

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:		Metropolitan Detention Center Brooklyn	
Physical address:		80-29 th St. Brooklyn, NY 11232	
Date report submitted:		October 16, 2014	
Auditor Information			
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Email:		Tome8689@yahoo.com	
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Date of facility visit:		September 8-10, 2014	
Facility Information			
Facility mailing address: <i>(if different from above)</i>			
Telephone number:		(718) 840-4200	
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	
Name of PREA Compliance Manager:		Patricia Rodman	Title: Associate Warden
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Agency Information			
Name of agency:		Federal Bureau of Prisons	
Governing authority or parent agency: <i>(if applicable)</i>		U.S. Department of Justice	
Physical address:		320 First St., NW, Washington, DC 20534	
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AUDIT FINDINGS

NARRATIVE:

The Metropolitan Detention Center (MDC) Brooklyn is the largest and most complex federal detention center in the country. The institution’s mission is to house federal detainees from the New York metropolitan areas that are going through the judicial process. However, as an administrative level facility, MDC Brooklyn houses all types of sentenced and un-sentenced offenders (designated, hold-over, pre-trial). Between 80 to 100 pre-trial detainees travel back and forth on a daily basis from the facility to court proceedings in Brooklyn, Manhattan, and New Jersey. The facility serves the Eastern and Southern Districts of New York. Federal detainees from the District of New Jersey and the Eastern District of Pennsylvania are also housed in the institution. Additionally, MDC Brooklyn operates as a transfer center averaging 8400 yearly admissions. Last year alone, over 44,000 offenders traveled through MDC Brooklyn. The facility houses a number of high profile offenders involved in a variety of illegal activity including terrorism, organized crime, and drug smuggling. Generally, offenders are housed on a short-term basis averaging 120-180 days. The facility also houses approximately 350 Cadre offenders. The cadre offenders are assigned to MDC Brooklyn to assist in the maintenance and upkeep of the facility. Many of the cadre offenders are from the immediate geographical area which helps maintain family ties and facilitate visiting.

In January 1992, the Bureau of Prisons gained possession of the structure and began transforming the warehouse into an interim facility to house federal offenders until a new institution could be constructed. When the West building was completed, an executive staff decision was made for this interim facility to remain open permanently.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] Each housing unit in both the East and West buildings is staffed by a unit manager, case manager, correctional counselor, and a unit secretary. These staff persons are directly responsible for the day-to-day needs of the offenders. Please refer to the attached site and floor plans to

visualize the facility.

SUMMARY OF AUDIT FINDINGS:

During the last 12 months Brooklyn had 24 cases of sexual abuse and sexual harassment investigated. Seventeen (17) of these cases were alleged sexual abuse and (7) were alleged sexual harassment.

The seventeen (17) sexual abuse allegations involved four (4) allegations made by inmates arriving at Brooklyn occurring at other facilities involving staff. Once the facility learned of each of these four allegations the Warden at Brooklyn made immediate notifications to the facilities where the incidents were alleged to have taken place. All these cases are still under investigation. Of the remaining thirteen (13) sexual abuse allegations, four (4) involved staff and nine (9) involved other inmates. Among the abuse allegations involving staff, three (3) were unfounded and five (5) still under investigation. Of the nine (9) abuse allegations involving other inmates, one (1) was unsubstantiated, seven (7) were unfounded with one (1) still under investigation.

The seven (7) sexual harassment allegations involved one (1) allegation made by an inmate against staff and six (6) allegations against other staff. All of these allegations were determined to be unfounded.

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)

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 Bureau of Prisons (BOP) has a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment in Policy, Sexually Abusive Behavior Prevention and Intervention Program (PS 5324.11). The policy describes the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment and includes definitions of prohibited behaviors. MDC Brooklyn has a Supplemental Policy outlining how it implements the agency's zero-tolerance approach policy.

The National PREA Coordinator, who was interviewed by David Haasenritter and the PREA Compliance Manager at the facility, stated they had enough time and authority to perform the duties of the title. The facility PREA Manager was interviewed at the time of the site visit and she indicated she had sufficient time to conduct her PREA responsibilities.

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

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 Bureau of Prisons does contract with other entities for the confinement of inmates and has a contract monitor. PREA auditor David Haasenritter shared the results of his interview with the Agency Contract Manager. The contracts were discussed and reviewed to ensure the private facilities adopted and complied with PREA standards, and provided for monitoring compliance with PREA standards.

§115.13 – Supervision and Monitoring

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)

MDC Brooklyn has a staffing plan that is reviewed and takes into account items such as generally accepted detention practices, physical plant, inmate population and prevalence of substantiated and unsubstantiated sexual abuse allegations. The PREA Compliance Manager at Brooklyn and the Warden are personally involved when reviewing staffing requirements and appropriate numbers of assigned staff. There has been no deviation to this staffing plan in the last 12 months and the interview with the Warden indicated she is notified if there is any. The PREA Manager and the facility review their staffing annually and forward it to the National PREA Coordinator with any recommendations. Supervisor's rounds are documented. Interviews conducted with them indicated the round are done regularly at different times. To the extent possible they to keep staff from alerting others by altering the sequence of areas they visit.

§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)

MDC- Brooklyn is an adult male and female facility that does not receive inmates under the age of 18 years. The standard is not applicable.

§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)

MDC- Brooklyn has not conducted any crossgender strip searches or cross-gender visual body cavity searches in the last 12 months. The auditor observed curtains on the showers and doors on toilet stalls during the tour. The random interviews with staff and inmates indicated inmates have privacy and are not exposed while showering, using the toilet or dressing. The inmate interviews also indicated that opposite gender staff announces their presence each time he/she enter the living areas. Both auditors witnessed the announcements being made during the site visit.

§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)

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)

MDC Brooklyn offers all victims of sexual abuse access to forensic medical examinations at Lutheran Hospital without any financial cost to the inmate. A SAFE/SANE Nurse performs these examinations. They also make available the St Luke-Roosevelt Crime Victim Treatment Center Advocacy Group to any victim of sexual abuse. The facility conducts all administrative investigations through their SIS Lieutenant. Once it has been determined the case is criminal it is handled by the FBI, by Agency policy. The facility investigator has received additional training on investigative techniques adopted from the recent edition of DOJ "National Protocol for Sexual Assault Medical Forensic Examinations". The training is documented in his training record. He described in detail what the training involved during his interview.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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 Bureau of Prisons policy PS 5324.11 requires that an administrative investigation, and if warranted a criminal investigation be initiated and completed by the FBI/OIG, for all allegations of sexual abuse and sexual harassment. The policies describing the investigation are outlined on the BOP Agency web page. The auditor interviewed both the Warden and SIS Lieutenant and they each indicated they follow this Agency policy and initiate an investigation immediately upon being notified of any allegation of sexual abuse or sexual harassment.

§115.31 – Employee Training

X 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 staff at MDC has received PREA training and have signed acknowledging their understanding of the BOP "zero tolerance" policy and their responsibilities to respond to any allegations. All staff is trained as first responders and each carry a small credit card size card with their responsibilities outlined on it. Interviews of random staff and general questions asked during the tour clearly indicated staff understands all policy aspects of responding to allegations of sexual abuse. Staff appeared very prepared for any situation.

§115.32– Volunteer and Contractor Training

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)

All contractors and volunteers at MDC Brooklyn receive PREA training prior to assuming their duties. The auditor reviewed a sampling of contractor and volunteer training records and found they had signed acknowledging their understanding of the PREA training. This was also substantiated during the contractor and volunteer interviews.

§115.33 – Inmate Education

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)

All inmates receive PREA information upon arrival in the Receiving and Discharge (R&D) area at MDC Brooklyn. The information includes how and who to report as well as a video they are required to watch. There were no inmate intakes performed during the site visit. The auditor did review PREA documentation each inmate receives on arrival informing them of their right to be free from sexual abuse and harassment and how to report allegations if necessary. Inmates who had not been received at Brooklyn within the last 12 months received this same identical training at mandatory "Town Hall" meetings on each of the Housing Units. Inmates that were randomly interviewed stated that they had received both written and video information on safeguarding themselves and how to report in the event of sexual assault victimization.

§115.34 – Specialized Training: Investigations

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)

MDC Brooklyn conducts administrative investigations on all cases of sexual abuse and sexual harassment. If there is evidence that a crime has been committed the case is

referred to the FBI. The SIA Lieutenant is the person who conducts these administrative investigations. He has received specialized training, in addition to general training provided to all employees. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. His training, from NIC, was documented in the training file.

§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)

A review of medical and mental health staff training records and interviews with Medical and Mental Health staff demonstrated compliance to the additional specialized training to detect and access signs of sexual abuse and sexual harassment, how to preserve evidence, how to respond to victims and how and to whom to report incidents.

§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 intake screening is suppose to consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: 1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated. (5) Whether the inmate’s criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child;(7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) the inmate’s own perception of vulnerability; and (10) whether the inmate is detained solely for civil immigration purposes. The auditor did not observe any intake screenings while at Brooklyn. The auditor interviewed the staff member who conducts the intake screening and he indicated that they ask all ten of the criteria. I specifically asked him if he asked question 7 and he responded “yes”. Both

auditors interviewed approximately 30 inmates and the vast majority recalled being asked all the questions.

§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)

The placement of transgendered and/or intersex inmates is done only after a Central Office Review Committee has reviewed each case individually. Dave Haasenritter, PREA auditor verified this Central Office placement review process with members of the Review Committee and indicated their review did meet the standard requirement. Transgender/Intersex inmates receive a face-to-face review at least twice a year, a requirement by BOP for all inmates, in which their program assignment, work assignment, discipline record as well as their views with respect to their safety is questioned. As previously indicated the auditor interviewed two members of the intake staff and unit management staff to question them on how the screening form and appendix A of the Agency Policy is used to determine work/housing and education assignments. Each explained how it was used in detail considering potential victimization, prior victimization and prior abuse perpetration among other things.

§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 Bureau of Prisons Policy PS5324.11 prohibits the facility from placing inmates at high risk of victimization in involuntary segregation unless there is no alternative available. If placed there inmates must be provided programs, privileges, education and work or document why they didn't. Interviews with the Warden, Segregation Supervisor and Segregation line staff all indicated that segregation has not been used during the last 12 months to house inmates at high risk for victimization. The auditor interviewed an alleged victim of sexual assault and she indicated she was never placed in involuntary segregation. The Warden did indicate if the facility found the need to place an inmate in involuntary segregation it would be short term and never beyond 30 days.

§115.51 – Inmate 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)

Bureau of Prison policy (PS 5324.11) describes the different means by which an inmate may report sexual victimization. Staff and inmate interviews indicated that inmates could report through various methods to staff and Department of Justice through TRULINCS computer email link directly. Most inmates knew third party notification process. Inmates in Segregation are afforded access to TRULINCS link as well. All inmates placed in segregation need to do is state to any staff member they have legal work so that they are released to utilize the TRULINCS system. The inmate can then sent an anonymous or signed email to the Department of Justice.

§115.52 – Exhaustion of Administrative Remedies

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)

POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (PS1330.18) details procedure for filing a grievances involving sexual abuse. The policy states no timeline for filing regardless of when the alleged incident occurred. MDC Brooklyn has had no grievances filed alleging sexual abuse.

§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 standard requires the facility to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. Brooklyn was providing this information to inmates but only to those who identified themselves as victims or prior victims. This was provided in the mental health department. The auditor informed the facility that the standard does not indicate that this information be provided to only those who identify as victims as some inmates may not want to disclose this information but still may want to talk to

an outside victim advocate group. Of all the inmates that were interviewed (30+) none were aware of any outside advocacy group. After speaking with the Warden informational notices, for an outside group, were placed on each of the housing unit bulletin boards with additional notices placed on the inmate email page.

§115.54 – Third-Party 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)

Brooklyn has third party reporting of sexual abuse or sexual harassment through the BOP Agency web site. To get to the section for making a report is not easy as you have to navigate through different pages to get to it, but it is available. Most of the inmates that were interviewed were not aware of it when questioned but they indicated they weren't aware based on the fact that they really had not interest to know about it. The Agency should make a better effort to make it easier to navigate their web site and reinforce with inmates third party reporting by family and friends on their behalf via this link.

§115.61 – Staff and Agency Reporting 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)

Staff duties for reporting sexual abuse and sexual harassment are outlined in policy Sexually Abusive Behavior Prevention and Intervention Program (PS 5324.11) These responsibilities are reiterated in the training each staff member receives and are carried by each staff in the credit card size card each staff member carries. Every employee that was interviewed knew their responsibility to immediately report knowledge, suspicion or information and also their obligation in confidentiality of information and disclosure only to their supervisor as required for an investigation.

§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)

Agency policy PS5324.11 requires staff to take immediate action to protect any inmate they learn may be subject to substantial risk of victimization. During each random and specialized staff interview the auditor heard the immediate steps they'd take to protect an inmate subject to risk of imminent sexual abuse.

§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)

Agency policy PS5324.11 requires when a sexual abuse allegation is made that an inmate was sexually abused while confined at another facility, the Warden that received the allegation shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation. The Warden, Deputy Warden and PREA Compliance Manager were well aware of the requirement when questioned during interviews. There have been 4 reported cases to date. Two were alleged sexual abuse within a BOP facility and two were alleged at other correctional facilities

The Warden notified all four of the Wardens where the alleged abuse occurred within 72 hours after receiving the allegation, both by phone and in writing (email).

§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)

The Bureau of Prisons trains all staff as first responders, regardless of their title. During the interview phase of the audit each staff member was questioned with regard to his or her responsibilities and all were able to describe in detail the actions they would take if an inmate made a sexual abuse allegation to them following the steps outlined in the standard. Their primary responsibility is the safety and protection of the victim including the preservation of all potential evidence. As previously indicated each employee carries a small card outlining their duties in the event they are confronted with an allegation.

§115.65 – Coordinated Response

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)

MDC Brooklyn has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse. It outlines duties and responsibilities among staff first responders, medical and mental health practitioners, investigators, and the facility Leadership. Each of the specialized interviews confirmed their knowledge of the policy and their responsibility in the overall process.

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

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 Master Agreement between the FBOP and Council of Prison Locals – American Federation of Government Employees was signed on July 21, 2014. IAW Article 30 – Discipline and Adverse Actions, Section g, “The employer may elect to reassign the employee to another job within the institution or remove the employee from the institution pending investigation and resolution of the matter, in accordance with applicable laws, rules and regulations.

§115.67 – Agency protection against retaliation

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)

Bureau of Prison policy PS5324.11 charges the Associate Warden as the staff member to ensure that there is no retaliation against any inmate or staff member who reported sexual abuse or sexually harassment. The auditor reviewed retaliation documentation during the site visit. Brooklyn conducts periodic checks up to 90 days but beyond if the situation requires it. With inmates they look at inmate disciplinary reports, housing or program changes. With staff they look at performance reviews or reassignments and shift changes.

§115.68 – Post-Allegation Protective Custody

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)

As indicated in standard 115.43, use of Protective Custody to protect alleged victims is only as a last resort for a very short time. Interviews with the Warden, Segregation Supervisor and Segregation line staff that segregation has not been used during the last 12 months to protect an alleged victim.

§115.71 – Criminal and Administrative Agency Investigations

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 SiA Lieutenant initiates an investigation, at MDC Brooklyn, immediately on being notified of any allegation. His training record and interview demonstrated he received special training from NIC to conduct sexual assault investigations. According to his interview the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as inmate or staff. Once his investigation appears to be criminal, the case is referred to the Office of the Inspector General and/or FBI. The Lieutenant does not proceed with any further part of the investigation unless directed by either of these Agencies.

§115.72 – Evidentiary Standard for Administrative Investigations

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 Bureau Policy PS5324.11 indicates that only a preponderance of evidence be established, as the standard, when determining allegations are substantiated. During the SIA Lieutenant interview, he indicated that this is the threshold he uses to determine each case.

§115.73 – Reporting to Inmate

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 auditor reviewed completed investigations files which included notifications that inmates were informed of the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded. There were no staff allegations that were substantiated but if there had been the inmate would be informed of the status of the staff member in writing to include whenever: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. If the inmate was alleged to have been sexually abused by another inmate, the investigator informs the alleged victim whenever: the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or been convicted on a charge related to sexual abuse within the facility.

§115.76 – Disciplinary sanctions for staff

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)

PS 5324.11 describes the penalty for any staff member involved in sexual abuse. Termination shall be the presumptive disciplinary sanction in every case. In the past 12 months there have been no staff from MDC Brooklyn that have violated agency sexual abuse or sexual harassment policies. It should be noted that previously (not within the 12 month review) Brooklyn had a case in which an employee engaged in a sexual relation with an inmate. She was terminated, prosecuted and is currently serving time.

§115.77 – Corrective action for contractors and volunteers

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)

Bureau of Prison policy PS3420.11 is the BOP employee code of conduct policy but applies to contractors and volunteers as well. It requires that any contractor or volunteer who engage in sexual abuse be reported to law enforcement agencies and to relevant licensing bodies. The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers at Brooklyn. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.

§115.78 – Disciplinary sanctions for inmates

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)

Bureau of Prison policy PS5324.11 stipulates that inmate-on-inmate sexual activity (not forced) will result in an incident report be written for violation of Code 205. This report results in a disciplinary hearing being held on the inmate within the facility. Inmate on staff sexual activity will be subject to disciplinary action and/or criminal prosecution, as appropriate.

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

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)

Bureau policy PS5324.11 requires that any inmate reporting any prior victimization be seen no longer than 14 days after arrival. Any inmate screening indicating the inmate perpetrated sex abuse is also seen within 14 days. Medical and Mental Health staff indicated during their interviews that they receive written consent before reporting prior sex victimization, which took place not in an institutional setting.

§115.82 – Access to emergency medical and mental health 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)

Bureau of Prison Policy PS5324.11 mandates that all inmate victims of sexual abuse receive immediate access to medical and mental health services. MDC Brooklyn (medical staff/mental health staff) and Lutheran Hospital provides this care. Inmates receive information and timely access to contraception and to sexually transmitted infection prophylaxis. There is no cost for forensic exams or treatment to the inmate. There have been no cases at Brooklyn requiring these services.

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

victims and abusers

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)

Agency policy PS5324.11 requires all inmates be offered medical and mental health evaluations to those who were sexually abused in any prison, jail or juvenile facility including follow up services. Brooklyn offers mental health services to all known inmate abusers, when appropriate. The facility also offers mental health service to all know inmate victims as well. This practice was confirmed by interviews with Medical and Mental Health staff and inmates interviewed with prior victimization.

§115.86 – Sexual abuse incident reviews

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)

Agency policy PS5324.11 requires post incident reviews be done within 30 days of the conclusion of every investigation except were the allegation was unfounded. This was confirmed in interviews with the SIA Lieutenant, the PREA Compliance Manager and the Warden. The auditor did verify reviews done on completed cases. The Institution PREA Compliance Manager is responsible for preparing this report, including recommendations for improvements, and forwards it to the Warden.

§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 provided documents demonstrating data was being collected, aggregated and maintained. Data is collected from a number of sources, but main source is TRUIINTEL system. This collects data on inmate on inmate sexual assault and harassment cases. Office of Internal Affairs (OIA) has a separate system on staff on inmate sexual cases, and the privatization office has a system for collecting data on these incidents. PREA Coordinator has access to info in TRUIINTEL and gets other information upon requests from OIA and privatization staff. The information is aggregated for all to be placed in DOJ BJS Report. The report was completed and

provided to DOJ November 2013. During a visit to the Central Office, the auditor observed the data systems, and had investigator staff walk through TRUIINTEL system and privatization office through their system. Both systems collect a lot of good data to include info from the reports. The private facilities provide same data, just different system. David Haasenritter, PREA auditor, verified this.

§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 only covered the period from August 2012 to December 2012. IT staff stated they had the info for the whole year, but decision by the PREA Coordinator was to just do the initial time period the standards came into effect. They did not do a comparison because "this was the first year". FBOP Director signed the report. It is posted on the FBOP website. David Haasenritter, PREA auditor, verified this.

§§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)

Data is strictly controlled throughout the system. Only SIS staff has access and full rights as applicable. Additionally, at the FBOP Central Office only the research office, PREA Coordinator, and other limited staff have view rights; at the FBOP regional offices the Deputy Director, correctional services, and PREA compliance manager has view rights; and at facility Warden, Associate Warden, Security Captain, Psychology, and PREA Compliance Manger has view rights. Access to the office system is limited to members in their office. Data provided in annual report and posted for public to see. Data is retained for at least 10 years. David Haasenritter, PREA auditor, verified this.

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.

Thomas Eisenschmidt

October 16, 2014

Auditor Signature

Date