

Do-it-Yourself Self-Advocacy Workshop

June 15, 2022



To help more people facing challenges with the criminal justice system, we've developed a do-it-yourself workshop. The workshop assists people who want to help themselves through the challenging times ahead. We're happy to offer this lower-cost alternative to the more personal services that our team of mitigation experts offer.

In this era of the First Step Act and the CARES Act, it's more important than ever for people to engineer self-advocacy initiatives. This workshop offers ongoing support for people while they work toward the earliest possible release date. Simultaneously, the project generates resources to build our nonprofit, the [Prison Professors Charitable Corporation](#). Through the nonprofit, we continue to gather information that help all justice-impacted people get a better outcome. For example, you may want to review our interviews with subject matter experts, including:

- » [Federal Sentencing Judges](#)
- » [Chief US Probation Officer](#)
- » [Director of the Federal Bureau of Prisons](#)

The workshop requires ongoing commitment from our team. Each participant will also have to make an ongoing commitment. To advance possibilities for the best possible outcome, participants should be deliberate with every decision.

To start, let me introduce myself as your primary instructor. My name is Michael Santos. Please feel free to skip the background section below if you're familiar with my journey. I offer the backstory for those who may want some information about the instructor.

Background on Instructor:

My name is Michael Santos, and I am the founder of Earning Freedom and the Prison Professors nonprofit. My partner is Justin Paperny. You may be familiar with Justin through our other platform, White Collar Advice, where he has a significant presence. Since 2008, when we met inside the Taft federal prison camp, Justin and I have collaborated.

For context, you should know that I made terrible decisions as a young man that led me to federal prison in 1987 when I was 23. I served the next 26 years as federal prisoner number 16377-004. During those 9,500 days, I served time in every security level. The journey included time in prisons of every security level.

Members receive a paperback copy of *Earning Freedom: Conquering a 45-Year Sentence* and *Prison: My 8,344th Day*. *Earning Freedom* tells the story of what I learned from my 9,500-day journey and the importance of self-advocacy. The book is a roadmap for laying out a plan to maintain discipline and energy while climbing through a lengthy journey. *Prison*, the story of a single day, describes a detailed examination in the importance of daily self-advocacy. We send additional content through Corrlinks messages to help participants "stay the course" on the path of self-advocacy.



» *I would never ask anyone to do anything that I didn't do.*

What Happens After Sentencing?

By beginning a self-advocacy strategy early, a person can begin to restore confidence, building a record that will lead to a better outcome. After sentencing, the person may not have the advantage of an attorney. For that reason, a person should learn steps he or she can take to work toward a transition to society at the soonest possible time.

When federal judges impose sentences, they order the person into the custody of the Attorney General. The Attorney General tasks the staff members in the Bureau of Prisons to carry out the sentence. Toward the end of the sentence, staff members may transition the person to a Residential Reentry Center (RRC), also known as a halfway house. Before the First Step Act, few mechanisms existed for a person to work toward advancing a release date.

On April 9, 2008, President George Bush signed the Second Chance Act. That law authorized the Bureau of Prisons to transition a person from federal prison to a halfway house for up to 12 months. Of those 12 months, a person could serve up to six months, or the final 10% of the sentence, on home confinement.

An example may bring more clarity to that rule. Consider the length of sentence for two people:

| Person serving a 30-month sentence | Person serving a 120-month sentence |
|---|--|
| Sentence length: 30 months | Sentence length: 120 months |
| Good time credit: 4.5 months (15 percent) | Good time credit: 18 months (15 percent) |
| Time in the BOP: 25.5 months | Time in the BOP: 102 months |
| Eligible time in halfway house: 12 months | Eligible time in halfway house: 12 months |
| Eligible time on home confinement: 3 months (10 percent of the sentence, because it's less than six months) | Eligible time on home confinement: 6 months (maximum amount under the Second Chance) |

Ultimately, each warden could decide how much RRC time to award within the framework of the Second Chance Act.

The First Step Act and Compassionate Release:

The First Step Act passed in 2018. It opened more opportunities for people in federal prison to advocate for an earlier release. Besides earning credit for participating in learning programs, a person could petition for compassionate release under the First Step Act.

Before the First Step Act became law, requesting compassionate release or leniency was practically impossible. First, a person had to persuade the BOP to file a motion with a sentencing court, asking a judge to grant compassionate release. If the BOP refused to file the motion, a judge would not have jurisdiction to grant relief. Despite thousands of worthy candidates, the BOP filed few motions. Clearly, despite having the power to grant mercy, the BOP would rarely act on its own accord to support a request for compassionate release.

With the First Step Act, a person did not *need* the Bureau of Prisons to file a motion for compassionate release. If a person went through the appropriate process of requesting administrative remedy, the person could file a motion with the sentencing court, and a federal judge could grant a compassionate release.

The CARES Act:

During the Pandemic, President Trump signed the CARES Act, with vast implications for people in federal prison. People serving federal sentences had a new opportunity to transition to home confinement. The CARES Act authorized the Bureau of Prisons to transition people to home confinement much sooner than before. Typically, if the person's sentence was less than 18 months, the BOP would consider the person for home confinement after the person served 25% of the sentence; if the sentence exceeded 18 months, the person would qualify after he served 50% of the sentence.

To transition to home confinement under the CARES Act, a person had to qualify. The person could not have a history of violence, and the person should have a good record in prison to show an extraordinary and compelling adjustment.

The BOP released a set of Memorandums to guide prison officials.

- » March 26, 2020 Memo (See attached)
- » April 3, 2020 Memo (See attached)

Since the Bureau of Prisons released the Memorandum, thousands of people transitioned from prison to home confinement. They remained accountable to the Bureau of Prisons until the end of their sentences. Yet those people were at home with their families. People serving sentences on home confinement had significantly higher levels of liberty than if they remained in prison. While on home confinement, the people could:

- » Work and earn a living,
- » Have a modicum of freedom for recreation,
- » Attend classes and prepare for higher levels of success.

Despite the danger of COVID, and authority under the CARES Act, the BOP did not authorize all eligible people to transfer to home confinement. If the BOP did not transfer a person to home confinement, the person would have to work through administrative remedy process, showing why he or she was a worthy candidate. People in prison must become masters of self-advocacy.

Our DIY Self-Advocacy Workshop offers ongoing insight and guidance for people to launch an initiative that could advance a person's candidacy for transfer to home confinement, compassionate release, and other ways to improve outcomes during a journey through the Bureau of Prisons.

What do participants get from the DIY Workshop:

1. A self-directed course that teaches participants how to prepare an administrative remedy package to start a request for home confinement, or overcome other challenges that come while serving

time in prison.

2. A self-directed course that teaches participants how to prepare a request for the sentencing judge to consider a self-directed request for compassionate release.
3. Ongoing tutorials we send to the participant in prison twice each month.
4. Access to our Impact@PrisonProfessors newsletter, which we send to members of our community in prison.
5. Data from our ongoing research apprise participants of what works for people who self-advocate well.
6. Access to our weekly group video calls, where participants and their advocates can learn from our daily research.
7. Sample administrative remedy forms and supporting documentation.
8. Copies of softcover books and workbooks, identified below:
 - » *Earning Freedom: Conquering a 45-Year Prison Term*
 - » *Prison! My 8,344th Day*
 - » *Success After Prison: How to Build a Career After Release*

We contribute 100% of the revenues from this project to support our nonprofit enterprise, the Prison Professors Charitable Corporation. You may learn more about the mission of our nonprofit through this link:

- » [The Prison Professors Charitable Corporation](#)

If this project makes sense, our team will help you enroll. We recommend that all participants join the weekly group calls for our community.

With hopes of proving worthy of the trust participants place in us, our team will work hard to help participants self-advocate effectively through the prison journey.

Michael Santos

Michael Santos



PS. If you'd like to get more information on our Do-it-Yourself Self-Advocacy Workshop, please connect with our partner, Sam Mangel. He can help you understand how self-advocacy strategies led to his early release from a 60-month sentence:

» [Click this link to book an appointment with Sam Mangel](#)


» Call to speak with Sam Mangel: 561-490-4544



Office of the Attorney General
Washington, D. C. 20530

March 26, 2020

MEMORANDUM FOR DIRECTOR OF BUREAU PRISONS

FROM: THE ATTORNEY GENERAL 
SUBJECT: Prioritization of Home Confinement As Appropriate in Response to COVID-19 Pandemic

Thank you for your tremendous service to our nation during the present crisis. The current situation is challenging for us all, but I have great confidence in the ability of the Bureau of Prisons (BOP) to perform its critical mission during these difficult times. We have some of the best-run prisons in the world and I am confident in our ability to keep inmates in our prisons as safe as possible from the pandemic currently sweeping across the globe. At the same time, there are some at-risk inmates who are non-violent and pose minimal likelihood of recidivism and who might be safer serving their sentences in home confinement rather than in BOP facilities. I am issuing this Memorandum to ensure that we utilize home confinement, where appropriate, to protect the health and safety of BOP personnel and the people in our custody.

I. TRANSFER OF INMATES TO HOME CONFINEMENT WHERE APPROPRIATE TO DECREASE THE RISKS TO THEIR HEALTH

One of BOP's tools to manage the prison population and keep inmates safe is the ability to grant certain eligible prisoners home confinement in certain circumstances. I am hereby directing you to prioritize the use of your various statutory authorities to grant home confinement for inmates seeking transfer in connection with the ongoing COVID-19 pandemic. Many inmates will be safer in BOP facilities where the population is controlled and there is ready access to doctors and medical care. But for some eligible inmates, home confinement might be more effective in protecting their health.

In assessing which inmates should be granted home confinement pursuant to this Memorandum, you are to consider the totality of circumstances for each individual inmate, the statutory requirements for home confinement, and the following non-exhaustive list of discretionary factors:

- The age and vulnerability of the inmate to COVID-19, in accordance with the Centers for Disease Control and Prevention (CDC) guidelines;

- The security level of the facility currently holding the inmate, with priority given to inmates residing in low and minimum security facilities;
- The inmate's conduct in prison, with inmates who have engaged in violent or gang-related activity in prison or who have incurred a BOP violation within the last year not receiving priority treatment under this Memorandum;
- The inmate's score under PATTERN, with inmates who have anything above a minimum score not receiving priority treatment under this Memorandum;
- Whether the inmate has a demonstrated and verifiable re-entry plan that will prevent recidivism and maximize public safety, including verification that the conditions under which the inmate would be confined upon release would present a lower risk of contracting COVID-19 than the inmate would face in his or her BOP facility;
- The inmate's crime of conviction, and assessment of the danger posed by the inmate to the community. Some offenses, such as sex offenses, will render an inmate ineligible for home detention. Other serious offenses should weigh more heavily against consideration for home detention.

In addition to considering these factors, before granting any inmate discretionary release, the BOP Medical Director, or someone he designates, will, based on CDC guidance, make an assessment of the inmate's risk factors for severe COVID-19 illness, risks of COVID-19 at the inmate's prison facility, as well as the risks of COVID-19 at the location in which the inmate seeks home confinement. We should not grant home confinement to inmates when doing so is likely to increase their risk of contracting COVID-19. You should grant home confinement only when BOP has determined—based on the totality of the circumstances for each individual inmate—that transfer to home confinement is likely not to increase the inmate's risk of contracting COVID-19.

II. PROTECTING THE PUBLIC

While we have an obligation to protect BOP personnel and the people in BOP custody, we also have an obligation to protect the public. That means we cannot take any risk of transferring inmates to home confinement that will contribute to the spread of COVID-19, or put the public at risk in other ways. I am therefore directing you to place any inmate to whom you grant home confinement in a mandatory 14-day quarantine period before that inmate is discharged from a BOP facility to home confinement. Inmates transferred to home confinement under this prioritized process should also be subject to location monitoring services and, where a court order is entered, be subject to supervised release.

We must do the best we can to minimize the risk of COVID-19 to those in our custody, while also minimizing the risk to the public. I thank you for your service to the country and assistance in implementing this Memorandum.



Office of the Attorney General
Washington, D. C. 20530

April 3, 2020

MEMORANDUM FOR DIRECTOR OF BUREAU OF PRISONS

FROM: THE ATTORNEY GENERAL *UPBarr*
SUBJECT: Increasing Use of Home Confinement at Institutions Most Affected by COVID-19

The mission of BOP is to administer the lawful punishments that our justice system imposes. Executing that mission imposes on us a profound obligation to protect the health and safety of all inmates.

Last week, I directed the Bureau of Prisons to prioritize the use of home confinement as a tool for combatting the dangers that COVID-19 poses to our vulnerable inmates, while ensuring we successfully discharge our duty to protect the public. I applaud the substantial steps you have already taken on that front with respect to the vulnerable inmates who qualified for home confinement under the pre-CARES Act standards.

As you know, we are experiencing significant levels of infection at several of our facilities, including FCI Oakdale, FCI Danbury, and FCI Elkton. We have to move with dispatch in using home confinement, where appropriate, to move vulnerable inmates out of these institutions. I would like you to give priority to these institutions, and others similarly affected, as you continue to process the remaining inmates who are eligible for home confinement under pre-CARES Act standards. In addition, the CARES Act now authorizes me to expand the cohort of inmates who can be considered for home release upon my finding that emergency conditions are materially affecting the functioning of the Bureau of Prisons. I hereby make that finding and direct that, as detailed below, you give priority in implementing these new standards to the most vulnerable inmates at the most affected facilities, consistent with the guidance below.

- I. **IMMEDIATELY MAXIMIZE APPROPRIATE TRANSFERS TO HOME CONFINEMENT OF ALL APPROPRIATE INMATES HELD AT FCI OAKDALE, FCI DANBURY, FCI ELKTON, AND AT OTHER SIMILARLY SITUATED BOP FACILITIES WHERE COVID-19 IS MATERIALLY AFFECTING OPERATIONS**

Subject: Increasing Use of Home Confinement at Institutions Most Affected by COVID-19

While BOP has taken extensive precautions to prevent COVID-19 from entering its facilities and infecting our inmates, those precautions, like any precautions, have not been perfectly successful at all institutions. I am therefore directing you to immediately review all inmates who have COVID-19 risk factors, as established by the CDC, starting with the inmates incarcerated at FCI Oakdale, FCI Danbury, FCI Elkton, and similarly situated facilities where you determine that COVID-19 is materially affecting operations. You should begin implementing this directive immediately at the facilities I have specifically identified and any other facilities facing similarly serious problems. And now that I have exercised my authority under the CARES Act, your review should include all at-risk inmates—not only those who were previously eligible for transfer.

For all inmates whom you deem suitable candidates for home confinement, you are directed to immediately process them for transfer and then immediately transfer them following a 14-day quarantine at an appropriate BOP facility, or, in appropriate cases subject to your case-by-case discretion, in the residence to which the inmate is being transferred. It is vital that we not inadvertently contribute to the spread of COVID-19 by transferring inmates from our facilities. Your assessment of these inmates should thus be guided by the factors in my March 26 Memorandum, understanding, though, that inmates with a suitable confinement plan will generally be appropriate candidates for home confinement rather than continued detention at institutions in which COVID-19 is materially affecting their operations.

I also recognize that BOP has limited resources to monitor inmates on home confinement and that the U.S. Probation Office is unable to monitor large numbers of inmates in the community. I therefore authorize BOP to transfer inmates to home confinement even if electronic monitoring is not available, so long as BOP determines in every such instance that doing so is appropriate and consistent with our obligation to protect public safety.

Given the speed with which this disease has spread through the general public, it is clear that time is of the essence. Please implement this Memorandum as quickly as possible and keep me closely apprised of your progress.

II. PROTECTING THE PUBLIC

While we have a solemn obligation to protect the people in BOP custody, we also have an obligation to protect the public. That means we cannot simply release prison populations en masse onto the streets. Doing so would pose profound risks to the public from released prisoners engaging in additional criminal activity, potentially including violence or heinous sex offenses.

That risk is particularly acute as we combat the current pandemic. Police forces are facing the same daunting challenges in protecting the public that we face in protecting our inmates. It is impossible to engage in social distancing, hand washing, and other recommended steps in the middle of arresting a violent criminal. It is thus no surprise that many of our police officers have fallen ill with COVID-19, with some even dying in the line of duty from the disease. This pandemic has dramatically increased the already substantial risks facing the men and women who keep us safe, at the same time that it has winnowed their ranks while officers recover from getting sick, or self-quarantine to avoid possibly spreading the disease.

The last thing our massively over-burdened police forces need right now is the indiscriminate release of thousands of prisoners onto the streets without any verification that those prisoners will follow the laws when they are released, that they have a safe place to go where they will not be mingling with their old criminal associates, and that they will not return to their old ways as soon as they walk through the prison gates. Thus, while I am directing you to maximize the use of home confinement at affected institutions, it is essential that you continue making the careful, individualized determinations BOP makes in the typical case. Each inmate is unique and each requires the same individualized determinations we have always made in this context.

I believe strongly that we should do everything we can to protect the inmates in our care, but that we must do so in a careful and individualized way that remains faithful to our duty to protect the public and the law enforcement officers who protect us all.



**U.S. Department of Justice
Memorandum
Federal Bureau of Prisons**

Correctional Programs Division

Central Office
320 First Street, N.W.
Washington, DC 20534

April 22, 2020

MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: Andre Matevosian, Acting Assistant Director
Correctional Programs Division

HUGH HURWITZ Digitally signed by HUGH
HURWITZ
Date: 2020.04.22 14:17:15 -04'00'
Hugh J. Hurwitz, Assistant Director
Reentry Services Division

SUBJECT: Home Confinement

In an effort to protect the health and safety of staff and inmates during the COVID-19 pandemic, it has become imperative to review at-risk inmates for placement on home confinement. This memorandum provides additional guidance and direction and rescinds the memorandum dated April 3, 2020.

It should be noted that for public safety reasons, in accordance with the March 26, 2020, memorandum from the Attorney General, and to ensure BOP is deploying its limited resources in the most effective manner, the BOP is currently assessing the following factors to ensure inmates are suitable for home confinement:

- reviewing the inmate's institutional discipline history for the last twelve months;
- ensuring the inmate has a verifiable release plan;
- verifying the inmate's primary or prior offense history does not include violence, a sex offense, or terrorism related;
- confirming the inmate does not have a current detainer;
- reviewing the security level of the facility currently housing the inmate, with priority given to inmates residing in Low and Minimum security facilities;
- reviewing the inmate's score under PATTERN, with inmates who have anything above a minimum score not receiving priority treatment;

- and reviewing the age and vulnerability of the inmate to COVID-19, in accordance with the CDC guidelines.

In addition, and in order to prioritize its limited resources, BOP has generally prioritized for home confinement those inmates who served a certain portion of their sentences, or who only have a relatively short amount of time remaining on those sentences. While these priority factors are subject to deviation in the BOP's discretion in certain circumstances and are subject to revision as the situation progresses, at this time, the BOP is prioritizing for consideration those inmates who either:

- have served 50% or more of their sentences,
- or have 18 months or less remaining on their sentences and have served 25% or more of their sentences.

Additionally, pregnant inmates should be considered for viability of placement in a community program to include Mothers and Infants Together (MINT) programs and home confinement.

All inmates must be reviewed by the SIS Department at the referring facility to determine if the inmate has engaged in violent or gang-related activity in prison. Additionally, inmates must have maintained clear conduct for the past 12 months to be eligible.

Referrals must be made based on appropriateness for home confinement. Consideration should be given to whether the inmate has demonstrated a verifiable reentry plan that will prevent recidivism and maximize public safety, including verification that the conditions which the inmate would be confined upon release would present a lower risk of contracting COVID-19 than the inmate would face in his or her BOP facility.

All referrals should clearly document the review of the following:

- Unit Team staff will screen each inmate identified to determine if they have a viable release residence and ask questions specific to:
 - Specific type of release residence (House/Apt/Group home, etc.),
 - Who will the inmate live with,
 - Any health concerns of individuals in the residence,
 - Contact phone numbers should he/she be placed on home confinement,
 - Transportation plan as to how the inmate will be transferred to the home confinement location.

All the above information must be clearly documented on the referral for home confinement prior to submission to the RRM Office.

Inmates determined to have a viable release residence will be screened by Health Services and a determination made as to if the inmate requires frequent and on-going medical care within the next 90 days. If frequent and on-going medical care is required, then:

- Health Services staff will coordinate with Naphcare and RRM's Health Services Specialists to determine if the inmate's medical needs can be met in the community at this time. Naphcare will set up follow-up care prior to the inmate's transfer. An inmate must transfer with AT LEAST 90 days of any prescribed medications.
- If the inmate's medical needs cannot be met in the community at this time, the inmate will remain at the BOP facility.
- If the inmate does not require frequent and on-going medical care, a referral to the community will be processed.
- All the above information must be clearly documented on the referral for home confinement prior to submission to the RRM Office.

Once an inmate is referred for home confinement due to the COVID-19 pandemic, the Case Management Activity (CMA) assignment **CV-COM-REF** should be loaded in SENTRY.

If the Warden determines there is a need to refer an inmate for placement in the community due to risk factors, or as a population management strategy during the pandemic; however, the inmate does not meet the above listed criteria, a packet should be forwarded to the Correctional Programs Division for further review. Packets should be sent to BOP-CPD/Assistant Director from the Warden's general mailbox.

Case Management Coordinators must track all inmates determined to be ineligible for home confinement or the Elderly Offender Pilot Program and enter the appropriate denial code in SENTRY. Reports outlining reason for denial must be reported to BOP-CPD/Unit Management on a weekly basis by Monday at 2:00 p.m. EST.

If an inmate does not currently qualify for home confinement under BOP criteria, they should be reviewed for placement in a

Residential Reentry Center and for home confinement at a later date, in accordance with applicable laws and BOP policies.

If you have any questions, please contact David Brewer, Acting Senior Deputy Assistant Director, Correctional Programs Division, at (202)353-3638 or Alix McLearn, Senior Deputy Assistant Director, Reentry Services Division, at (202)514-4919.