

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Name of facility:		Federal Correctional Institution Bennettsville including the Satellite Prison Camp	
Physical address:		696 Muckerman Road Bennettsville, South Carolina 29512	
Date report submitted:		August 14, 2014	
Auditor Information		James Curington	
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Telephone number:		352-538-2636	
Date of facility visit:		July 29 – August 1, 2014	
Facility Information		FCI Bennettsville	
Facility mailing address: (if different from above)			
Telephone number:		843-454-8200	
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input checked="" type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
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Agency Information			
Name of agency:		Federal Bureau of Prisons	
Governing authority or parent agency: (if applicable)		U.S. Department of Justice	
Physical address:		320 First St., NW, Washington, DC 20534	
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Agency Chief Executive Officer			
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AUDIT FINDINGS

NARRATIVE:

A Prison Rape Elimination Act (PREA) audit was scheduled by the American Correctional Association (ACA) for the Bureau of Prisons (BOP) Federal Correctional Institution (FCI) Bennettsville, South Carolina including the Satellite Prison Camp (SPC). The date of the audit was July 29 through August 1, 2014.

This was a dual Intensive Reaccreditation Process (IRP)/Prison Rape Elimination Act (PREA) audit. James Curington, PREA auditor was notified and assigned this audit of FCI Bennettsville in May, 2014. Separate materials were sent by both the ACA and the BOP for this dual audit.

The audit process began with a review of the audit instrument materials for adult prisons and jails furnished by the national PREA resource center. To summarize, there are seven sections, A through F, comprised of the pre-audit questionnaire, the auditor compliance tool, instructions for the PREA audit tour, the interview protocols, the auditor's summary report, and the checklist of documentation process map.

Using these materials, the process began with the posting of notices, making contacts and reviewing the questionnaire. Scheduling and announcements were initiated through the American Correctional Association and the Bureau of Prisons. The audit began with the first of the contacts, Mr. Michael Stone, Bureau Accreditation Manager, External Audits Branch BOP, and then the sharing of a series of emails. This series of emails was divided into 15 parts. These 15 parts contained 2 to 16 attachments. These attachments were comprehensive and started with the pre-audit questionnaire response and documents from the BOP Central Office and FCI Bennettsville. Specifically; abstracts, agendas, agreements, charts, contracts, files, handbooks, lesson plans, meeting minutes, memos, pictures, policies, records, schedules, studies, supplements, training records, and others were sent. The pre-audit questionnaire was originally completed May 28, 2014 and was last revised and finalized on August 1, 2014. The auditor was especially appreciative of the clarification, revisions and/or appropriate additions and corrections made by the Associate Warden, Larry Schults and the PREA Compliance Manager, Dr. Cindy Ojeda, Chief Psychologist.

Monday evening, July 28, the Warden, Mr. M Travis Brad, Mr. Larry Schults, Mr. Michael Stone, other key staff and the auditor met for dinner and discussed the complexities, direction and agenda of accomplishing this dual audit.

Mr. Michael Stone and the auditor stayed in Laurinburg, North Carolina and commuted daily to the facility in Bennettsville, South Carolina.

The tour and site visit began July 29 with the security identifications and precautions and then a meeting with key staff. The following were in attendance:

Mr. M. Travis Bragg Warden

Mr. Larry Shults Associate Warden of Programs, PREA Compliance Manager

Mr. Michael Furman	Associate Warden of Operations.
Miss Sheila Brosier	Executive Assistant/SPC Administrator
Mr. William Hicks	Captain
Dr. Cindy Ojeda	Chief Psychologist
Mr. Tony Borck	Health Systems Specialist
Ms. Jenny Hayes	Associate Warden Secretary / Recorder
Ms. Anessa Merrit	Program Reviewer In Charge (RIC)
Ms. Debora Ingram	Health Service Examiner
Ms. Mary Birchler	Health Service Specialist
Ms. Kelley DeWald	Health Service Examiner
Ms. Wendy McManus	Health Service Administrator
Mr. Michael Stone	Accreditation Manager, BOP
Mr. James Curington	PREA Auditor

The PREA auditor, at this time, explained that he was there to observe all areas of the facility, paying particular attention to intake reception, and screening areas, all housing units, Segregated Housing Units (SHU), health care areas, recreation and food service, work and education areas and areas that have been modified or renovated. This tour would include asking questions and observing operations.

After the introductions and greetings, the tour of the facility began at approximately 8:30 a.m. and continued until 2:30 p.m. that afternoon. The tour continued on the second day visiting the SPC and the outbuildings, Human Resources, Education, Financial Management, the Trust Fund, Computer Services, and Special Investigative Services. The third day the auditor toured the Psychology Department, Religious Department and inside the control room, including a complete and thorough tour of the whole facility. All four days included revisits to most of the institution and interviews with staff and inmates.

While at FCI Bennettsville, 25 staff were formally interviewed from scripted questions. Interviews included specialized staff, the Warden, the PREA Compliance Manager, the Deputy PREA Compliance Manager, health care staff, human resource staff, the Facility Investigator, staff responsible for intake and screening and random staff from each shift plus staff in all housing areas, also staff from the SHU and education and vocational staff. Additionally, 20 inmates were formally interviewed including inmates from each housing unit, inmates in the SHU and inmates who identified themselves as bisexual and/or homosexual. There are no intersex nor transgender inmates at FCI Bennettsville.

Of special note: for this PREA audit, the auditor was presented with three items that were particularly interesting, impressive and indicative of the efforts staff and inmates have put in to preparing for this PREA audit:

1. Laminated, Prison Rape Elimination Act first responder cards outlining duties and responsibilities
2. A pocket notebook entitled, Prison Rape Elimination Act (PREA) Standards: A Guide for Employees, Contractors and Volunteers, complements of FCI Bennettsville Psychology Services.
3. Two pages listing 22 bullets of the FCI Bennettsville PREA implementations.

The process concluded at 12:15 p.m. August 1 in the Warden's executive conference room after summary discussions. It was noted at that time that a summary report would be submitted within 30 days.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Federal Correctional Institution Bennettsville, is located in the sand hills of north-central South Carolina about 20 miles south of the North Carolina border. FCI Bennettsville, is located at 696 Muckerman Rd., Bennettsville, SC 29512. The facility takes its name from the county seat, Bennettsville, of Marlboro County. This is a rural area primarily known for its cotton, soybean, wheat and peach agriculture.

[REDACTED]

[REDACTED]

[REDACTED]

Facility demographics:

Rated Capacity: 1152 FCI; 128 SPC from FCI Bennettsville inmate demographics. Welcome booklet for 2014

Actual Population: 1639 FCI; 153 SPC July 29, 2014

Average Daily Population for the last 12 months: 1637 FCI; 131 SPC

Average Length of Stay: 143.3 months FCI; 120 months SPC

Security: minimum/medium FCI; minimum SPC / Custody Level: 155 minimum, 1455 low, 22 medium, 5 other FCI; 153 minimum SPC.

Age Range of Offenders: 20 – 86

Number of Full-Time Staff: 331 includes both the FCI and the SPC

8 Administrative, 68 Program, 158 Security, 97 other

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Non-applicable: 1

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The BOP Sexually Abusive Behavior Prevention and Intervention Program statement PS5324.11 clearly outlines, zero tolerance and requires compliance at all BOP facilities. Not only is the agency's zero tolerance policy outlined in this program statement, it was clear that FCI Bennettsville supports such through its BEN5324.11 supplemental policy for the institution.

Furthermore, through discussions with staff and inmates, observation of bulletin boards and posters, handouts and materials such as inmate and staff handbooks, laminated first responder cards, shirt pocket flip guides on PREA, all outlining zero tolerance, the institution met this standard.

The agency PREA Coordinator was identified and organizational charts included.

The institution has a PREA Compliance Manager, Associate Warden, Mr. Larry Shults and a Deputy Compliance Manager, Dr. Cindy Ojeda.

§115.12 - Contracting with other entities for the confinement of inmates

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Program statement PS5324.11 that prescribes zero tolerance to the BOP operations, also requires that contractors with the BOP adopt a zero tolerance policy towards all forms of sexual abuse and sexual harassment. Contracts, furnished as examples, were reviewed.

§115.13 – Supervision and Monitoring

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

FCI Bennettsville has developed documents and puts forth its best efforts to comply on a regular basis with its staffing plan. The Warden's and the Human Resources Department's, comprehensive involvement has assured appropriate staffing ratios and adequate supervision. Correctional Service's critical post assignments are maintained and managed on a daily basis.

Intermediate and higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

Executive staff, including the Safety Manager and Facilities Manager, are routinely reviewing technology to assist in supervision and monitoring.

§115.14 – Youthful Inmates

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Not Applicable. There are no youthful inmates at FCI Bennettsville.

§115.15 – Limits to Cross-Gender Viewing and Searches

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility does not conduct cross gender strip and visual body cavity searches of inmates. Note: in the past 12 months, there have been zero number of cross gender strip and visual body cavity searches of inmates as well as zero strip or visual body cavity searches of inmates involving exigent circumstances by nonmedical staff. Additionally, policy prohibits staff from physically examining or searching transgender or intersex inmates for the sole

purpose of determining the inmate's genital status. There are no transgender or intersex inmates at FCI Bennettsville at this time.

Procedures require that staff of the opposite gender announce their presence when entering inmate housing. It was discussed several times that the idea of simple courtesy and some privacy could and should be extended in inmate housing.

It was observed in the restrooms, shower areas and cells and confirmed by interviews with staff and inmates that inmates can perform bodily functions, change clothing and shower without staff of the opposite gender completely viewing them. All felt there was a sense of some privacy.

All staff have received training in conducting patdown searches, counts, unannounced rounds to assure compliance with the standard limits to cross gender viewing and searches.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency has established procedures to provide inmates with limited English proficiency, and an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. (Policy statement PS5324.11)

Only care 1 level graded inmates are assigned to FCI Bennettsville. For inmates who are limited in English proficiency, a staff member will assist. One of the random inmates interviewed by this auditor required staff assistance to translate and the staff member presented the scripted PREA questions for the interviewee. In the past 12 months, there has been zero number of incidences where inmate interpreters, readers or other types of inmate assistants have been used.

§115.17 – Hiring and Promotion Decisions

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The Warden and the Human Resource Manager were interviewed and presented a thorough, comprehensive and inclusive overview of policy and procedures for the agency and the institution as it relates to PREA, background checks and all personnel hiring and promotion practices.

There is a code of ethics that all employees are expected to follow. Also noted for this standard was the agency policy on hiring and promoting, PS3000.03 and the government's general service personnel practices.

§115.18 – Upgrades to Facilities and Technology

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

This facility is a prototypical large, medium security federal correctional institution which was opened in 2004. [REDACTED]

[REDACTED] All areas of the facility are constantly reviewed for improvement and updating as necessary. The Warden and executive staff make rounds and meet to identify blind spots in security and facility weaknesses. Staff are also encouraged to assist with identifying needed upgrades to the facility and the technology they use. Interviews with staff were especially complementary.

§115.21 – Evidence Protocol and Forensic Medical Examinations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency, BOP is responsible for administrative investigations. The Office of the Inspector General (OIG), and/or the Federal Bureau of Investigation (FBI) may be responsible for criminal investigations. FCI Bennettsville staff are familiar with all protocols which are adapted from the Department of Justice national policy. Furthermore, evidence collection, as required, may be done through Palmetto Health Columbia, South Carolina Regional Hospital, including the collection of sexual assault evidence and the conducting of a sexual assault investigation, e.g. rape kit as administered by sexual assault nurse examiner, and/or forensic examiner. The facility documents efforts to provide SANEs or SAFEs (Palmetto Health, Columbia).

Advocacy service agreements have been sought in Bennettsville, South Carolina, and in North Carolina for the inmate population (PeeDee Counseling Coalition, Durham Crisis Response Center). This has been unsuccessful. Thus, the facility is continuing to pursue outside advocacy resources, but also understands that its Psychology staff and Chaplaincy Services staff, who are trained, may and can be called upon to administer such counseling to inmates who have been abused or harassed.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency ensures that the administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment as defined in policy PS5324.11

The facility ensures that an administrative criminal investigation is completed for all allegations of abuse with the supplemental institutional policy BEN5324.11. During the past 12 months there has been one allegation of sexual abuse and sexual harassment that was received. This resulted in an administrative investigation and was referred for criminal investigation. It was completed and the resulting investigation revealed that the allegation was unfounded. This was appropriately documented, and was published on the agency website or made publicly available via other means.

§115.31 – Employee Training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

After reviewing the questionnaire, receiving the documents from the Central Office and the institution, after reviewing training records, curriculum and after interviewing staff and inmates, it was clear to this auditor that employees were well-trained.

Staff were knowledgeable about the zero tolerance policy for sexual abuse and sexual harassment. They were knowledgeable on how to perform their responsibilities in detection, reporting and response. They have received pocket handbooks on PREA, they have attended meetings, training sessions and updates through the internet, all on PREA compliance. Moreover, employees carry a first responder card on how to handle PREA first response.

Employees are trained annually. In the past 12 months, 311 staff who may have contact with inmates, have been trained.

Between trainings, employees are provided information concerning PREA, through department head meetings, departmental meetings, specialized training, semi-annual trainings, video presentations, the Warden's memos and briefings. Especially impressive was the BOP's Internet and communications, i.e. the Sallyport training tool that is used to train and enhance communication.

Employees document that they have been trained and understand the standard training they have received.

FCI Bennettsville exceeded substantial compliance, they exceed standards.

§115.32– Volunteer and Contractor Training

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All volunteers and contractors who have contact with inmates have been trained on their responsibility under agency policies. In the past 12 months, there have been 11 volunteers/contractors who have been trained in the agency's policies. The agency maintains documentation on this training.

§115.33 – Inmate Education

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Admission and orientation was observed, the Inmate Handbook was reviewed and interviews with staff and inmates revealed that, at the time of intake, inmates receive training and information about the zero tolerance policy and how to report instances of or suspicions of abuse or harassment. Inmate interviews confirmed this education,

864 inmates were trained and given information on PREA. The institution indicated that the number of inmates in the facility, on the date of the audit, who did not receive comprehensive education within 30 days of intake was zero.

The agency maintains documentation of inmate participation in PREA education. Form BP – S518.052 is the documentation.

Key information about the agency’s PREA policy is continuously and readily available through posters, inmate handbooks, and other written formats.

§115.34 – Specialized Training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency’s PREA policy PS5324.11 requires investigators be trained in conducting sexual abuse investigations in confinement. After review of investigative intelligence training records, certificates, TruIntel, and the curriculum, it is clear that the agency supports training, and the special investigators received training with three having completed the training. The agency maintains this documentation.

§115.35 – Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Medical and mental health practitioners, who work regularly at FCI Bennettsville, are trained. The number and percent of all medical and mental health care practitioners who work regularly at this facility and have received training by the agency are, 13 in Health Services, and three in Psychology, 90%. Documentation is maintained.

Facility medical staff do not conduct forensic medical exams.

§115.41 – Screening for Risk of Victimization and Abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The screening process for risk of victimization and abusiveness is objective and meets PREA standards. BOP policy PS5324.11 was reviewed along with the Intake Screening Form and the Psychology Intake Form. This, combined with the interviews of mental health staff and the PREA Coordinator, and the inmate interviews supports the finding of compliance. The Clinical Psychologist was especially helpful in her interview and the information and data presented reference this assessment process.

Inmates are screened within 72 hours of intake. 864 inmates were screened within the timeframe for the risk of sexual victimization or the risk of sexually abusing other inmates.

The facility reassesses risk of victimization or abusiveness within 30 days after the inmates arrival at the facility.

The agency's policy prohibits disciplining inmates for refusing to answer or disclosing complete information about mental, physical or developmental disabilities or sexual orientation questions or victimization, or the inmates own perception of vulnerability.

§115.42 – Use of Screening Information

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Practice, observation, and documentation, along with interviews with mental health staff and interviews with inmates supports appropriate use of this information.

The safety of each inmate is paramount.

§115.43 – Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing, again this is the policy statement PS5324.11.

The number of inmates at risk of sexual victimization, who were held in involuntary segregated housing in the past 12 months for 1 to 24 hours was zero.

The number of inmates at risk of sexual victimization, who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement is zero.

From review of the information/documentation, the number of inmates at risk of sexual victimization who were held in involuntary segregation housing the past 12 months was zero.

§115.51 – Inmate Reporting

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency has established procedures allowing for multiple internal ways for the inmates to report, privately, to agency officials about sexual abuse and sexual harassment.

Interviews with inmates, interviews with staff, revealed that inmates know how to report sexual abuse and sexual harassment. Policy PS5324.11, posters and bulletin board information, and the TruLink communication system all support multiple internal ways for inmates to report privately to agency officials concerning PREA.

§115.52 – Exhaustion of Administrative Remedies

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. Policy PS1330.18 clearly outlines the procedure for remedies, extensions, third-party reporting, exhaustion of remedies and emergency grievances. The facility also has a supplemental procedure BEN1330 to assist with administrative remedies.

The number of grievances alleging sexual abuse filed by inmates in the past 12 months is zero.

§115.53 – Inmate Access to Outside Confidential Support Services

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility is in a rural area and has had difficulty obtaining agreements with community service providers for confidential support services. FCI Bennettsville continues to make efforts in soliciting outside confidential support services. The Psychology Department and Religious Department have been trained in these kind of support services and work with the inmate population to meet their needs.

§115.54 – Third-Party Reporting

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency provides a method to receive third-party reports of inmate sexual abuse or harassment. Third-party reporting is through the Internet, Bureau of Prisons website. Inmates can report as third-party using the TruLink communication system with access to the OIG.

The agency and facility also publicly distribute information on how to report inmate sexual abuse or sexual harassment on behalf of the inmates, through the pamphlet: Abusive Behavior, Prevention and Intervention, and through PREA reports and notices.

§115.61 – Staff and Agency Reporting Duties

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Sexually Abusive Behavior, Prevention and Intervention Program statement PS5324.11 clearly outlines staff and agency reporting steps.

Interviews with staff and inmates revealed that all are aware of the step by step procedure to take concerning reporting duties.

Training curriculum and records reveal that staff and inmates have been trained in how to report.

Laminated business size cards for staff clearly identify how to report, including how to report during nonbusiness hours, and who to notify in completing first responder duties. Additionally, the staff have been presented, complements of the Psychology Services Department, Bennettsville FCI, a pocket handbook which is a guide for employees, contractors and volunteers about the Prison Rape Elimination Act.

§115.62 – Agency Protection Duties

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The institution and its staff were very knowledgeable and well-trained in their protection duties when an inmate is subject to substantial risk of imminent sexual abuse. Agency and institutional policy direct the appropriate protective measures that must be made without unreasonable delay.

In the past 12 months, the number of times the facility has determined that an inmate was subject to substantial risk of imminent sexual abuse was zero.

§115.63 – Reporting to Other Confinement Facilities

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, FCI Bennettsville knows the appropriate procedure to immediately handle this issue. The institutional policy BEN5324.11 clearly outlines the steps.

During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was one. Appropriate notification was done and follow up was within the timeframe.

In the past 12 months, there have been no allegations of sexual abuse received from other facilities regarding FCI Bennettsville.

§115.64 – Staff First Responder Duties

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

First responder duties are outlined in the policy on Sexually Abusive Behavior Prevention and Intervention Program, policy PS5324.11.

First responder duties are also further outlined in the institutional supplemental policy BEN 5324.11.

Each of the employees at FCI Bennettsville have received, Prison Rape Elimination Act, PREA cards that clearly outline first responder duties. Additionally, Psychological Services has given complimentary copies of a small pocket handbook explaining the Prison Rape Elimination Act, PREA, standards for the staff. Interviews with staff confirm knowledge and training of first responder duties.

§115.65 – Coordinated Response

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility has a written coordinated response plan (BEN5324.11) led by the Associate Warden and Chief Psychologist.

PREA reviews and training sessions have occurred with medical and mental health practitioners, investigators, and facility leadership.

§115.66 – Preservation of ability to protect inmates from contact with abusers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Collective bargaining agreement: the Federal Bureau of Prisons and Counsel Prison Locals, American Federation of Government employees have entered into a new master agreement effective July 21, 2014 to July 20, 2017. This document preserves the ability to protect inmates from contact with abusers (if it is staff).

§115.67 – Agency protection against retaliation

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency's policy on PREA protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff.

The facility also has a supplemental policy BEN5324.11, which offers protections.

The Associate Warden/PREA Compliance Manager is charged with monitoring retaliation. This monitoring is to last at least 90 days unless longer monitoring is warranted.

Zero incidents of retaliation occurred in the past 12 months.

§115.68 – Post-Allegation Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All available alternatives are explored before determination is made for the placement of inmates who have alleged to have suffered sexual abuse in involuntary housing.

Zero number of inmates who have alleged to have suffered sexual abuse were held in involuntary housing in the past 12 months for 1 to 24 hours awaiting completion of assessment.

Zero number of inmates who have alleged to have suffered sexual abuse, who were assigned to involuntary housing in the past 12 months for longer than 30 days while awaiting alternative placement.

§115.71 – Criminal and Administrative Agency Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency's program statement PS5324.11 Sexually Abusive Behavior Prevention and Intervention Program governs criminal and administrative agency investigations.

The number of sustained allegations of conduct that appear to be criminal, at FCI Bennettsville is zero.

§115.72 – Evidentiary Standard for Administrative Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

A "preponderance of the evidence" was described as the level of evidence during interviews with the special investigative services staff.

Agency policy clearly defines the evidentiary standard as a "preponderance of the evidence", PS5324.11.

§115.73 – Reporting to Inmate

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Any inmate who makes an allegation that he or she suffered sexual abuse in the BOP facility is informed verbally or in writing as to whether the allegation has been determined to be substantiated or unsubstantiated or unfounded following an investigation.

One allegation of inmate sexual abuse was made. That allegation was investigated and reported as an unfounded allegation, and the inmate was notified verbally or in writing of the results of the investigation.

There were zero investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency.

There has been no substantiated or unsubstantiated complaints of sexual abuse committed by a staff member against an inmate at FCI Bennettsville in the last 12 months.

§115.76 – Disciplinary sanctions for staff

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Staff is subject to disciplinary actions, up to and including termination violating agency sexual abuse or sexual harassment policies.

In the past 12 months, there have been zero number of staff from the facility that have violated agency sexual abuse or sexual harassment policy. Outlined in Warden's memo.

§115.77 – Corrective action for contractors and volunteers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policy requires any contractor or volunteer who engages in sexual abuse be appropriately reported.

There have been zero number of contractors/volunteers reported to law enforcement for engaging in sexual abuse of inmates. Outlined in Warden's memo.

§115.78 – Disciplinary sanctions for inmates

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Inmate discipline policy outlines disciplinary sanctions for inmates for sexual abuse and sexual harassment.

Zero number of administrative findings of inmate on inmate sexual abuse or sexual harassment.

Zero number of criminal findings of inmate on inmate sexual abuse or sexual harassment.

The agency prohibits all sexual activity between inmates.

§115.81 – Medical and mental health screenings; history of sexual abuse

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to statute/rule 115.41 are offered a follow-up meeting with a medical or mental health practitioner.

In the past 12 months 100% of the inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

In the past 12 months 100% of the inmates who have previously perpetrated sexual abuse, as indicated during screening, were offered a follow-up meeting with a mental health practitioner.

Psychologist, interviews, and case reviews with inmates support meeting this standard. Intake staff, unit management staff and mental health staff clearly are trained in documenting history of sexual abuse, victimization and abuse and/or making appropriate mental health scheduling.

§115.82 – Access to emergency medical and mental health services

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

FCI Bennettsville has the appropriate medical support contracts and service agreements with Marlborough Health Center and Columbia Palmetto Health Center, for treatment and care.

Psychological services and mental health staff at the facility are trained and supportive in extending appropriate care to inmates at this FCI.

Administration and management, through observation and interviews, are clearly supportive of their medical and mental health treatment departments and services.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse.

Medical/mental health treatment is outlined in policy statement PS5324.11, Sexually Abusive Behavior, Prevention and Intervention Program. The Chief Psychologist and health care staff work hard to extend appropriate treatment to inmates at this facility as observed and heard by this auditor in interviews with staff and inmates.

§115.86 – Sexual abuse incident reviews

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility conducts a Sexual Abuse Incident Review at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months, there have been zero number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only unfounded incidents.

There is a Sexual Abuse Incident Review Team at FCI Bennettsville, including upper-level management officials. The facility implements recommendations for improvement or reasons for not doing so.

§115.87 – Data Collection

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its direct control. Agency policy PS5324.11 again directs this data collection.

The agency aggregates the incident-based sexual abuse data at least annually.

Special Investigative Services data, internal affairs data, SENTRY data, and the annual report substantiate the standard.

§115.88 – Data Review for Corrective Action

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The annual report is used by FCI Bennettsville to improve the effectiveness of its sexual abuse prevention, detection, response, policies and training.

The agency Bureau of Prisons makes its annual report readily available to the public through its website www.BOP.gov.

§§115.89 – Data Storage, Publication, and Destruction

Exceeds Standard (substantially exceeds requirement of standard)

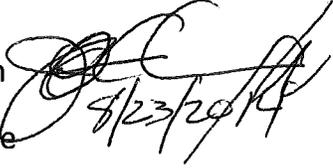
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The agency program statement PS5324.11, Sexually Abusive Behavior, Prevention and Intervention Program, ensures that the incidents based on accurate data are securely retained. The Bureau of Prisons maintain sexual abuse data collection pursuant to statute/rule 115.87 for at least 10 years after the date of initial collection, unless federal, state or local all require otherwise.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

James Curington 
Auditor Signature

8/14/2014

Date