

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



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

Name of facility:	FCI-LaTuna		
Physical address:	8500 Doniphan Dr., Anthony, Texas 79821		
Date report submitted:	September 23, 2014		
Auditor Information			
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Date of facility visit:	August 25-28, 2014		
Facility Information			
Facility mailing address: (if different from above)	PO Box 1000, Anthony TX/NM 88021		
Telephone number:	915-791-9000		
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		
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AUDIT FINDINGS

NARRATIVE:

FCI La Tuna consists of three separate components located on a 640 acre property: A low security prison (FCI), an adjacent prison camp (FPC) which is both in located in Anthony, Texas, approximately 20 miles north of El Paso, Texas. A third component is a satellite facility (FSL) located on Fort Bliss, an US Army Post east of El Paso, Texas.

FCI

The Federal Correctional Institution (FCI) was opened in April 1932 as a "detention farm." In 1938 it was renamed as a Federal Correctional Institution for housing low security male inmates. Currently this part of the complex consists of a large administration building attached to six housing units, one of which houses a residential drug treatment unit. The inmates live in multi occupancy rooms with access to day rooms, showers, sinks and toilet facilities.

The FCI has a kitchen and dining room, recreation areas (outdoor and sheltered), a central laundry, a library and an education area, religious services spaces, a health services area, a segregation unit (SHU), a commissary, facility maintenance shops, a visiting area (indoor and outdoor) and a UNICOR factory. A steam generating utility plant is located outside the perimeter of the FCI. Facility maintenance staff manages water and waste water systems. Staff housing, a staff training center and a staff fitness center are located nearby. The armory is located near the main building entrance. [REDACTED]

[REDACTED]

FPC

The Federal Prison Camp (FPC) that opened in March 1978 houses its inmates in two living units, designed with four person rooms in open dormitories. Inmates have access to dayrooms and common areas with showers, sinks and toilet facilities. There is a kitchen and dining room. Multipurpose rooms accommodate the visiting, library/law library, education and religious services programs. The camp provides inmate labor for all areas of outside operations and also supplies work details for community service projects. The 15-acre area for the FPC is partially secured with fencing to minimize the introduction of contraband. Altogether the FCI/FPC maintains 635 acres of federal property.

FSL

The Federal Satellite Low (FSL) was originally a separate camp facility that housed only minimum custody inmates who worked on the grounds of Fort Bliss. In May 2001 it was reconfigured with a secure perimeter in order to house low security inmates along with minimum-security inmates. It then was administratively linked to the FCI. Its main mission continues to be supplying work details for various aspects of the operation of Fort Bliss. There are three inmate-housing areas with multi occupancy rooms having access to day rooms and common areas for showers, sinks and toilet facilities. In addition to an administrative area there are spaces for a kitchen, dining room, covered and outdoor recreation areas, education and library/law library, facility maintenance, health services, commissary and visiting.

Re-Entry is a major emphasis for FCI- La Tuna. Their program provides an array of strategies and programs to prepare an inmate for release back into society and improve his behavior during incarceration. Each department within the FCI holds the responsibility of either creating a new or maintaining already set-up, reentry initiatives and programs. Educational Programs include Basic Literacy, General Educational Development (GED), and English as a Second Language. Post-secondary education is also available to the inmate population. The FCI has several drug abuse programs. These include, Residential Drug Abuse Treatment Program (RDAP), Non-Residential Abuse Program (NR-DAP), and Drug Education.

FCI LaTuna houses inmates with low to minimum custody classifications, nearing their date of release. Going back 24 months the facility has had no allegations of sexual abuse or sexual harassment. The auditor spent a considerable amount of time with the investigative Lieutenant discussing the process he would follow when conducting an investigation. He also showed the auditor his paperwork and documents he'd fill out when conducting an investigation of sexual assault or sexual harassment. During the visit the auditor conducted 13 random inmate interviews, 1 random inmate interviews from a list that included potential "victims" based on criteria from appendix A and the Intake Screening Tool, 14

random staff, 1 inmate who identified as transgender and all specialized staff as outlined in the Bureau of Justice Assistance documents. Inmates and staff at LaTuna were well aware of PREA. Inmates interviewed were knowledgeable about how and where to report sexual abuse and sexual harassment. They all indicated they had received written and video information either in the Receiving and Discharge area on their arrival or on the housing units for those that have been at the facility for a considerable amount of time. All staff at FCI is trained to be first responders. Each staff person was well versed on their responsibilities in reporting sexual assaults and suspected sexual abuse.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded:	2
Number of standards met:	40
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)

BOP has a written policy (Sexually Abusive Behavior Prevention and Intervention Program PS 5324.11) mandating zero tolerance toward all forms of sexual abuse and sexual harassment. FCI LaTuna has a supplemental policy outlining how it will implement the agency's zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. BOP appointed a National PREA Coordinator, who was previously interviewed by David Haasenritter, PREA Auditor. The Coordinator indicated she had sufficient time to accomplish her PREA duties. I interviewed the facility PREA manager who also indicated he had sufficient time and authority to accomplish his duties.

§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)

The agency does contract with other entities for the confinement of inmates and has a contract monitor. PREA auditor David Haasenritter who shared the results of the interview interviewed 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)

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

Does Not Meet Standard (requires corrective action)

BOP policy, Sexually Abusive Behavior Prevention and Intervention Program PS 5324.11, requires each facility to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against abuse. The interview with the Warden indicated that the staffing plan is reviewed quarterly and the PREA Manager is included in the review. She also indicated the review

includes video camera placements and the placement of additional convex mirrors in blind spots.

§115.14 – Youthful Inmates

FCI- LaTuna is an adult male facility with no one under the age of 18 housed at the main, the low or the Camp. This standard does not apply.

§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)

FCI LaTuna does not conduct cross gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. This is mandated by the Agency Sexually Abusive Behavior Prevention and Intervention Program PS 5324.11 policy. The facility has not had any cross gender searches performed ever. It does have a procedure in place to document any if it ever is required. Random interviews with staff and inmates indicated inmates have privacy and are not exposed while showering, using the toilet or dressing. The auditor observed curtains on the showers and doors on toilet stalls during the tour.

§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)

FCI LaTuna is a care level 2 facility. At the time of the audit there were no inmates with sight or hearing impairments. The facility does have a staff member who can sign and they can utilize, Language Line Solution, a pay interpretive service for any language for which they do not have a staff member to interpret.

§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)

FCI LaTuna follows Bureau Policy for Hiring and Promoting (PS3000.03). This policy does not allow hiring or promotions of anyone who have been convicted of sexual abuse in prison/jail or in community. Background checks are done on all employees, contractors and volunteers prior to entering the facility. The Human Resource staff person indicated that all 5-year re-checks are done and are up to date. According to the interview of the Central Office Human Resource person in Grand Prairie, that handles all requests for employees seeking employment somewhere else, all substantiated allegations of sexual abuse and sexual harassment are reported to the prospective employer.

§115.18 – Upgrades to Facilities and Technology

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)

David Haasenritter, PREA Manager interviewed the National PREA Coordinator and Deputy Director. Both indicated that Central Office staff considers the effects of the design or modification of a facility has on its ability to protect inmates from sexual abuse. There have been no renovations done to FCI LaTuna. The facility currently [REDACTED] throughout the facility in areas that they feel enhances the safety of staff and inmates.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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)

FCI LaTuna is responsible for conducting administrative sexual abuse investigations including inmate-on-inmate sexual abuse or staff sexual misconduct. The SIS Lieutenant is the individual who conducted these administrative investigations. The Lieutenant 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 went into detail of what the training involved during the interview process. The FBI handles criminal investigations. Inmates who may become victims of sexual assault are offered access to forensic exams at no cost at Sierra Providence Hospital. The hospital has a Safe/Sane nurse available there at ball times. As previously mentioned there have been allegations of sexual abuse/assault at FCI LaTuna so the hospital has not been used.

§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)

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

§115.31 – Employee 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)

Review of the Employee Training Records indicate that all staff at LaTuna has been trained on the Agency policy of zero tolerance and their responsibilities to fulfill their obligations including how to conduct a search of a transgendered or intersex inmate. When staff were questioned during the tour and during the random staff interviews it was apparent to the auditor staff was aware of all policy aspects of responding to allegations of sexual abuse. The staff training files demonstrated staff signed after completing mandatory PREA training indicating that they understood the training they received.

§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 receive PREA training prior to assuming their responsibilities. The auditor reviewed training records in which they signed acknowledging understanding the 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)

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 LaTuna within the last 12 months received this same identical training at mandatory "Town Hall" meetings on each of the Housing Units. At the conclusion of the training inmates were allowed to ask questions.

§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)

The auditor reviewed the training record of the SIS Lieutenant here at LaTuna. His record indicated he received specialized investigative 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. The Lieutenant went into detail about the training during his interview.

§115.35 – Specialized training: Medical and mental health care

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)

The auditor spent a considerable amount of time interviewing mental health and medical practitioners. The facility Chief Psychologist insures that not only do these full and part time specialized staff receive training in:(1) How to detect and assess signs of sexual abuse and sexual harassment;(2) How to preserve physical evidence of sexual abuse;(3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and(4) How and to whom to report allegations or

suspicions of sexual abuse and sexual harassment, but also any staff person who works in these areas regardless of their position. Training records and interviews confirms all have received this specialized training.

§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)

As previously mentioned no intakes took place during the site visit. All random inmate interviews did indicate that inmates received intake screening immediately upon arrival. Intake staff interviews also confirmed this practice. The intake screening does 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 asked three of the intake staff if these 10 criteria were in fact questions asked of each inmate and each responded yes.

§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 at LaTuna or any BOP facility is done only after a Central Office Review Committee has reviewed the case. Dave Haasenritter, PREA auditor verified this Central Office placement review process with members of the Review Committee and indicated compliance. Transgender or 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.

Additionally, inmates who are identified as at high risk for perpetration or victimization are monitored through a weekly meeting, to ensure inmates are not assigned to work, housing or education assignments in a manner that might increase their propensity for abuse.

§115.43 – 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)

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. The auditor interviewed the Warden, Segregation Supervisor and a Segregation line staff. Each indicated that segregation has not been used during the last 12 months to house inmates at high risk for victimization.

§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)

The BOP and La Tuna provide multiple ways for inmates to privately report sexual abuse and sexual harassment and retaliation. Random staff and inmate interviews demonstrated that they could report through various methods including: directly to staff: Department of Justice email through TRULINCS computer and a phone number. Most knew third party notification process. Inmates in the SHU 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. They are released from their cells and taken to the legal room that has a computer and allows the user to connect via drop down window to DOJ.

§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 filing a grievances involving sexual abuse. The policy states no timeline for filing regardless when the alleged incident occurred. FCI-La Tuna as previously mentioned has had no allegations of sexual abuse or sexual harassment. There also has been no grievance(s) filed alleging sexual abuse or sexual

harassment.

§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)

Sexual Trauma Assault Response Services (STARS) provides advocacy services for FCI- La Tuna. Phone numbers and mailing addresses are provided to the inmate on posters in the entrances of each of the housing units and in the inmate handbook. The MOU with them describes all the services to be provided which includes confidential support and emotional services. Inmate interviews confirmed the inmates were informed and know of the confidential support services provided.

§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)

FCI- LaTuna has third party reporting of sexual abuse or sexual harassment through the BOP Agency web site. It is not easily accessible for making a report since you have to navigate through different pages to get to it, but it is available. Most of the inmates that were interviewed were aware of it when questioned. The Agency should make a better effort to make it easier to navigate their web site and insure inmates are aware that family and friends may make abuse complaints on their behalf via this link.

§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)

The BOP and FCI-La Tuna shall require all staff to report immediately and according to Sexually Abusive Behavior Prevention and Intervention Program (PS 5324.11) policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. 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)

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 staff to take immediate action to protect any inmate they learn may be subject to substantial risk of victimization. Interviews with random staff demonstrate they know the immediate steps to take to protect an inmate subject to risks of imminent sexual abuse. Interviews with line staff to the Warden emphasized their responsibility to take immediate action on learning an inmate may be at substantial risk of victimization.

§115.63 – Reporting to Other Confinement Facilities

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 when a sexual abuse allegation 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. Interview of the Warden, Deputy Warden and PREA Compliance manager demonstrated they knew the procedures to follow. There have been no allegations at LaTuna requiring notification to another Warden nor has the facility ever received a notice of allegation from another Warden about their facility.

§115.64 – Staff First Responder Duties

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)

The auditor conducted random interviews and specialized interviews on staff at LaTuna. All staff are trained and required to respond as “first responders” to allegations of sexual

assault. Each staff member was well aware of his or her responsibilities to safeguard the inmate, the crime scene and preserve potential evidence. Each staff member carries with them a laminated "responsibilities" card to review to minimize any possibility that they forget.

§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)

LaTuna has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Interviews with specialized staff confirmed they were knowledgeable about the PREA Plan and the coordinated duties and collaborative responsibilities.

§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)

Agency policy PS5324.11 describes the BOP policy and practice to be followed to ensure that there is no retaliation against any inmate or staff member who reported sexual abuse or sexually harassment. The Associate Warden is the staff member charged to insure compliance to this policy. There has been no allegation of sexual abuse or sexual harassment to date. The Associate Warden at LaTuna does have a process to be followed should it become necessary. He has the Chief Psychologist

personally follow up with the inmate or staff member for at least 90 days following an incident, in order to monitor for retaliation. This monitoring is done periodically up to 90 days but beyond if it is felt the situation requires it extending the time. The Psychologist looks at inmate disciplinary reports, housing or program changes. With staff she looks at performance reviews or reassignments and shift changes.

§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)

The use of Protective Custody to protect alleged victims is only done as a last resort for a very short time according to interviews with the Warden, Segregation Supervisor and some Segregation line staff all indicated that segregation has not been used during the last 12 months to protect an alleged victim. And as previously stated there have been no allegations of sexual abuse.

§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)

At LaTuna the SiS Lieutenant conducts all investigations immediately on being notified of any allegation. His training record and interview revealed he has had additional specialized training from NIC. 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 the Lieutenant believes a crime has been committed 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)

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 indicates that only a preponderance of evidence is the gauge to be used when determining allegations are substantiated. The Lieutenant confirmed ,in his interview, that this is the threshold that he uses.

§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)

There were no investigations to review for notifications being made since LaTuna has not had any allegations made. The SIS Lieutenant showed the auditor in his blank case files where he documents notifications that inmates were informed of the outcome of the investigations whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded. If the allegation of sexual abuse was by a staff member, the inmate is 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 staff involved in sexual abuse as, termination shall be the presumptive disciplinary sanction. In the past 12 months there have been no staff from the facility that have violated agency sexual abuse or sexual harassment policies.

§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)

Agency policy PS3420.11, is the employee code of conduct policy but applies to contractors and volunteers. It requires contractors or volunteers who engaged in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. 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)

Agency policy PS5324.09 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. Staff-on-inmate 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)

During the intake process at LaTuna if an inmate indicates that he has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, or the inmate previously perpetrated sexual abuse, he is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Depending on the circumstance the inmate may be seen immediately in the intake area by medical or mental health practitioners. This practice was confirmed during the specialized interview with the Chief Psychologist and Health Service Administrator.

§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)

BOP policy PS5324.11 mandates inmate victims of sexual abuse receive immediate access to medical and mental health services. FCI LaTuna and Sierra Providence Hospital provides this care. The hospital has either a SANE or SAFE nurse on duty at all times. 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 to date requiring these 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)

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. FCI LaTuna also attempts to conduct mental health evaluations on all known inmate abusers, offering treatment when appropriate. The Chief Psychologist and Health Service Administrator confirmed this practice during the interview process.

§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)

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 SIS Lieutenant, and PREA Compliance Manager and the Warden. The policy requires the PREA Compliance Manager document the review in a written report, which includes recommendations for improvements, and then forward it to the Warden. There have been no incidents reviews done to date.

§115.87 – Data Collection

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 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 privatization 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.

/S/

Thomas Eisenschmidt

9/24/2014

Auditor Signature

Date