

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 Bureau of Prisons – Federal Detention Center Philadelphia		
Physical address:	U.S. Department of Justice 320 First St. NW, Washington, DC 20534		
Date report submitted:	06/29/2014		
Auditor Information			
Address:	611 Raby Road Sweetwater, TN 37874		
Email:	bivens.rodney@yahoo.com		
Telephone number:	865-659-2424		
Date of facility visit:	November 5-7, 2013		
Facility Information			
Facility mailing address: <i>(if different from above)</i>	N/A		
Telephone number:	202-307-3198		
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 (Reception and pretrial Center)	
Name of PREA Compliance Manager:	Richard A. Hudgins	Title:	Associate Warden
Email address: rxhudgins@bop.gov		Telephone number:	215-521-4081
Agency Information			
Name of agency:	Federal Detention Center Philadelphia		

Governing authority or parent agency: <i>(if applicable)</i>	Federal Bureau of Prisons		
Physical address:	700 N. Arch St. Philadelphia, PA 19106		
Mailing address: <i>(if different from above)</i>			
Telephone number:	215-521-4000		
Agency Chief Executive Officer			
Name:	Charles E. Samuels, Jr.	Title:	Director
Email address:	BOP-CPD/PREA COORDINATOR@BOP.GOV	Telephone number:	202-353-3629
Agency-Wide PREA Coordinator			
Name:	Katie McGowan	Title:	National PREA Coordinator
Email address:	kmcgowan@bop.gov	Telephone number:	202-353-3629
PREA coordinator reports to	Angela Dunbar, Senior Deputy Assistant Director, Correctional Programs Division		
Number of compliance managers who report to PREA coordinator	To be determined		
Agency website with PREA information:	http://www.bop.gov/inmate_programs/sa_prevention_reporting.jsp		

AUDIT FINDINGS

NARRATIVE:

The audit of Federal Detention Center Philadelphia in Philadelphia, Pennsylvania was conducted on November 5-7, 2013 by Rodney Bivens, ACA and Certified PREA auditor. The PREA audit for this facility was conducted in conjunction with the Intensive Review Program Audit, which requires a tour of the entire facility.

An entrance meeting was held with facility and bureau staff, to include the Bureau of Prison Program Reviewers. The following persons were in attendance:

David E. Ortiz, Warden
Richard A. Hudgins, Associate Warden of Programs
Karl J. Belfonti, Associate Warden of Operations
Marisa Davidson, Attorney
Jeremy Nash, Captain

James Kowalski, Computer Services Manager
Susan Marchese, Trust Fund Supervisor
Tim Kavelak, Facility Manager
Jamie Amareld, Environmental and Safety Administrator
Cynthia Smith, Unit Team 1 Manager
Harold Mills, Unit Team 2 Manager
Father Ben Regotti, Supervisory Chaplain
Kevin Stremmel, CMC
Michelle Baker, Health Services Administrator
Brian Miner, Acting Human Resources Manager
Edward Fisher, SIA
Andrea Boardman, Chief Psychologist
Maureen McPhail, Financial Management Manager
Richard Morris, Supervisor of Education
Danny Morales, Food Services Administrator

Members of the Program Review Team:

Stacy Spier, Reviewer-in-Charge
Dr. John Mitchell, Chief Psychologist, ALX
Lawrence Karpen, Clinical Psychologist, CPD
Suzanne Lindgren, Chief Psychologist, DAN
John Watson, Examiner, PRD

Member of the Central Office Staff:

Chuck Ingram, ACA Administrator
Joseph Pecoraio, ACA Deputy Administrator
Christian Burch, ACA Accreditation Manager

Following the entrance meeting, the following staff accompanied me on the facility tour Tuesday, November 5, 2013 from 8:45 a.m. to 2:00 p.m. with completion of the facility tour on Wednesday, November 6, 2013 from 7:00 a.m. to 9:15 p.m.:

David Ortiz	Warden
Richard Hudgins	Associate Warden, Programs
Karl Belfonti	Associate Warden, Operations
Chuck Ingram	ACA Administrator BOP
Joseph Pecoraio	ACA Deputy Administrator BOP
Christian Burch	ACA Accreditation Manager BOP

Upon completion of the tour the first day, I began interviewing the randomly selected inmates, chosen by myself, from the offender housing unit rosters provided. I had randomly selected one inmate from each housing area as well as any inmates who were limited English speaking or had hearing/vision impairment to be interviewed. In addition, I requested to interview all transgender/intersex offenders, which consisted of one transgender inmate during this audit. Interviews were scheduled for inmates as well as interviews with staff, both random and specialized. Staff interviews were conducted on all shifts utilizing staffing rosters. All required interviews were conducted onsite during the three days of this audit.

There were three (3) sexual assault/harassment allegation cases reported within the past year. All records were reviewed in relationship to these allegations.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Consistent with the Bureau of Prisons mission, the Federal Detention Center Philadelphia's mission is to protect society by confining offenders in the controlled environments of prison and community-based facilities that are safe, humane, cost-efficient, and appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.

The Federal Detention Center Philadelphia is committed to fulfilling the mission of the Bureau of Prisons and accomplishing these key goals:

- Protecting the safety of the public first and foremost;
- Creating a positive, safe work environment for staff that encourages and supports learning, advancement and diversity
- Creating a safe and secure environment for inmates that provides essential services and assists the offender in transitioning into incarceration;
- Providing quality service to the federal courts, members of the federal family and the law enforcement community; and
- Being a good employer, a good neighbor to the citizens of Philadelphia, and a good public steward.

In furthering this objective, Federal Detention Center Philadelphia provides work programs, vocational training courses, and a variety of self-improvement programs to assist offenders in becoming law-abiding citizens. Consistent with the position of the agency, the institution employs a balanced philosophy which recognizes that punishment, deterrence, rehabilitation and incapacitation are the purpose of confinement.

Federal Detention Center Philadelphia is an administrative level institution located at 700 N. Arch Street in the center of the city of Philadelphia, Pennsylvania. It has 320,000 gross square feet and has eleven stories including below-grade levels. The short-term facility is used mainly to house detainees awaiting trial and sentencing in the United States Federal Court House, which is located directly across the street from the facility.

The below grade levels and the first four stories contain access to the courthouse secured passageway, service areas, United States Marshal areas, and pedestrian entry, as well as administrative offices, public spaces and inmate services.

The tunnel level provides access to the courthouse and secured passageway under Seventh Street. The sub-basement contains maintenance shops and laundry. The basement includes a two story space on Filbert Street for vehicular sally ports for service vehicles, and the Marshal Services. Also provided are a receiving area, warehouse and mechanical spaces.

The first floor includes the main entry and lobby, inmate visitation, administration and the control center. The second floor houses Administration, correctional services, receiving and discharge, food services, health services, commissary and the law library.

The inmate housing floors encompasses six floors with associated unit management. There are 566 multi-occupancy cells that are 98 square feet of cumbered space. The third through sixth floors are large general housing units, with two modules per unit and double bunked. Each module has a main level with 31 cells and a mezzanine with 32 cells. An indoor/outdoor covered recreation area is also provided for each module. The third floor South is designated for the female work cadre population. The seventh floor contains two one story small general housing modules. Each module includes 31 cells.

The eighth floor consists of two special housing modules and was reconfigured to allow for the female housing unit to be completely separate. The modules have a common administrative and support areas located between them. Each module includes exterior recreation areas.

The Correctional Systems Department is responsible for admissions, releases, mail, and records. Federal Detention Center Philadelphia detains inmates of many classifications. As an administrative security level facility, pretrial males and females are housed while awaiting completion of their federal court proceedings. The pre-trial population is primarily made up of United States Marshal Service inmates from the following districts: Eastern District of Pennsylvania, Southern and Northern Districts of New Jersey and the District of Delaware. Federal Detention Center Philadelphia is also a United States Parole Commission Revocation Hearing site. Federal Detention Center Philadelphia has a designated female cadre unit.

SUMMARY OF AUDIT FINDINGS:

On November 5-7, 2013, the on-site visit was completed at the Federal Detention Center Philadelphia, Pennsylvania. The following results indicate the Federal Detention Center Philadelphia, Pennsylvania over all compliance levels with the PREA standards:

Number of standards exceeded: 3

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 1

Standard number here	115.11
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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)

Auditor comments, including corrective actions needed if does not meet standard

Program Statement (PS) 5324.09 (Sexually Abusive Behavior Prevention and Intervention Program) does not affirmatively state zero tolerance towards all forms of sexual abuse and sexual harassment. PS 5324.09 simply re-states the standard from Department of Justice Final Rule and standards. Federal Bureau of Prison Office of Public Affairs Press Release found on the Federal Bureau of Prison website states "We have a "zero tolerance" standard for sexual abuse." The statement does not address sexual harassment. PS 5324.09 covers a number of the standards by simply stating the standards found in the Department of Justice Final Rule. The standards are bolded and in blue, anything added is in normal type. Some of the standards can be found in other documentation such as PS 5270.09 (Inmate Discipline Program), PS 1380.05 (Special Investigative Supervisors Manual); PS 1350.01 (Criminal Matter Referral), etc. PS 5324.09 outlines the agency's approach to preventing, documenting, and responding to sexual assault and sexual harassment. It does not cover: 115.15 (b) the prohibition on cross-gender pat-down searches of female inmates is not yet implemented by agency policy; 115.15 (e) policy on transgender searches; 115.52 (f) initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance; and 115.76 (b) termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. New policy already pending release.

During the corrective action period the Federal Bureau of Prison finalized and published PS 5324.11 dated January 6, 2014, replacing PS 5324.09. The new PS now mandates zero tolerance regarding all forms of sexual abuse and sexual harassment. It also outlines the Federal Bureau of Prison approach to preventing, detecting and responding to all complaints of sexual abuse and sexual harassment received.

Standard number here 115.12

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)

Auditor comments, including corrective actions needed if does not meet standard

Federal Bureau of Prisons was proactive and renewed all existing contracts to include PREA requirements and policy. Contract monitoring is in the contract to be done through on site visits and PREA documentation/audits. No audit to date as the audit window has just opened up on 20 August 2013.

Standard number here 115.13

- 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)

Auditor comments, including corrective actions needed if does not meet standard

The procedures and practice does not create a staffing plan, nor does the plan calculate staffing levels using the criteria in 115.13(a).

During the corrective action period Department of Justice certified PREA auditor David Hassenwriter interview staff at the Central Office, Warden Perdue of the Federal Bureau of Prisons by phone, and reviewed additional documentation provided by the Federal Bureau of Prisons Central Office staff and determined that the Federal Bureau of Prisons now meets this standard. Also, PS 5324.11 was revised and now requires the annual reviews be coordinated with the Federal Bureau of Prisons PREA Coordinator.

Standard number here 115.14

- 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)

N/A – No youthful offenders housed at this facility

Standard number here 115.15

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.15 (b) & (c) The prohibition on cross-gender pat-down searches of female inmates is not yet implemented by agency policy and there is no record/documentation when this occurs. However, this part of the standard does not go into effect for this facility until August 20, 2015 and therefore is non-applicable for this audit cycle.

115.15 (d) Windows in the cells prohibit the inmate to change clothes or perform bodily functions without being viewed. The facility has implemented a door bell system (two rings of the bell indicates staff members of opposite gender entering unit) and announce when entering housing units. This procedure exceeds the requirement of this section of standard and to this auditor ensures acknowledgement with an audible tone and not just a vocal announcement, which can be hard to hear inside a cell. Interviews with staff and inmates confirmed knowledge of the bell system and both indicate they feel this is a "notice" of opposite gender entering. This procedure meets the section of the standard. However, there were no written policy provided requiring staff to adhere to this procedure.

115.15 (e) and (f) is not covered in any Bureau of Prisons policy provided or researched. Staff did say during the interviews they would conduct a transgender search the same way they would search a female inmate. The standard requires "operationally, three options are in current practice for searches of transgender or intersex inmates/residents: 1) searches conducted only by medical staff; 2) searches conducted by female staff only, especially given there is no prohibition on the pat-searches female staff can perform (except in juvenile facilities); and 3) asking inmates/residents to identify the gender of staff with whom they would feel most comfortable conducting the search."

During the corrective action period Policy P5324.11 was revised 1/6/14 to meet this part of the standard. "The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. This provision does not limit searches of inmates to ensure the safe and orderly running of the institution. The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The Correctional Services Branch updates and maintains training materials on conducting pat-down searches of transgender and intersex inmates". Documentation was provided regarding the Annual Refresher Training (ART) along with staff sign in sheets documenting the training of staff.

Standard number here 115.16

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Federal Detention Center Philadelphia is compliant with this standard there are practices in place for ensuring inmates with disabilities (including deaf; blind; low vision; intellectual, psychiatric or speech disabilities) have access to information pertaining to PREA and receive

the appropriate training as required. There is a contract in place to provide interrupter services as needed.

Standard number here 115.17

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Standard 115.17 (h) requires unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Per interview of Federal Detention Center Philadelphia and Bureau of Prisons HRMD staff if an employer request information on an employee it is only provided if requestor has a release form signed by the employee. Per Jeff Barnes, HRMD, the practice that many institutions are utilizing at this time, requiring a release of information before responding to an inquiry, is a safe practice which he feels protects all parties involved from potential defamation lawsuits. Per Bureau of Prisons there is no policy to provide information sharing with other agencies.

During the corrective action period the Federal Bureau of Prisons changed the guidance for release of information on former employees. New guidance is upon receipt from an institutional employer, requests are forwarded to Federal Bureau of Prisons Office of Internal Affairs for review and to provide information as applicable. Per interview with FBOP Office of Internal Affairs, the information would be released under routine use if requests is from a federal, state, local, or private correctional agency/facility in connection with a hiring action. The former employer will not have to sign a release form.

Standard number here 115.18

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Federal Detention Center Philadelphia is aggressive with technology. There are 304 cameras strategically placed throughout the entire compound inside and out to enhance security, with an active plan in place to enhance the cameras in the near future. It also should be noted that of the 304 cameras in place 25 cameras are equipped with pan, tilt and zoom capabilities.

Standard number here 115.21

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.21 (d) & (e) Federal Detention Center Philadelphia provided a Gratuitous Services Agreement with the Women Organized Against Rape Philadelphia, PA group which was signed August 29, 2013, meeting the requirements of these sections of the standard.

115.21 (f) Bureau of Prisons did not provide documentation to demonstrate requesting the FBI and/or OIG follow the requirements of paragraphs 115.21 (a) through (e) Current agreement with FBI was dated 1996. Per memorandum dated August 6, 2013 from National PREA Coordinator Abigail G. Harris the external investigators have not completed PREA training to date.

During the corrective action period the auditor was provided documentation demonstrating the facilities compliance with this standard.

Standard number here 115.22

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.22 (e) No documentation was provided to demonstrate Department of Justice components (FBI and OIG) responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails have in place a policy governing the conduct of such investigations.

During the corrective action period the auditor was provided documentation demonstrating the facilities compliance with this standard.

Standard number here 115.31

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.31 (d) agency does not document through staff signature or electronic signature that they “understand” the training “received.” Rosters are signed at the beginning of the training day and at the end of the training to verify they attended the training but the form does not say they “received and understand” the training as required by the standard. In the interviews conducted it is apparent they have received the required training they were able to articulate what they had been trained on.

During the corrective action period new training sheets were received documenting the staffs understanding of the training received.

Standard number here 115.32

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)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed contractor and volunteer sign-in sheets for training received. Interviewed one volunteer/contractor who confirmed training.

Standard number here 115.33

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)

Auditor comments, including corrective actions needed if does not meet standard

Inmate education is provided upon arrival, during orientation within 14 days of arrival. This was articulated from staff and inmates during the interviews. All inmates view a video and receive a rule book containing PREA information.

Standard number here 115.34

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.34 (b). Documentation reviewed did not demonstrate “Specialized training shall include 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.” Training lesson plan sent is for Investigative Intelligence Training which has one hour block for PREA but does not cover requirements noted above. NOTE investigators had certificate for PREA Investigative reporting; lesson plan for that may cover standards. During interviews with the SIS, the Garrity warning is not given but he could articulate 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.

115.34 (d). Per memorandum dated August 6, 2013 provided from National PREA Coordinator Abigail G. Harris the external investigators have not completed PREA training to date. Therefore, No documentation that FBI and OIG are trained as required by the standard provided.

During the corrective action period the auditor was provided documentation demonstrating the facilities compliance with this standard.

Standard number here	115.35
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- 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)

Auditor comments, including corrective actions needed if does not meet standard

Based on interviews with the Assistant Warden, Chief Psychologist, and HSA, as well as review of mandatory training records and sign in sheets. All forensic examinations are performed offsite at the contract hospital.

Standard number here	115.41
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- 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)

Auditor comments, including corrective actions needed if does not meet standard

The Bureau of Prisons standard screening form (BP-A1030) identifies and covers all items on the standard 115.41.

Standard number here 115.42

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)

Auditor comments, including corrective actions needed if does not meet standard

115.42 (c) Bureau of Prisons staff uses genitalia to determine what type of facility to place a transgender or intersex inmate. Interview with Associate Warden of Programs stated he does take into consideration where the inmate feels they are best suited when a transgender or intersex inmate is received at the facility.

During the corrective action period policy P5324.11 dated 1/6/14 was revised and now meets this standard.

Standard number here 115.43

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)

Auditor comments, including corrective actions needed if does not meet standard

Form BP A1002 is completed when inmates are at risk, however to date no LGTBI inmate placed in segregation for sole purpose of being at high risk of sexual victimization. Interview with a transgender inmate confirmed never being placed in segregation, nor ever felt the need to be.

Standard number here 115.51

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)

Auditor comments, including corrective actions needed if does not meet standard

Addressed in PS5324.09 and based on staff interviews. Inmates can report through various methods to staff, mail and outside the agency via TruLinks.

Standard number here 115.52

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)

Auditor comments, including corrective actions needed if does not meet standard

PS 1330.17 and 1330.13 cover this standard.

Standard number here 115.53

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)

Auditor comments, including corrective actions needed if does not meet standard

Gratuitous Services Agreement was signed with the Women Organized Against Rape organization on 8-29-13.

Standard number here 115.54

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)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed Bureau of Prisons web site.

Standard number here 115.61

- 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)

Auditor comments, including corrective actions needed if does not meet standard

PS 5324.09 Verified during interview with the Chief Psychologist and random staff interviews.

Standard number here	115.62
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- 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)

Auditor comments, including corrective actions needed if does not meet standard

Per interview with staff and PREA Manager in the event of substantial risk immediate action is taken to protect the inmates.

Standard number here	115.63
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- 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)

Auditor comments, including corrective actions needed if does not meet standard

Per interview with PREA Manager and documentation received there was one allegation of sexual abuse reported and the facility followed all procedures as set forth in this standard.

Standard number here	115.64
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- 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)

Auditor comments, including corrective actions needed if does not meet standard

PS 5324.09

Standard number here 115.65

- 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)

Auditor comments, including corrective actions needed if does not meet standard

PS 5324.09

Standard number here 115.66

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Per memo from Warden David E. Ortiz dated 9/26/13 no new collective bargaining agreements since August 2012.

Standard number here 115.67

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09. During interviews with SIS Lt. and PREA Manager both are responsible for monitoring retaliation and accomplish this with a tracking system in place once a person has been identified as potentially being threatened. Psychologist also monitors for this during their counseling services. Based on interviews with staff, inmates (that have reported sexual abuse) and the Warden the PREA Manager continuously monitors each inmate on a weekly basis for retaliation.

Standard number here 115.68

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Per interview with PREA Manager no instance of using segregation housing.

Standard number here 115.71

- 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)

Auditor comments, including corrective actions needed if does not meet standard

115.71 (b) Per memorandum dated August 6, 2013 provided from National PREA Coordinator Abigail G. Harris the external investigators have not completed PREA training to date. Therefore, No documentation that FBI and OIG are trained as required by the standard provided.

115.71 (k), no documentation to demonstrate FBI and OIG investigators have training or follow all the procedural requirements to meet this standard.

During the corrective action period the auditor was provided documentation demonstrating the facilities compliance with this standard.

Standard number here 115.72

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Based on interview with SIS Investigator.

Standard number here 115.73

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Interviews indicated that when there is a substantiated sexual misconduct from staff, the inmate is notified only that the allegations were substantiated. The inmate is not informed of the requirements in 115.73(c).

During corrective action a review of the documentation provided revealed that the inmates are being notified in writing of the findings.

Standard number here 115.76

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed PS 3420.09 which provides offenses and disciplinary sanctions for staff. No document found or referred to states (b) Termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. No disciplinary action taken in the past 12 months.

During corrective action period new policy 5324.11 dated 1/6/14 was reviewed and now address presumptive discipline, Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. If evidence supports that a staff member engaged in sexual abuse, as defined in section 115.76, the matter will first be referred for criminal prosecution. Administrative discipline (including proposed removals for sexual abuse) will be conducted using the Program Statement Standards of Employee Conduct, the Program Statement Human Resource Management Manual, and the collective bargaining agreement. Any decision made on the proposal will be in accordance with all applicable laws, rules, and regulations.

Standard number here 115.77

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09 as written in standards and PS 3420.09 states applicable to contractors and volunteers. There have been no allegations reported in the past 12 months.

Standard number here 115.78

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09 as written in standards and PS 5270.09 – Inmate Disciplinary Program. Addressed “(g) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced; there is no “consensual” sexual activity permitted in Bureau of Prisons facilities between inmates or between staff and inmates. Inmate-on-inmate sexual activity will result in an incident report for violation of Code 205 - Engaging in Sexual Acts. Staff-on-inmate sexual activity will be subject to disciplinary action and/or criminal prosecution, as appropriate.” PS 5324.09

Standard number here 115.81

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09 as written in standards and expanded a little. Psychology has a Psychological Services PREA Tracking Form. Notes on cases were observed. Follow-up meetings also documented in Bureau of Prisons Sexually Abusive Behavior Prevention and Intervention Handout provided to the auditor.

Standard number here 115.82

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09 as written in standards. Per interview with HSA and Psychologist.

Standard number here 115.83

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Covered in PS 5324.09 as written in standards. Per interview with HSA and Psychologist.

Standard number here 115.86

- 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)

Auditor comments, including corrective actions needed if does not meet standard

PS 5324.09 and review of Sexual Abuse Incident Reviews to the Warden from Associate Warden Richard Hudgins.

Standard number here 115.87

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Based on a completed copy of the Department of Justice - Survey of Sexual Violence, 2012 report provided. 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. 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 to OIA and privatization staff. The information is aggregated as required.

Standard number here 115.88

- 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)

Auditor comments, including corrective actions needed if does not meet standard

Review not done since data was just collected and reported during this audit.

During the corrective action period the 2012 report was published January 2014. 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". The report was signed by Federal Bureau of Prisons Director. It is posted on the Federal Bureau of Prisons website.

Standard number here 115.89

- 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)

Auditor comments, including corrective actions needed if does not meet standard

No aggregate data on web site or published.

During the corrective action period PREA auditor David Haasenritter determined through interviews, observation of the data system at the Federal Bureau of Prisons Central Office and documents the Federal Bureau of Prisons provided that standard 115.89 meets standard. Data is strictly controlled throughout the system. Only SIS staff has access and full rights as applicable. Additionally, at the Federal Bureau of Prisons Central Office only the research office, PREA Coordinator, and other limited staff have view rights; at the Federal Bureau of Prisons 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 For 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.

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.

2014/06/29

Auditor Signature

Date