First Step Act Implementation Fact Sheet

I. Retroactive Application of Fair Sentencing Act (Crack: Powder)

- The Act’s retroactive application of the Fair Sentencing Act of 2010 (reducing the disparity between crack cocaine and powder cocaine threshold amounts triggering mandatory minimum sentences) has resulted in 1,691 sentence reductions.

II. New/Expanded Programs and Policies

- Compassionate Release
  - One of the first policy changes (notification and assistance) were new procedures for “compassionate release” sentence reductions under 18 U.S.C. §§ 3582 and 4205(g).
  - 51 requests have been approved since the FSA was enacted (as compared to 34 total in 2018).
- Good Conduct Time Changes Apply on July 19th
  - Will result in approximately 3,100 releases from BOP custody.
  - Created individualized release plans for every inmate.
  - Coordinated with the U.S. Probation and Pretrial Services System to ensure a seamless transition.
- Expand the Use of Home Confinement
  - The FSA expanded a pilot program for elderly offenders to be transitioned to Home Confinement. Since enactment of the law, 201 inmates have qualified to be transitioned under the pilot program.
  - In response to FSA requirement to expand the use of outside resources, BOP added approximately 1,700 volunteers since December 2018.
- Drug Treatment
Sobriety is a key in maintaining employment. The BOP has a robust drug treatment strategy, including well-designed, effective programs. Offenders who have an identified need are provided with an individualized treatment plan to address their needs.

- +16,000 are currently enrolled in drug treatment programs.
- BOP offers a variety of drug treatment programs, one of the most popular being the Residential Drug Abuse Program (RDAP), which is optimized to begin as the inmate is near release. There are no wait lists for RDAP.
- Medication Assisted Treatment (Opioids)
  - The FSA requires BOP to assess the availability of and the capacity to treat heroin and opioid abuse through evidence-based programs, including medication-assisted treatment. In the wake of the opioid crisis, this is important treatment for those suffering from opioid addiction.
  - Offenders are initially screened to assess for potential benefits of Medication Assisted Treatment (MAT) program enrollment. Once identified, offenders undergo additional medical and psychological screening, and if they volunteer to participate, are provided an individualized treatment plan to address their needs.
  - Every inmate within 15 months of release who might qualify for MAT has been screened.
  - 171 have met the criteria.

- Re-Entry
  - The Department announced our “Ready to Work” initiative, through which the BOP seeks to connect employers directly to inmates seeking employment to improve reentry outcomes. The Ready to Work initiative aims to enable every offender reentering his or her community an opportunity to secure employment.
  - Since June 13, 2019, four employers have expressed interest in the program.

- BOP has 21 pilot dog programs operating under Sec. 608 of the Act.
- BOP has developed a youth mentoring program in accordance with the Act.
- BOP has issued policy guidance to enable its employees to carry and store personal weapons under 18 U.S.C. § 4050.
- BOP has issued guidance to field sites advising of changes in the law with regard to placing offenders within 500 driving miles of their release residence, as well as
processing nearer release transfers, where appropriate. Since the passage of the First Step Act, 797 requests for nearer release transfers have been approved.

- BOP has developed procedures implementing the dyslexia screening requirement, which will enable BOP to identify those offenders within the BOP inmate population who have this learning disorder.

- BOP has issued an updated advisory memo and distributed training for federal prison facilities housing female inmates regarding the Act’s requirements prohibiting the use of restraints on pregnant inmates absent extreme circumstances (Note: BOP policy has prohibited the use of restraints on pregnant prisoners absent extreme circumstances since August 2014).

- BOP has issued guidance to Wardens as to how to enter into partnerships with nonprofits and other private organizations (including faith-based, art, and community-based organizations); institutions of higher education; private vocational training entities; and industry-sponsored organizations. These partnerships will enable BOP to expand the opportunities for evidence-based recidivism reduction programs and productive activities.

- The U.S. Marshals Service (USMS) has issued updated procedures and forms for USMS and its contracted private detention facilities regarding the Act’s requirements prohibiting the use of restraints on pregnant inmates absent extreme circumstances.

- BOP policies and contracts provide sanitary products and ensure they are available and accessible to female offenders in compliance with the Act.

- BOP has issued guidance to field sites regarding entering into partnership agreements with outside organizations to offer evidence-based recidivism reducing programs.

- BOP and USMS policies comply with the Act’s requirements that prohibit certain room confinement for juvenile offenders. (BOP does not house juveniles in its facilities.)

- BOP offers specialized and comprehensive de-escalation training to its employees and officers in accordance with Sec. 606 of the Act (including mental health awareness training regarding inmates with psychiatric disorders), and more than 31,000 BOP employees have already received the updated training.

- BOP’s Federal Prison Industries (FPI) has begun work to expand FPI’s markets under the Act.