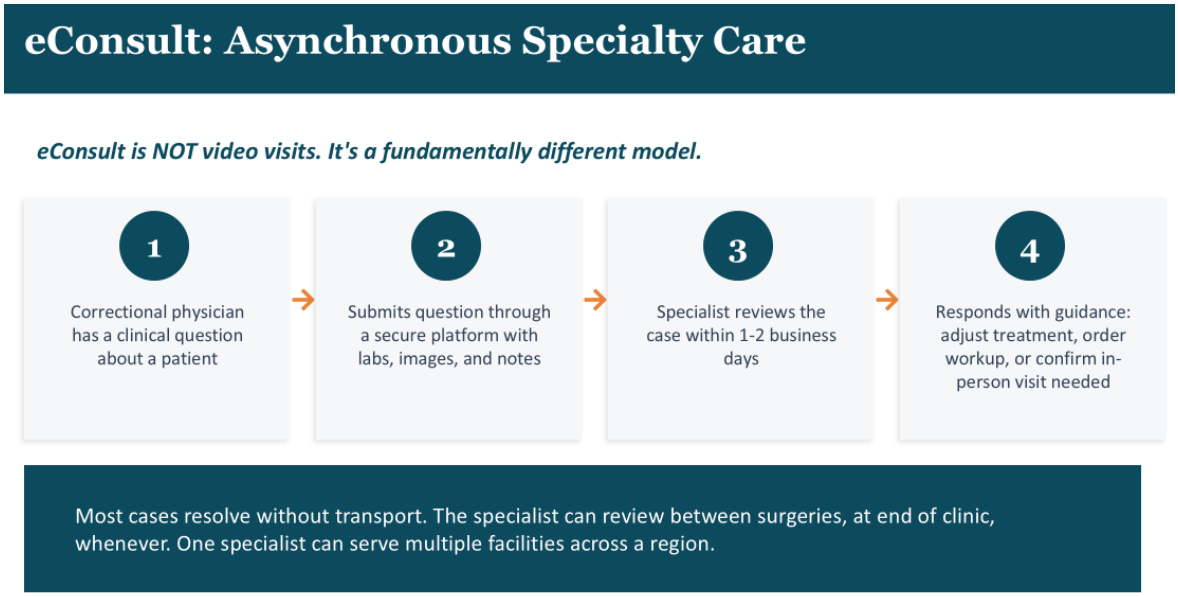
Metrics:

- Bureau Electronic Medical Records System (BEMR)
- Review of BOP Notices Regarding the Process for Securing Outside Provider Care
- BOP Medical and Mental Health Care Staffing Levels, March 2026
- CM Email Complaints Directly or Through Class Counsel
- Confidential Third-Party Wait Times Report, Paragraph 37, Report Provided by BOP
- Program Statements and Reference Documents, January - March 2026, Attachment

Assessment: During this monitoring period, there were 15 CMs awaiting outside specialty clinic appointments (third-party care). The average wait time for these appointments was approximately 9 months, with individual wait times ranging from 3 to 24 months. BOP currently relies on more traditional methods for health care delivery (i.e., in person appointments with specialty care providers) and has expanded to the use of limited video visits. However, there are other opportunities that have been leveraged by correctional health care providers that can assist BOP in providing more timely and cost-efficient specialty care.

As an example, there is asynchronous health care (eConsult) which allows patients and providers to exchange medical information at different times without requiring both parties to be online simultaneously. This model is increasingly used as a tool in the telehealth umbrella of care. eConsults are not video visits, but rather, a model of care that involves peer-to-peer consultations to determine appropriate specialty care evaluation, diagnostics needed, and determination of when an in-person visit is required. By providing asynchronous guidance to corrections-based health care providers, they are better able to manage issues locally, safely and expeditiously, thus maximizing the utilization of limited health care resources for the most critical cases requiring in-person visits, consultation and treatment.

The key insight is that most cases are able to be resolved within the cycle of peer-to-peer discussions inherent to eConsult. No scheduling or coordination of transport is needed which can help alleviate delays associated with the availability of security staff.



Wait Times & Outside Provider Care:

- Did BOP provide the Senior Monitor with monthly reports about wait times for outside provider care for CMs after May 1, 2024? **Yes**
- Did the Senior Monitor review BOP's notice posted in English and Spanish regarding the process for securing outside provider care? **Yes**
- Did any CMs, or Class Counsel make any written requests regarding the status of any CM's request or referral for outside provider care? **Yes**
- If yes, did BOP communicate with the CM regarding the status of the request or referral, including the estimated wait time? **No. CMs continue to send emails to the Senior Monitor requesting information on their medical appointments.**

Findings & Recommendations:

Finding 3: During this quarter, there were 15 outside specialty clinic appointments pending completion for CMS. CMs continue to experience lengthy delays in having these appointments scheduled and completed, including both initial specialty consultations and follow-up appointments recommended by outside specialists. In addition, CMs continue to submit emails and requests seeking updates regarding the status of their pending appointments, reflecting ongoing concerns regarding access to timely specialty care. Several alerts are currently open that are associated with outside specialty services that remain unresolved and are awaiting scheduling and completion. These continued delays raise concerns regarding unreasonable wait times for medically necessary specialty care.

Recommendation 3: BOP should evaluate opportunities to expand its outside specialty provider network and specialty care pool in order to improve timely access to care for CMs. This can include the integration of asynchronous specialty consultation that can help relieve the need for transportation to outside

appointments, support BOP providers in managing care internally while receiving specialist input, and allow for more efficient and valuable in-person visits, when needed. **

A. Medical & Mental Health Care

4. Provision of Care in Primary Language

38. To the extent feasible, BOP shall provide medical and mental health care to Class Members in their primary language at all medical and mental health encounters. This may be accomplished using Language Line Services (LLS) for on-demand, over-the-phone language interpretation services. To the maximum extent feasible, the use of interpreters shall comply with confidentiality requirements, including minimizing the use of AICs as translators and AICs shall only be used as translators for Spanish in emergency situations. The Monitor shall review, and include in quarterly reports, any reports of Class Members being denied access to care in their primary language.

Metrics:

- CM Email Complaints or Through Class Counsel
- CM Interviews
- Program Statements and Reference Documents, January - March 2026, Attachment

Assessment: Although BOP makes Language Line Services (LLS) available, evidence of whether the lines are used by CMs is dependent on staff and the inclusion of the appropriate documentation. The Monitoring Team is concerned that there is a lack of consistent practice related to proper documentation.

Language Line Accessibility:

- Are LLS available and functioning at all facilities housing CMs? **Unable to determine.**
- If the Senior Monitor is unable to determine whether LLS are consistently available and utilized in all BOP facilities, describe why: **Unless a CM submits a complaint, the Monitoring Team is unable to determine if the clinical visit was provided in the CM's primary language.**
- During this quarter, how many complaints did the Senior Monitor receive from CMs regarding denial of access to care in their primary language. **Two complaints were received from CMs 1 and 2 in which they reported they were not provided the use of a translator during their medical appointments.**

Findings & Recommendations:

Finding 4: During this rating period, the Medical Experts received complaints from CMs and Class Counsel indicating that they were denied access to the language line during their clinic appointments.

Recommendation 4: For consistency and verification, BOP should remind providers of the need to document the use of the language line in BEMR, to include the name of the recipient (CM) of this service.

A. Medical & Mental Health Care

5. Access to Rape Crisis Centers

40. The Monitor shall review, and include in quarterly reports, any reports of Class Members being unable to access services from Rape Crisis Centers.

Metrics:

- CM Interviews
- CM Email Complaints Directly or Through Class Counsel
- Sexual Assault Prevention and Intervention Booklet, February 2025
- BOP PREA Homepage Website
- Review of BEMR
- Program Statements and Reference Documents, January - March 2026, Attachment

Assessment: All BOP facilities have fully executed MOUs with rape crisis centers for services.

Rape Crisis Center Services:

- Are RCC services available at facilities housing CMs? **All facilities have RCC services available.**
- During this quarter, did the Senior Monitor receive reports of CMs being denied access to services from RCCs? **No**

Findings & Recommendations:

Finding 5: On March 16, 2026, a reminder was placed on BOP's Trust Fund Limited Inmate Computer System (TRULINCS), at all facilities housing CMs, with directions on how to access Rape Crisis Center services.

Recommendation 5: BOP should continue to incorporate quarterly reminders into TRULINCS and as appropriate.

C. Staff Abuse & Retaliation

3. Reports of Staff Physical or Sexual Abuse

65. The Monitor will review and provide in monthly reports, all reports of staff physical or sexual abuse toward Class Members. The Monitor shall include in quarterly reports an assessment of BOP's responses to reports of staff physical and sexual abuse towards Class Members and recommendations for corrective action, including changes to designations, changes to housing and job placements, provision of medical and/or mental health treatment, and other measures necessary to protect Class Members. The Monitor may make these recommendations prior to issuing a quarterly report on an emergency basis.

Metrics:

- BEMR Clinical Encounters and Psychology Data System
- Quarterly Report of Sexual and Physical Abuse Complaints
- CM Interviews and Complaints
- CM Email Complaints Directly or Through Class Counsel
- Program Statements and Reference Documents, January - March 2026, Attachment

Allegations of Sexual & Physical Abuse			
Sexual Abuse	**12**	Physical Abuse	**2**
TOTAL: 14			

Assessment: On March 19, 2026, BOP rescinded *Program Statement 5324.12 CN-1, Sexually Abusive Behavior Prevention and Intervention Program*, *February 18, 2025* and replaced it with *Program Statement 5333.01, Sexually Abusive Behavior Prevention and Intervention Program Manual, March 19, 2026.*

The new Program Statement 5333.01 incorporated the following updates and expanded guidance to staff, as follows:

- Clarified the use of the BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse and/or Harassment form;
- Clarified the duties of the Regional PREA Coordinators;
- Clarified the responsibilities of the facility PREA Compliance Manager;
- Updated the American Correctional Association standards;
- Provided information on the maintenance of training records;
- Provided additional guidance on the public address announcement and the language of the announcement to be used at shift change;
- Provided additional guidance concerning the separation of alleged inmate victims and perpetrators;
- Clarified levels of response and appropriate actions consistent with response levels;
- Provided conceptual clarification of Full Response Protocol, which is now known as a Level 3 response;

- Clarified Unit Management and Psychology Services responsibilities in assessing and reassessing risk of victimization and abusiveness;
- Provided additional guidance concerning the reassignment of staff, if necessary, to protect victims.
- Created the expectation for staff to use the new BP-A1175, Staff Retaliation Monitoring and BP-A1176, Inmate Retaliation Monitoring forms, as well as new retaliation codes in the applicable BOP inmate management system;
- Required local training annually for all staff completing PREA investigations;
- Clarified that the facility PREA Compliance Manager is responsible for retaliation monitoring, including when staff report sexual abuse or sexual harassment;
- Provided guidance to facility PREA Compliance Managers on tracking and distributing Reports of Incident;
- Clarified psychologist documentation requirements for inmate reports of sexual abuse at previous facilities;
- Clarified definitions of sexual abuse applied by Correctional Services to categorize the nature of sexual abuse when completing a BP-E583, Report of Incident and investigations;
- Provided clarification of evidentiary standards applied to investigation conclusions;
- Created a BP-A1180, PREA Staffing and Workforce Utilization form;
- Created a BP-A1181, Institution PREA Tracking Log form;
- Require the facility PREA Compliance Manager to conduct quarterly multidisciplinary meetings for the supervision and monitoring of inmates to ensure sexual safety; and
- Removed specific references to BOP's inmate management system and related codes. Staff must now refer to the PREA page of the BOP's intranet site for guidance regarding this system and the required codes for PREA.

A highlight of the new Program Statement is the creation of three different response levels to a CM/inmate's claim of sexual abuse in a facility. The definitions and scenarios outlined for each level should assist staff in better understanding the manner in which to manage sexual abuse complaints. A more detailed explanation of each level is outlined below:

Level 1: Level 1 responses occur when an investigation is conducted at a facility other than the one in which the inmate(s) currently resides. Some examples may include the inmate reporting sexual abuse at another facility, the inmate is not available to complete a medical evaluation, or the inmate was released from BOP custody and cannot be interviewed. Level 1 responses ordinarily include fewer systemic interventions given limited access to the alleged victims and perpetrators.

Level 2: Most allegations of sexual abuse and sexual harassment will require, at a minimum, a Level 2 response. If the alleged behavior was said to have occurred at the inmate's current facility at any time in the past, a Level 2 response is required. Level 2 responses include in-person intervention from Psychology Services, Health Services, and Correctional Services; completion of a BP E583, Report of Incident; an investigative case with a determination; inmate notification; and if appropriate, retaliation monitoring and an Executive Team Review. All incidents requiring a Level 2 response are entered on the BP-A1181, Institution PREA Tracking Log form.

Level 3: A Level 3 response, formerly referred to as the Full Response Protocol, refers to the highest level of response intervention following a reported or detected incident of sexual abuse or sexual assault. It includes all actions from Level 2, as well as a forensic medical exam and evidence collection. Activation of an Evidence Recovery Team can be considered. Procedures for ensuring crisis intervention victim services and evidence preservation must be prioritized. Level 3 response is most likely in the immediate aftermath of a detected or reported sexual assault. The facility's PREA Compliance Manager determines whether a Level 3 response is needed and enters the incident on the BP-A1181, Institution PREA Tracking Log form.

Sexual Abuse Reports: As previously noted, during this reporting period there were 12 reports of sexual abuse. A summary of the reports are listed below:

Log# 2026-002-P: During count, two Officers reportedly pulled the curtain open while the CM was showering, thereby exposing her, and causing her to slip and fall. The CM closed the curtain and dressed. She indicated she was unaware that count had begun.

Log# 2026-006-R-P: CM stated that she was strip searched prior to her transfer, and a bra was not supplied. CM reported this made her uncomfortable, given that she was exposed to both male and female staff.

Log# 2026-010-P: CM indicated she reported experiencing headaches to the Medical Department on two occasions. An EKG was administered by a male staff member with another male staff member in the room and with the door closed. The CM's shirt was reportedly lifted by the male staff member to enable the electrodes to be attached.

Log# 2026-023-P: CM indicated that other inmates report sexual abuse to her because they are aware of her advocacy efforts and because she is unafraid to speak out on their behalf.

Log# 2026-025-P: CM was reportedly sexually abused by a staff member in the Medical Department. She subsequently lodged a complaint after other CMs reported similar complaints. This allegedly led to the removal of the staff member.

Log# 2026-029-P: CM stated that during various times in August 2025 she was summoned by a medical staff member who subsequently sexually attacked her. She reported he scared her and said he would keep "*doing those things,*" and if she told anyone, she would not get her "*immigration issues fixed*" and end up in SHU.

Log# 2026-048-P, 2026-049-P, 2026-050-P: While the CM was in the process of being returned to RRC custody via the United States (U.S.) Marshal's Service, CM incurred three incidents.

- While in the computer lab at the U.S. Marshal's Day Reporting Center, a male and a female Marshal entered and reportedly directed the CM to stand up. The female allegedly searched the CM by grabbing her sports bra and pinching her right breast.

- On May 5, 2022, the CM was in a holding cell inside of a court. Twenty minutes after her placement in the cell, two male U.S. Marshal's Officers pat searched the CM. The CM reported that one Officer held the CM's arms while the other rubbed her body up and down. This allegedly included her arms, shoulders, breasts, stomach, thighs and legs. This was the first instance in which the CM reported this information to BOP staff.
- On January 20, 2026, while at a Day Reporting Center, an improper search reportedly took place in which it is alleged that a staff member "*jiggled*" the CM's breasts. This was the first time the CM reportedly shared this information with BOP staff.

Log# 2026-077-P-R: CM was placed in SHU on close observation on dry cell status. She reported feeling uncomfortable by the manner in which she was strip searched. CM was allegedly told to bend over and hold her vagina open so the Officer could view inside. While in the dry cell, the CM reported the Officers "*laughed and talked about the CM, would not give her toilet paper, took her clothes and only gave her a smock to wear*." The CM was also allegedly not allowed to wash her hands or brush her teeth. When she returned to SHU, she was subsequently housed with an inmate who did not have a bottom bunk chrono, but refused to vacate the bottom bunk. As a result, the CM indicated she had to sleep on the floor until the non-CM could be removed from the cell.

BOP Response: "*According to the sexual abuse intervention done and clinical encounter with the CM, the CM did not feel the event was a PREA. The CM did not like the way the Lieutenant stripped her out. When the CM was placed on dry cell status, the CM was given a roll of toilet paper whenever the toilet was used. All conditions were allowed in accordance with Program Statement 5521.06, CN-1.*
All allegations of misconduct were appropriately referred."

Log# 2026-043-P: A third-party anonymous complaint was sent to the Warden, by OIA, stating that the CM was having an affair with a Spanish-speaking Officer. The staff was moved to a new assignment, and the CM was placed on retaliation monitoring despite the fact that she denied the affair.

Log# 2026-053-R-P: CM was uncomfortable in the way she was bent over and strip searched by an Officer. She was reportedly directed to bend over three times while the Officer allegedly smirked and made reference to the fact she was from FCI Dublin.

Physical Abuse: During this reporting period, there were two reports related to physical abuse. A summary of the reports are listed below:

Log# 2026-004-R-PA: CM indicated she previously reported having been "*beaten up"* and sexually assaulted in the SHU. As a result, placements in SHU are very traumatic for her. She also reported continued retaliation from staff.

Log# 2026-086-PA: The CM was on a medical transport. Another inmate reportedly said that the CM was trying to escape. In response, an Officer allegedly pushed her to the ground and put his knee on her back while she was restrained.

Assessment of BOP's Responses to Above-Listed Reports: BOP has improved in the quality and timeliness of their responses to CM complaints submitted to the Senior Monitor. All medical and psychological reports are received by the Senior Monitor when a report of sexual or physical abuse is made. However, the PREA Compliance Manager's documentation related to reports of sexual abuse have not routinely been forwarded to the Senior Monitor, thereby making it difficult to evaluate BOP response in its' entirety. Examples of documentation include BP-A1002, Safeguarding the Inmates Alleging Sexual Abuses/Assault Allegation, January 2014; Retaliation Monitoring forms; and the PREA Tracking Log.

During the onsite visit of FMC Carswell in February 2026, the Senior Monitor was informed of a change to the manner in which sexual abuse victims are handled, depending on the circumstances. The BOP Liaison and facility staff advised the Senior Monitor that guidance had been provided to the field by the National PREA Coordinator on how to handle potential sexual abuse situations between inmates. This guidance differed from how prior similar situations had been handled.

An email from the National PREA Coordinator stated the following:

"*I provided guidance to the field beginning last October/November to bolster our PREA responses nationwide. I met with the regions and female institutions first and I am now meeting with all male institutions. The guidance was to investigate all allegations of PREA behaviors, to include if inmates are witnessed engaging in a sex act and immediately claim it was consensual (not coerced). The reason for this is to ensure an inmate was not victimized, since many victims will initially deny anything wrong is occurring. Once they are seen individually, and after time has passed, they may be more willing to discuss a coerced incident.*

If at the outset of an investigation, it is unclear what is happening, there may be a need to place all inmates in SHU for everyone's safety. This should be time-limited; as soon as the institution has a better understanding of who is a victim AND if there is not any danger to safety and security of the unit or institution, they should release the victim back to the compound. The Warden makes the ultimate decision, using the BP-A1002 form to show the safeguarding rationale (see pg. 37 of policy, section 115.43 (d)."

When the PREA Compliance Manager does not provide complete documentation of a sexual abuse complaint, the Senior Monitor is unable to conduct an appropriate assessment of the facility's full response to the CM, especially in light of the new guidance from the National PREA Coordinator.

Additionally, the placement of appropriate CM cases on the PREA Retaliation Report and retaliation monitoring, in general, continues to be problematic. CM 20 should not have been placed on the report, yet she was. The CM with three sexual abuse complaints (reflected as log numbers 2026-048-P, 2026-049-P, and 2026-050-P) should have been placed on the report, yet she was not.[6]

[6] CM 20 and the CM with sexual abuse complaints logged as 2026-048-P, 2026-049-P and 2026-050-P are detailed in the confidential CM key for the February 2026 public status report.

Summary of Corrective Actions: During this quarter, two staff members were reassigned to different BOP facilities pending the outcome of investigations related to CM sexual abuse complaints. One complaint was made by a CM, and the other by a third party to the Warden via OIA. After the investigation, BOP closed this case with a disposition of unfounded. The Senior Monitor has not been provided a with a copy of the investigation and as a result, is unable to conduct an assessment.

Additionally, CM with the complaint logged as 2025-218-P is under PREA retaliation monitoring, but reportedly suffered a punitive job change after filing the PREA complaint against the person who facilitated the job change.[7] The job was changed from that of an orderly to the kitchen. The CM reported her concern to BOP staff that she felt the job change was retaliatory in nature. She indicated no action was taken by BOP. The CM then complained to the Senior Monitor, who subsequently conveyed this information to the BOP Liaison. In response, the CM's initial position was restored.

Findings & Recommendations:

Finding 6: With the implementation *of Program Statement 5333.01, Sexually Abusive Behavior Prevention and Intervention Program Manual*, *March 19, 2026,* specific documentation must be completed by the PREA Compliance Manager, whereas previously it was only a suggestion. For example, the PREA Compliance Manager's Log, and the After-Action Review Template for all cases except those that are unfounded. However, BOP is still not providing the Senior Monitor with the PREA Compliance Manager's PREA protocol documentation.

Recommendation 6: For the Senior Monitor to conduct an appropriate assessment of the response to a CM's complaint of sexual abuse, documentation completed by the PREA Compliance Manager should be forwarded for review. **

Finding 7: CMs who file claims of sexual abuse are not always placed on PREA retaliation monitoring. At least one CM who was on PREA retaliation monitoring was still suffering from retaliation until the Monitoring Team intervened.

Recommendation 7: Every CM who files a sexual abuse complaint should be placed on PREA retaliation monitoring. ** The PREA Compliance Manager should monitor these cases, to include personally and periodically following up with the CM. This should also include reviewing actions related to the CM, such as job changes that could be punitive in nature, the issuance of Incident Reports, bed moves, etc. This follow up should continue for 90 days or longer, as necessary, and dependent on the circumstances.

[7] CM is identified as log number 2025-218-P in the December 2025 public status and confidential reports, and as log numbers 2025-18-P and 2026-218-R in the February 2026 public report. Both log numbers relate to the same CM who is on PREA retaliation monitoring for both complaints during this quarter.

C. Staff Abuse & Retaliation

3. Reports of Staff Abuse or Sexual Abuse

66. The Monitor shall also review and include in quarterly reports the status of PREA reports made by Class Members regarding abuse that took place at FCI Dublin.

Metrics:

- Office of the Inspector General (OIG) Extract/Any Allegation/All Dublin Investigations Report[8], 1st Quarter - 2026
- BOP Report of New Cases Referred to the Office of Internal Affairs (OIA)/OIG, CM Email Complaints Directly or Through Class Counsel
- Summary of Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: During this quarter, the Senior Monitor was made aware of cases at FCI/FPC Aliceville, on the OIA report matrix, that were opened and closed during the previous quarter (October – December 2025). These were cases in which BOP should have notified the Senior Monitor. It should be noted that on January 14, 2026, BOP opened, reviewed, and returned these investigations to the facility Warden for disposition.

In January 2026, the Senior Monitor requested the status of all CM retaliation complaints since the inception of the Consent Decree (March 31, 2025). In response, BOP provided a matrix from OIA that included all CM complaints of retaliation, sexual and physical abuse. These complaints were reviewed by OIA and either assigned for investigation by OIA, the local institution OIA investigator, or referred to the OIG. If a complaint did not meet the criteria for an investigation, it was designated as a "*complaint for disposition*," and forwarded to the facility's Warden for disposition pursuant to the criteria outlined in the Misconduct Diversion and Discipline Resolution Program Memorandum. For context, BOP adopted this program as a way to improve the timeliness of investigations. A BOP memorandum, dated December 1, 2025, indicated that effective January 1, 2026, a new voluntary program would go into effect that would provide Wardens and employees avenues by which to resolve routine low-level allegations of employee misconduct, without a referral to the OIA or a subsequent investigation.

Based on this information, the Senior Monitor will request additional information on cases that have been returned to the facility Warden for disposition to determine what actions have been taken, and to enable the Senior Monitor to assess and report on these related actions.

Status of Open PREA Cases by Year:

2022: 8 cases remain open
2023: 15 cases remain open
2024: 367 remain open, pending a local investigation or deferral from the OIG (9 cases were closed this quarter).

[8] Reflects BOP title of report.

2025: 43 cases remain open from the previous quarter (5 cases were closed this quarter)[9]
2026: 15 cases were opened this quarter pending a local investigation or deferral from the OIG

Findings & Recommendations:

Finding 8: BOP's database includes all CM allegations and is not sorted by complaint type. Based on the volume of information and the lack of consistency in the entry of data, it is very difficult to query the system. Additionally, the disposition of cases is not included nor whether a CM was notified of the closure of their case. This lack of information makes it difficult for the Monitoring Team to report on the requirements outlined in Paragraph 65.

Recommendation 8: BOP should augment and update the current database (Extract/Any Allegations/All Dublin Investigation Report) to include the outcome of each case, and the date CMs were notified of the disposition of their case. **

Finding 9: Some investigations take an extremely long period of time -- sometimes years to complete.

Recommendation 9: Cases should be investigated and completed promptly. This would help investigators in obtaining more accurate witness testimony given that over time, the recollection of events has the potential to fade. This would also help bring closure to CMs and restore their confidence in the investigative process. **

Finding 10: Pursuant to Paragraph 63, "*If a report of staff physical or sexual abuse against a Class Member is reported to BOP, the BOP Liaison shall alert the Monitor within forty-eight (48) hours of becoming aware of the report unless the forty-eight (48) hours covers a weekend or holiday, in which the report shall be made the next workday. Sexual abuse includes sexual abuse, harassment, and voyeurism as defined by 28 C.F.R. Section 115.6.*" However, some sexual and physical abuse, and retaliation cases on the investigation report were not shared with Senior Monitor, as required.

Recommendation 10: All sexual abuse, physical abuse and retaliation complaints must be shared with the Senior Monitor within the appropriate time frames and as required by the Consent Decree.

Finding 11: On January 14, 2026, OIA opened 20 FCI/FPC Aliceville cases as new matters and closed them on the same date. The Senior Monitor was not made aware of the opening or closure of these cases. The cases that were closed were referred to the facility for disposition.

Recommendation 11: The Senior Monitor should be advised of new cases added to the *OIG Extract/Any Allegation/All Dublin Investigations Report.* If the complainant or victim in an investigation is a CM, the Senior Monitor should be notified of the complaint, the name of the CM, the date of the complaint, and any additional pertinent information.

[9] The query conducted during the last quarter (October – December 2025) indicated there were 48 open cases. The BOP's January – March 2026 report indicates that five of those cases were closed during the current reporting period.

C. Staff Abuse & Retaliation

3. Reports of Staff Physical or Sexual Abuse

67. The Monitor shall also review and include in quarterly reports reported injuries and mistreatment suffered by Class Members during transport between BOP facilities, including the status of investigation into transport issues.

Metrics:

- Closure of OIA Transportation Investigation Report
- Listing of 22 Pre-Consent Decree and 5 Post-Consent Decree Class Counsel Memorandums
- CM Email Complaints Directly or Through Class Counsel
- Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: The investigation into the transport of the 596 CMs originally moved from FCI Dublin to their designated BOP facilities, via different modes of travel, during the period of April 16, 2024, through April 24, 2024, was concluded on October 29, 2025. Of this total, only 20 CM statements were referenced in the report. The report did not state the total number of CMs that were interviewed. Although some staff stated they witnessed the effects of the lack of feminine hygiene products on the bus and that restraints may have been applied too tight, overall, BOP found that the versions conveyed by the CMs were not deemed to be credible by the investigators even though numerous CMs made similar complaints over the course of numerous different transports. Although there were instances of BOP staff corroborating CM complaints, BOP found that the majority of these examples were "*within policy*" and without malicious intent.

The investigation discovered that not all of the transportation buses were equipped with hygiene products. Furthermore, a number of the CMs reported they could not safely use the bus toilet without assistance from fellow inmates. As a result, BOP determined there were two policies related to menstrual products and application of restraints during transport, that were in need of review and/or modification. Although misconduct was not sustained during the investigation, OIA recommended that *Program Statement 5540.09* be reviewed for updates and additional guidance be included specific to the transportation of female inmates.

Subsequent to the release of the report, two additional investigations were opened resulting in allegations that were sustained; one bus did not have hygiene products, while in another instance, a staff member pulled on a leg restraint in an effort to control a CM's movement.

The Senior Monitor received a copy of the investigation on November 6, 2025. In general, the Senior Monitor finds that the investigation is insufficient and lacks the breadth of complaints received during CM interviews. By indicating in the investigative report that the alleged actions were within BOP policy and for the most part, not conducted with malicious intent, conclusions drawn from the investigation discount CM complaints with similar elements. The reported actions of some staff, during various transports, could possibly indicate the beginning of the retaliatory behavior that some CMs still

reportedly feel they suffer today. Failure to incorporate this perception in the investigation report is a significant factor that should have been acknowledged.

Findings & Recommendations:

Finding 12: Based on a review of the OIA's transportation investigation and BOP's March 25, 2026, response to the Senior Monitor's follow-up questions, the Senior Monitor continues to have concerns regarding the treatment of some CMs during the transport from FCI Dublin to their receiving facilities. Based on policy, OIA did not record any of the CM interviews. However, the investigator took notes during CM transportation bus-related interviews.

Recommendation 12: OIA should provide the Senior Monitor with full documentation of the investigation, to include all written notes regarding CM transportation bus-related interviews and any video recordings made during the actual transports to enable a full assessment to be conducted. The Senior Monitor recommends that the investigation be reopened in an effort to ensure that all allegations are investigated, and all CMs interviewed, not just a subset representative of the complaints. **

D. Designation & Release

1. Designations

68. The Monitor shall review and report on Class Member designations. Monthly reports will include information about where Class Members are designated, and quarterly reports will include whether Class Members are designated to facilities with adequate programming, and educational and vocational opportunities.

Metrics:

- CM Email Complaints Directly or through Class Counsel
- Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: During this monitoring period, BOP provided a roster outlining all programming, educational, and vocational opportunities available at each facility that houses CMs. All facilities housing CMs are listed in the attached confidential report titled, *Paragraph 68 (Part 1 and 2), Programming, Educational and Vocation Opportunities, BOP Report.*

There is no delineation between CMs and the general population in the information provided by BOP. The Senior Monitor has repeatedly requested that BOP identify programming information that pertains strictly to CMs. The Senior Monitor cannot identify how many CMs are enrolled and therefore, cannot assess access or participation rates. As a result, it is impossible to answer questions such as:

- Are CMs being offered programming?
- Are they enrolling?
- Are they completing programming?

This also prevents any meaningful evaluation of impact. Without enrollment numbers, capacity versus demand cannot be measured. Additionally, accurate waitlists cannot be identified. In effect, the absence of enrollment data means the Senior Monitor cannot establish a baseline, track trends over time, or evaluate whether BOP is meeting its obligations under the Consent Decree. It significantly limits both accountability and the ability to recommend targeted improvements. While BOP has offered to provide instruction to the Senior Monitor on how to independently access this information, it is too burdensome for the Monitoring Team to query 225 CMs monthly, and is not a substitute for BOP's obligation to provide the data upon request.

FCI/FPC Aliceville: FCI/FPC Aliceville, located in Alabama, is a care-level 2 facility, housing 1,500 low-security female adults in custody (AICs) and 22 CMs. This facility's Education Program offers General Educational Development (GED), English as a Second Language (ESL), Adult Continuing Education (ACE), Sign Language (SLN), and The Barton Reading System, Academic Success. Additional courses are also offered, such as Release Preparation, Post Secondary Education, Partners for Reentry, Academic Success, and Square One: Essentials for Women, Understanding Your Feelings, and Women's Career Exploration. The Vocation Program offers ACE, Carpentry, Electrician, Plumber, Heating, Ventilation, Air Conditioning (HVAC), and Welding. In addition, Cosmetology, Commercial Driver's License, SERVSAFE Food Handler,

and Culinary Arts are offered. The Education Program and the Vocation Programs have an approximate waitlist of 0 to 6 months. The Psychology Program waitlists vary dependent upon a CM's release date and need. For future reporting purposes, BOP should include wait times and not just the number of individuals on each waitlist.

FCI/FPC Aliceville reported there were no class cancellations during this reporting period. For those housed in the SHU, ACE packets are provided weekly and Turning Point handouts are provided monthly by psychology staff.

FPC Bryan: FPC Bryan, located in Texas, is a minimum-security camp housing approximately 660 Female AICs, of which 9 are CMs. The CM population total has consistently remained at 9 during this quarter. This facility offers ACE classes, Logistics, ACT WorkKeys GED, and Academic Success. The Vocation Programs include Certified Nursing Assistant (CNA) classes, Cosmetology, HVAC and Apprenticeship programs. The Psychology Program offers both a Residential Drug Abuse Program (RDAP) and a Non-RDAP (NRDAP), and four other therapeutic courses.

This facility offers a variety of additional programming opportunities. Examples include the Dog Program, Forklift Certification, Occupational Safety and Health Administration (OSHA), and Parenting classes.

Education waitlists range from no wait to 3 months. Vocation Program waitlists range from no wait to one year. Psychology Program waitlists range from 30 days to 9 months.

FPC Bryan reported there were no cancellation of classes during this quarter.

FMC Carswell: FMC Carswell, located in Texas, has a population of 1,147, of which 47 are CMs. The facility includes two housing units for minimum security female AICs. There is also low and high security housing for those not eligible for minimum placement. The Education Program offers GED both in English and Spanish, ESL, The Barton Reading Program, ACE, and Academic Success classes. There are 7 faith-based classes offered. The Vocation Program offers Cosmetology, Culinary Arts, SERVSAFE Manager, and Apprenticeship Programs. A new Nail Technician program was added this quarter; however, an instructor has not been hired. The Psychology Program offers Female Integrated Treatment (FIT) both in English and Spanish, Sex Offender Treatment Program, Dual Diagnosis Residential Drug Program, and Seeking Safety. There are 17 therapeutic courses offered by the Psychology Program at this facility.

The Education Program has a waitlist of up to 6 months and no class cancellations. The faith-based classes have waitlists up to 18 months and had 7 cancellations for the Life Connections class due to the facilitator being on leave and at trainings. Vocation waitlists range from 3 - 6 months, with the Cosmetology program cancelled for the entire quarter until a contractor could be secured to teach the class.

The Psychology Program waitlists range from 4 – 15 months, with cancellations as outlined below:

- Anger management – February 23, 2026 – March 13, 2026 – due to staff in training.
- Basic Cognitive Skills – February 16, 2026 – March 6, 2026 -- due to staff on extended medical leave.

- Emotional Self-Regulation -- February 23, 2026 – March 13, 2026 -- due to staff in training.
- Sex-Offender Non-Residential, February 1, 2026 to March 31, 2026 -- due to staff on extended medical leave.

FSL Danbury: FSL Danbury houses low-security female AICs. It is located in Connecticut and includes a satellite Federal Prison Camp designed to house minimum custody level female AICs in dormitory housing. Twenty CMs are housed at FSL Danbury and two at FPC Danbury. FSL and FPC Danbury both offer GED, ESL, Adult Education classes, and College courses. They additionally offer Culinary Arts as a part of their vocation programs. The Psychology Program at the Camp offers Drug Education, NRDAP, and Trauma in Life. FSL Danbury offers the FIT program, Women's Sexual Safety, National Parenting Program and Foundations.

The Education waitlist ranges from 0 - 30 days with no class cancellations reported by BOP for this quarter. Wait time was not listed for the Culinary Arts program. The Psychology Program waitlist is 0 – 6 months.

There were no cancellations of programs during this reporting period.

FPC Greenville: FPC Greenville, located in Illinois, houses 220 minimum-custody AICs, of which 2 are CMs. This facility offers GED, ESL, ACE, and 7 other education classes. Vocation programs are limited with only a Custodial Certification Program offered. The Psychology Programs consist of FIT, NRDAP, Drug Education, and other classes, to include Emotional Self-Regulation, Seeking Safety, Anger Management, and Trauma in Life. FPC Greenville offers other additional programming opportunities, including Doula training, College Megatronics, and college-level courses.

There are no waitlists for Education classes and the Psychology Programs, while the Vocation class has a 3 - 6 month waitlist.

FPC Greenville reported there were no class cancellations during this reporting period.

SFF Hazelton: SFF Hazelton, located in West Virginia, houses approximately 450 low-security female AICs, of which 8 are CMs. The facility offers GED, ESL, ACE and Academic Success classes. There is also a Barista and SERVSAFE class offered. There are two Vocation programs offered, Culinary Arts and Horticulture. There are 16 additional programming opportunities offered. The Psychology Program offers NRDAP, Trauma in Life, Drug Education, and 3 other programs. The FIT program was suspended in 2024 due to BOP's inability to fill staff vacancies.

The Education courses have a waitlist time of 0 - 5 months. The Vocation courses have a one-year wait time as the courses take one year to complete. The Psychology courses did not provide waitlist times, but rather, the number of AICs on waitlists for each course. This ranges from 99 - 254 AICs. For future reporting purposes, wait times should be included rather than the number of individuals on each waitlist.

FPC Lexington: FPC Lexington, located in Kentucky, is a female satellite Federal Prison Camp housing approximately 254 low/minimum security female AICs of which 8 are CMs. This facility offers GED,

Spanish GED, ESL, ACE and First Step Act courses. Vocation programs consist of Carpentry, Electrical, SERVSAFE and apprenticeships. The Psychology Program offers Resolve, NRDAP, and 12 additional therapeutic courses. Additional programming opportunities are also offered.

The Education waitlist times range from 0 - 12 weeks. The Vocation program's waitlists depend on interest in the courses. A wait time was not provided by BOP. The Psychology programs also stated the wait depends on interest. BOP previously provided the number of inmates on the waitlist, but not for this quarter. For future reporting purposes, BOP should include wait times and numbers of CMs on the waitlist.

There were no class cancellations reported.

FPC Marianna: FCI and FPC Marianna, located in Florida, includes a satellite minimum-security facility housing female AICs. The FCI houses 875 inmates and the FPC houses 248 female inmates of which 2 are CMs. The Education program offers Literacy, GED, Spelling, ESL, Phonics, K2 Awareness, and Parenting. Vocation programs consist of Cosmetology and Dog training. Psychology offers Anger Management, Criminal Thinking, Emotional Self-regulation, NRDAP, Resolve and Trauma in Life courses. There are 23 additional self-help courses offered.

The Education waitlist is 30 - 60 days. The Vocation program waitlists are 18 months in length. The Psychology programs waitlists are 30 - 90 days.

There were no class cancellations reported for this quarter.

FPC Pekin: FPC Pekin, located in Illinois, is a medium security federal correctional institution housing 1060 male inmates, with an adjacent minimum security satellite camp that houses 242 female inmates. The minimum Federal Prison Camp houses 9 CMs. The Education program offers GED, ESL, ACE, and college courses. Vocation opportunities consist of Federal Prison Industries, Occupational Certificates, Ultra Key 6-Typing and Apprenticeships. The Psychology Program offers 10 courses. There were 17 additional programming opportunities listed for this facility.

There are no waitlists for the Education programs. For Post Secondary Education, the wait times depend on the availability of the Pell Grant. Vocation program waitlists vary in length. Psychology programs offered all have varying waitlists with priority given to those with closer release dates. For future reporting purposes, BOP should also include wait times.

Drug Education was cancelled on March 24, 2026, as a result of a staff vacancy.

FPC Phoenix: FPC Phoenix, located 10 miles north of the Phoenix city limits, is a minimum-security facility for female AICs. It houses approximately 256 AICs, of which 15 are CMs. The facility offers GED, ESL, ACE and other education courses. There are two vocation courses offered and 23 Vocational apprenticeships. The Psychology program offers 8 classes inclusive of RDAP, Resolve, and Anger Management. There are also 17 additional programming opportunities, to include a dog program.

The waitlists for the Education program range from 0 - 18 months. Vocation programs can range from 0 - 24 months. The Psychology program waitlists in the previous quarterly report ranged from 6 - 12 months or longer depending on the release date of the CM. The list now includes "*N/A*" for wait times.

Narcotics Anonymous was cancelled on February 25, 2026, because of the unavailability of a volunteer. Sunday Christian Services were cancelled from February 28, 2026, through March 14, 2026, due to the lack of staff coverage.

Jehovah's Witnesses Services were cancelled on February 7, 2026, due to the unavailability of staff. Religious services are an integral source of support for CMs, and it is concerning that these sessions were cancelled.

FCI Tallahassee: FCI Tallahassee, located in Florida, houses approximately 1,142 low security female AICs of which 25 are CMs. The facility offers GED in English and Spanish, ESL, ACE, Hooked on Phonics and College Correspondence courses. Vocation courses offered are Custodial Maintenance and Barista/Culinary Arts. The Psychology Program offers FIT, Resolve, NRDAP, and 12 other therapeutic courses. There are 14 add
itional programming opportunities.

The waitlists for Education range from no wait to 1 year or more. Wait times for Vocation programs range from 2 - 3 months. Psychology Program waitlists range from 7 - 14 weeks.

FCI Tallahassee reported no class cancellations.

FPC Victorville: FPC Victorville, located in California, includes a Satellite Prison Camp housing approximately 256 minimum security female AICs, of which 18 are CMs. This facility offers GED in English and Spanish, and ESL.. It also includes college courses, to include courses from Victor Valley College. The University of California, Los Angeles, was listed last quarter, but not this quarter. Vocation courses offered are Culinary Arts, Workforce Readiness Academy, Doula, HVAC, Electrical, Plumbing, Automotive, Housekeeping, and Manager/Administrative Services Apprenticeships. Additional vocation programs include Solar Panel, Financial Literacy, Forklift, CPR/AED and OSHA 30. The Psychology Program offers courses such as Trauma, Seeking Safety, Resolve, and Anger Management. There are also 26 additional programming opportunities offered.

The Education programs have no waitlist. Vocation waitlists range from no wait to 1 year. Psychology Program course waitlists were not provided. Additionally, Resolve has been cancelled since October 2025 pending the selection of a coordinator. There were no additional cancellations reported.

FCI Waseca: FCI Waseca, located in Minnesota, houses approximately 856 low security female AICs, of which 35 are CMs. This facility provides GED, ESL, ACE, Academic Success, Barton Reading and Spelling, Business and Entrepreneurship, Academic Success, Preparing for Success after Prison, PROWD, and Franklin Covey 7 Habits. A multitude of vocation programs are offered at this facility, making it the most

robust of all the facilities housing CMs. Vocation apprenticeship courses offered include HVAC, Pipefitter, Housekeeping, Cook, Landscape, Teachers Aid, Recreation Assistant, Electric and Baker**.** Additional vocation programs consist of Recycling and Reclamation, Turf and Grounds Management, PAWS/Animal trainer, Landscape Technician, Doula, Certified Nursing Assistant, Personal Trainer, Cosmetology, and Horticulture. The Psychology Program offers RDAP and NRDAP, and 18 other therapeutic classes. There are also 9 additional programming opportunities offered.

The waitlists for education classes range from 0 - 9 months. Vocation course waitlists can range from no wait to 4 years. The Psychology program waitlist ranges from 10 weeks to 1 year.

For this reporting period, there were multiple class cancellations, as follows:

- UNICOR Sewing was closed for the entire quarter because the program was being mothballed.
- SERVSAFE was also closed for the entire quarter as a result of a lack of funding for the testing portion of the course. This is the second quarter this program was closed for this reason.
- CQIA closed for the quarter because the program was mothballed.
- Peer Support Specialist Apprenticeship was closed due to a lack of staffing during this quarter.
- All classes were closed on January 1, 2026, January 19, 2026, and February 26, 2026, as a result of Federal holidays.
- ACT Work Keys was closed for the quarter until a new contract could be secured.
- GED/ESL/ACE were closed on January 2, 2026 and February 13, 2026 due to staff on leave/augmentation.
- Personal Trainer was closed on March 3, 10, 11, 12, 16, and 19 due to staff on leave/augmentation.
- Horticulture/CNA was closed on January 2, 9, 16, 23 and February 13 due to staff on leave/augmentation.
- RDAP was closed on March 4, 2026 as a result of fog watch.

Findings & Recommendations:

Finding 13: BOP did not provide data that accurately reflects programming enrollment, access, and waitlists for CMs. The lack of separation between CM data from non-CM data hinders the Senior Monitor's ability to assess if CMs are designated to facilities with adequate programming, and educational and vocational opportunities. In a previous response to this assertion, BOP stated, *"BOP did not fail to provide this information. Rather, the CD Team expressed an inability in providing this information in a reliable format for all CMs. The CD Team, in good faith, provided information on a SENTRY search which can be performed individually (PPJ8), and suggested the Monitoring Team conduct a sampling of CMs or institutions for each quarter.*" The Senior Monitor contends that performing this query for 225 CMs monthly is burdensome, and is not a substitute for BOP's obligation to provide the data upon request.

Recommendation 13: BOP should provide, on a consistent and ongoing basis, programming data that clearly identifies CMs separate from the general population. This data should be organized in a manner that allows the Senior Monitor to readily assess access, participation, and any disparities in programming

opportunities. Training the Senior Monitor to independently extract information does not relieve BOP of its reporting responsibilities. Clear, disaggregated reporting should be required for all future reporting periods to ensure transparency, accountability, and meaningful reviews. **

D. Designation & Release

4. Compassionate Release

77. The Monitor shall review and report on all compassionate release requests submitted by Class Members. Reports will be quarterly and include an update on the status of the request.

Metrics:

- Reduction in Sentence Requests Alleging Sexual Abuse, Paragraph 77, March 2026, Attachment
- Summary of Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: The following table reflects resolved requests for reductions in sentence (RIS) cases as of March 2026. This information was provided by BOP. A detailed list is included in the confidential attachment

Reduction in Sentence Requests Status Resolved Case List	
Released Between April 1, 2024 and July 8, 2025 (5 releases were in response to approval of an RIS request)	10
RIS Denied by the Office of General Counsel	33
RIS Denied by FSL Danbury	1
RIS Denied by SFF Hazelton	1

Since April 1, 2024, five CMs have been released based on an RIS, of which one was released via executive clemency. Two RIS requests were denied at the facility level (FSL Danbury and SFF Hazelton), and 33 by the Office of General Counsel.

Findings & Recommendations: N/A

E. Member Access to Counsel & the Monitor

83. The Monitor will review, and include in quarterly reports, complaints from Class Members regarding confidential communication with the Monitor or Class Counsel and may provide recommendations for improved confidential communication.

Metrics:

- CM Email Complaints Directly or Through Class Counsel
- Emails from the BOP Liaison
- Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: During this quarter, there were 46 complaints from CMs regarding confidential communication, including access to email, regular mail, and access to legal calls and/or the Senior Monitor. Upon receipt of any complaint from a CM regarding a lack of access, the Senior Monitor immediately contacts the BOP Liaison to request that the issue be resolved. Individual CM complaint detail is provided in the monthly public and confidential monitoring reports.

The following is a synopsis of related complaints during this quarter:

- **January 2026:** Two complaints were received related to legal calls (one from Class Counsel Memorandum) and none regarding legal mail.
- **February 2026:** Five complaints were received related to legal calls (one from Class Counsel Memorandum) and nine related to legal mail (four from Class Counsel Memorandums).
- **March 2026:** Nine complaints were received related to legal calls (three from Class Counsel Memorandums) and twenty-one related to legal mail (eight from Class Counsel Memorandums).

Despite additional training provided to staff by BOP, complaints within this area continue to increase and are concerning. It should be noted that none of the complaints were related to the confidentiality of calls. However, the complaints regarding legal mail were in response to a lack of confidentiality. Legal mail was opened prior to CMs receiving it or opened prior to it being sent out.

Findings & Recommendations:

Finding 14: Despite repeated instruction to staff, issues related to access to legal calls continue to be reported by CMs to Class Counsel and the Senior Monitor.

Recommendation 14: While BOP indicated that additional staff instruction will be provided in response to concerns regarding legal calls and legal mail, repeated reliance on training alone has been insufficient and suggests the need for more structured corrective measures. In facilities where these issues are identified, BOP should move beyond generalized instructions and implement a documented corrective action plan that includes:

- clearly defined timelines for completion of instruction;
- mandatory attendance tracking;
- supervisory verification that policies are being followed; and

- periodic audits of legal mail handling and legal call procedures. **

F. Processing of Damages related to Closure due to Property Loss

84. The Monitor shall also review and report on loss and damage to Class Member property as a result of transfer from FCI Dublin, including the status of Class Members' claims for compensation. Nothing in this section shall prejudice the right of the Class Members to make unreleased claims within the normal one-year time frame from the incident.

Metrics:

- CM Email Complaints Directly or Through Class Counsel
- F. Processing of Damages Related to Closure due to Property Loss, Paragraph 84, Attachment[10]
- Program Statements and Reference Documents, January – March 2026, Attachment

Assessment: From March 15, 2024 through the closure of FCI Dublin on April 15, 2024, CMs were notified of their transfers with minimal notice—sometimes as little as a few hours—and instructed to pack their belongings into a single green duffle bag. Items that could not fit into the duffle bag were packed in one box and some were mailed to the CM's residential address at BOP expense.

NOTE: The Consent Decree did not go into effect until March 31, 2025.

Following the facility's closure and the subsequent transfer of all CMs to locations across the country, numerous individuals reported the loss of personal property, including boxes that were packed, but not mailed to the CMs' residences. CM's that left in the initial stages were provided one duffle bag and not given the opportunity to send excess property home. It was, therefore, left behind. Other CMs were not given the opportunity to pack their property and as a result, it was likely stolen.

The Senior Monitor and Class Counsel have consistently worked with BOP staff to facilitate the processing of property claims. To accommodate CMs who were unable to provide receipts to substantiate the value of their lost property, the Consent Decree offered an alternative option for reconsideration, allowing individuals to submit a signed affidavit in lieu of receipts. BOP reposted the informational bulletin on May 16, 2025. It remained active until March 31, 2026. After BOP reposted the informational bulletin in TRULINCS, many CMs refiled for reconsideration.

CMs report BOP has frequently denied or rejected claims or offered disproportionately low compensation relative to their reported value of the property lost. There is inconsistency in the application of grant and deny criteria, resulting in unequal settlement awards. These concerns are reflected in the attached confidential documentation provided by BOP for this Paragraph.

A significant consequence of the property claim process was that any approved claim payments can be subject to offset by the U.S. Department of the Treasury to satisfy outstanding debts (Judgement Fund) owed by the CM. Individuals may owe money to the federal government which is considered a debt. If

[10] This attachment is included in the *Confidential Quarterly Monitoring Report, January 1 – March 31, 2026.*

the individual does not pay the debt on time, it becomes overdue (delinquent). When the debt is overdue, the Treasury Offset Program (TOP) helps collect the debt by holding back money from a federal payment to the debtor. (Holding back money from a payment is called "*offsetting the payment*" or "*administrative offset*.") For example, if an individual has a delinquent debt for a federal loan, TOP can reduce the individual's federal tax refund or social security benefit payment to pay the debt.

TOP may offset many types of federal payments to collect delinquent debt. These offsets could include obligations such as unpaid child support, taxes, or overpayments of public assistance benefits. Based on information provided by the BOP Point of Contact for property claim information, the BOP will receive notification from the U.S. Department of the Treasury when a payment has been diverted to satisfy an offset. However, the notifications are not timely. In instances where notification is received, it does not include information specifying the nature of the offset. TOP is required to send a notice to the taxpayer and will not offset the debt if a notice is not provided. However, there is no requirement for TOP to determine if the notice is actually received. The offset notification will be mailed to the CMs last known residence. As a result, the CM may not be notified, yet the responsibility falls to the CM to investigate the reason for the offset.

Last quarter BOP produced contact information for the Department of Treasury's Offset Program (TOP). A 1-800 number was provided. This is not helpful as CMs cannot call 1-800 numbers. Their families cannot call this number on their behalf as this is not allowed by the Department of Treasury. BOP has suggested that CMs need to have staff assist them in making a call to the 1-800 telephone number.

Additionally, an address was provided by BOP that had been previously provided. CMs have written to this address with no response. BOP provided additional information in their response to the prior quarterly public status (October – December 2025) report stating, "*The signed letter requesting information regarding the debt should include the CM's Social Security Number and address the CM wants the information sent to.*"

When a claim is under review by BOP, one of the steps in the process is for BOP to send an affidavit to the CM to sign either accepting or denying the amount being offered. BOP policy has no limitations on the number of times the affidavit can be sent to the CM. When the Senior Monitor becomes aware of an affidavit not being received by the CM, the Senior Monitor requests that it be resent to the CM.

Findings & Recommendations:

Finding 15: While the number of documented property claims provides some insight into the scope of the issue, the information provided by BOP remains incomplete. The partial update of data to reflect reconsiderations and Treasury offsets does not allow for a full assessment of how property claims are processed or resolved. Ongoing concerns raised in Class Counsel memoranda further indicate potential systemic issues in the reimbursement practices of CM property claims.

There is also the appearance of inconsistency and disparity in the settlement amounts. The Senior Monitor requested documentation regarding the settlement amounts, but BOP will not provide this

based on their position that the calculations are part of attorney work product and therefore privileged. As a result, it is not possible, at this time, to determine if property claims were consistent and fair in the settlement amounts awarded to CMs. Continued monitoring is necessary to ensure that all claims are carried out through to final resolution.

Recommendation 15: BOP should ensure that complete and accurate data is provided for all CM property claims, reflecting clear documentation of the status of claims, including reconsideration status and payments. BOP should also review its internal processes to identify and address any delays or inconsistencies in the handling of property claims. **

Signature

Submitted to: (1) United States District Court, Northern District of California, Oakland Division, (2) U.S. Federal Bureau of Prisons Counsel & (3) Class Counsel.

Wendy Still, MAS
Senior Monitor

June 30, 2026
Date

Glossary of Acronyms

ACE	Adult Continuing Education
ADO	Administrative Detention Order
AICs	Adults in Custody
BOP	Bureau of Prisons
BEMR	Bureau Electronic Medical Record
C.F.R.	Code of Federal Regulations
CNA	Certified Nursing Assistant
DHO	Disciplinary Hearing Officer
ESL	English as a Second Language
FDC	Federal Detention Center
FCI	Federal Correctional Institution
FIT	Female Integrated Treatment
FMC	Federal Medical Facility
FSA	First Step Act
FTC	Federal Time Credit
GED	General Educational Development
LLS	Language Line Services
MOU	Memorandum of Understanding
NRDAP	Non-Residential Drug Abuse Program
OIA	Office of Internal Affairs
OIG	Office of Inspector General
PREA	Prison Rape Elimination Act
RCC	Rape Crisis Center
RDAP	Residential Drug Abuse Program
RIS	Reduction in Sentence
SCA	Second Chance Act
SHU	Special Housing Unit
SLN	Sign Language
TRULINCS	Trust Fund Limited Inmate Computer System
HVAC	Heating, Ventilation and Air Conditioning

Definitions

The following definitions apply to the terms of the Consent Decree.

Adult in Custody (AIC) refers to any person in BOP custody who is designated at a penal or correctional institution, or in a halfway house, contract facility, or in limited cases, on supervision on home confinement, or designated to some other setting outside a BOP penal or correctional facility. BOP states that it is not responsible for care for persons held in a halfway house, contract facility, or, in limited cases, on supervision on home confinement, or designated to some other setting outside a BOP penal or correctional facility.

Administrative Detention refers to an administrative status which removes an AIC from the general population. Administrative detention status is non-punitive, and can occur for a variety of reasons. 28 C.F.R. § 541.22(a).[11]

Administrative Detention Facility for the purposes of this agreement refers to BOP institutions that house people in pretrial detention, including Metropolitan Correctional Centers (MCCs), Metropolitan Detention Centers (MDCs), and Federal Detention Centers (FDCs).

Alert[s] refers to instances where Senior Monitor, identified a concern arising from a Class Member's treatment or lack thereof at FCI Dublin or during transfer from FCI Dublin, including concerns related to: medical and/or mental healthcare (including Medication Assisted Treatment and Medical and/or Mental Health Nexus Cases, as defined below), PREA reports and advocacy services, compassionate release requests, release dates and application of Federal Time Credits, disciplinary incidents and impacts on security and recidivism classifications (including Good Credit Time, Forfeited Non-Vested Good Time Credit, Administrative Detention Time and Disciplinary Segregation Time), property claims, and transport issues. The Senior Monitor's decision to clear or place an Alert shall be final subject to reconsideration by the Senior Monitor at the Senior Monitor's discretion. Alerts closed prior to the Effective Date may be reopened if the AIC provides proof that the Senior Monitor deems sufficient that the alert should not have been closed. Such requests shall be submitted to the Senior Monitor no later than December 1, 2024, unless the AIC shows by clear and convincing evidence that the evidence submitted in support of reopening could not have been submitted before December 1, 2024. This paragraph does not limit the ability of the Senior Monitor to reopen an alert closed prior to the Effective Date if the Senior Monitor determines, based on sufficient proof, that the alert should not have been closed.

BOP Counsel means both BOP in-house counsel and litigation counsel assigned by the Department of Justice. In the event that any individual BOP Counsel separates from his or her employment or if the case is reassigned to different counsel, BOP Counsel will designate successor counsel and notify the Senior Monitor and Class Counsel of the change.

BOP Liaison means an employee from BOP's Central Office who is a direct report to the BOP's Deputy Director who is designated to and whose sole duties are to facilitate BOP's compliance with the terms of

[11] eCFR :: 28 CFR 541.22 -- Status when placed in the SHU.

this Consent Decree. The BOP Liaison will have access to BOP subject matter experts at the regional and Central Office level, and should assist the Senior Monitor to gather information, help track alerts, and if necessary, should raise concerns with the Deputy Director directly. The BOP Liaison will share only minimal information with other BOP employees, and will share such information only to the extent necessary to enable the BOP Liaison to access necessary records and other information. The BOP Liaison shall not share any information related to a Class Member complaint with any official who is the subject of that complaint. The BOP Liaison does not have independent authority to direct any BOP employee to take a particular action but should make recommendations after consulting with BOP's Deputy Director, subject matter expert, or the Senior Monitor.

Class Member refers to all people who were incarcerated at FCI Dublin between March 15, 2024 and May 1, 2024, and all named Plaintiffs.

Class Counsel refers to Arnold & Porter, California Collaborative for Immigrant Justice, Rights Behind Bars, Rosen Bien Galvan & Grunfeld including Ernest Galvan, Kara Janssen, Luma Khabbaz, Adrienne Spiegel, Susan Beaty, and Amaris Montes. In the event that any individual Class Counsel separates from his or her employment, Class Counsel will designate successor counsel and notify the Senior Monitor and BOP Counsel of the change.

Code of Federal Regulations (C.F.R.) The C.F.R. is the official legal print publication containing the codification of the general and permanent rules published in the Federal Register by the departments and agencies of the Federal Government.

Complaint refers to any notification to the Senior Monitor in any form by a Class Member or Plantiffs' counsel.

Consistent with Security means subject to exceptions including, but not limited to, major disturbances that require staffing to be re-directed to other areas of the facility on an emergency and temporary basis or natural disasters, and similar other emergencies that restrict movement to preserve safety.

Daylight Provision means no attendant obligation shall be imposed upon the BOP other than the collection and provision of data.

Designation or designated refers to an order from the BOP's Designation and Sentence Computation Center indicating the facility of confinement for an AIC.

Disciplinary Segregation refers to a punitive status wherein an AIC is placed in SHU, only as a sanction imposed by a Discipline Hearing Officer (DHO) for committing a prohibited act(s). 28 C.F.R. § 541.22(b), 541.24.

Effective Date refers to the date on which this Consent Decree is approved by the Court.

Federal Correctional Institution (FCI) Dublin refers to both the low security Federal Correctional

Institution located in Dublin, California and the adjacent satellite Camp.

Federal Detention Center (FDC) refers to an administrative security federal detention center that houses pretrial detainees and sentenced inmates.

Federal Medical Institution (FMC) referrals to a Board of Prisons medical institution.

First Step Act (FSA) refers to the First Step Act (FSA) of 2018 (P.L. 115-391) and any subsequent amendments to the law.

Federal Time Credit (FTC) refers to time credits towards prerelease custody or early transfer to supervised relief, authorized by procedures for earning and application of time credits that are outlined within the FSA.

Grievance refers to any BOP cop-out, administrative remedy, or similar written form.

Medical and/or Mental Health Nexus Case refers to a medical or mental health issue that (i) was first raised, identified, or documented at FCI Dublin (whether by the CM themselves, BOP staff or contractors, the then-Special Master, and/or a member of her team, or the Court); or (ii) the Senior Monitor and/or a member of her team, based on a review of a more recently filed grievance or complaint or other communication, determines (ii) category, this definition is limited to Grievances or Complaints submitted to the Senior Monitor no later than December 1, 2024, unless the Senior Monitor determines there is clear and convincing evidence establishing that the grievance or complaint could not have been submitted by December 1, 2024. In making this determination, the Senior Monitor shall review any relevant information available to the Senior Monitor, including any information provided by the CM, BOP personnel or third-party contractors, Class Counsel or BOP Counsel.

Protective Status Protective Status refers to an administrative status where an AIC placed in SHU for their own protection. 28 C.F.R. § 541.23(c)(3). For any AIC who is placed in SHU as a protection case, whether requested by the AIC or staff, an investigation occurs to verify the reasons for placement. 28 C.F.R. § 541.28.

Rape Crisis Centers refers to community-based organizations that help survivors of rape, sexual abuse, and sexual violence who have an active Memorandum of Understanding (MOU) with BOP.

Second Chance Act (SCA) refers to the Second Chance Act of 2007 (P.L. 110-199) or any subsequent amendments to the law.

Security Sensitive Information refers to information whose disclosure without the benefit of a protective order would jeopardize the safety and security of any person, or would jeopardize an ongoing investigation of crime or misconduct.

Senior Monitor (or Monitor) refers to Wendy Still while serving under the order of May 20, 2024, ECF

No. 308 in the instant action, or any successor Monitor appointed in this action.

Special Housing Unit(s) (SHU[s]) refers to housing units in BOP facilities where AICs are separated from the general population, and may be housed either alone or with another AIC. When placed in the SHU, an AIC is either in disciplinary segregation status or administrative detention status. 28 C.F.R. § 541.22.

Special Master refers to Wendy Still during the period between April 4, 2024, and May 20, 2024, when she served as the Special Master in the instant action.

Third Party Care or Outside Provider Care refers to medical, mental health, or dental care that the BOP provides to AICs using non-BOP employees.

Term of the Consent Decree runs two years from the Effective Date, unless terminated pursuant to § VIII.

§ 541.22 Status when placed in the SHU.

When placed in the SHU, you are either in administrative detention status or disciplinary segregation status.

(a) Administrative detention status. Administrative detention status is an administrative status which removes you from the general population when necessary to ensure the safety, security, and orderly operation of correctional facilities, or protect the public. Administrative detention status is non-punitive, and can occur for a variety of reasons.

(b) Disciplinary segregation status. Disciplinary segregation status is a punitive status imposed only by a Discipline Hearing Officer (DHO) as a sanction for committing a prohibited act(s).

§ 541.23 Administrative detention status.

You may be placed in administrative detention status for the following reasons:

(a) Pending Classification or Reclassification. You are a new commitment pending classification or under review for Reclassification.

(b) Holdover Status. You are in holdover status during transfer to a designated institution or other destination.

(c) Removal from general population. Your presence in the general population poses a threat to life, property, self, staff, other inmates, the public, or to the security or orderly running of the institution and:

(1) Investigation. You are under investigation or awaiting a hearing for possibly violating a Bureau regulation or criminal law;

(2) Transfer. You are pending transfer to another institution or location;

(3) Protection cases. You requested, or staff determined you need, administrative detention status for your own protection; or

(4) Post-disciplinary detention. You are ending confinement in disciplinary segregation status, and your return to the general population would threaten the safety, security, and orderly operation of a correctional facility, or public safety.

§ 541.24 Disciplinary segregation status.

You may be placed in disciplinary segregation status only by the DHO as a disciplinary sanction.

§ 541.25 Notice received when placed in the SHU.

You will be notified of the reason(s) you are placed in the SHU as follows:

(a) Administrative detention status. When placed in administrative detention status, you will receive a copy of the administrative detention order, ordinarily within 24 hours, detailing the reason(s) for your placement. However, when placed in administrative detention status pending classification or while in holdover status, you will not receive an administrative detention order.

(b) Disciplinary segregation status. When you are to be placed in disciplinary segregation status as a sanction for violating Bureau regulations, you will be informed by the DHO at the end of your discipline hearing.

§ 541.26 Review of Placement in the SHU.

Your placement in the SHU will be reviewed by the Segregation Review Official (SRO) as follows:

(a) Three-day review. Within three work days of your placement in administrative detention status, not counting the day you were admitted, weekends, and holidays, the SRO will review the supporting records. If you are in disciplinary segregation status, this review will not occur.

(b) Seven-day reviews. Within seven continuous calendar days of your placement in either administrative detention or disciplinary segregation status, the SRO will formally review your status at a hearing you can attend. Subsequent reviews of your records will be performed in your absence by the SRO every seven continuous calendar days thereafter.

(c) Thirty-day reviews. After every 30 calendar days of continuous placement in either administrative detention or disciplinary segregation status, the SRO will formally review your status at a hearing you can attend.

(d) Administrative remedy program. You can submit a formal grievance challenging your placement in the SHU through the Administrative Remedy Program, 28 CFR part 542, subpart B.

§ 541.28 Protection case—review of placement in the SHU.

(a) Staff investigation. Whenever you are placed in the SHU as a protection case, whether requested by you or staff, an investigation will occur to verify the reasons for your placement.

(b) Hearing. You will receive a hearing according to the procedural requirements of § 541.26(b) within seven calendar days of your placement. Additionally, if you feel at any time your placement in the SHU as a protection case is unnecessary, you may request a hearing under this section.

(c) Periodic review. If you remain in administrative detention status following such a hearing, you will be periodically reviewed as an ordinary administrative detention case under § 541.26.

Attachments

Non-Confidential Attachment

- Program Statements and Reference Documents, January – March 2026

Confidential Attachments (provided under separate cover)

- Confidential Quarterly Monitoring Report, January 1 – March 31, 2026
- Class Member Confidential Key, January - March 2026
- Confidential Third-Party Wait Times Report, Paragraph 37, Report Provided by BOP
- Reduction in Sentence Requests Alleging Sexual Abuse, Paragraph 77, March 2026

Program Statements & Reference Documents January - March 2026	CD Para.
Program Statements	
6010.05 Health Services Administration, June 26, 2014	38
6031.05 CN-2 Patient Care, March 14, 2025	38
6270.01 Medical Designations & Referral Services for Federal Prisoners, January 15, 2005	38
Program Statement 5333.01, Sexually Abusive Behavior Prevention and Intervention Program Manual, March 19, 2026	39, 40, 62-66
5310.016 CN-1 Treatment and Care of Inmates with Mental Illness, February 18, 2025	52-57, 65
5200.09 CN-1 Female Offender Manual, July 31, 2025	39, 40, 44, 52-57, 58, 64-67, 68
5220.01 First Step Act Program Incentives, July 14, 2021	68
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