

April 27, 2009

The Honorable William Reukauf Acting Special Counsel 1730 M. Street, N.W., Suite 218 Washington, D.C. 20036-3600

Re: OSC File No. DI-08-0523 & OIA File No. 2008-03216; VIOLATION OF LAW, RULE, OR REGULATION, GROSS MISMANAGEMENT, ABUSE OF AUTHORITY AND SPECIFIC DANGER TO PUBLIC HEALTH OR SAFETY AT THE FEDERAL CORRECTIONAL INSTITUTION, AND FEDERAL PRISON INDUSTRIES FACTORY, TUCSON, ARIZONA

Dear Mr. Reukauf

I am writing this correspondence to address my grave concerns with the Federal Bureau of Prisons investigative report into the Executive staff violation of law, rule or regulation, gross mismanagement, abuse of authority and specific danger to public health or safety, dated January 30, 2009. I have made a formal disclosures in 2004 to the Office of Special Counsel for similar inappropriate actions taken by the Bureau of Prisons Executive staff. Again, the Agency finds the Executive staff have taken appropriate action to eliminate the unsafe and unhealthy conditions. They have exonerated the Executive staff from interference, restraint, coercion, threats, intimidation and many other violations of misconduct, law, rule or regulation. This is in despite of my extensive documentary of evidence to support my account of the events surrounding the allegations in the complaint. They failed to interview some witnesses in possession of relevant evidence and the inappropriate conduct of the Office of Internal Investigators who conducted my interview. The lack of candor responses in the report continues to demonstrate the Agency's wiliness not to conduct an impartial and comprehensive investigation. They made little effort to explain why my documentary evidence that contradicts the Agency's findings is unreliable. Their spin doctor responses were compounded and directed to confuse and discourage the reader. The Agency's report relies on strained interpretations and plausible deny-ability of the applicable rules and procedures to justify their actions.

The Office of Special Counsel sent my previous disclosure report to the President of the United States, Chairman of the Senate Committee on Commerce, Science and Transportation and the House Committee of Science, which appears to have fallen on deaf ears. The Director and other Executive staff have continued business as usual or even worse continuing to be promoted without any adverse action taken against them. This land mark for the Whistleblower was a beacon of false hope. As a Whistleblower the Director has allowed Executive staff to retaliate, interfere, restrain and discriminate against me for participating in protected activities. This is clearly demonstrated by the lack of executive staff misconduct investigations by the Office of Internal Affairs and not being promoted to the Executive level, but being placed on the best qualified list for almost three years. Protecting the lives and well-being of staff and inmates is what I do, which took real courage to stand up and stand my ground against the Bureau of Prisons leadership of tyranny. Mv courage and fortitude to come forward a second time to report that reform by the Agency has not taken place is the sort of dedication to government service we all should strive to achieve. Despite the stated policy by the Bureau of Prisons, retaliation will not be tolerated against staff engaging in protected activities and providing safe and healthful environment for all employees and inmates, they recklessly and in all cases knowingly and wilfully turned a blind eye and deaf ear to reported retaliation and biases and failure to abate unsafe and unhealthful working conditions by the Executive staff. Instead, the Agency's leadership has taken the long arm approach to coverup what I believe is corruption at the highest level in the Bureau of Prisons, without any check and balance by the President, Congress or the House.

I have to ask what does the politicians really think about Whistleblowers, other then what they have transcribed and signed on paper? When they continue to allow Executive staff knowingly and willfully to violate law and endangering the safety and health of staff and inmate workers, which goes unpunished and Whistleblowers unprotected.

Sincerely,

Occupational Safety and Environmental Health Manager



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The Honorable William Reukauf Acting Special Counsel 1730 M. Street, N.W., Suite 218 Washington, D.C. 20036-3600

Re: OSC File No. DI-08-0523 & OIA File No. 2008-03216; VIOLATION OF LAW, RULE, OR REGULATION, GROSS MISMANAGEMENT, ABUSE OF AUTHORITY AND SPECIFIC DANGER TO PUBLIC HEALTH OR SAFETY AT THE FEDERAL CORRECTIONAL INSTITUTION, AND FEDERAL PRISON INDUSTRIES FACTORY, TUCSON, ARIZONA

Dear Mr. Reukauf

I have received a copy of the Office of Internal Affairs (BOP), Federal Prison Industries (UNICOR), and Federal Bureau of Prisons (BOP) investigation report and alleged findings dated January 30, 2009. Please accept comments and attached supporting documentation as a summary and conclusion to the Agencies Investigation and alleged findings.

Sincerely,

Leroy Smith

Occupational Safety and Environmental Health Manager

## A Response to the Agency's Investigation and Alleged Findings

The following will be a point by point summary of each violation of rule, law, or regulation, abuse of authority, substantial danger to public health and safety, retaliation, discrimination, executive staff misconduct, and unprofessional conduct, which a conclusion will be provided as well.

## <u>Allegation 1 Responses:</u>

1. **Paragraph #1**: I reported (Not Alleged) that staff and inmate workers were potentially exposed to hazardous metal substances and carbon black dust associated with Computer Processing Units (CPU's), Cathode Rey Tubes (CRT's), Copier and Printer Cartridges.

On April 13, 2006, I addressed the hazards metal substances associated with Computer Processing Units (CPU's) and Cathode Rey Tubes (CRT's), which requires personal air sampling and surface wipe sampling to be conducted to determine the exposure levels to the staff and inmate workers. Also, I addressed the hazards associated with Carbon Black Dust generated from copier and which was addressed with the Associate Warden of Operation and Acting Associate Warden for UNICOR, FCI Warden and Complex Warden. (See Attachment # 27)

The Federal Bureau of Prisons (BOP) and Federal Prison Industries (UNICOR) are knowingly aware of the potential toxic and hazardous substances associated with Computer Processing Unit's (CPU's) and Cathode Rey Tube's (CRT's), especially with the previous investigation requested by the Office of Special Counsel and the ongoing investigation by the Office of Inspector General concerning the toxic and hazardous substances exposure to staff and inmate workers at Atwater, Elkton, Marianna, Texarkan etc., according to OSHA, EPA and NIOSH:

A. Computers and their components contain a number of hazardous substances. Among these are "platinum in circuit boards, copper in transformers, nickel and cobalt in disk drives, barium and cadmium coatings on computer glass, and lead solder on circuit boards and video screens" [Chepesiuk 1999].

B. The Environmental Protection Agency (EPA) notes that "In addition to lead, electronics can contain chromium, cadmium, mercury, beryllium, nickel, zinc, and brominated flame retardants" [EPA 2008].

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Schmidt [2002] linked these and other substances to С. their use and location in the "typical" computer: Pb (Lead) used to join metals (solder) and for radiation protection, is present in the cathode ray tube (CRT) and printed wiring board (PWB) or Aluminum, used in structural components and for its conductivity, is present in the housing, CRT, PWB, and connectors. Gallium is used in semiconductors; it is present in the PWB. Ni is used in structural components and for its magnetivity; it is found in steel housing, CRT and PWB. Vanadium functions as a red-phosphor emitter; it is used in the CRT. Be (Beryllium), used for its thermal conductivity, is found in the PWB and in connectors. Chromium, which has decorative and hardening properties, may be a component of steel used in the housing. Cd (Cadmium), used in Ni-Cad batteries and as a blue-green phosphor emitter, may be found in the housing, PWB and CRT.

D. Mr. Cui and Mr. Forssberg [2003] note that Cd is present in components like SMD (Stanford Microarray Database) chip resistors, semiconductors, and inuared detectors. Mercury may be present in batteries and switches, thermostats, sensors and relays [Schmidt 2002, Mr. Cui and Mr. Forssberg 2003], found in the housing and PWB. Arsenic, which is used in doping agents in transistors, may be found in the PWB [Schmidt 2002].

#### E. Carcinogenic. (Black Carbon Dust)

Also, Federal Bureau of Prisons (BOP) and Federal Prison Industries (UNICOR) were knowingly aware of the potential hazards associated with CPU's, CRT's and Carbon Black Dust, which according to OSHA, EPA and NIOSH a detailed job hazard analysis should be conduct prior to beginning any new operation or before making any changes to existing operations. This will allow the BOP and UNICOR to identify hazards prior to exposing staff and inmate workers:

**NOTE:** The UNICOR Web-site Pledge to Protect the Environment, Demonstrates Compliance - UNICOR Factories have undergone intensive technical reviews of their ability to perform effective, responsible recycling activities, including safety procedures and materials handling and disposition. Also, they mention the institutions have a full time Safety Manager and this person conduct inspections. (See Attachment A)

A. No personal air sampling or wipe sampling had been conducted for FCI Tucson's Computer Recycling Program prior to April 26, 2006 and June 20, 2006, concerning toxic and hazardous substances associated with the CPU's, CRT's and Carbon Black Dust, which they were not in compliance with OSHA, EPA, NIOSH or Bureau Policies and Standards.

B. The ISO 9001 certification addresses Administrative Procedures "ONLY". (See Attachment # 125)

C.The ISO 14000 certification addresses Environmental Indoor Air Contaminants, Post-production Environmental Elements, Evaluation of Environmental Performance etc. (See Attachment # 126)

Listing of Actual/Apparent Violations:

A. According to the UNICOR Wed-site Pledge - The institution has a Safety Manager and they conduct inspections, which they don't comply.

B. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

C. Program Statement 1600.08, chapter 1, page 4, section e, Chief Executive Officers - shall ensure the prompt abatement of unsafe and unhealthful working conditions.

D. 29 CFR 1910.1200, Hazardous Communication -1910.1200 (a)(1), - The purpose of this section is to ensure that the hazards of all chemicals produced or imported are evaluated, and that information concerning their hazards is transmitted to employers and employees.

E. OSHA 1910.1000 Air Contaminants (Toxic and Hazardous Substances) - to determine employee exposure.

F. OSHA 29 CFR 1910.1000(e) - Administrative or engineering controls must first be determined and implemented whenever feasible, and equipment or technical measures used for this purpose must be approved for each particular use by use by a competent industrial hygienist or other qualified technically qualified person.

G. OSHA 29 CFR 1910.1000, Subpart Z-1, Limits for Air Contaminants (Toxic and Hazardous Substances).

H. OSHA 29 CFR 1910.1025 Lead (d) (1) (i) (2) Exposure

**Monitoring -** Initial determination to assess employee exposure which would occur if the employee were not using a respirator.

I. OSHA 29 CFR 1910.1027 Cadmium(d)(1)(i)(2)(i) Exposure Monitoring - Specific initial monitoring to assess employee exposure which would occur if the employee were not using a respirator.

J. UNICOR Computer Recycling Procedures (dated June 1, 2003).

K. **Executive Order 13423** - Strengthening Federal Environmental, Energy, and Transportation Management.

L. ISO 14001 - Environmental Management Systems -Requirements With Guidance For Use. (See Attachment # 126)

2. **Paragraph #2**: I reported (Not Alleged) the Agency's and UNIOCR's failure to provide adequate notification to employees and inmate workers regarding the results of air and wipe sampling conducted on April 26, 2006 and June 20, 2006.

On May 17, 2006, I addressed the UNICOR staff and inmate workers had not received OSHA personal and area air and wipe sampling results in writing nor had the test result been posted in the Factory. (See Attachment # 36)

On July 26, 2007, I addressed the UNICOR staff and inmate workers had not received the ACT Environmental Incorporated personal and area air and wipe sampling results in writing nor had the test results been posted in the Factory. (See Attachment # E)

The Federal Bureau of Prisons (BOP) and Federal Prison Industries (UNICOR) are knowingly aware of the OSHA notifications of toxic and hazardous substances and exposure monitoring results, which they were not in compliance with OSHA Standards, especially with the previous investigation requested by the Office of Special Counsel and the ongoing investigation by the Office of Inspector General concerning the toxic and hazardous substances exposure to staff and inmate workers at Atwater, Elkton, Marianna, Texarkana etc.

**NOTE:** The BOP references applicable regulations, which are not accurate - 29 CFR 1910.1027 (d) (5) (I), Toxic and Hazardous

Substances, should be **1910.1027(d)(5)** Employee Notification of Monitoring Results, **(I)** The employer must, within 15 working days after the receipt of the results of any monitoring performed under this section, notify each affected employee of the results either individually or in writing.

#### Listing of Actual/Apparent Violations:

A. **Program Statement 1600.08(1)(A) -** This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

 B. Program Statement 1600.08, chapter 1, page 4, section
 e, Chief Executive Officers - shall ensure the prompt abatement of unsafe and unhealthful working conditions.

C. 29 CFR 1910.1200, Hazardous Communication -1910.1200 (a)(1), - The purpose of this section is to ensure that the hazards of all chemicals produced or imported are evaluated, and that information concerning their hazards is transmitted to employers and employees.

D. OSHA 29 CFR 1910.1025 Lead (d)(1)(i)(2) Exposure Monitoring - Initial determination to assess employee exposure which would occur if the employee was not using a respirator.

E. OSHA 29 CFR 1910.1027 Cadmium(d)(1)(i)(2)(i) Exposure Monitoring - Specific initial monitoring to assess employee exposure which would occur if the employee was not using a respirator.

F. UNICOR Computer Recycling Procedures (dated June 1, 2003).

3. **Paragraph #3**: There are no alleged allegations, the Executive staff and others conspired to interfere and restrain me from ensuring the safety and welfare of the staff and inmate workers in the UNICOR Factory.

A. On April 13, 2006, Ms. Connee Thygerson, Human Resource Manager stated, Your request to deduct union dues was received in our office on 4-11-06. Today I changed your Bargaining Unit Status code to show you as included in the bargaining unit. This will also require a personnel action, which will be processed tomorrow. Your union dues will be deducted beginning pay period 8 (4-16-06), in accordance with Article 8, section e. of the Master Agreement. (See Attachment # 26)

B. On April 26, 2006, Ms. Sabol stated, "I need to kick you out of this meeting, during an OSHA inspection. (See Attachments # 28)

C. On May 3, 2006, I received supporting documentation
from Mr. Ramon Cuestes, Safety Manager.
(See Attachment # 29)

D. On April 26, 2006, Mr. Phillip Kostel made a formal notice to Ms. Sabol and Mr. Chavez, that effective immediately Mr. Leroy Smith, is designated to represent AFGE Local 3955 as our Union Safety Representative. (See Attachment # 30)

E. On May 5, 2006, I disclosed an Hostile Work Environment to Mr. Chavez concerning Ms. Sabol and Mr. Roy. (See Attachment # 31)

F. On May 3, 2006, I received supporting documentation
from Mr. Ramon Cuestes, Safety Manager.
(See Attachment # 32)

G. On April 26, 2006, Mr. Phillip Kostel made a formal notice to Ms. Sabol and Mr. Chavez, that effective immediately Mr. Leroy Smith, is designated to represent AFGE Local 3955 as our Safety Representative. (See Attachment # 33)

H. On May 3, 2006, I received supporting documentation from Mr. K Coleman, S.O.S. (See Attachment # 34)

#### Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

B. 29 CFR 1903.8(a) - Compliance Safety and Health Officers shall be in charge of inspections and questioning of persons. A representative of the employer and a representative authorized by his employees (Union Representative) shall be given an opportunity to accompany the Compliance Safety and Health Officer during the physical inspection of any workplace for the purpose of aiding such inspection. A Compliance Safety and Health Officer may permit additional employer representatives and additional representatives authorized by employees to accompany him where he determines that such additional representatives will further aid the inspection. A different employer and employee representative may accompany the Compliance Safety and Health Officer during each different phase of an inspection if this will not interfere with the conduct of the inspection.

1. Section 8(e) of the Occupational Safety and Health Act of 1970 (OSHAct) says in part: A representative of the employer and a representative authorized by his employees shall be given an opportunity to accompany the Compliance Safety and Health Officer (CSHO) during the inspection for the purpose of aiding such inspection. Where there is no authorized employee representative, the CSHO shall consult with a reasonable number of employees concerning matters of health and safety in the workplace (clarification added).

2. Title 29 Code of Federal Regulations 1903.8(a) says in part: A representative of the employer and a representative authorized by his employees shall be given an opportunity to accompany the CSHO during the...inspection...for the purpose of aiding such inspection (clarification added).

3. Section 1903.8(b) says in part: CSHOs shall have authority to resolve all disputes as to who is the representative authorized by the employer and employees... If there is no authorized representative of employees, or if the CSHO is unable to determine with reasonable certainty who is such representative, he shall consult with a reasonable number of employees concerning matters of safety and health in the workplace.

4. Section 1903.8(c) says in part: The representative(s) authorized by employees shall be an employee(s) of the employer. However, if in the judgment of the CSHO, good cause has been shown why

accompaniment by a third party who is not an employee of the employer (such as an industrial hygienist or a safety engineer) is reasonably necessary to the conduct of an effective and thorough...inspection... such third party may accompany the CSHO during the inspection (emphasis and clarification added).

**Note**: As the appointed Union Representative I was kicked out of the opening conference. I was not allowed to participate in the opening conference and walk around inspection. I was also kicked out of the inspection of the UNICOR Factory. No other Union Employee Representative was assigned to take my place. The Compliance Officer failed to have a Union Employee Representative during the OSHA inspection, which violates OSHA's requirements by Federal Law, Rule or Regulation. (See Attachments Above)

B. Federal Bureau of Prisons and Council of Prison Locals Master Agreement - Article 27 - Health and Safety, Section f; When a Safety and Health inspection is being conducted by an outside Agency such as OSHA, the National Institution for Occupational Safety and Health (NIOSH), or private contractor, the Union will be invited and encouraged to have a local representative participate. (See Attachment #127)

C. Program Statement 1600.08, Chapter 1, Page 3 & 4, Section g - Chief Executive Officers Shall - Ensure that an employee(s) are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their rights under Executive Oder 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environmental Health Program.

D. **Executive Order 12196 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

E. OSHA 29 1960 - that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

4. **Paragraph #4**: According to NIOSH - Employers should understand that not all hazardous chemicals have specific OSHA PEL's and for many agents, the legal and recommended limits mentioned above may not reflect the most current health-based information. However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA PEL. In particular, OSHA requires an employer to furnish employees a place of employment that is free from recognized hazards that are causing or likely to cause death or serious physical harm. Thus, NIOSH investigators encourage employers to make use of other OEL's (Occupational Exposure Limits) when making risk assessment and risk management decisions to best protect the health of their employees. NIOSH investigators also encourage the use of the traditional hierarchy of controls approach to eliminating or minimizing identified workplace hazards. (See Attachment # 128)

5. <u>Paragraph #5</u>: I arrived at FCC Tucson on February 6, 2006, and became the Complex Safety Manager for the USP, FCI and SPC. On August 6, 2006, I reported potentially unsafe and unhealthy working conditions associated with the current UNICOR operation. (See Attachment # 27)

**Note:** Management did not request assistance from OSHA. OSHA conducted an unannounced inspection, which resulted from the UNICOR Computer Recycling Program at USP Atwater, in Atwater California. This was my last duty station before being assigned to FCC Tucson.

**Note:** If the Agency or UNICOR would have asked OSHA to review or inspect our Institution, it would of been conducted by the OSHA Consultation Division and not the OSHA Enforcement Division, which the OSHA report by the Consultation Division would not be a public record, like the Enforcement Division reports.

6. **Paragraph #6**: I was considered a Bargaining Unit employee and appointed by the Local Union President as the Union Safety Representative, which Warden Sabol and Warden Chavez were officially notified on April 26, 2006. Warden Chavez was not only the USP Warden, he was the Complex Warden. The Complex Warden is responsible for all three institutions, which includes the FCI. The Complex Warden would also be Warden Sabol's supervisor. **(See Attachment # 30)** 

A. At the time of the OSHA inspection, Federal Correctional Complex, Tucson included the FCI. On March 24, 2006, Warden Chavez directed that the Health Service Administrator would take the role of Safety Manager, which he would assume all the duties and responsibilities. The FCI Safety Managers position was changed from the FCI Safety Manager to a Complex Safety Specialist and I would be the Complex Lead Safety Specialist. We where reassigned from Non-Bargaining to Bargaining Unit, Not to attend Department Head Meetings nor participate as Institution Duty Officer. This was sent to the Health Services Administrator, which he confirmed this change with the Complex Warden and FCI Warden. This was in compliance with Director Lappin's directive. This letter was also sent to Mr. Lappin, Mr. Gunja, Former Western Regional Director, Mr. Day, National Safety Administrator and Mr. Clements, Regional Safety Administrator. (See Attachment # 11)

B. On March 24, 2006, I was directed by Warden Chavez to provide the Health Services Administrator/Safety Manager a copy of Program Statement 1600.08. I was directed to highlight the Safety Manager's duties and responsibilities. Also, I was directed to assist the Health Services Administrator/Safety Manager through this transition period. (See Attachment # 13)

C. On April 24, 2006, the FCI Safety Manager informed the Chris Lamb, Health Services Administrator that on March 24, 2006, he was demoted to Safety Specialist, L. Smith was assigned to Lead Safety Specialist and Mr. Lamb to the Safety Manager, per Warden Chavez. (See Attachment # 14)

D. On April 24, 2006, the FCI Safety Manager informed the FCI Warden's Secretary, "Please be advised, as of Friday, March 24, 2006, I was demoted to a Safety Specialist, L. Smith to Lead Safety Specialist, Per Warden Chavez. This is a Safety Manager issue. Please forwarded all messages pertaining to the Safety Manager to the HSA/Safety Manager. THX!" This was responding back concerning an issue with Warden Sabol. (See Attachment # 15)

E. As a Complex setting the Safety staff works for both Wardens. As mentioned by the FCI Safety Manager and Complex Warden Chavez, which means the FCI Safety Manager and I had responsibilities enforcing the Safety Program at the USP, FCI and SPC.

F. The OSHA inspection, personal air and wipe sample(s) was conducted at the FCI UNICOR Factory and USP UNICOR Warehouse. According to the Office of Internal Affairs, it would be expected that I attend the meeting since I had oversight at the United States Penitentiary (USP) at Tucson. (See Attachments # 129)

G. Union Representative, Mr. Coleman reported to the UNICOR Factory to meet with/represent this Union Local #3955 during the on going OSHA Inspection. Upon his arrival there, and in the presence of Associate Warden Roy, Mr. D. Clifton, and the OSHA Enforcement Officer it was made clear that per the Union President P Koestel, that in his stead Mr. L. Smith would be called upon to represent the Union and I agreed to respond only in the event that Mr. Smith is not available. The OSHA representative had no objections and I returned to my assigned post. (See Attachment # 34)

H. The OSHA Inspector provided Mr. Roy and Warden Chavez a OSHA Employer Rights and Responsibilities pamphlet. During the exiting meeting, she expressed that Mr. Roy and Warden Chavez should read this pamphlet and especially read the section about Employer discrimination. Also, she expressed that she hopes their would not be any complaints reported, which would require here to come back and investigate.

**Note**: Warden Sabol was not present at the closeout with the OSHA Compliance Officer, which the Complex Warden Chavez attended. I still have a copy of the pamphlet provided to the Complex Warden Chavez and Associate Warden Roy.

I. On April 27, 2006, I reported Warden Sabol's Unprofessional Conduct, Violation of Employee Misconduct, Master Agreement, Law, Rule or Regulation, Abuse of Authority and Hostile Work Environment to Complex Warden, Chavez, which was Warden Sabol's Supervisor. The Complex Warden failed to report my allegations to the Office of Internal Affairs. This was also sent to Regional Director, Associate Warden and the Office of Special Counsel. (See Attachment # 28)

J. On May 25, 2006, I reported Associate Warden Roy's Unprofessional Conduct, Violation of Employee Misconduct, Master Agreement, Law, Rule or Regulation, and Abuse of Authority to Warden Sabol, which was Mr. Roy's Supervisor. Warden Sabol failed to report my allegations to the Office of Internal Affairs. This was also sent to Regional Director, Warden Chavez, Executive Assistant Salazar, Associate Warden Roy, Mr. Cuestes, Office of Special Counsel and Office of Inspector General. (See Attachment # 37)

# Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

B. Program Statement 1600.08, chapter 1, page 4, section
 e, Chief Executive Officers - shall ensure the prompt
 abatement of unsafe and unhealthful working conditions.

C. 29 CFR 1903.8(a) - Compliance Safety and Health Officers shall be in charge of inspections and questioning of persons. A representative of the employer and a representative authorized by his employees (Union Representative) shall be given an opportunity to accompany the Compliance Safety and Health Officer during the physical inspection of any workplace for the purpose of aiding such inspection.

D. Federal Bureau of Prisons and Council of Prison Locals Master Agreement - Article 27 - Health and Safety, Section f, When a Safety and Health inspection is being conducted by an outside Agency such as OSHA, the National Institution for Occupational Safety and Health (NIOSH), or private contractor, the Union will be invited and encouraged to have a local representative participate. (See Attachment #127)

E. Program Statement 1600.08, Chapter 1, Page 3 & 4, Section g - Chief Executive Officers Shall - Ensure that an employees are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their rights under Executive Oder 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environmental Health Program.

F. **Executive Order 12196 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

G. **OSHA 29 CFR 1960 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

H. **Program Statement 1210.24** - Office of Internal Affairs, Page 4, Section 7 (a), Classification 1 - Work Place Violence and Attempt, conspiracy, obstruction, aiding and abetting, concealment, or failure to report any matter in Classification 1.

I. Program Statement 1210.24 - Office of Internal Affairs, Page 4 Classification 3 - Unprofessional conduct (disorderly conduct.) J. **Program Statement 3420.09** - Standards of Employee Conduct, Page 9, Section (3) - An employee may not use physical violence, threats or intimidation towards fellow employees, Section (7) - Employees shall not participate in conduct which would lead a reasonable person to question the employee's **impartiality**.

7. **Paragraph #7**: The Agency's lack of candor response forgot to ask Ms. Clark, OSHA Compliance Officer, was she informed by Mr. Coleman and myself that I was appointed by the Union President as the Union Safety Representative.

They forgot to ask Ms. Clark if she had to kick Complex Warden Chavez and Associate Warden Roy out of our closing meeting, because they continued to barge into the office.

The wipe samples taken by the OSHA Enforcement Officer did show concentrations of Toxic and Hazardous Substances, which would trigger additional housekeeping, hygiene procedures, toxic and hazardous substances notification. Also, wipe sampling of the work surfaces was not conducted.

# (See Attachment # 34 and #129)

8. **Paragraph #8**: I reported (Not Complained) as the Agency's lack of candor suggests. I was making an attempt to report unsafe and unhealthy working conditions (i.e., housekeeping, hygiene and notification) associated with the toxic and hazardous substances generated in the UNICOR Factory. Also, I questioned the validity of the OSHA sampling results.

The ACT testing results did detect concentrations of toxic and hazardous substances (i.e., Zinc, Barium, Cadmium, Cobalt, Lead etc.). The wipe sampling results did detect concentrations above the Lab Reporting Limits for toxic and hazardous substances (i.e., Barium, Cadmium, Zinc etc.). The results did not trigger the OSHA action or permissible exposure limits, but they did trigger the following requirements;

## Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

 B. Program Statement 1600.08, chapter 1, page 4, section
 e, Chief Executive Officers - shall ensure the prompt abatement of unsafe and unhealthful working conditions. C. 29 CFR 1910.1200, Hazardous Communication -1910.1200 (a)(1), - The purpose of this section is to ensure that the hazards of all chemicals produced or imported are evaluated, and that information concerning their hazards is transmitted to employers and employees.

D. OSHA 29 CFR 1910.132 General requirements for Personal Protective Equipment and Subpart I Appendix B - Hazard Assessment - Harmful Dust.

E. OSHA 29 CFR 1910.1025(d)(8) Lead - Employee Notification - within 5 days after the receipt of monitoring results, the employer shall notify each employee in writing, or post the results in an appropriate location that is accessible to the affected employees.

F. OSHA 29 CFR 1910.1027(d) (5) Cadmium - Employee Notification of Monitoring - Results within 15 days of receipt of the results, notify each affected employee individually in writing, or post the results of the exposure monitoring in an appropriate location that is accessible to all affected employees.

G. OSHA 29 CFR 1910.1020(g)(1) - annual requirements, including information on the existence, location, and availability of any records covered by this section (sampling data including, but not limited to, air sampling and wipe sampling utilized to evaluate the presence of hazardous substances); identification of the person responsible for maintaining and providing access to the records; and each employees right of access to these records.

H. Program Statment 1600.08, chapter 1, page 14, section I - Reporting Hazards, paragraph 2 - Any employee or inmate or representative of employees or inmates who believe that an unsafe or unhealthy condition exists in any workplace where the person is employed, has the right to make a report of the unsafe or unhealthy working condition.

I. According to U.S. Department of Health and Human Services - Employers should understand that not all hazardous chemical have specific OSHA PEL's and for many agents, the legal and recommended limits mentioned above may not reflect the most current health-based information. However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA PEL. J. 29 CFR 1910.1027, Appendix A, Safety Hazardous Data Sheet for Cadmium - Long-term (chronic) exposure. Repeated or long-term exposure to cadmium, even at relatively low concentrations, may result in kidney damage and an increased risk of cancer of the lung and of the prostate.

K. 29 CFR 1910.1025, Appendix A, for occupational exposure to lead - Short term occupational exposures of this magnitude are highly unusual, but not impossible. Similar forms of encephalopathy may, however, arise from extended, chronic exposure to lower doses of lead. There is no sharp dividing line between rapidly developing acute effects of lead, and chronic effects which take longer to acquire. Lead adversely affects numerous body systems, and causes forms of health impairment and disease which arise after periods of exposure as short as days or as long as several years.

L. 29 CFR 1910.141 (a)(3) - Housekeeping - 1910.141
(a)(3)(I) - All places of employment shall be kept clean to
the extent that the nature of the work allows.

9. <u>Paragraph #9</u>: Again, the Agency's lack of candor concerning that I was notified of notification meetings with the staff and inmates is not true. I did not receive a copy of the May 15, 2006, e-mail until July, 2007. The e-mail I received did not have inmate names and signatures.

If you observe closely at both e-mails having the inmate names and signatures they of two (2) different fonts sizes. The smaller font size you will observe the signatures at a slight angle downward. The signatures were added from another document to the e-mail sent by Warden Sabol. This would explain why there was no date to show when the inmates received any notification as the Agency and UNICOR alleges. **(See Attachment C)** 

A. Also, the e-mail was not translated into Spanish for the none English speaking UNICOR inmate workers.

B. The Associate Warden of UNICOR did tell me that "No Hazards" or "Negative Results" have been identified by the OSHA and ACT air and wipe sampling results, which again was not accurate. The testing results did not trigger any OSHA regulatory limits, but they did identify toxic hazardous substances present in the factory, warehouse, trailers etc. (See Attachment # 130) **Note**: On May 17, 2006, I addressed formal training concerning the hazards associated with the Computer Recycling Products (i.e., cadmium, lead and barium etc.), which were identified in the OSHA and ACT wipe sampling results for surface dust. I even discussed the standards that mandate the notification of toxic and hazardous substances, testing assessments and notifications of results according to the OSHA Standards.

# (See Attachments # 35, F, G & G2)

**Note**: Again, these memorandums and e-mails were sent to Director Lappin, Regional Director McFadden, Complex Warden Chavez, Warden Winn, Warden Sabol, Associate Warden Roy, Captain Barnhart and even Former Safety Manager Cuestes. They never verbally or in writing disagreed with my recommendations.

C. Then on August 1, 2007, the UNICOR Associate Warden Sanchez stated, "All exposures were below OSHA permissible exposure limits (PEL's). Again, where does the lack of candor or truth begin with his conflicting statements, on May 21, 2006 or August 1, 2007. (See Attachment # 131)

D. Again, even if the results of the testing were given in July, 2006, they would of still exceeded the 5 day and 15 day notifications for lead and cadmium hazards. The notifications came one year later. I have yet to receive any supporting documentation that the staff and inmate workers received notifications as the agency's report suggests.

E. The OSHA and ACT sampling results showed toxic and hazardous substances present, Example ACT testing results - inmates Caldera and Nichol's, which shows low concentration levels of barium, magnesium, zinc, sodium, iron, and calcium.

F. Also, inmate Caldera had traces of lithium, titanium, and manganese, which inmate Nichol's has individual traces of copper as well.

G. The air sampling results showed low concentrations of barium air sampling west area, east area and crusher bailer area, cadmium in the east area lead in the east area and other metals etc.

H. The wipe sample results showed low concentrations of barium at the east bailer, east disassembly work bench,

front of transport trailer, rear of transport trailer, east CPU sorting area benches at warehouse.

I. It showed cadmium at the east disassembly work bench, and rear transport trailer.

J. Also, copper at the east bailer, east disassembly work bench, rear of transport trailer, and east CPU sorting area benches at the warehouse, and other metals etc, which were above the lab reporting limit.

(See Attachment D and OSHA Report # 129)

K. Again, the Agency's and UNICOR's lack of candor and misleading facts of the Regulatory Standards vs. Bureau Policy is astounding, but consistent with their false and deceitful statements.

Example - The 29 CFR 1910.1027 Cadmium(d)(5)(I) and 29 CFR
1910.1025 Lead(d)(8) are for Employee Notification, not Toxic and
Hazardous Substances. The Subpart Title for each of these
standards reference Toxic and Hazardous Substances.

Example - The Bureau of Prisons Program Statement 1600.08, Occupational Health and Environmental Safety, does not reference employee notification for monitoring results, like 29 CFR 1910.1027(d)(5)(I) and 29 CFR 1910.1025(d)(8).

L. Program Statement 1600.08, chapter 1, page 14, section I, Reporting Hazards - Paragraph 2 - Any employee or inmate or representative of employee or inmates who believes that an unsafe and unhealthy condition exists in any workplace where the person is employed, has the right to make a report of the unsafe or unhealthy working condition, Paragraph d - An employee or inmate submitting a report of unsafe or unhealthy condition shall be notified in writing within 15 days if the official receiving the report determines there are not reasonable grounds to believe such a hazard exists and does not plan to make an inspection based on such a report.

1. Also, the part they lift out in this paragraph is - A written summary, if any, shall be made available to the employee or inmate making the report within 15 days after completion f the inspection for safety violations or within 30 days if for health violations. **Note:** The Employee Notification for air sampling results of toxic and hazardous substances is completely different from staff and inmate workers reporting unsafe or unhealthy working conditions and an inspection conducted to determine if the hazards exist and putting this in writing. Again, the Agency is deliberately being misleading.

2. Also, UNICOR staff and inmate workers and Correctional Services staff assigned to UNICOR duties have not been properly informed upon first entering into employment and at least annually thereafter" of the requirements of 1910.1020(g)(1).

H. The FCI Safety Manager at the time only attended the initial meeting with OSHA and not with ACT. He did not even attend the close out meeting with OSHA as well. Also, he did not have the experience concerning the hazards that are associated with the CPU's and CRT's. This is why he played a limited role concerning these issues.

I. I became the Complex Safety Manager on August 6, 2006, which I then became the Safety Manager's (Mr. Cuestes) Supervisor. Any advise or issues needing to be addressed by Complex Warden Chavez and Warden Sabol should of come through me at this point.

J. The training plan the Agency mentions in the report was not developed until May 12, 2008, two months before OIA came to conduct their investigation, which again I was not provided this information until February 27, 2009, by the UNICOR Associate Warden. (See Attachment # 132 & 132A)

**Note:** The Agency's report mentions the training plan was established in November, 2007. The training plan is still not currently in place.

Also, they mention the UNICOR Associate Warden prepared a training plan for those employees assigned to the rear gate whose work involved contact with materials going to and from the UNICOR Factory, which they should of said, materials going to and from the UNICOR Warehouse and Factory.

I. Again, this demonstrates the Agency's and UNICOR's lack of candor and misleading of facts; On February 27, 2009, I received an e-mail from the UNIOCR Associate Warden stating, "Gentlemen, in May 2008, we put together a rear gate procedure for the correctional staff that oversee the rear gate. The procedure did not get implemented due to Mr. Cuestes memo. I would like for both of you to review and add any comments to Rear Gate Procedure... This procedure is been created as a precaution. Per Mr. Cuestes, (Retired Safety Manager) memo dated May 19, 2006, at present time no hazards have been identified per OSHA site inspection and air sampling test with negative results." (See Attached # 132)

**Note**: Again, remember that Mr. Cuestes was no longer the Safety Manager as of August 6, 2006, which the Agency and UNICOR continue to use him as their escape goat for not complying with Law, Rule or Regulation, Abuse of Authority and Gross Mismanagement etc.

J. I will provide the following information that demonstrates the training is required by OSHA and Bureau Policy;

## Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

B. Program Statement 1600.08, chapter 1, page 4, section
 e, Chief Executive Officers - shall ensure the prompt
 abatement of unsafe and unhealthful working conditions. OSHA

C. 29 CFR 1910.1200 (h) "Employee information and training." 1910.1200(h)(1) - Employers shall provide employees with effective information and training on hazardous chemicals in their work area at the time of their initial assignment, and whenever a new physical or health hazard the employees have not previously been trained about is introduced into their work area. Information and training may be designed to cover categories of hazards (e.g., flammability, carcinogenicity) or specific chemicals. Chemical-specific information must always be available through labels and material safety data sheets.

D. OSHA 29 CFR 1910.1200(h)(2) "Information." Employees shall be informed of: 1910.1200(h)(2)(i) The requirements of

this section; 1910.1200(h)(2)(ii) Any operations in their work area where hazardous chemicals are present; and, 1910.1200(h)(2)(iii) The location and availability of the written hazard communication program, including the required list(s) of hazardous chemicals, and material safety data sheets required by this section.

E. 1910.1200(h) (3) "Training." Employee training shall include at least: 1910.1200(h) (3) (I) Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area (such as monitoring conducted by the employer, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.); 1910.1200(h) (3) (ii) The physical and health hazards of the chemicals in the work area; 1910.1200(h) (3) (iii) The measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used;.

F. Program Statement 1600.08, chapter 1, page 11 & 12, section 6 (a)(1,2,3) &(b)(1,2,3) & (c), Dissemination of Information and Training, Department Heads of each department identified as a user of hazardous materials shall insure staff and inmates have received information and training on hazardous materials at the time of their initial assignment to the area and whenever a new hazard is introduced into their work area.

1. **Information -** Staff and Inmate shall be informed of: (1) The requirement of this section of the Manual, (2) Any operation in their work are where hazardous materials are present, and (3) The location and availability of the Hazardous Materials Communication Program Institution Supplement and the Material Safety Data required by this section.

2. **Training -** Staff and Inmates training shall include at least the following; (1) Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area (such as monitoring conducted by the employer, continues monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc, (2) The physical and health hazards of the chemical in the work area, (3) The measures workers can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect workers from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used,

3. Documentation of the required information dissemination and training shall include the course outline and signature of the instructor(s) and participant(s). The required documentation shall be maintained in the department for a period of three years.

G. 29 CFR 1910.1200, Hazardous Communication -1910.1200
(a) (1), - The purpose of this section is to ensure that the hazards of all chemicals produced or imported are evaluated, and that information concerning their hazards is transmitted to employers and employees.

H. OSHA 29 CFR 1910.1025(d) (8) Lead - Employee Notification - within 5 days after the receipt of monitoring results, the employer shall notify each employee in writing, or post the results in an appropriate location that is accessible to the affected employees.

I. OSHA 29 CFR 1910.1027(d) (5) Cadmium - Employee Notification of Monitoring - Results within 15 days of receipt of the results, notify each affected employee individually in writing, or post the results of the exposure monitoring in an appropriate location that is accessible to all affected employees.

J. OSHA 29 CFR 1910.1020(g)(1) - Annual Requirements, including information on the existence, location, and availability of any records covered by this section (sampling data including, but not limited to, air sampling and wipe sampling utilized to evaluate the presence of hazardous substances); identification of the person responsible for maintaining and providing access to the records; and each employees right of access to these records.

K. Program Statement Internal Affairs, Office of - page 4, section 7(a) - Misconduct Classifications - False Statements, Falsification of documents, Concealment, Removal or mutilation of Official documents and attempt, Conspiracy, Obstruction, aiding and abetting Concealment or Failure to report any matter in **Classification 1**.

L. 29 CFR 1910.1020(g)(1) - including information on the existence, location, and availability of any records covered by this section (sampling data including, but not limited to, air sampling and wipe sampling utilized to evaluate the presence of hazardous substances); identification of the person responsible for maintaining and providing access to the records; and each employees right of access to these records.

10. **Paragraph #10**: Again, the notification of toxic and hazardous substances and training requirements does not have an OSHA trigger level before the Agency and UNICOR are mandated to inform the staff and inmate workers of the hazards associated with their work area and site. Also, the employee notification monitoring requirements does not have an OSHA trigger level before the Agency and UNICOR are mandated to conduct the health as shown in my responses. The trigger for OSHA action and permissible limits

A. As the Agency and UNICOR mentioned time after time that I serve as staff advisor to the Chief Executive Officer of their institutions on matters relating to safety and environmental health programs, which the Chief Executive Officers shall - ensure the prompt abatement of unsafe or unhealthy working conditions and ensure that employees any recommendation from me or any other contractor or regulatory agency in the polite way of telling the Chief Executive Officer, Agency or UNICOR that the following needs to be implemented to ensure compliance with the Regulatory Guidelines are met.

B. According to Frank G. Fitzpatrick, Certified Industrial Hygienist (CIH), Senior Industrial Hygienist Federal Occupational Health (FOH), interviewed the OSHA Compliance Officer who conducted the April, 2006, inspection of the FCI UNICOR Factory and USP UNICOR Warehouse. Also, he reviewed the OSHA report, which OSHA reported that UNICOR/FCI Tucson was in the process of scheduling an Industrial Hygiene Baseline Study. According to the UNICOR Associate Warden and my knowledge, this study has not been conducted. Both the UNICOR Associate Warden and I reported this to the FOH Investigator on February 25, 2009.

(See Attachment # 133 FOH Questions)

C. The Agency and UNICOR mention that NIOSH also provided very useful information regarding the acquisition of consultants and methods for obtaining more robust reports, which means the OSHA and ACT industrial hygiene survey reports are not accurate, comprehensive or complete concerning safety, health and environmental hazards associate with the UNICOR working environment.

**Note:** According to the Agency and UNICOR, NIOSH appears to have the same concerns that I have addressed with the OSHA and ACT surveys being incomplete, which requires additional industrial hygiene risk assessment and risk management concerns need to be further addressed concerning the potential hazards to the staff and inmate workers, which the following has been identified in NIOSH reports provided to the Agency and UNICOR concerning FCI UNICOR Factory, USP Warehouse and other UNICOR Operations Bureau-wide;

A. **NIOSH Stated -** Employers should understand that not all hazardous chemical have specific OSHA PEL's and for many agents, the legal and recommended limits mentioned above may not reflect the most current health-based information. However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA PEL.

B. **NIOSH Encourages** - employers to make use of other OEL's (Occupational Exposure Limits) when making risk assessment and risk management decisions to best protect the health of their employees. According to the U.S. Department of Health and Human Services report date February, 2009.

#### C. NIOSH Recommendations

### (See Attachment # 128 February, 2009 Report);

1. Training of workers should be scheduled and documented in the use of techniques for dust suppression (Black Carbon and Other Toxic and Hazardous Substances etc.), personal protection equipment (e.g., respirators, gloves, etc.) and hazard communication. Additional training, record keeping and other restrictions apply if a formal respiratory protection program is implemented.

2. Frequently while conducting the on-site work, NIOSH researchers observed tasks (such as lifting and using screwdrivers) being conducted in an awkward manner which could produce repetitive stress injuries. Tasks should be evaluated to determine if they are bio mechanically taxing and if modifications in procedures or equipment would provide benefit to this workplace.

3. Ambient temperature measurements indicate that heat stress should be periodically evaluated to ensure proper precautions are in place to prevent problems associated with a hot environment.

4. A program should be established within the Bureau of Prisons to assure that all UNICOR operations, including but not limited to recycling, should be evaluated from the perspective of health, safety and the environment in the near future. This program should be overseen by competent, trained and certified individuals.

5. Due to the levels of surface contamination of Pb measured in the recycling facility, workers should wash their hands before eating, drinking, or smoking.

6. Daily and weekly cleaning of work areas by HEPAvacuuming and wet mopping should be conducted, taking care to assure no electrical or other safety hazard is introduced.

7. A comprehensive noise survey should be conducted focusing on the bailing and disk destroying areas since spot measurements showed these are the most likely areas for potential noise problems.

## Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

 B. Program Statement 1600.08, chapter 1, page 4, section
 e, Chief Executive Officers - shall ensure the prompt abatement of unsafe and unhealthful working conditions.

C. Executive Order 12196 - that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

D. **OSHA 29 1960 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

E. Program Statement 1600.08, chapter 1, page 3 & 4, Section g - Chief Executive Officers Shall - Ensure that an employees are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their rights under Executive Oder 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environmental Health Program.

## Allegation 2 Responses:

1. <u>Paragraph #1</u>: The actual date was September 20, 2006, when recreational staff verbally reported unsafe and unhealthy working conditions concerning mold growing in their recreation trailer, which Mr. Marcus McKissic, Facility Manager and I went to investigate.

A. Again, the Agency's lack of candor concerning Warden Sabol's and Associate Warden Szafir's reasoning for subjecting staff and inmates to additional exposure to toxin molds, without receiving authorization from the Regional and Central Office or discus their concerns with the Institution Facility and Safety Managers.

B. By the Agency's own admission the Warden Sabol and Associate Warden Szafir were knowingly aware of the potential health concerns. Also, the Agency admits they knowingly and wilfully new of the unhealthy conditions of the trailers and still ordered staff to enter a unsafe and unhealthy building.

1. Again, they continue to run in circles to deflect the truth, which Warden Sabol, Complex Warden Chavez, Associate Warden Szafir, Associate Warden Jones and Recreation Supervisor Anderson observed mold in the recreation trailer, on September 20, 2006, which was the same day the Facility Manager and I were notified by Recreation staff.

2. Warden Sabol and Associate Warden Szafir plainly failed to protect the staff and inmate workers, they interfered and obstructed my ability to correct unsafe and unhealthy working conditions, they failed to comply with their own directive and the directive of the Regional and Central Offices. 3. The Office of Internal Affairs has clearly failed to conduct an impartial and comprehensive investigation and have conspired to conceal and report the truth.

4. On September 22, 2006, Warden Sabol and Complex Warden Chavez signed and approved the memorandum stating, the recreation trailer will remain closed until the Facility Manager and the Safety Manager has conducted a thorough review of the sampling results and appropriate corrective action has been taken to abate any safety or health concerns. The Facility Manager and the Safety Manager will then put in writing to all concerned, if any additional actions maybe necessary prior to re-opening the recreation trailer. (See Attachment # 134)

**Note:** This document had been signed by Warden Sabol, Complex Warden Chavez, Facility Manager and myself, which was sent to Associate Warden Jones, Associate Warden Szafir and Associate Warden Sanchez and institution staff. (See Attachment # 134)

C. On September 20, 2006, Warden Sabol and Complex Warden Chavez directed Associate Warden Sanchez (UNICOR, Education, Recreation), Associate Warden Szafir, (Correctional Services), Recreation Supervisor Anderson and myself that no Recreation staff or inmates will be allowed back into Recreation Trailers.

D. Again, on September 21, 2006, Warden Sabol and Complex Warden Chavez directed Associate Warden Szafir, Associate Warden Jones, Associate Warden Roy, Deputy Captain Swepson, Health Services Administrator Lamb, Facility Manager McKissic, Recreation Supervisor Anderson and myself that no Recreation staff or inmates will be allowed back into the Recreation Trailers until we received direction from the Regional and Central Offices.

E. On September 22, 2006, As directed by Warden Sabol and Complex Warden Chavez, Facility Manager McKissic and I developed and implemented a closure of the recreation trailer and corrective action plan memorandum. (See Attachment # 134)

F. On September 25, 2006, Recreation Supervisor Joseph (Keith) Anderson notified me by e-mail, concerning that he had been advised to commence moving supplies and equipment from the Recreation Trailers to the Palo Verde Room. Also, he mentioned to please advise as to whether or not we can do that and how I want that carried out. (See Attachment # 47)

**Response**: Joseph, I would like to know what supplies and who approved you to re-enter the rec-trailers? If there has been any additional requests for anything to come out of the rec-trailer it has not been mentioned to me. At this time any other items in the rec-trailer needs to remain there and not to be disturbed. We had a window of opportunity to get rec-equipment (ONLY) out of the trailer last week. This area needs to still be off limits to all staff and inmates, until air sampling and bulk has been conducted. Also, until we receive analytical data stating what type of mold we are dealing with. (See Attachment # 47)

**Note:** This e-mail was sent to Warden Sabol, Complex Warden Chavez, Associate Warden Jones, Facility Manager McKissic, and Associate Warden Szafir, which neither one of the Executive staff ever directed me to do otherwise.

G. On September 21, 2006, The Regional Director McFadden, Regional Safety Administrator Clements, and Central Office Industrial Hygienist Korbelak supported and directed the Recreation Trailer to remain closed.

H. Regional Safety Administrator Clements conducted all communication with the Industrial Hygienist Korbelak concerning the mold, except on September 21, 2006, were Industrial Hygienist Korbelak, Regional Safety Administrator Clements and myself spoke together on the phone concerning what could be removed from the Recreation Trailers safely.

I. We all agreed that the "ONLY" items to be removed were the v-bikes and yoga equipment were approved to be removed by Industrial Hygienist Korbelak. Also, he directed how to clean and disinfect the metal equipment.

J. On September 26, 2006, Recreation Supervisor Anderson advised me by e-mail that Recreation staff had not moved anything other than the cardio-cycles and mats, but Associate Warden Szafir wanted him to start moving office equipment/supplies, files, computers to Palo Verde. I informed him (AW Szafir) that I needed to get with you first, so as not to step on your toes, before doing anything. He told me to do that then start moving everything into Palo Verde. (See Attachment # 47)

**Response**: Joseph, During town hall we were asked by the inmate population if they could get their arts and craft items etc. Mr. Szafir and I both replied that no staff or inmates will be allowed into the rec-trailer until proper testing can be conducted. Then based of the testing results will allow us to make further decisions in how we continue to handle the current situation. At this time according to the memorandum that was put out by Facilities and the Safety Departments, this area has be closed to all staff and inmate workers until testing can be conducted by an outside source, which is scheduled for Wednesday, September 27, 2006. Thanks, (See Attachment # 47)

**Note:** This e-mail was sent to Warden Sabol, Complex Warden Chavez, Associate Warden Jones and Associate Warden Szafir, which neither one of the Executive staff ever directed me to do otherwise.

K. On September 25, 2006, I notified the Regional Safety Administrator Clements concerning Warden Sabol and Associate Warden Szafir ordering Recreational Supervisor Anderson to remove additional gym and office equipment out of the Recreation Trailers.

L. On September 26, 2006, Warden Sabol stated, "I received a tela-message from Regional Director McFadden, which he directed her to stop removing any gym or office equipment from the recreation trailers and that I needed to keep in direct contact with Regional Safety Administrator Clements concerning the mold issues." Also, she stated, "I totally disagree with the Regional Director and that I should have squashed this issues when I had the chance and you along with it."

M. On October 2, 2006, I received a memorandum from Recreation Supervisor Anderson concerning the mold plan of action meetings with Warden Sabol, Complex Warden Chavez, Associate Warden Szafir, Associate Warden Jones, Associate Warden Roy, Deputy Captain Swepson, Health Services Administrator Lamb, Facility Manager McKissic, Recreation Supervisor Anderson and myself. (See Attachment # 48)

1. This memorandum serves to inform you of my understanding concerning the meeting on September 20,2006, with Warden Sabol. I recall Warden Sabol asking you what your plan of action was pertaining to the mold found in the Recreation Trailer. You described to her that originally you were going to have all staff and inmates removed from the trailer and have it secured. You also described your decision was based off that you were not able to locate Warden Sabol or Warden Chavez initially, which you decided to hold off until you were able to speak with them. Warden Sabol responded by telling you that she was glad you did not

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implement your initial plans because you have no authority to make decisions like that in her institution.

2. On September 20, 2006, Warden Sabol and Warden Chavez instructed AW Sanchez, AW Szafir, you and myself that no Recreation staff or inmates will be allowed to enter the Recreation Trailer. This was also discussed during the meeting on September 21, 2006, with Warden Sabol, Warden Chavez, AW Szafir, AW Jones, AW Roy, Deputy Captain, Health Services Administrator, Facilities Manager, you and myself until you received direction from the Regional and Central Offices. At this meeting you informed us that we could remove the v-bikes and yoga equipment from the trailer per Mr. Korbelak, Central Office. You also described that Mr. Korbelak recommended the equipment to be placed out in the sun for four to eight hours and then use a disinfectant to clean the equipment. We all discussed the office equipment and other inmate items in the trailer, which we all agreed would not be removed until proper testing could be conducted. They also have not provided the recreation staff any real direction or support in conducting our normal duties in a conducive working environment.

3. On September 21, 2006, Warden Sabol also stated that she wanted AW Szafir to coordinate a town hall meeting in the housing units with unit team, safety, and recreation. Knowing that I was going to be off the following two days, I instructed recreation specialist Kitzman to prepare for a possible town hall meeting Thursday or Friday, on September 21-22, 2006. I also instructed him what to say and how to answer recreation related questions only.

4. On Sunday, September 24, 2006, recreation specialist Kitzman informed me that the town hall meeting was not conducted on Thursday or Friday. On Monday, September 25, 2006, I instructed recreation specialist Timothy Gillooly to assist with a possible town hall meeting that day. The meeting was eventually carried out after the 3:15 p.m. recall on Monday.

5. In addition, I was approached by AW Szafir on Monday morning, September 25, 2006, and was instructed to move office supplies, files, and computers from the trailer to the Palo Verde day room, which was being converted into an office for recreation staff. I informed him that I needed to talk to Safety prior to doing so because I did not want to break protocol especially after we were ordered not to move anything, other than the v-bikes and yoga mats, out of the trailers. AW Szafir told me to do so, then move the items into Palo Verde. I electronically mailed you about this and you responded by saying nothing goes in or out of the trailers until inspected.

6. On Wednesday, September 27, 2006, I asked AW Szafir if he had seen the memorandum, which he replied, Yes. I mentioned to him that I was not going to do anything until Safety gives me a green light to do so. AW Szafir responded by saying that there was a misunderstanding between you two (Mr. Smith and AW Szafir), that he (AW Szafir) did not like the attitude conveyed in the e-mail! AW Szafir then responded that he was going to meet with you to straighten things out!

7. I then went to the Education building, which my supervisor informed me that AW Szafir advised her of a mix-up involving the movement of trailer office supplies and equipment to Palo Verde. I informed her that there was no mix-up, which I then began to tell her what AW Szafir wanted me to do.

8. This memorandum should explain my concern of properly protect my staff and inmates, which I have no intentions of breaking protocol until I receive specific instructions from you regarding a plan of action on the mold currently in the recreation trailer. (See Attachment # 48)

N. Warden Sabol and Associate Warden Szafir directed staff to remove office equipment and supplies, knowing the potential hazards, they were not regular building maintenance staff, nor were they properly trained on proper clean-up methods, personal protective equipment and potential hazards, which is required to comply with OSHA's Hazardous Communication and Respiratory standards;

#### Listing of Actual/Apparent Violations:

A. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

B. Program Statement 1600.08, chapter 1, page 4, section

e, Chief Executive Officers - shall ensure the prompt abatement of unsafe and unhealthful working conditions.

C. OSHA's Brief Guide to Mold in the Workplace -Remediation can be conducted by the regular building maintenance staff as long as they are trained on proper clean-up methods, personal protection, and potential health hazards. This training can be performed as part of a program to comply with the requirements of the OSHA Hazard Communication Standard (29 CFR 1910.1200).

D. **EPA Indoor Air Quality, Sick Building Syndrome**, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants.

E. OSHA's Brief Guide to Mold in the Workplace -Respiratory protection (e.g., N-95 disposable respirator) is recommended. Respirators must be used in accordance with the OSHA respiratory protection standard (<u>29 CFR 1910.134</u>). Gloves and eye protection should be worn.

F. Program Statement 1600.08, chapter 1, page 3, section
5, Safety Manager - Professional judgement shall be exercised when regulations and policy is not item specific.

G. **NIOSH -** However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA Regulatory Standard.

H. Program Statement 1600.08, OSHA 29 1960 Executive Order 12196 - Chief Executive Officers, Shall - Ensure the prompt abatement of unsafe and unhealthy working conditions.

I. **Executive Order 12196 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

J. **OSHA 29 1960-** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

K. Program Statement 1600.08, Chapter 1, Page 3 & 4,
 Section g - Chief Executive Officers Shall - Ensure that an employees are not subjected to restraint, interference,
 coercion, discrimination or reprisal for exercising their

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rights under **Executive Oder 12196, 29 CFR 1960,** or for participating in the Bureau's Safety and Environmental Health Program.

L. Program Statement Internal Affairs, Office of - page 4, section 7(a) - Misconduct Classifications - False Statements, Falsification of documents, Concealment, attempt, Conspiracy, Obstruction, aiding and abetting Concealment or Failure to report any matter in Classification 1.

2. **Paragraph #2**: The Agency admits that they have known for years that mold has been growing in the Recreation, Lieutenants Office, Compound Officer, Physiology, Medical Records, Administration Building, Palo Verde etc., for years. Also, that staff have made unhealthy complaints to Senior Management and the previous Safety Manager. I arrived FCC Tucson on February 6, 2006 and not March, 2006.

A. A Visual Inspection and Mold Samples were conducted by Applied EnviroSolutions Inc., (AES) on September 27, 2006, concerning East and West trailers. (See Attachment # 50)

1. The East Trailer currently used as the Band; Exercise, and Arts and Crafts rooms, and an Office. The rooms had a detectable musty odor. The Band, Exercise and Arts & Crafts rooms had noticeable decay or rot of the paneling and inner wall structures, below and near the windows in their east and west walls.

2. FCI personnel stated that the musty odor and black mold growth had been present on the east wall between the windows of the exercise room for some time.

3. The floor with in the latrine located in the Arts and Crafts room had noticeable rot around the toilet to the extent that the toilet was no longer stable.

4. The floor in front of the entry inside the Arts & Crafts room also has noticeable rot.

5. The West Annex Building contains the Officers Station, Lieutenants Station and the Psychology offices were in significantly better condition. However, stains were found around the windows of offices. Only bulk samples were taken from each location.

6. Additionally, one sample was collected from the cabinets located in the lieutenant's office. In the

psychology office stain was found and sampled from around the windows.

7. Mr. Paul Madrid's office ceiling. The FCI staff member that provided access to this office stated that "the ceiling is always wet" as is the floor directly beneath this location.

a. During the visual inspection, the inspector observed the following issues:

1. Floor buckling (rotten wood) in the East Trailer and Psychology office.

 Wet carpeting and ceiling tiles in the Psychology office, Medical Records.
 Office, Dental Office and the Office of Mr.
 Paul Madrid.

3. Musty odor in the East Trailer.

4. Portion of rotten paneling exposed with mold in the Exercise Room.

5. Ceiling tile stains in Medical, Dental and Paul Madrid's Offices.

6. Discolored painted & textured surfaces throughout West Trailer.

B. Mold is not always visible to the human eye as we found out by taking wipe and bulks from the ventilation ducts in the Safety, Facility, Carpentry, Administration Building, Yucca Officer Station, Yucca Laundry Room, Commissary etc.

The mold exposure effects not "ONLY" unhealthy staff or inmates, but even normal healthy staff according to the test results, depending on pre-existing health, length of exposure and amount of mold in the environment.

The ambient air sample for the outside was 13 to 1600 spores and sampling was 13 to 11000 spores on the inside of the buildings. Then bulks and wipes from the building material and ventilation ducts ranged from 2 to 320,000 spores.

The following are the type of molds that were found and the health affects associate with mold exposure;

 Cladosporium - 51, 000 spores in the Palo Verde Units Ventilation Duct Cover. a. Cladosporium common cause of respiratory problems, allergic reactions and can be an agent for hypersensitivity diseases.

2. Penicillium/Aspergilllus - 80,000 spores in the Carpentry Shop Ventilation Duct Cover.

a. Penicillium/Aspergilllus causes allergic reactions, hypersensitivity pneumonitis and variety of severe lung complications. Also, this mold is capable of producing mycotoxins.

3. Chaetomium - 290,000 spores in the Yucca Unit ceiling.

a. Chaetomium is a fungus type that included approximately 80 different species. It is allergenic and an agent of onychomycoses (nasal infection), peritonitis, cutaneous lesions and potential agent in fatal systemic mycoses.

b. Chaetomium have been documented, brain abscess, peritonitis and cutaneous lesions may also develop.

4. Stachybotrys - 320,000 spores in the Palo Verde shower areas.

a. Stachybotrys may cause one or more mycotoxins, low doses include rashes, mild neurotixon effects such as headaches, nausea, muscle aches and pains, and fatigue. The immune system may also be affected resulting in a decreased resistance to infections.
(See Attachment # 50 and Other Test Results Provided)

C. The following precautionary measures were discussed and supported by Warden Sabol, Complex Warden Chavez, Associate Warden Jones, Associate Warden Roy, Associate Warden Szafir, Associate Warden Sanchez, Associate Warden Calcote, Regional Safety Administrator, Dave Clements, Industrial Hygienist Korbelak and Contractor Mr. Martin, Applied Environmental Solutions:

1. The trailers will need be temporally closed and all items in the trailers be cleaned by an outside source.

2. As a precautionary measure the medical records office will need to be temporally closed. Need to conduct air sampling, the crawl space in these areas need to cleaned by an outside source, and the leaks on the roof needs to be repaired.

3. As a precautionary measure Mr. Madrid's and Ms. Avery's office will need to be temporally closed. Need to conduct air sampling, the crawl space needs to be cleaned by an outside source, and the leaks on the roof needs to be repaired.

4. Additional air and bulk sampling needs to be conducted in the lieutenants office, compound officer office, psychology, to determine the extent of the mold throughout their trailer.

5. As a precautionary measure no equipment or materials should be removed from the trailers until an outside source can conduct proper cleaning, which will help prevent the spread of mold spores in other areas in the institution

6. Abatement or demolition of the trailers may need to be considered based off the high concentrations of mold. An abatement and cleaning analysis will need to be requested from an outside source.

7. The recommended trailer areas will remain closed until precautionary environmental measures can be implemented. (See Attachment # 49)

### Listing of Actual/Apparent Violations:

A. Program Statement 1600.08, chapter 1, page 3, section 4, Regional Safety Administrators - they provide first line guidance and technical supervision to institution safety personnel and assist in resolving problems that cannot be resolved at the institution level.

B. Program Statement 1600.08, chapter 1, page 2, section 2, Safety Administrator (National) - He also serves as consultant to institution safety managers when such issues cannot be resolved at the institution or regional levels.

C. According to Program Statement 1600.08(1)(A) - This policy of the Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

D. **EPA Indoor Air Quality, Sick Building Syndrome**, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants.

E. OSHA's Brief Guide to Mold in the Workplace -Remediation can be conducted by the regular building maintenance staff as long as they are trained on proper clean-up methods, personal protection, and potential health hazards. This training can be performed as part of a program to comply with the requirements of the OSHA Hazard Communication Standard (29 CFR 1910.1200).

F. OSHA's Brief Guide to Mold in the Workplace -Respiratory protection (e.g., N-95 disposable respirator) is recommended. Respirators must be used in accordance with the OSHA respiratory protection standard (<u>29 CFR 1910.134</u>). Gloves and eye protection should be worn.

G. Program Statement 1600.08, chapter 1, page 3, section
5, Safety Manager - Professional judgement shall be exercised when regulations and policy is not item specific.

H. **NIOSH -** However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA Regulatory Standard.

I. Program Statement 1600.08, OSHA 29 1960 Executive Order 12196 - Chief Executive Officers, Shall - Ensure the prompt abatement of unsafe and unhealthy working conditions.

J. **Executive Order 12196 -** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

K. **OSHA 29 1960-** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

L. Program Statement 1600.08, Chapter 1, Page 3 & 4, Section g - Chief Executive Officers Shall - Ensure that an employees are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their rights under Executive Oder 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environmental Health Program. M. Program Statement Internal Affairs, Office of - page 4, section 7(a) - Misconduct Classifications - False Statements, Falsification of documents, Concealment, attempt, Conspiracy, Obstruction, aiding and abetting Concealment or Failure to report any matter in Classification 1.

3. **Paragraph #3**: The Agency admits to knowingly and willfully exposing staff and inmate to potentially harmful molds from 2000 through 2007. The mold found in the trailer had been growing for years, which should not have been missed by an inspection conducted by the Safety Manager previously, unless is was behind the walls, airborne or in the ventilation ducts. In this case the Safety and Facility Manager should of identified the mold by the excess growth on the window sills, outside the wood panels, insulation and the odor being admitted and the rotten wood.

A. Pictures taken of the recreation trailer inner walls. This is a 2 inch growth outside the wood panels and 4 to 6 inches of growth inside the wall panel and insulation throughout the trailers.

(See Attachments # 50A, 50B, 50C & 50D)

**Note:** OSHA states - Indoors, mold growth should be avoided. Problems may arise when mold starts eating away at materials, affecting the look, smell, and possibly, with the respect to wood-framed buildings, affecting the structural integrity of the buildings.

**Note: NIOSH -** However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA Regulatory Standard.

<u>Note</u>: EPA - Indoor Air Quality, Sick Building Syndrome, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants.

4. **Paragraph #4**: The actual date was September 20, 2006, when recreational staff verbally reported potentially unsafe and unhealthy working conditions concerning mold growing in the recreation trailer, which Mr. Marcus McKissic, Facility Manager and I went to investigate.

A. Again, the Agency's lack of candor concerning Warden Sabol's and Associate Warden Szafir's reasoning for subjecting staff and inmates to additional exposure to toxin molds, without receiving authorization from the Regional and Central Office or discus their concerns with the Institution Facility and Safety Managers. B. By the Agency's own admission the Warden Sabol and Associate Warden Szafir were knowingly aware of the potential health concerns. Also, the Agency admits they knowingly and wilfully new of the unhealthy conditions of the trailers and still ordered staff to enter a unsafe and unhealthy building.

1. Again, they continue to run in circles to deflect the truth, which Warden Sabol, Complex Warden Chavez, Associate Warden Szafir, Associate Warden Jones and Recreation Supervisor Anderson observed mold in the recreation trailer, on September 20, 2006, which was the same day the Facility Manager and I were notified by Recreation staff.

2. Warden Sabol and Associate Warden Szafir plainly failed to protect the staff and inmate workers, they interfered and obstructed my ability to correct unsafe and unhealthy working conditions, they failed to comply with their own directive and the directive of the Regional and Central Offices.

3. The Office of Internal Affairs has clearly failed to conduct an impartial and comprehensive investigation and have conspired to conceal and report the truth.

4. On September 22, 2006, Warden Sabol and Complex Warden Chavez signed and approved the memorandum stating, the recreation trailer will remain closed until the Facility Manager and the Safety Manager has conducted a thorough review of the sampling results and appropriate corrective action has been taken to abate any safety or health concerns. The Facility Manager and the Safety Manager will then put in writing to all concerned, if any additional actions maybe necessary prior to re-opening the recreation trailer. (See Attachment # 134)

C. On September 25, 2006, I notified the Regional Safety Administrator Clements concerning Warden Sabol and Associate Warden Szafir ordering Recreational Supervisor Anderson to remove additional gym and office equipment out of the Recreation Trailers.

D. On September 26, 2006, Warden Sabol stated, "I received a tela-message from Regional Director McFadden, which he directed her to stop removing any gym or office equipment from the recreation trailers and that I needed to keep in direct contact with Regional Safety Administrator Clements concerning the mold issues." Also, she stated, "I totally disagree with the Regional Director and that I should have squashed this issues when I had the chance and you along with it."

**Note:** The Office of Internal Affairs has not interviewed Regional Director McFadden nor the Regional Safety Administrator Clements concerning these issues and the cover-up by the Central Office, Safety and Health Division and the Office of General Counsel. **(See Attachment # 135)** 

E. The Agency has conspired to conceal concerning the Safety and Health Division lack of action to get involved and provide any technical assistance for over two years, This was even after staff had formally reported potential health concerns associated with mold exposure and even after the Regional Director McFadden requested for their help.

F. The Central Office Environmental Attorney and the Safety and Health Division conspired to coerce Regional Safety Administrator Clements into agreeing that he told them that we did not need their assistance or services.

G. On September 20, 2006, Warden Sabol, Complex Warden Chavez, Associate Warden Szafir, Associate Warden Jones and Recreation Supervisor Anderson conducted an on sight inspection of the trailers and observed mold growing, behind and underneath the walls, floors and ceilings, which was on the same day the Facility Manager and I were notified by Recreation Staff of possible mold.

1. On September 21, 2006, Warden Sabol and Complex Warden Chavez held another meeting and directed the Facility Manager and myself to draft a memorandum for closure of the recreational trailers and plan of action measures, which they would sign before being distributed out to all Department.

a. On September 22, 2006, Warden Sabol and the Complex Warden Chavez sign and approved, that the recreation trailer will remain closed until the Facility Manager and the Safety Manager has conducted a thorough review of the sampling results and appropriate corrective action has been taken to abate any safety or health concerns. The Facility Manager and the Safety Manager will then put in writing to all concerned, if any additional actions maybe necessary prior to re-opening the recreation trailer. (See Attachment # 49) 2. The reason for telling the Office of Internal Affairs that I did not close the recreation trailers immediately on September 20, 2006, was because it didn't seem to be an imminent danger at the time.

3. Plus I wanted to speak with Warden Sabol and Complex Warden Chavez first to prevent any misunderstandings.

4. I needed to conduct interviews with the staff.

5. Also, I I did not want any retaliation or bias from Warden Sabol or other Executive staff towards me like Atwater, which I had already been retaliated against by Warden Sabol and other Executive staff previously.

**Note:** Again, on September 20, 2006, the staff reported a potential health hazard, they did not report any personal health issues associated with the mold until September 21, 2006, which elevated my concerns to an **imminent health concern**.

You can tell by the Agency's report, I was not directing anything. According to Warden Sabol's statement, I am glad you did not implement your initial plans because you have no authority to make decisions like that in my institution.

**Note:** According to the Recreation Supervisor Anderson's memorandum, which he stated, "This memorandum serves to inform you of my understanding concerning the meeting on September 20,2006, with Warden Sabol. I recall Warden Sabol asking you what your plan of action was pertaining to the mold found in the Recreation Trailer. You described to her that originally you were going to have all staff and inmates removed from the trailer and have it secured. You also described your decision was based off that you were not able to locate Warden Sabol or Warden Chavez initially, which you decided to hold off until you were able to speak with them. Warden Sabol responded by telling you that she was glad you did not implement your initial plans because you have no authority to make decisions like that in her institution." (See Attachment # 48)

6. Warden Sabol and the Complex Warden Chavez directed the recreational trailer to be closed after we all discussed and agreed there were safety and health concerns associated with the mold. Also, Warden Sabol's decision not only conflicted with our discussion during the meetings, but they were in direct conflict with the Regional and Central directives.

# Listing of Actual/Apparent Violations:

A. Same as Above.

5. **Paragraph #5**: I believe that the meetings held on September 20 & 21, 2006, meant that all Senior Management and Middle Management staff were adamant that the trailers shall no longer be accessed, which Mr. Anderson discussed in his memorandum as well. The same was echoed and directed by the Regional and Central Offices until sampling could be conducted.

A. On September 25, 2006, I notified the Regional Safety Administrator Clements concerning Warden Sabol and Associate Warden Szafir ordering Recreational Supervisor Anderson to remove additional gym and office equipment out of the Recreation Trailers.

B. On September 26, 2006, Warden Sabol stated, "I received a tela-message from Regional Director McFadden, which he directed her to stop removing any gym or office equipment from the recreation trailers and that I needed to keep in direct contact with Regional Safety Administrator Clements concerning the mold issues." Also, she stated, "I totally disagree with the Regional Director and that I should have squashed this issues when I had the chance and you along with it."

C. You don't deem anything necessary when subjecting your staff and inmate workers knowingly and willfully to potentially unsafe and unhealthy conditions and you don't disobey a direct order from the Regional Director.

D. Regional Safety Administrator Clements conducted all communication with the Industrial Hygienist Korbelak concerning the mold, except on September 21, 2006, were Industrial Hygienist Korbelak, Regional Safety Administrator Clements and myself spoke together on the phone concerning what could be removed from the Recreation Trailers safely.

E. We all agreed that the "ONLY" items to be removed were the v-bikes and yoga equipment were approved to be removed by Industrial Hygienist Korbelak. Also, he directed how to clean and disinfect the metal equipment.

1. This was because the equipment was a solid surface without growing mold pores or where that mold would be hard to clean and disinfect, which would prevent cross contamination and additional exposure to staff and inmate workers. 2. Again, the typical lack of candor response concerning the conversation between Mr. Korbelak, Mr. Clements and myself on September 21, 2006, were misleading to deflect the truth.

3. Warden Sabol and Associate Warden Szafir plainly failed to protect the staff and inmate workers, they interfered and obstructed my ability to correct unsafe and unhealthy working conditions, they failed to comply with their own directive and the directive of the Regional and Central Offices.

**Note**: On October 12, 2006, Mr. Korbelak sent an e-mail to Mr. Clements "ONLY", which was not disseminated or provided to me until two years later from the Central Office Safety and Health Division by accident. The following information was never implemented. (See Attachment # 136)

A. I've reviewed the memo from Tucson and the report on the mold sampling/assessment you sent in your email. I've also spoken with a facilities staff member from Tucson and tried to contact AES, Inc.

B. I believe the air conditioning units, trailer construction/insulation, and leaks have provided conditions where moisture condenses around the trailers and promotes mold growth. The remediation recommendations of cleanup and leak repair may not solve the whole problem - mold growth could reoccur.

C. HVAC timers may be necessary to allow building surfaces to dry out. Depending on the mold contamination within the walls, re-insulation may be needed and could also be good in preventing mold growth reoccurrence.

D. It would be very helpful to see photographs of the mold in the trailers as well as to speak with the Environmental Technician that did the sampling.

E. It may be more cost effective to replace the trailers than to remediate them.

# Listing of Actual/Apparent Violations:

A. Program Statement 1600.08, chapter 1, page 3, section 4, Regional Safety Administrators - they provide first line guidance and technical supervision to institution safety personnel and assist in resolving problems that cannot be resolved at the institution level. B. Program Statement 1600.08, chapter 1, page 2, section 2, Safety Administrator (National) - He also serves as consultant to institution safety managers when such issues cannot be resolved at the institution or regional levels. Same as Above.

C. **EPA Indoor Air Quality, Sick Building Syndrome**, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants.

6. **Paragraph #6**: Please review paragraph #2 responses and look at the test results, which I have also provided additional testing for review and to tell me if the encountered molds are just common, which do not affect most people. Afterwards, ask yourself, could you go back to the staff and inmate workers with the AES definitions of each identified mold and tell them no health hazards exist for the common person? Especially, if you are the person held accountable for the safety and health of the staff and inmates at in your work place.

A. The recreation trailers were always closed to staff and inmates, especially after Regional Director McFadden's phone call to Warden Sabol.

B. Once we received the testing results from AES, Warden Sabol and Associate Warden Szafir directed Correctional Services to remove additional office equipment and supplies out of the trailers, that were demeaned contaminated with mold spores by AES, Regional Safety Administrator Clements, Central Office Industrial Hygienist Korbelak and myself.

### Listing of Actual/Apparent Violations:

A. Same as Above

7. <u>Paragraph #7</u>: While under Warden Sabol's tenure, sampling was conducted on September 27, 2006, by AES, for mold in Mr. Paul Madrid's office (Business Office) and the one next to him in the Administration Building tested positive. (See Attachment # 137)

A. Again, on October 13, 2006, AES conducted additional sampling in the Business Office in the Administration Building due to high mold counts previously sampled (see mold sampling report on 9/27/06) from **Mr. Paul Madrid's office**. Samples were collected in Ms. Avery's Office, the Office of the Controller, the Financial Programs Office, and the HVAC duct above the hallway, which the leaking roof and windows cause mold to grow in Mr. Madrids Office, other Business Offices, Controllers and Financial Programs Offices had levels of Stachybotrys, Aspergillus/Penicillium and Alternaria and Ulocladium mold spores. Also, the HVAC ducting had Aspergillus/Penicillium and Chaetomium mold spores. (See Attachment # 138)

B. Then on October 31, 2006, AES provided a mold consulting and a cleaning crew for FCI Tucson, for the purpose to conduct cleaning and disinfection of Mr. Madrid's Office "Only", which the Controller's, Financial Programs, Ms. Avery's Office, and the HVAC ducting did not get cleaned until some time in late 2008. (See Attachment # 139)

C. Warden Sabol's successor (Warden Winn) arrived FCI Tucson in February 2007. I made him aware of the ongoing mold projects, which included the Business offices in the Administration Building, which he did not take any immediate steps to eliminate the mold contamination.

D. There was no actions taken in the Administration Building until the Warden's Secretary made an official complaint on May 13, 2008. (See Attachment # 140)

E. This allowed the Business Office staff, Warden and Warden's Secretary to be subjected to harmful mold for 1 year and 9 months, because the Institution and Regional Office refused to pay for additional remidation and roof repairs/replacement.

F. On May 13, 2008, Warden's Secretary filed a complaint concerning mold, which she noticed a smell in office that was like "Fresh Cut Grass". This began to affect her allergies and asthma more at work then at home. Her eye's even began to burn. (See Attachment # 140)

G. Also, Warden Winn made a verbal complaint of health issues associated with mold, allergies, drainage, headaches and itchy eyes, which the following staff were present during these discussions, Wardens Secretary, Ms. Kerry Peeples, Ms. Kristin Ballard, Ms. Chris Haag, Mr. Paul Madrid, Mr. Keith Anderson and Mr. Michael Moriarty.

H. Also, the following staff complained of health concerns that was being caused by the mold, Warden Winn, Wardens Secretary Ms. Kerry Peeples, Ms. Kristin Ballard, Ms. Chris Haag, Mr. Paul Madrid, Mr. Keith Anderson and Mr. Michael Moriarty concerning increase allergies, drainage, headaches, itchy eyes, respiratory, and bloody noses. I. I believe AES used the term, wipes samples showed very high numbers of Cladosporium spores in the return air vents southern most Safety Office at 11,000 spore compared to 138 spores outside, which effected Safety Specialist Moriarty. They also detected Yeast and Bacterial growth.

1. **Cladosporium** - common cause of respiratory problems, allergic reactions and can be an agent for hypersensitivity diseases. (See Attachment # 141)

J. Based off the health complaints from Warden Winn and other staff during the meeting with the AES Industrial Hygienist and I, we strongly recommended to Warden Winn that staff should be removed from their current offices until the remedation and clearances could be made to ensure a safe and healthy working environment before their return.

K. On December 30, 2008, AES conducted further sampling, which they were very concerned about the presence of Penicillium/Aspergillius in the Business Office Storage Room walls and carpet. They recommended more sampling should be taken from the air registers and walls in the related 14 Business Office areas, before they are able to conclude the presence or absence of the molds. The remediaton and additional sampling has not be conducted to determine the work area's safe and healthy for the staff. (See Attachment # 142)

L. The interpretation of the NIOSH review is misleading. You must determine the presents of airborne mold spores by air sampling and growth of mold spores by wipe sampling. In both cases the mold was not able to be seen by the human eye.

M. If you see it growing in your walls or ceilings then remove and replace by trained employees, but after cleaning surfaces, ventilation ducts, furniture etc., you must take a post test to determine if your housekeeping procedures worked.

N. It's been mentioned that if we don't reduce the mold spores in the indoor air to equal the minium outdoor molds there will still be health concerns and the mold will attach themselfs to building material and other services and begin the growth process all over again.

O. Since October 2008 to Present the institution has had eight (8) other buildings have savior mold growth in ventilation ducts, walls and ceilings, which most not identified by visual inspections. Also, the mold growth was not caused during rainy weather. The testing for mold was directly related by staff complaints. (See Attachment # 143)

P. Mr. McFadden, Regional Director, Mr. Kendig and Mr. Batten, Regional Facility Administrator collaborated together without seeking any guidance from Mr. Clements, Regional Safety Administrator which serves as the subject matter experts for the field. Warden Winn stated, I was not consulted by Mr. McFadden or Mr. Kendig about having the Health Services Division conduct a staff assistance visit at FCI Tucson.

Q. Warden Winn stated, "Mr. McFadden denied your request for funding to conduct a complete health risk assessment and the cleaning the ventilation ducts." Mr. McFadden, Complex Warden Apker and Warden Winn never responded to my requests to have the Agency's or UNICOR's Industrial Hygienists conduct a health risk assessment from 2006 through 2008.

R. The Health Services Division e-mailed a Mold Questionnaire to Warden Apker and Warden Winn, which was assigned to me and needed to be completed prior to their arrival.

S. Mr. Batten "Only" became aware that the Health Services Division canceled the staff assistance visit while in transit to FCI Tucson to meet them. Mr. Apker, Mr. Winn, Mr. Clements, Facility Manager Marchetti and myself were made aware of the cancellation when Mr. Batten arrived the day of the visit.

T. Mr. Day, National Safety Administrator and Mr. Flannery, National Environmental Coordinator canceled the technical assistance visit without notifying Mr. McFadden, Mr. Clements, Mr. Apker, Mr. Winn, or myself.

U. According to Mr. Clements, he called Mr. Flannery, which he asked, who contacted them (National Safety Branch) to conduct a technical assistance visit, which Mr. Flannery replied, Mr. McFadden and Mr. Batten.

V. Mr. Flannery asked Mr. Clements, if it was necessary for him to still come out to FCI Tucson, which he replied, I am not in a position to tell you to come or not to come out, that's up to you, Mr. Day and the Regional Director. Mr. Flannery e-mailed Mr. Clements concerning the technical assistance visit. W. He wanted Mr. Clements to confirm that he told Mr. Flannery not to come to Tucson, which Mr. Clements denies that particular conversation ever happened.

X. Then Mr. Clements received an e-mail from Mr. Greg Myers, Environmental Attorney, Office of General Counsel, which was suppose to be a response to Mr. Flannery concerning the conversation between Mr. Flannery and Mr. Clements.

Y. Mr. Clements stated, Mr. Myers conveyed to Mr. Flannery, that we are trying to get Mr. Clements to commit, that he (Mr. Clements) or FCC Safety staff have not requested any assistance from the National Safety Division concerning mold at FCC Tucson for the past two years.

(See Attachments # 135,144,145,146,147,148,149,150,151,152, 153 & 154)

**Note**: On September 3, 2008, a meeting was held by AES with the Facility Manager Marchetti, Regional Facility Administrator Batton, General Foreman Cobb and myself, which was suppose to be the day the Central Office Health Services Division was to conduct a staff assistance visit and attend the meeting at FCI Tucson. **(See Attachment # 169)** 

A. Mold was identified in the Administration Building previously, which they took a few screening samples for airborne mold spores in various areas in the Administration Building.

The analytical data revealed that mold spores inside the building exceeded the types and amounts of mold found outside the building. According to the AES report, we would have to assume that there is mold growth somewhere within the structure.

Also, sampling was conducted in the Administration ventilation system, which showed mold growth of different types, bacteria and yeast. The mold growth was not generated after a rainy day or season, but has been growing over time.

Mr. Korbelak mentioned, the mold growth is also affected by humidity, poor ventilation, poor maintenance and temperature. This information was not sent to the institution until 2 years later.

The Agency has admitted time after time in the report that they were knowingly and willfully aware of the unsafe and unhealthy building conditions, which they subjected staff and inmates to mold spores/toxins. **Note:** According to Mr. Kendig, my allegations of corruption, misconduct and gross mismanagement have been referred to the appropriate office for review.

Mr. Clements stated, "No one has approached me about the mold, ventilation or UNICOR issues at FCC Tucson." Mr. Clements will be retiring in July 2009.

Mr. Kendig, Mr. Day, Mr. Flannery and Mr. Meyers actions continues to demonstrate the Agency's deliberate cover-up of their failure to provide a safe and healthy work and living environment for the staff and inmates.

Mr. Meyers, Attorney attempt to coerce Mr. Clements in making false statements violates the code of ethics and conduct.

The corruption begins and ends with Mr. Lappin, which he has conspired to conceal my reported allegations of retaliation, interference, obstruction, coercion, gross mismanagement, abuse of authority and specific danger to public health or safety, which is potentially criminal.

My reports of unsafe or unhealthy conditions have been sent to the Regional and Central Office experts, which at anytime they could of provided technical advise or assistance. Again, this did not occur.

Mr. Lappin and other Executive staff have deliberately violated law, rule or regulation in attempt to prevent me from make appropriate decisions to correct unsafe and unhealthy working conditions, which they have made this personal. (See Attachment # 154)

B. On October 17, 2008, Warden Winn makes assumptions that the Commissary roof was repaired and remediation completed and the sources of leaks to the Yucca North Office were repaired and remediation had been completed. Again, this is not true.

The Yucca Unit Office and other areas had just been identified and staff complaints made as well, which was discussed during a meeting with Warden Winn present. (See Attachment # 165)

1. On October 18, 2008, I e-mailed Warden Winn, which I inform him that an attempt has been made to repair the Commissary roof, which really needs to be replaced.

I went on to tell Warden Winn the I believe the Commissary and Yucca Unit abatement had not been conducted, since we just received the mold analytical data results for Yucca Unit, Palo Verde, Health Services, and Carpentry Shop, which the results were off the chart.

Also, I informed Warden Winn that we could not forget about the roof repairs, abatement and cleaning of the mold in Facility and Safety Departments, which had the highest concentration of mold until the recent tests.

2. In this e-mail I formally **requested for additional funding** to conduct a thorough Health and Environmental Risk Assessment of all buildings at FCI Tucson, which will ensure compliance the OSHA and EPA's Hazardous Communication, Occupational Exposure, Housekeeping and Indoor Air Quality regulatory guidelines.

I went on to tell Warden Winn, all of our analytical data from 2006 to present has shown mold growing in the drywall, ceiling tiles, insulation, ventilation ducts and to be airborne as well.

Also, I informed Warden Winn that there are several types of mold being found that will cause staff and inmates severe health affects over long term exposure, especially the staff and inmates that have pre-existing health concerns. (See Attachment # 166)

**Note:** I sent this e-mail to Complex Warden Apker, Regional Safety Administrator Clements and others. Again, I did not receive any response back approving my request or providing any technical advise or assistance.

#### Listing of Actual/Apparent Violations:

A. OSHA, EPA and NIOSH - However, an employer is still required by OSHA to protect their employees from hazards even in the absence of a specific OSHA Regulatory Standard.

B. OSHA, EPA and NIOSH Basic Mold Cleanup - The key to mold control is moisture control, it is important to dry water damaged areas and items within 24-48 hours to prevent mold growth. This does not mean for the Agency to take 1 to 8 years to correct the leaking and clearly damaged roofs and windows etc. or only after staff and inmate workers complain of their health. C. Program Statement 1600.08, chapter 1, page 3, section 5, Safety Manager - Professional Judgement shall be exercised when regulation and policy is not item specific.

D. **EPA Indoor Air Quality, Sick Building Syndrome**, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants.

#### <u>Allegation 3 Responses:</u>

1. **Paragraph #1**: The three man cells at the FCI have been there for several years before I arrived FCC Tucson. The Institution all most lost there ACA Accreditation prior to my arrival. Also, the Regional Office instructed Warden Winn and Complex Warden Chavez to have them removed.

A. The 2007 and 2008 ventilation surveys were sent to Regional Safety Administrator Clements for review to ensure they meet the ACA and Bureau standards, which he replied "These look good to me Leroy!", which again does not support the Agency responses. (See Attachment #177)

2. <u>Paragraph #2</u>: On August 2, 2007, at the request of Associate Warden Roy, I addressed the need for Air Ventilation Flow Testing to be conducted conducted for FCI Tucson. This document was signed by Associate Warden Roy and sent to Warden Winn.

Also, this document was forwarded to the Complex Warden Chavez, Director Lappin, Regional Director McFadden, Regional Safety Administrator Clements. Again, no technical advise or assistance was provided. (See Attachment # 155)

A. The March 14, 2000, ventilation testing as the Agency mentions was a certified test, adjust and balance report for some of the housing units. Also, on February 6, 2002, was another certified test, adjust and balance report, which was conducted for Food Service. (See Attachments # 156 & 157)

B. These reports were developed because of mechanical problems, which repairs were conducted by the institution. The balancing and adjustments were contracted out.

The testing reports are like what the Agency mentioned in paragraph 3. Also, SAIC recommended adjustments in balancing the airflow among the inmate housing units.

C. If the reports were valid ventilation flow tests, they were also outdated by 5 to 7 years, which would not of met the ACA standard that requires the ventilation testing to be conduct every three (3) years. 50 **Note:** According to Cynthia DeAngelo, Acting National Safety Administrator memorandum to Dave Clements, Regional Safety Administrator, dated August 15, 2007 stated - "Through the guidance in ACA and the Program Statement 1600.08 there are specified areas requiring testing no less than every three years."

"Those areas in existing facilities are inmate rooms/cells, officer stations, and dining areas and are to be documented by an independent, qualified source."

"In Conclusion, a representative sampling of inmate rooms/cells, officer stations, and dining areas must be tested and results documented no less than once every three years at all facilities based on the guidelines put forth in ACA and Program Statement 1600.08." (See Attachment # 158)

**Note**: This document was sent to Deputy Regional Director Gill, Warden Winn, Complex Warden Chavez, Assistant Director, Health Service Division, Kendig, National Safety Administrator Day and Environmental Program Manager Flannery.

Again, there was no response agreeing or disagreeing with my assessment of the ventilation flow issues at the FCI nor did they provide any advise or assistants, because the Acting National Safety Administrator DeAngelo's assessment and advise supported my concerns.

D. Complex Warden Chavez (USP Warden) was kept well informed of my concerns with the FCI Housing Units air ventilation flow rates, but he would never get involved.

E. On August 7, 2007, Scott Sutton, Acting Associate Warden stated, "Warden Winn and Complex Warden Chavez instructed me to tell you based on the results of testing earlier this year, they are not convinced additional testing needs to be done at this time."

"As Acting Associate Warden, please inform Mr. Smith that no additional testing should occur without the concurrence of Mr. Roy and I," which was sent from Warden Winn. (See Attachments # 159 & 160)

3. **<u>Paragraph #3</u>**: Again, the additional ventilation flow testing for the FCI Housing Units (i.e., Palo Verde, Palo Verde Officer Station, Cholla Unit and Cholla Unit Officer Station etc.) was supported by Central Office Health Services Division. This information was sent to Warden Winn, Complex Warden Chavez, Director Lappin, Regional Director McFadden and Regional Safety Administrator Clements, which Warden Winn and Associate Warden Roy kept interfering and obstructing my ability to conduct and address safety and health concerns.

A. In my August 2, 2007, memorandum, I addressed Warden Winn, Complex Warden Chavez and Associate Warden Roy concerns about appropriate training on the velometer used by Mr. Michael Moriarty or myself, which we used to determine basic air flow rate. I replied, we had no specific training by the Agency.

B. The equipment actually used by a qualified, independent source would be much larger, which covers the entire ventilation vent. The device we used was handheld.

Again, they Agency continues to deflect the truth, the Agency knows Mr. Moriarty or myself can not certify off on any ventilation flow tests, which is according to Agency and ACA policy/standard.

C. They also should of noticed that SAIC did not test any of the three man cells, Palo Verde, Palo Verde Officer Station, Cholla Unit and Cholla Unit Officer Station.

D. The Agency attempts to be the resident and subject matter experts when they don't want to agree, address or pay for the abatement of unsafe and unhealthy working conditions.

4. **Paragraph #4**: On August 10, 2007, Warden Winn stated, "We are making arrangements for an Industrial Hygienist to conduct some testing in UNICOR in the near future. When they visit the institution for that testing, we will have them conduct additional testing, for ventilation, in the areas you mentioned."

Again, this is a false statement. The Agency never contracted an Industrial Hygienist to conduct any testing in UNICOR or the FCI. Once again, the Agency is promising to address unsafe and unhealthy working conditions knowing they were going to do nothing in regards to abate the problem.

It is clear the Agency will tell everyone what they what to hear and return to business as usual once they have gone. (See Attachment # 161)

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A. This is the same promise the Agency gave OSHA, which NIOSH has been trying to verify if the Industrial Hygienist actually conducted the testing in UNICOR in my recent interview with them, which the flow testing had not been conducted.

B. My concerns, was there was enough air flow being circulated through the cells for three men and could the current air flow effect an inmate with respiratory problems. Especially, when they were locked in their cells from 10:00 p.m. tell 6:30 a.m. the next morning.

1. Again, remember the initial testing that the Agency alleges was available was for certification testing, adjust and balance "Only", which there were no documentation that would support that there was adequate air flow for one inmate in a cell.

2. This was why it was paramount for additional air flow testing to be conducted.

3. Again, if these reports were valid ventilation flow tests, they were outdated by 5 to 7 years and needed to be updated by the ACA standard and Bureau Policy.

C. The Western Regional Facility Administrator (Mr. Batton) provide wrong advise to the USP Warden (Warden Chavez).

1. The Safety Program 1600.08 and ACA standards supercede the Facility Program Statement when addressing Occupational Safety and Health issues.

2. According to the Agency's report, NIOSH disagreed with the two ventilation flow testing conducted by NEBB and SAIC Inc., which does not support the Regional Facility Administrator's advise to the USP Warden (Complex Warden Chavez).

3. The Regional Facility Administrator does not have any jurisdiction over the Safety and Environmental Health Program.

D. The Regional Safety Administrator was out in Colorado attending the Annual Safety Training with me, when he provide Warden Winn and Complex Warden Chavez a second copy of the Acting National Safety Administrators DeAngelo's memorandum supporting my concerns, which Warden Winn and Complex Warden Chavez denied ever receiving.

1. This memorandum and the advise of the Regional Safety Administrator should of resolved this issue, without any further restraint or interference by Warden Winn or Associate Warden Roy.

2. On April 17, 2009, the Regional Safety Administrator stated, "Office of Internal Affairs has has not interviewed me concerning any of the issues you mentioned."

3. On August 17, 2007, I inform the Central Office Environmental Program Manager that the Regional Safety Administrator Clements supported additional flow testing should be conducted. (See Attachment # 162)

Note: On April 20, 2009, I sent the 2007, 2008 and 2009 light, noise and ventilation survey to be reviewed by the Regional Safety Administrator Clements. His response, "These look good to me Leroy!" (See Attachment #175)

E. I never discussed or questioned that air flow testing needing to be conducted in all areas of the Institution.

I questioned the NEBB 2000 and 2002 certification for balance and adjustment of the air handlers, proper air flow in the three man cells and needed air flow testing in other housing units and buildings that were not similar in structure or ventilation systems, which air flow testing had not been in these areas.

This was discussed with the Central Office, National Safety Administrator Day and Environmental Program Manager Flannery, who oversees and directs the Bureau's Safety Program.

1. On August 17, 2007, the Central Office, Environmental Program Manager Flannery responded with the following - Based on my understanding of the housing units at Tucson there are significant differences in the design and construction of the area that must be tested. Therefore a representative sampling for each of the areas should be conducted. (See Attachment # 162) F. The following is why the Agency's continued lack of candor and running in circles to deflect the truth should concern everyone;

1. On August 15, 2007, Associate Warden Roy sent Complex Warden Chavez's Performance Work Plan to all Department Heads under his supervision to provide input regarding our department, which affects the Warden's evaluation. (See Attachments # 163)

a. 1.3 - Provide oversight and management to ensure that BOP's inmate crowding systemwide is held at a manageable, safe and secure level. 1.3.1
- FCC Tucson will maintain crowing levels to assist in achieving an agency goal of 42% by the end of FY -2007. Progress Update - During FY -2007, FCI Tucson removed all bunks from the day rooms, which had previously been used to house inmates. In addition to the removal, all triple bunk cells were converted to double bunk cells.

G. On August 29, 2007, I sent Complex Warden Chavez an e-mail concerning this issue. I informed him that I thought initially the Performance Work Plan (PWP) was Warden Winn's concerning the removal of the three man cells to two inmate in a cell. Until Warden Winn informed me that the PWP wasn't his, but belong to you. (See Attachment # 164)

H. The Agency has not made me aware of any NIOSH review of three consultant reports and the ACA Standards that effects the Institution and the Safety Program.

If among the reports were the NEBB March 14, 2000 and February 6, 2002, I would agree with NIOSH that they don't contain terms of measurement methods, details of HVAC systems and the areas ventilated. This was my big concerns with these reports.

The NEBB reports were to determine the if the horse power and CFM's met the design specification by the manufacture. (See Attachments # 156 & 157)

1. The NEBB reports don't met any of the NIOSH recommendations, ACA standard nor Program Statement 1600.08.

**Note:** The SAIC Industrial Hygienist review of the NEBB reports was to determined the mechanical performance of the system as compared to the design specifications. Furthermore, the reports did not include any sampling methodology or the specific areas tested. (See Attachment # 176)

I. The only time that I accepted that we were in compliance was when SAIC came out to conduct additional ventilation sampling and gave us a good verbal on February 19 & 20, 2008.

J. Warden Winn and Associate Warden Roy directed Mr. Moriarty, Safety Specialist and I to report the ventilation in the inmate housing units at the FCI met the ACA standard.

K. Also, I was threatened with disciplinary action if I did not sign off on the hot work permits, which would allow the Facility Department staff to weld the third additional bunk throughout Saguaro, Mesquite and Yucca Units.

1. I reported the threats, restraint, interference by Warden Winn and Associate Warden Roy to Assistant Duty Regional Director Gill, Director Lappin, Chief Office of Internal Affairs Dignam, Complex Warden Chavez, Regional Director McFadden, Regional Safety Administrator Clements and Office Inspector General Investigator Humm.

There were not responses providing technical advise or assistants by anyone. Also, there has not been any impartial and comprehensive investigation conducted by the Office of Internal Affairs nor Office of Inspector General. (See Attachments # 170, 171 & 172)

2. Also, Warden Winn made false statements to the Facility General Foreman Cobb concerning the ventilation testing at the FCI, which Warden Winn told Mr. Cobb that my subordinate (Former Safety Manager Cuestes) had told Warden Winn that the ventilation testing at the FCI was meeting all the requirements.

According to Mr. Cuestes memorandum to me, he never had this conversation with Warden Winn, which again Warden Winn's lack of candor demonstrates the Agency's wiliness to interfere and obstruct Safety staff from performing their duties in ensuring a safe and healthy work and living environment for staff and inmates.

(See Attachment # 173)

This conversation with Warden Winn and General Foreman Cobb shows they knew the NEBB Air Flow reports were not in compliance the ACA Standard nor Bureau Policy.

3. The threats, restraint, interference, law, rule or regulation, abuse of authority and executive misconduct by Warden Winn and Associate Warden Roy was reported to the following;

The Honorable Mr. Bloch, Office Inspector General Investigator Humm and Chief Office of Internal Affairs Dignam

Again, no impartial or comprehensive investigation has been conducted by any of the Federal Agency's. (See Attachment # 174)

D. Also, measurement methods (Methodology) and areas ventilated is addressed in the SAIC reports. The NIOSH recommendations is additional information that is not required by ACA or Bureau Policy. (See Attachments # 167 & 168)

E. The ACA or Bureau Policy does not require the ventilation flow testing to be conducted according to NIOSH recommendations, otherwise I would of ensured the company complied.

F. The air ventilation reports NIOSH must be referencing that were based on an unverified assumption regarding outdoor air supplied to HVAC system were the NEBB March 14, 2000 and February 6, 2002 reports.

According to the Agency's report the Regional Facility Administrator and Facility Department gave the following statement, there was no need for concern and that the Facility was in compliance to the USP Warden according the Agency's report.

Again, the Agency refused to lesson to their subject matter experts, concerning the incomplete air flow testing results needing to be conducted at FCI Tucson, which was Regional Safety Administrator Clements, National Safety Administrator Day, Environmental Program Manager Flannery and myself this would not of been an issue.

G. The NEBB reports identify the outdoor air supply by the OSA (Outside Supplied Air) Intake Deminsions and OSA (Outdoor Supplied Air) (CFM), which again were the reports the Regional Facility Administrator stated, there was no need for and that the Facility was in compliance.

H. Remember the ACA and Program Statement 1600.08 only requires only 10 cubic feet of **fresh** or **recirculated air** for old construction and 15 cubic feet of **fresh** or **recirculated air** for new construction.

## Listing of Actual/Apparent Violations:

A. Program Statement 1600.08, chapter 1, page 3, section 4, Regional Safety Administrators - they provide first line guidance and technical supervision to institution safety personnel and assist in resolving problems that cannot be resolved at the institution level.

B. Program Statement 1600.08, chapter 1, page 2, section C(2), Safety Administrator (National) - He also serves as consultant to institution safety managers when such issues cannot be resolved at the institution or regional levels.

C. Program Statement 1600.08, chapter 1, page 3, section 7 (e)(g), Chief Executive Officers - Shall - ensure prompt abatement of unsafe and unhealthy working conditions and ensure that employees are not subject to restraint, interference, coercion, discrimination or reprisal for exercising their rights under Executive Order 12196, OSHA 29 CFR 1950 or for participating in the Bureau's Safety and Environmental Health Program.

(4) Violation or Apparent Violation of Law, Rule or Regulation Allegation #1:

1. I believe my allegations were that staff and inmate workers in the Factory and UNICOR Warehouse were potentially being exposed to toxic and hazardous substances (i.e., lead, cadmium, barium, black carbon dust etc.) when dismantling computer components and carbon toner cartridges.

FCI Warden Sabol, Complex Warden Chavez and UNICOR Associate Warden Sanchez failed to provide adequate notification to staff and inmate workers regarding the results of the air and wipe sampling conducted in the UNICOR Factory and Warehouse.

FCI Warden Sabol, Complex Warden Chavez and Associate Warden Roy and others engaged in overt acts intended to interfere and restrain me from effectively abating and ensuring the safety and health of staff and inmate workers in the UNICOR Factory and Warehouse.

A. The air and wipe sampling results did determine that low concentrations of lead, cadmium, barium, black carbon dust were present in the UNICOR Factory, Warehouse, Trailers and other areas, which staff and inmate workers are being exposed to the toxic and hazardous substances by it being airborne and on the working surface.

B. The Agency continues to discard the toxic and hazardous substances associate with the computer recycling program and black carbon dust, because the levels of exposure doesn't trigger any OSHA action and permissible limits.

I provide you the following information for review;

According to OSHA 29 CFR 1910.1027, Appendix A, Safety Hazardous Data Sheet for Cadmium - Long-term (chronic) exposure. Repeated or long-term exposure to cadmium, even at relatively low concentrations, may result in kidney damage and an increased risk of cancer of the lung and of the prostate.

According to OSHA 29 CFR 1910.1025, Appendix A, for occupational exposure to lead - There is no sharp dividing line between rapidly developing acute effects of lead, and chronic effects which take longer to acquire and black carbon dust is carcinogenic.

The toxic and hazardous substances identified in the air and wipe sampling requires the Agency to comply with the above mentioned OSHA, EPA and Bureau Policy/Standards.

C. On April 26, 2006, Warden Sabol clearly interfered, obstructed and discriminated against me for participating in the OSHA meeting as part of the Institution Safety staff and especially, as the appointed AFGE Local 3955 Union Safety Representative.

According to Federal Bureau of Prisons and Council of Prison Locals Master Agreement - Article 27 - Health and Safety, Section f, When a Safety and Health inspection is being conducted by an outside Agency such as OSHA, the National Institution for Occupational Safety and Health (NIOSH), or private contractor, the Union will be invited and encouraged to have a local representative participate.

D. Warden Sabol's actions to remove me from the meeting, UNICOR Factory and out of this institution is clearly a retaliatory act towards me as a whistleblowers, Union Representative and for enforcing and participating in the Bureau Safety Program, which this violates the Master Agreement, Bureau Policy, Executive Order 12196 and OSHA 1960.

2. As mentioned above, the Agency and UNICOR admitted that they would have additional testing conducted in UNICOR during the April 26, 2006, OSHA inspection OSHA, which this has not been conducted for over three years. This was according to OSHA and Warden Winn's e-mail.

A. The testing may have seemed unnecessary to the Agency, but it played a big part in determining that toxic and hazardous substances exist in the UNICOR Factory and Warehouse, which the testing results required other OSHA standards to be implemented to ensure the safety and health of staff and inmate workers.

The Agency and UNICOR keep denying the toxic and hazardous substances exist throughout this report, which is not true. UNICOR Associate Warden Sanchez even admits that appropriate training has not been conducted for the rear gate officer in his e-mail and the UNICOR staff and inmate workers have not been trained according to the above mentioned OSHA standards as mentioned above.

B. As of August 6, 2006, I became the Safety Manager for the Institution and the Supervisor of the former FCI Safety

Manager, which the Agency continues to use this person as their fail person to shirk their responsibility for non-compliance with OSHA, EPA and Bureau Policy/Standards,

C. This means I became the responsible Safety Manager to provide technical advise and assistants to the Chief Executive Officer, which Senior Management continued to obstruct, interfere and retaliated against me by their failure to comply with;

1. **Executive Order 12196 and OSHA 29 CFR 1960-** that Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

2. Program Statement 1600.08, Chapter 1, Page 3 & 4, Section g - Chief Executive Officers Shall - Ensure that an employees are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their rights under

3. **Executive Oder 12196, 29 CFR 1960,** or for participating in the Bureau's Safety and Environmental Health Program as mentioned above.

3. Again, I became the Safety Manager for the entire complex on August 6, 2006. The Agency reports stated "The Safety Manager is the technical advisor to the Chief Executive Officer."

I notified the Chief Executive Officers and other Executive staff on May 17, 2006, July 26, 2007 and August 2, 2007. The Agency and UNICOR have been aware of the OSHA Notification standards for several years concerning toxic and hazardous substances associate with the Computer Recycling Program and black carbon dust.

The Agency's continued denial or ignorance to the law, rule or regulation is potentially criminal. OSHA makes it very clear that the employer (management) is required to notify their employees of toxic and hazardous substances found in the work place. (See Attachments # E, 36, & 155)

**Note**: Evidence shows that the Safety Manager did establish notification responsibility to Management on three different occasions, August 6, 2007, May 17, 2006 and July 26, 2007, which UNICOR is the responsible party.

**Note**: The Agency and UNICOR were very much aware of the toxic and hazardous substances associated with the computer recycling program (lead, cadmium, barium etc.) through their own written procedures, OSHA/EPA standards and most recently the NIOSH/U.S. Department of Health, which identified UNICOR is responsible for staff and inmate worker notifications concerning the safety and health hazards in the work place.

**Example**: They know there is cadmium associated with the computer recycling program, which according to **OSHA 1910.1027(d)**, Exposure Monitoring, **1910.1027(d)(1)(i)**, each employer who has a workplace or work operation covered by this section shall determine if any employee may be exposed to cadmium at or above the action level, **1910.1027(d)(1)(ii)**, determination of employee exposure shall be made from breathing zone air samples that reflect the monitored employee's regular, daily 8-hour TWA exposure to cadmium.

A. The OSHA and EPA Standards are very clear when they mention the employer is responsible to make proper notifications, which would be the Chief Executive Officer and the Associate Warden of UNICOR.

B. There is Bureau Policy that states the following;

1. Program Statement 1600.08, chapter 1, page 3, section 7(b)(e)(h), Chief Executive Officers shall - Ensure compliance with OSHA, EPA, and NFPA requirements and applicable state and local regulations.

2. Ensure the prompt abatement of unsafe and unhealthful working conditions.

3. Ensure that adequate safety and environmental health training is provided management, supervisory personnel, safety personnel, collateral duty safety personnel and other employees of the Bureau.

C. As you read through this report the advise of the Safety Manager is only accepted, considered and respected if the advise or recommendations reflect the Chief Executive Officer's personal and professional agenda, which does not ensure the safety and health of our staff and inmates.

D. In this report the Agency does not fault the Chief Executive Officer or other Executive staff for failure to comply with OSHA and EPA regulatory guidelines, once advise by the Safety Manager (Mr. Smith) on several occasions.

E. They only find direct fault on the former and retired FCI Safety Manager, who can't speak in his defense of the allegations brought against him by the Agency.

F. The Agency makes it very clear that Warden Sabol and other Executive staff have no obligation to duty or responsibility for their actions and knowingly and willfully violating Law, Rule or Regulation and Specific Danger to Public Health or Safety, which is potential criminal.

### 2. <u>Allegation 2</u>:

1. The Agency attempts to make a stance that Management did not expose staff and inmates to unsafe and unhealthy conditions, again their lack of candor is misleading. It was determined by AES that the mold growing in the trailers had been present and growing for years, which caused severe structural damage and unsafe levels of exposure to the mold.

(See Attachment #50 and other reports provided)

2. **OSHA stated -** Indoors, mold growth should be avoided. Problems may arise when mold starts eating away at materials, affecting the look, smell, and possibly, with the respect to wood-framed buildings, affecting the structural integrity of the buildings.

A. By AES visual inspection, the trailers were unserviceable and should of been condemned for years, the inspector observed the following issues:

1. Floor buckling (rotten wood) in the East Trailer and Psychology office.

2. Wet carpeting and ceiling tiles in the Psychology office, Medical Records, Office, Dental Office and the Office of Mr. Paul Madrid.

3. Musty odor in the East Trailer.

4. Portion of rotten paneling exposed with mold in the Exercise Room.

5. Ceiling tile stains in Medical, Dental and Paul Madrid's Offices.

6. Discolored painted & textured surfaces throughout West Trailer.

B. Mold is not always visible to the human eye as we found out by taking wipe and bulks from the inside of the walls, floors and ventilation ducts in the Safety, Facility, Carpentry, Administration Building, Yucca Officer Station, Yucca Laundry Room, Commissary etc.

3. The AES reports mentions mold spores inside the trailer exceeded the types and amounts of mold found outside the building. Also, they mention that there was mold growth of different types in the air handling system and especially in the Administration Building. (See Attachment # 169)

A. The ambient air sample for the outside was 13 to 1600 spores and sampling was 13 to 11000 spores on the inside of the buildings. Then bulks and wipes from the building material and ventilation ducts ranged from 2 to 320,000 spores:

1. Cladosporium causes respiratory problems, allergic reactions and can be an agent for hypersensitivity diseases.

2. Penicillium/Aspergilllus - causes allergic reactions, hypersensitivity pneumonitis and variety of severe lung complications. Also, this mold is capable of producing mycotoxins.

3. Chaetomium is an allergenic and an agent of onychomycoses (nasal infection), peritonitis, cutaneous lesions and potential agent in fatal systemic mycoses. Also, Chaetomium has been documented, brain abscess, peritonitis and cutaneous lesions may also develop.

4. Stachybotrys causes one or more mycotoxins, low doses include rashes, mild neurotixon effects such as headaches, nausea, muscle aches and pains, and fatigue. The immune system may also be affected resulting in a decreased resistance to infections. B. This is why the Agency should of taken the advise of the Safety Manager (Mr. Smith), which these molds will cause health affects to even normal healthy staff and inmates according to the test results, depending on pre-existing health, length of exposure and amount of mold in the work environment, which in many cases the result were severe.

4. The Agency admits in their report that staff and inmates have made complaints of mold since 2001, which Mr. Anderson, Recreation Supervisor made his complaint in writing to Management. Also, other staff have made similar complaints, which mold had to of been present for the staff to specifically state mold as part of their complaints and causing them additional health issues.

**Note:** OSHA, EPA and CDC stated, the cause of water intrusions should be eliminated within 24 to 48 hours of the damage, not 1 to 8 years later. The Agency admits to subjecting the staff to unsafe and unhealthy conditions.

5. Again, on September 20, 2006, the staff reported a potential health hazard, they did not report any personal health issues associated with the mold until September 21, 2006, which elevated my concerns to an imminent health concern and we all agreed to close the recreation trailers until testing could be conducted.

6. Mr. Anderson, Recreation Supervisor told Warden Sabol and others during the meetings that recreation staff have complained of health concerns while working in the recreations trailers, which one staff member reported respiratory, headaches and nose bleeds. Even after this was reported to Warden Sabol and other Executive staff, they still directed staff to re-enter the trailers and remove office equipment and supplies, which was against the direct order of the Regional Director and advise of the Regional Safety Administrator, Central Office Industrial Hygienist, AES and myself.

A. The Agency admits there is not a direct standard for mold by OSHA, but OSHA does make it very clear that once mold has been identified whether or not by visual, air or wipe sampling that a Mold Housekeeping Plan needs to be implemented and only trained Maintenance Staff can remediate the mold, which the General Duty Clause would apply.

1. Respiratory track would be a part of the body the mold spore exposure over short or long term and at low doses would be considered a serious physical harm.

2. The identified types of molds, which cause a mycotoxins, neurotoxins and a fatal systemic mycoses to staff and inmates, which they reported headaches, nose bleeds, severe allergies, muscle aches and pains, fatigue, etc., would be a health hazard which is present and would cause substantial reduction in physical and mental efficiency.

B. When the obvious of mold or any toxic and hazardous substance were not revealed by the human eye, but staff and inmates continued to complain of health issues, Management should of considered air sampling to determine the route cause, which indoor air quality (sick building syndrome) should of come into question.

1. According to the Agency's report staff and inmates have complained of health issues for over 5 years, which the EPA Guidelines for Indoor Air Quality, Sick Building Syndrome, which is caused by biological contaminants bacteria, mold, pollen, and viruses are types of biological contaminants.

The following health effects are caused from by Biological Contaminants:

a. Trigger allergic reactions, including hypersensitivity pneumonitis, allergic rhinitis, and some types of <u>asthma</u>.

b. Infectious illnesses, such as influenza, measles, and chicken pox are transmitted through the air. Molds and mildews release disease-causing toxins.

c. Symptoms of health problems caused by biological pollutants include sneezing, watery eyes, coughing, shortness of breath, dizziness, lethargy, fever, and digestive problems.

d. Allergic reactions occur only after repeated exposure to a specific biological allergen.However, that reaction may occur immediately upon re-exposure or after multiple exposures over time.As a result, people who have noticed only mild allergic reactions, or no reactions at all, may

suddenly find themselves very sensitive to particular allergens.

7. My efforts to protect the safety and health of the staff and inmates fell on death ears by Warden Sabol and other Executive staff. My request to keep the trailers closed were accurate and supported by the AES reports, Regional Director, Regional Safety Administrator and Central Office Industrial Hygienist.

- A. The AES report stated that all items in the rooms in this trailer be professionally cleaned (remediated) before they are relocated to a new location.
- B. This closure of the trailers were approved and signed off by Warden Sabol and Complex Warden Chavez.

8. Warden Sabol did not only obstruct and interfere with my ability to ensure the safety and health of staff, she also knowingly and willfully endangered the safety and health of staff and inmates and cross contaminated other areas with mold spores, which is criminal intent.

9. She did not support my efforts or the Regional Office efforts, which is well supported in my documentation and Mr. Anderson's documentation as well. Again, recommendations in the safety field are like directing someone to do something in a nice or political way.

10. I noticed the Agency keeps directing Warden Sabol's decisions were contrary to only my recommendations, this is why the Regional Safety Administrator should be interviewed as well and some one other the OIA should re-interview Mr. Korbelak, Central Office Industrial Hygienist.

11. In the Agency's report they mention the office equipment and supplies were deemed necessary for the continued operation of the facility, this is not true.

A. The office equipment and supplies were brought during our initial meetings by Warden Sabol, which Mr. Korbelak felt the equipment, supplies and files would be contaminated with mold spores.

B. Currently, the Recreational, Lieutenants and Psychology staff have been relocated for almost three years, which they were either provided new computers, desks, files and supplies. The Recreation and Psychology staff are currently using other staff office space and computers. All the items are currently be stored in the outside Commissary Warehouse. 12. By the Agency on omission they were aware of unsafe and healthy conditions for years and did not take any appropriate action. Once Warden Sabol became aware of potential unsafe and unhealthy conditions, she was obligated to protect them from any further harm. Her actions were based on abuse of authority and gross mismanagement.

Warden Sabol made it clear to me on many occasions, that I hade no authority to make safety decisions in her institution and she did not like the Regional Director telling her to follow the Regional Safety Administrator and my lead concerning the mold issues.

A. OSHA, EPA and CDC state - water damage and mold should be eliminated with 24 to 48 hours, which this mold was discovered under the dry season for Arizona.

B. OSHA refers to EPA on mold issues. Again, the mold issues and the symptoms of the staff and inmates fall directly under the **EPA's Indoor Air Quality**, **Sick Building Syndrome**, causes are biological contaminants - bacteria, mold, pollen, and viruses are types of biological contaminants, which Warden Sabol and the other Executive staff are not the subject matter expert concerning safety and environmental health issues according to the Agency's report.

13. The Agency would like you to believe that a Safety Manager can not act independently of the Warden involving unsafe and unhealthy conditions effecting staff and inmate, which is not true.

A. Program Statement 1600.08, chapter 1, page 3, section 5, Safety Managers, professional judgement shall be exercised when regulations and policy is not item specific, which is independent from not only the Warden, but all Bureau staff.

14. Once staff and inmates reported health concerns to the Safety Manager (Mr. Smith), Warden Sabol and other Executive staff, I did advise Warden Sabol, Complex Warden Chavez and others that some air contaminate in the trailers is causing an occupational or indoor air quality (sick building syndrome) exposure to staff and inmates.

A. The decision of what is imminent or reasonable is at the discretion of the Safety Manager, not Warden Sabol's or any other Executive staff according to Bureau Policy. Otherwise, it would of been written into policy.

1. According to Program Statement 1600.08, chapter 1, page 5, section D, Imminent Danger, when the Safety

Manager determines that conditions or practices exist in any place of employment which could be "REASONABLY" be expected to cause death or serious physical harm, he shall inform the effected employees of the danger and shut down the work or process until such danger can be eliminated, which I did by informing the staff, inmates and the Executive staff in writing.

2. He shall inform in writing the CEO and Regional Safety Administrator of the hazard and action, which again, I did provide the written notification and plan of action was put in writing and it included the Regional Director, Director and Central Office Health Services Division and Industrial Hygienist.

3. Reactivation of the work or process shall be contingent upon the Safety Manager's reinspection and written approval, which this was not conducted before Warden Sabol deliberately endangered the safety and health of the staff by ordering them to re-enter the trailers .

4. In Executive Order 12196 the Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

5. In OSHA 29 1960 the Safety Officials shall have sufficient authority to correct unsafe and unhealthy working conditions.

**Note:** I believe the Executive Order 12196, OSHA 29 CFR 1960 and Bureau Policy mentioned above demonstrates that not only Safety Manager's have the authority to act independently, but allows Safety staff in general to act independently of the Warden without interference, restraint, coercion, discrimination or reprisal.

15. The Law, Rule or Regulation and Bureau Policy expects the Chief Executive Officer (Warden) to ensure following:

A. The Bureau of Prisons and UNICOR is to provide a safe and healthful environment for all employees and inmates.

B. The prompt abatement of unsafe and unhealthful working conditions.

C. Employees are not subjected to restraint, interference, coercion, discrimination or reprisal for exercising their

rights under Executive Oder 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environmental Health Program.

**Note**: The actions of Warden Sabol and other Executive staff continues to demonstrate the abuse of authority, gross mismanagement and deliberate discard for the safety and health of staff and inmates.

They are knowingly and wilfully aware of their actions in preventing me from taking corrective safety and health measures. They immediately deny any wrong doing, deny having any responsibility and blame or fault others (Safety Manager) like they have done in the agency's report over and over again.

16. Again, whether I wrote the memorandum directing or recommending staff and inmates are not authorized to enter the trailers, the results by the Executive staff would of remained the same. Their decisions have not been about the safety and health of staff and inmates, but the power to put in my place and discredit me personally and professionally because of my whistleblower activities. Especially, when the advise I provide them goes against their own personal and political agendas.

**Example:** The Regional or Central Offices did not get involved when it was apparent that Warden Sabol was disregarding my advise and recommendations, which according to policy they should of been involved to resolve the problems between Warden Sabol and I at the Institution level.

17. Once again, Warden Sabol did not have full and final authority to determine whether conditions warranted permitting access to retrieve those items deemed necessary to continue operations. Especially, after I deemed it an imminent danger to the health of the staff and inmates, which is supported by Mr. Anderson's memorandum and AES reports.

18. The Agency appears to be very ignorant or smart when they use the words likely minimal or was not a great risk to staff to enter the trailers to remove the office equipment, when our own Bureau Policy and OSHA standard requires us to ensure we provide a safe and healthful environment to our staff and inmates.

A. This doesn't mean once we identify a unsafe or unhealthy condition in the work place, that upon the Warden's decision it's okay to place our staff and inmates back into the unsafe or unhealthy environment, which the Agency's report continues to suggest time after time. B. Again, there is plenty of supporting documentation from the AES reports, Safety, Recreation Supervisor and the Industrial Hygienist memos that all items in the rooms in the trailers should of been professionally cleaned (remediated) before they were relocated to a new location, which means unsafe and unhealthy conditions.

19. I believe Management took clear or decisive steps to inform staff of the mold testing results only in September 2008, once the Agency was aware of my complaint to the Office of Special Counsel.

20. There are no memorandums or e-mails that would suggest that any other Safety professional provided any advise other then that of AES and my recommendations to close the trailers down and not remove items from the trailers until they could be professionally cleaned (remediated) before they are relocated to a new location.

21. Again, the AES reports demonstrates the CDC publication pamphlet the Agency hangs their hat on is misleading, time after time the AES testing results found mold behind the walls, ventilation ducts and airborne that was not visible during any inspection, which this was the case in all of AES reports.

A. Again, the Agency is being misleading in attempt to redirect our attention by using the CDC Mold Prevention Strategies and Possible Health Affects in the aftermath of Hurricanes and Major Floods, which OSHA directs us to EPA.

B. EPA enforces indoor air quality, which sick building syndrome is regulated, which is caused by biological contaminants like bacteria, mold etc.

22. According to CDC guidelines - if sampling is to be considered, a clear purpose should exist;

1. To help evaluate a source of mold contamination, testing the types of mold and mold concentrations indoors can be used to identify an indoor source of mold contamination that might not be obvious on visual inspection.

2. To help guide mold remediation, for example - if mold is being removed and it is unclear how far the colonization extends, then surface or bulk sampling in combination with moisture reading might be useful.

A. Types of Samples - types of samples used to assess the presence of mold and the potential for human exposure to mold

in a water-damaged building include air samples, surface samples, bulk samples and water samples from condensate drain pans or cooling towers. Detailed descriptions of sampling and analysis techniques have been published.

B. Airborne sampling is used for acute short-term exposure. Wiper sampling is used for in determining the chromic exposures to fungi on surfaces and dust.

C. Bulk sampling is used for providing information of biologic agents in the building and general composition and relative concentrations of those biologic agents.

23. Again, the Agency only mentioned and directed us to the CDC guidelines to extract information that attempts to justify there decisions and an attempt deflect the truth. Why didn't they address the OSHA and EPA guidelines on mold in the work place and the EPA indoor air quality concerning sick building syndrome that is associated with bacteria, mold etc.

#### 3. Allegation 3:

1. The NEBB reports don't met any of the NIOSH recommendations nor the ACA standard and Program Statement 1600.08 for identifying the areas and the 15 cubic feet for new construction and 10 cubic feet for old construction.

2. Remember the ACA standard and Bureau Policy only requires either fresh or recirculated air measurement, not both.

3. Again, On August 17, 2007, I inform the Central Office Environmental Program Manager that the Regional Safety Administrator Clements supported additional flow testing should be conducted. (See Attachment # 162)

Note: On April 20, 2009, I sent the 2007, 2008 and 2009 light, noise and ventilation survey to be reviewed by the Regional Safety Administrator Clements. His response, "These look good to me Leroy!" (See Attachment #175)

**Note:** The SAIC Industrial Hygienist agreed the NEBB testing was for determining the mechanical performance of the system as compared to the design specifications. Furthermore, the reports did not include any sampling methodology or the specific areas tested. (See Attachment # 176)

4. The only time that I accepted that we were in compliance was when SAIC came out to conduct additional ventilation sampling

and gave us a good verbal on February 19 & 20, 2008, which is supported by the Regional Safety Administrator. (See Attachment # 168)

5. Warden Winn and Associate Warden Roy directed Mr. Moriarty, Safety Specialist and I to report the ventilation air flow in the inmate housing units met the ACA standard.

6. Also, I was threatened with disciplinary action if I did not sign off on the hot work permits, which would allow the facility department staff to weld the third additional bunk throughout Saguaro, Mesquite and Yucca Units.

A. The retaliation, threats, restraint, interference by Warden Winn and Associate Warden Roy was reported to Assistant Duty Regional Director Gill.

Director Lappin, Chief Office of Internal Affairs Dignam, Complex Warden Chavez, Regional Director McFadden, Regional Safety Administrator Clements and Office Inspector General Investigator Humm were notified as well.

Again, no further impartial and comprehensive investigation has been conducted by the Office of Internal Affairs nor by Office Inspector General. (See Attachments # 170, 171 & 172)

B. Also, Warden Winn made false statements to the Facility General Foreman Cobb concerning the ventilation testing at the FCI, which he told him that my subordinate Former Safety Manager Cuestes had told him that the ventilation testing at the FCI was meeting all the requirements. According to Mr. Cuestes memorandum to me, he never had this conversation with Warden Winn, which again Warden Winn's lack of candor and attempt of coercion continues. **(See Attachment # 173)** 

C. The threats, restraint, interference, law, rule or regulation, abuse of authority and executive misconduct by Warden Winn and Associate Warden Roy was reported to The Honorable Mr. Bloch, Office Inspector General Investigator Humm and Chief Office of Internal Affairs Dignam, which again no further investigation has been conducted by any of the Federal Agency's. (See Attachment # 174)

D. Also, the SAIC reports do have terms of measurement methods (Methodology) and areas ventilated, which again these reports provide additional information that is not required by ACA or Bureau Policy. (See Attachments # 167 & 168)

E. The ACA or Bureau Policy does not require the ventilation flow testing to be conducted according to NIOSH recommendations, but SAIC does have this information in their reports.



**U.S. Department of Justice** 

Federal Bureau of Prisons

Federal Correctional Institution

Office of The Safety Department

Tucson, Arizona 85706

April 13, 2006

MEMORANDUM TO KEITH ROY, ASSOCIATE WARDEN OF OPERATIONS

FROM: Leroy A. Smith, Lead Safety Specialist

**SUBJECT:** Air Quality and Wipe Sampling

As a precautionary measure the Safety Department requests that Federal Prison Industries, UNICOR, to conduct personal air quality sampling of the staff and inmate workers in the UNICOR Factory and Warehouse at Federal Correctional Institution (FCI), Tucson, Arizona. Also, wipe sampling needs to conducted on the staff and inmate workers, work stations, CPU's, gaylord box's, electric and manual forklifts, and the transport trailer. The concern come from the Central Processing Units (CPU's) and Cathode Ray Tubes (CRT's), which during transportation the CRT's break releasing the hazardous metal particles on other CRT's and CPU's.

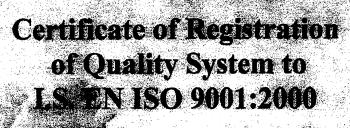
The Safety Department has conducted several mandatory monthly inspections and general walkthroughs of the Factory and Warehouse, which dust levels on occasions have been visible to the eye. The UNICOR inmate workers are provided nuisance dust masks when requested, which by the end of work shift the outer portion of the mask has turned black. Nuisance dust masks don't protect an employee from any harmful dusts generated from the CRT's.

This will assist the Safety Department and UNICOR to comply with 1600.08, Chapter 1, Page 25, which states, a Hazard Assessment of Personal Equipment must be conducted in compliance with 29 CFR 1910-Subpart I Appendix B. This requires the Safety Department to conduct walkthroughs to identify sources of hazards to workers and co-workers. Consideration should be given to the basic hazard categories: 1. Impact, 2. Penetration, 3. Compression (roll over), 4. Chemical, 5. Heat, 6. **HARMFUL DUST**, 7. Light (optical) radiation etc. The testing being requested is paramount to comply with Bureau Policy, OSHA Guidelines, and ensure the safety of the staff and inmates handling the CPU's and CRT's.

If there are any questions pertaining to this matter, please do not hesitate let me know.

cc: Carolyn A. Sabol, Warden FCI Ricardo E. Chavez, Warden, FCC

Attachment #27



Mindards Authority of Ireland centifies that Meral Prison Industries, Inc. F.C. I. Tucson MI South Wilmot Road Tucson AZ 85766

has been assessed and deen and to confine with the requirements a belove standard in respect of the same of organizations given belo Scenne of Requiremention.

The recycling and set of bishing of piectromisequipment

Certificate number: Reginal Regimedite and smended on: Certificate valid to: 19.4213 Apr 15, 2006 Apr 20, 2006 Apr 14, 2009

Signed:

J Nauna

Simon Kelly - Chief Executive Officer

Daniel Tierney - Chairperson of the Board

NSAL is a partner of IQNet - the international certification network (www.iqnet-certification.com) The validity of this certificate is maintained through on going surveillance inspections Issued on April 21, 2006

> National Standards Authority of Ireland, Glassevin, Dublin 9, Ireland 9001:2000-NL-US(42)

402 Amherst St. Nashus, NH 03063

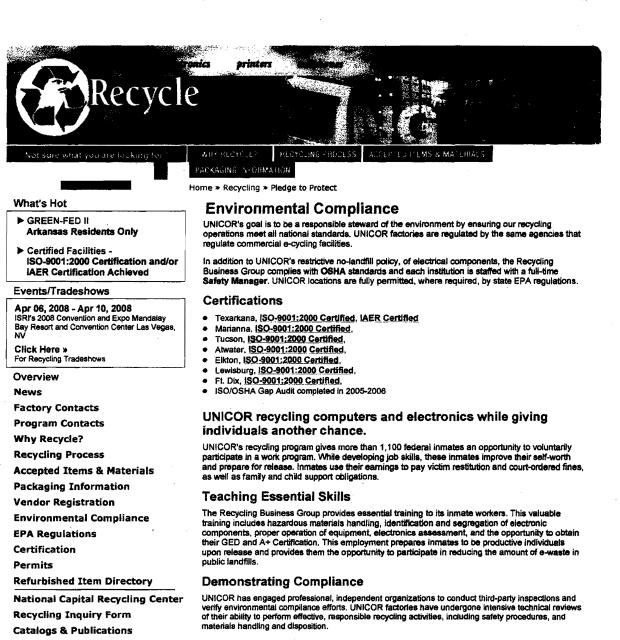
Nashus; NH 03063 Tel: (603) 882 4412 Fax: (605) 882 1985

County -

AND COMPANY Glasnevin

Dublin 9, Ireland Tel: +353-1 807-3800 Fax: +353-1 807-3844

Att Achment A



Medical Test/Monitoring

- Staff and inmates
- Blood and Urine
- Lead, Cadmium, Barilium, Barium
- Air/Wipe Test

#### **3rd Party Inspections**

- Safety Manager
  DTSC (Department of Toxic Substance Control), CA
- N.J. DEPA
- P.A. DEPA
- OSHA
- DoD

Partnerships

- Customer Inspections/Reviews
- Bureau of Prisons Program Reviews/Inspections
- IAER
- Training
- OSHA
- DeMil
- Monthly Health & Safety Traning
- ISO Training
- Pre-Industrial Training (Recycling) Staff / Inmates

Customer Service Public Notices Privacy SiteMap

2/11/2008

# **ISO 9000**

From Wikipedia, the free encyclopedia (Redirected from ISO 9001)

**ISO 9000** is a family of standards for quality management systems. ISO 9000 is maintained by ISO, the International Organization for Standardization and is administered by accreditation and certification bodies. Some of the requirements in ISO 9001 (which is one of the standards in the ISO 9000 family) include

- a set of procedures that cover all key processes in the business;
- monitoring processes to ensure they are effective;
- keeping adequate records;
- checking output for defects, with appropriate and corrective action where necessary;
- regularly reviewing individual processes and the quality system itself for effectiveness; and
- facilitating continual improvement

A company or organization that has been independently audited and certified to be in conformance with ISO 9001 may publicly state that it is "ISO 9001 certified" or "ISO 9001 registered". Certification to an ISO 9000 standard does not guarantee any quality of end products and services; rather, it certifies that formalized business processes are being applied. Indeed, some companies enter the ISO 9001 certification as a marketing tool.

Although the standards originated in manufacturing, they are now employed across several types of organizations. A "product", in ISO vocabulary, can mean a physical object, services, or software. In fact, according to ISO in 2004, "service sectors now account by far for the highest number of ISO 9001:2000 certificates - about 31% of the total."<sup>[1]</sup>

Co	ontents
	<ul> <li>1 ISO 9000 series of standards</li> </ul>
	2 Contents of ISO 9001
	• 2.1 Summary of ISO 9001:2000 in informal language
	<ul> <li>2.2 1987 version</li> </ul>
	<ul> <li>2.3 1994 version</li> </ul>
	<ul> <li>2.4 2000 version</li> </ul>
	<ul> <li>2.5 2008 version</li> </ul>
	<ul> <li>2.6 Certification</li> </ul>
	■ 3 Auditing
	• 4 Industry-specific interpretations
	■ 5 Debate on the effectiveness of ISO 9000
	<ul> <li>5.1 Advantages</li> </ul>
	■ 5.2 Problems
	■ <sup>-</sup> 5.3 Summary
	■ 6 See also
	<ul> <li>7 References</li> </ul>
	<ul> <li>8 Further reading</li> </ul>
1	• 9 External links

AHachment #125 4/2/2009

# ISO 9000 series of standards

ISO 9000 includes standards:

- ISO 9000:2000, Quality management systems Fundamentals and vocabulary. Covers the basics of what quality management systems are and also contains the core language of the ISO 9000 series of standards. A guidance document, not used for certification purposes, but important reference document to understand terms and vocabulary related to quality management systems. In the year 2005, revised ISO 9000:2005 standard has been published, so it is now advised to refer to ISO 9000:2005.
- ISO 9001:2000 Quality management systems Requirements is intended for use in any organization which designs, develops, manufactures, installs and/or services any product or provides any form of service. It provides a number of requirements which an organization needs to fulfil if it is to achieve customer satisfaction through consistent products and services which meet customer expectations. It includes a requirement for the continual (i.e. planned) improvement of the Quality Management System, for which ISO 9004:2000 provides many hints.

This is the only implementation for which third-party auditors may grant certification. It should be noted that certification is not described as any of the 'needs' of an organization as a driver for using ISO 9001 (*see* ISO 9001:2000 section 1 'Scope') but does recognize that it may be used for such a purpose (*see* ISO 9001:2000 section 0.1 'Introduction').

• ISO 9004:2000 Quality management systems - Guidelines for performance improvements. covers continual improvement. This gives you advice on what you could do to enhance a mature system. This standard very specifically states that it is not intended as a guide to implementation.

There are many more standards in the ISO 9001 series (see "List of ISO 9000 standards" from ISO), many of them not even carrying "ISO 900x" numbers. For example, some standards in the 10,000 range are considered part of the 9000 group: **ISO 10007:1995** discusses Configuration management, which for most organizations is just one element of a complete management system. ISO notes: "The emphasis on certification tends to overshadow the fact that there is an entire family of ISO 9000 standards ... Organizations stand to obtain the greatest value when the standards in the new core series are used in an integrated manner, both with each other and with the other standards making up the ISO 9000 family as a whole".

Note that the previous members of the ISO 9000 series, 9001, 9002 and 9003, have all been integrated into 9001. In most cases, an organization claiming to be "ISO 9000 registered" is referring to ISO 9001.

# **Contents of ISO 9001**

*ISO 9001:2000 Quality management systems* — *Requirements* is a document of approximately 30 pages which is available from the national standards organization in each country. Outline contents are as follows:

- Page iv: *Foreword*
- Pages v to vii: Section 0 Introduction
- Pages 1 to 14: Requirements

- Section 1: Scope
- Section 2: Normative Reference
- Section 3: Terms and definitions (specific to ISO 9001, not specified in ISO 9000)
- Pages 2 to 14
  - Section 4: Quality Management System
  - Section 5: Management Responsibility
  - Section 6: *Resource Management*
  - Section 7: Product Realization
  - Section 8: Measurement, analysis and improvement

In effect, users need to address all sections 1 to 8, but only 4 to 8 need implementing within a QMS.

- Pages 15 to 22: Tables of Correspondence between ISO 9001 and other standards
- Page 23: *Bibliography*

The standard specifies six compulsory documents:

- Control of Documents (4.2.3)
- Control of Records (4.2.4)
- Internal Audits (8.2.2)
- Control of Nonconforming Product / Service (8.3)
- Corrective Action (8.5.2)
- Preventive Action (8.5.3)

In addition to these, ISO 9001:2000 requires a Quality Policy and Quality Manual (which may or may not include the above documents).

# Summary of ISO 9001:2000 in informal language

- The quality policy is a formal statement from management, closely linked to the business and marketing plan and to customer needs. The quality policy is understood and followed at all levels and by all employees. Each employee needs measurable objectives to work towards.
- Decisions about the quality system are made based on recorded data and the system is regularly audited and evaluated for conformance and effectiveness.
- Records should show how and where raw materials and products were processed, to allow
  products and problems to be traced to the source.
- You need a documented procedure to control quality documents in your company. Everyone must have access to up-to-date documents and be aware of how to use them.
- To maintain the quality system and produce conforming product, you need to provide suitable infrastructure, resources, information, equipment, measuring and monitoring devices, and environmental conditions.
- You need to map out all key processes in your company; control them by monitoring, measurement and analysis; and ensure that product quality objectives are met. If you can't monitor a process by measurement, then make sure the process is well enough defined that you can make adjustments if the product does not meet user needs.
- For each product your company makes, you need to establish quality objectives; plan processes; and document and measure results to use as a tool for improvement. For each process, determine what kind of procedural documentation is required (note: a "product" is hardware, software, services, processed materials, or a combination of these).
- You need to determine key points where each process requires monitoring and measurement, and

ensure that all monitoring and measuring devices are properly maintained and calibrated.

- You need to have clear requirements for purchased product.
- You need to determine customer requirements and create systems for communicating with customers about product information, inquiries, contracts, orders, feedback and complaints.
- When developing new products, you need to plan the stages of development, with appropriate testing at each stage. You need to test and document whether the product meets design requirements, regulatory requirements and user needs.
- You need to regularly review performance through internal audits and meetings. Determine whether the quality system is working and what improvements can be made. Deal with past problems and potential problems. Keep records of these activities and the resulting decisions, and monitor their effectiveness (note: you need a documented procedure for internal audits).
- You need documented procedures for dealing with actual and potential nonconformances (problems involving suppliers or customers, or internal problems). Make sure no one uses bad product, determine what to do with bad product, deal with the root cause of the problem and keep records to use as a tool to improve the system.

### 1987 version

ISO 9000:1987 had the same structure as the UK Standard BS 5750, with three 'models' for quality management systems, the selection of which was based on the scope of activities of the organization:

- ISO 9001:1987 *Model for quality assurance in design, development, production, installation, and servicing* was for companies and organizations whose activities included the creation of new products.
- ISO 9002:1987 *Model for quality assurance in production, installation, and servicing* had basically the same material as ISO 9001 but without covering the creation of new products.
- ISO 9003:1987 *Model for quality assurance in final inspection and test* covered only the final inspection of finished product, with no concern for how the product was produced.

*ISO 9000:1987* was also influenced by existing U.S. and other Defense Standards ("MIL SPECS"), and so was well-suited to manufacturing. The emphasis tended to be placed on conformance with procedures rather than the overall process of management—which was likely the actual intent.

### 1994 version

*ISO 9000:1994* emphasized quality assurance via preventive actions, instead of just checking final product, and continued to require evidence of compliance with documented procedures. As with the first edition, the down-side was that companies tended to implement its requirements by creating shelf-loads of procedure manuals, and becoming burdened with an ISO bureaucracy. In some companies, adapting and improving processes could actually be impeded by the quality system.

### 2000 version

*ISO 9001:2000* combines the three standards 9001, 9002, and 9003 into one, called 9001. Design and development procedures are required only if a company does in fact engage in the creation of new products. The 2000 version sought to make a radical change in thinking by actually placing the concept of process management front and center ("Process management" was the monitoring and optimizing of a company's tasks and activities, instead of just inspecting the final product). The 2000 version also demands involvement by upper executives, in order to integrate quality into the business system and

# **ISO 14000**

From Wikipedia, the free encyclopedia

The **ISO 14000** environmental management standards exist to help organizations minimize how their operations negatively affect the environment (cause adverse changes to air, water, or land) and comply with applicable laws and regulations.

ISO 14001 is the international specification for an environmental management system (EMS). It specifies requirements for establishing an environmental policy, determining environmental aspects and impacts of products/activities/services, planning environmental objectives and measurable targets, implementation and operation of programs to meet objectives and targets, checking and corrective action, and management review. ISO 14000 is similar to ISO 9000 quality management in that both pertain to the process (the comprehensive outcome of how a product is produced) rather than to the product itself. The overall idea is to establish an organized approach to systematically reduce the impact of the environmental aspects which an organization can control. Effective tools for the analysis of environmental aspects of an organization and for the generation of options for improvement are provided by the concept of Cleaner Production.

As with ISO 9000, certification is performed by third-party organizations rather than being awarded by ISO directly. The ISO 19011 audit standard applies when auditing for both 9000 and 14000 compliance at once.

# Standards

The material included in this family of specifications is very broad. The major parts of ISO 14000 are:

- **ISO 14001** is the standard against which organizations are assessed. ISO 14001 is generic and flexible enough to apply to any organization producing and/or manufacturing any product, or even providing a service anywhere in the world.
- **ISO 14004** is a guidance document that explains the 14001 requirements in more detail. These present a structured approach to setting environmental objectives and targets and to establishing and monitoring operational controls.

These are further expanded upon by the following:

- ISO 14020 series (14020 to 14025), Environmental Labeling, covers labels and declarations.
- **ISO 14030** discusses post-production environmental assessment.
- ISO 14031 Evaluation of Environmental Performance.
- **ISO 14040** series (14040 to 14044), Life Cycle Assessment, LCA, discusses pre-production planning and environment goal setting.
- ISO 14050 terms and definitions.
- **ISO 14062** discusses making improvements to environmental impact goals.
- **ISO 14063** is an addendum to 14020, discussing further communications on environmental impact.
- **ISO 14064-1:2006** is Greenhouse gases Part 1: Specification with guidance at the organization level for the description, quantification and reporting of greenhouse gas emissions and removals.
- ISO 14064-2:2006 is Greenhouse gases Part 2: Specification with guidance at the project level

Attachment #126

for the description, quantification, monitoring and reporting of greenhouse gas emission reductions and removal enhancements.

- ISO 14064-3:2006 is Greenhouse gases Part 3: Specification with guidance for the validation and verification of greenhouse gas assertion.
- ISO 19011 which specifies one audit protocol for both 14000 and 9000 series standards together. This replaces **ISO 14011** meta-evaluation—how to tell if your intended regulatory tools worked. 19011 is now the only recommended way to determine this.

# See also

- Air quality index
- Cleaner Production
- Food safety
- ISO International Organization for Standardization
- **ISO 9000**
- **ISO 19011**
- Indoor air quality
- Life cycle assessment
- OHSAS 18001
- Water quality
- Water safety
- Water supply
- Green Globe

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Categories: ISO standards | Environmental economics | Environmental standards | Industrial ecology Hidden categories: Cleanup from February 2008 | All pages needing cleanup | Articles needing additional references from March 2008

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#### **U.S. Department of Justice**

Federal Bureau of Prisons

Federal Correctional Institution

Office of The Safety Department

Tucson, Arizona 85706

May 17, 2006

MEMORANDUM FOR KEITH ROY, ACTING ASSOCIATE WARDEN OF UNICOR FROM: Smith, Lead Safety Specialist **L** . **A** .

#### SUBJECT: Notification of Monitoring

It has been brought to the Safety Departments attention, that staff who received personal air sampling and wipe sampling during the OSHA Inspectors periodic inspection have not been notified of their results verbally or in writing. Also, the inmate workers at the UNICOR Factory and UNICOR Warehouse have not been notified verbally or in writing of the air sampling nor wipe sampling results conducted in their affected areas. I recommend UNICOR provide to each staff and inmate workers writing the test results to comply with Executive Order 12196, OSHA 29 CFR 1910.1025, Lead and 29 CFR 1910.1025, Cadmium Standards, and Bureau Policy.

If I can provide any further assistance, please do not hesitate to let me know.

cc: Ricado E. Chavez, Warden Carolyn A. Sabol, Warden Joe Salazar, Executive Assistant Daryl Clifton, Production Controller Ramon Cuestes, Safety Manager

Attachment # 56



U.S. Department of Justice

Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

July 26, 2007

#### MEMORANDUM FOR JOSE SANCHEZ, ASSOCIATE WARDEN OF UNICOR

#### DARYL CLIFTON, PRODUCTION CONTROLLER

**FROM:** Leroy A. Smith, Safety Manager

**SUBJECT:** Notification of Monitoring

It has been brought to the Safety Departments attention, that staff and inmate workers who received personal air sampling and wipe sampling during the Industrial Hygiene Monitoring in the UNICOR Computer Recycling Operation at Federal Correctional Institution, Tucson, have not been notified verbally and/or in writing of their environmental health risk assessment air sampling results, which were conducted by ACT Environmental Incorporated dated July 10, 2006. I recommend UNICOR provide to all affected staff and inmate workers in writing their test results to comply with OSHA 29 CFR 1910.1025, Lead and 29 CFR 1910.1025, Cadmium Standards, and Bureau Policy.

If I can provide any further assistance, please advise.

cc: Ricado E. Chavez, Warden
Louis W. Winn, Warden
Keith Roy, Associate Warden
Jose Sanchez, Associate Warden of Industries
Safety File

Att AChment E

From:	Connee Thygerson
To:	Smith, Leroy
Date:	4/13/2006 2:03:56 PM
Subject:	Union Dues

Your request to deduct union dues was received in our office on 4/11/06. Today I changed your Bargaining Unit Status code to show you as included in the bargaining unit. This will also require a personnel action, which will be processed tomorrow.

Your union dues will be deducted beginning pay period 8 (4/16-29), in accordance with Article 8, section e. of the Master Agreement.

CC:

Cates, Robert; Koestel, Phillip; Roy, Keith



Allachment #26



**U.S. Department of Justice** 

Federal Bureau of Prisons

Federal Correctional Institution

Office of the Safety Department

Tucson, Arizona 85706

April 27, 2006

#### MEMORANDUM FOR RICARDO E. CHAVEZ, WARDEN

#### PHILLIP KOESTEL, LOCAL UNION PRESIDENT

FROM:

Leroy A. Smith, Lead Safety Specialist

SUBJECT: Hostile Work Environment

On Wednesday, April 26, 2006, at approximately 2:50 p.m., Mr. Ramon Cuestes, Safety Manager, called and requested that I provide him the UNICOR file I was auditing in preparation for Program Review. He then stated, "OSHA is in the institution conducting an inspection of UNICOR Factory and UNICOR Warehouse at the Satellite Prisons Camp (SPC).

I provided the UNICOR file to Mr. Cuestes approximately at 3:05 p.m. at the Federal Correctional Institution (FCI) front lobby. I asked, if I could attend to the OSHA meeting, since it affects the United States Penitentiary (USP)? Mr. Cuestes replied, "I don't have a problem with it since you are part of safety and that it affects the USP." Mr. Cuestes then introduced me to Ms. Kenneatha Clark, OSHA Inspector.

During the meeting Ms. Clark asked Mr. Cuestes to make some copies of the UNICOR safety file. Mr. Cuestes then left the conference room. Shortly after Mr. Cuestes departure, Warden Sabol and Associate Warden of Operations, Roy, walked into the conference room and sat down.

albechment #28

At this point Ms. Clark began to discuss what kind of sampling she was going to conduct at the UNICOR FCI and USP. Ms. Clark also stated, "I'm not sure if I will consider the air samples out at the UNICOR Warehouse. Warden Sabol asked, "may I ask why?" Ms. Clark replied, " I will not be present to ensure the sample won't be tampered with." I then mentioned, I maybe able to request ----. Warden Sabol in an aggressive manner stated, "can you be quite, I have another question to ask !!" Warden Sabol then asked, "what other type of sampling will be conducted?" Ms. Clark replied, "I will place air pumps at the work stations and place personal air samples on the staff." I then asked, "would you be conducting personal air sampling on the inmates?" Ms. Clark replied, "No, my focus in on the staff at this point." Warden Sabol then stated, "it would take a lot more time to get approval to conduct air sampling of the inmates !!" I then asked, so this visit is more focused on the air quality of the factory, warehouse, and personal air sampling of the staff, but you could conduct air sampling of the inmates if you thought it was necessary today? Ms. Clark replied, "yes."

Ms. Clark then asked, "if there were any other questions?" I again mentioned, I maybe able to be present to ensure the air samples ----. Warden Sabol again in an aggressive manner stated, "he doesn't work for us, he would have to get permission from the Warden Chavez at the USP!!" I replied, I believe that was exactly what I mentioned. Warden Sabol then stated, "I need to kick you out of this meeting, you can wait outside!!"

At this point Mr. Cuestes returned to the Wardens area. Mr. Cuestes asked, why are you setting out here? I replied, that Warden Sabol kicked me out of the meeting with OSHA. Mr. Cuestes then asked, this all happened in the last ten minutes while I was gone? I replied, Yes. Mr. Cuestes also asked, Warden Sabol actually said, I need to kick you out of this meeting? I replied, Yes. Mr. Cuestes then stated, "it just continues to get better."

As Associate Warden of Operations, Roy and Warden Sabol began to leave the conference room, Warden Sabol stated, "Mr. Cuestes I want to let you know I kicked Mr. Smith out of the meeting." I then mentioned, Warden Sabol's comments where hostile, discriminatory, and retaliatory towards me for participating in the OSHA inspection, Safety program, and my whistleblower case.

Mr. Roy kept stirring at me, while Warden Sabel kept talking. I then mentioned, now I know why my butt is sore, I was kicked out of the meeting.

#29

cc: Western Regional Director Senator McCain Associate Warden Roy Safety Manager Cuestes Attorney Mary Dryovage Office of Special Counsel

20

Machmant

: 29

From:	Ramon Cuestes
To:	Smith, Leroy
Date:	5/3/2006 9:10:56 AM
Subject:	Conversation

On Wednesday, April 26, 2006, A meeting with Occupational Safety & Environmental Health was taking place in the Warden Conference Room. I was asked to make copies of documentation for the compliance Officer. As I left the Lead Safety Specialist, Mr. Leroy Smith remained with her. Approximately 10 minutes later when I returned I saw Mr. Smith outside the room and asked him why. He said Warden Sabol had kicked him out of the room. Warden Sabol was coming out of the room about the same time that Leroy was telling me this and she confirmed what he had told me. She said that she had kicked Mr. Leroy Smith out of the meeting.

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#### Mail Envelope Properties (4458D610.959 : 1 : 46672)

Subject: Creation Date From: Conversation 5/3/2006 9:10:56 AM Ramon Cuestes

**Created By:** 

RCuestes@bop.gov

#### Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

#### Post Office

TCNADM1.TCNDOM1

### Route bop.gov

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<b>Return Notification:</b>	None	

No

# Security: Standard

**Concealed Subject:** 

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Junk Mail settings when this message was delivered

Junk Mail handling disabled by User Junk List is not enabled Junk Mail using personal address books is not enabled Block List is not enabled

129

Page

From:	Phillip Koestel		
To:	Chavez, Ricardo; Sabol, Carolyn		
Date:	4/26/2006 6:07:42 PM		
Subject:	Union Representative		

#### Warden's,

this is sent to serve as our formal notice, that effective immediately Mr. Leroy Smith, is designated to represent AFGE Local 3955 as our Safety Representative. He will attend all meetings in which this local takes part under the contract, including the ongoing meetings with OSHA, on behalf of this local.

Thank you, Phil Koestel, President AFGE Local 3955

CC:

Lamb, Christopher

Attachment #30

Page 1



Office of The Safety Department

**U.S. Department of Justice** 

Tucson, Arizona 85706

Federal Bureau of Prisons

Federal Correctional Institution

May 5, 2006 MEMORANDUM TO RICARDO CHAVEZ. WARDEN

FROM: Leroy A.

Smith, Lead Safety Specialist

SUBJECT :

Hostile Work Environment

Warden Sabol, Carolyn A., and Mr. Keith Roy, Associate Warden of Operations requested that I provide technical assistance in preparation for the FCI Safety Departments Program Review scheduled the week of June 6, 2006. I have continued to provide this assistance, even with constant harassment, discrimination, and demeaning acts towards me for supporting and implementing safety and health program needs at the FCI by Warden Sabol and Mr. Roy over the last few months. Warden Sabol held a meeting with Mr. Ramon Cuestes and I to explain our rolls in preparing for the safety program review and the importance of only needing to receive an acceptable program review rating, which she would be satisfied with.

Mr. Roy has given me direct orders that conflict with the mission and direction Warden Chavez has direct me perform. When I have requested to speak with Warden Chavez to ensure his aware what Mr. Roy has requested me to do, Mr. Roy begins telling me in an aggressive manner what are you telling me Leroy! Mr. Roy will in an aggressive manner repeat "what are you telling me Leroy" on several occasions during our conversation!

I spoke with Warden Chavez about Mr. Roy's actions. I also mentioned, that Mr. Roy continues to give me direct orders knowing that Warden Chavez had already expressed the direction

Altochment # 31

- AWN YOU

that I should proceed. I then mentioned, that Mr. Roy's deliberate comments where an attempt to have me become insubordinate or fail to follow a direct order. Mr. Chavez replied, "you need to do what Mr. Roy tells you, to ensure you don't get into any trouble."

Warden Sabol stated to the OSHA Inspector, "he doesn't work for me, he works for the Warden at the USP!" Then Warden Sabol stated, "I need to kick you out of this meeting!" As Warden Sabol walked out of the conference room she stated, "Ramon just to let you know, I kicked Mr. Smith out of the meeting!" After, Mr. Roy was informed that I was the Safety Representative for the Local Union, he requested that I be removed from the UNICOR Factory and sent back to the USP.

Warden Sabol nor Mr. Roy have requested that I discontinue providing technical assistance at the FCI. Warden Sabol and Mr. Roy have gone out of their way to make it clear that I am not welcomed or allowed in the FCI by calling the Executive staff at the USP to either have me removed from the FCI or inquire why I am over at the FCI. These action of Warden Sabol and Mr. Roy are personal in nature, which these same action are not directed towards any other staff member at the FCI or USP.

On Thursday, May 4, 2006, I spoke with Mr. Cuestes about the USP budget. Mr. Cuestes and I spoke about the purchase requests and monthly statement where not matching. Since, I have been the sole safety staff member accepting and accounting for the supplies and equipment coming into the institutions, Mr. Cuestes asked if I could assist him, which I replied that I would see him in the morning to go over the purchase requests. I spoke with Mr. Salazar about Mr. Cuestes requesting that I assist him on the USP budget, since I have been receiving all the sanitation and equipment purchased for the USP. I then mentioned, that the monthly statement and purchase requests weren't matching. I asked Mr. Salazar if it would be okay to assist Mr. Cuestes, which he replied, yes?

On Friday, May 5, 2006, I was called by Mr. Salazar at the FCI Safety Department. Mr. Salazar stated, "Warden Sabol called and spoke with Ms. Hardy about a USP vehicle being parked in front of the FCI Administration building." Mr. Salazar asked, "is the vehicle in front of the FCI Admin Building yours?" I replied, yes. Mr. Salazar then stated, "Warden Sabol wants the vehicle moved and parked somewhere else." Mr. Salazar also stated, "Warden Sabol said the parking spots up front are for the Executive staff." I replied, that the parking spots are not identified Warden, AW(O), or AW(P), which I believe the signs state "authorized vehicle parking only" and one or two say law enforcement. Mr. Salazar then asked, "I need you to move the

431

vehicle." I replied, that I would take care of it immediately. I then asked, why am I being solely pointed out, when staff park there all the time? Mr. Salazar replied, "I don't think that's happening."

cc: Josias Salazar, Executive Assistant Phil Koestel, Union President Mark Barnard, Union Representative Ramon Cuestes, Safety Manager Carolyn A. Sabol, Warden Keith Roy, Associate Warden of Operations C:\DOCUME~1\TCN3409\LOCALS~1\Temp\GW}00002.TMP

Page 1

#### Mail Envelope Properties (445BC0E0.294 : 7 : 45988)

Subject: Creation Date From: Emailing: CHAVEZSABOL552006 5/5/2006 2:17:20 PM Leroy Smith

**Created By:** 

lasmith@bop.gov

#### Recipients

bop.gov LEXADM1.LEXDOM1 LEX5249 BC (Gregory T. Kapusta)

bop.gov

TCNADM1.TCNDOM1 TCN0607 CC (Josias Salazar) TCN3024 CC (Phillip Koestel) TCN5587 CC (Carolyn Sabol) PM

TCN5909 CC (Keith Roy) TCN7228 (Ricardo Chavez)

TCN9257 CC (Ramon Cuestes) TCN9834 CC (Mark Barnard) AM

## AM

Post Office LEXADM1.LEXDOM1 TCNADM1.TCNDOM1

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Replied	5/8/2006 7:41:12 AM
Delivered	5/5/2006 2:17:37 PM
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 5/5/2006 2:17:37 PM
 bop.gov

Date & Time 5/5/2006 2:17:20 PM

5/5/2006 2:15:00 PM

#31

From:Ramon CuestesTo:Smith, LeroyDate:5/3/2006 9:10:56 AMSubject:Conversation

On Wednesday, April 26, 2006, A meeting with Occupational Safety & Environmental Health was taking place in the Warden Conference Room. I was asked to make copies of documentation for the compliance Officer. As I left the Lead Safety Specialist, Mr. Leroy Smith remained with her. Approximately 10 minutes later when I returned I saw Mr. Smith outside the room and asked him why. He said Warden Sabol had kicked him out of the room. Warden Sabol was coming out of the room about the same time that Leroy was telling me this and she confirmed what he had told me. She said that she had kicked Mr. Leroy Smith out of the meeting.

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#### Mail Envelope Properties (4458D610.959 : 1 : 46672)

Subject:	Conversation	
<b>Creation Date</b>	5/3/2006 9:10:56 AM	
From:	Ramon Cuestes	

**Created By:** 

RCuestes@bop.gov

Size

897

# Recipients bop.gov

TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

# **Post Office**

MESSAGE

Security:

Files

TCNADM1.TCNDOM1

### Route bop.gov

**Date & Time** 5/3/2006 9:10:56 AM

Options	
<b>Expiration Date:</b>	5/18/2006
Priority:	Standard
ReplyRequested:	No
<b>Return Notification:</b>	None

**Concealed Subject:** No Standard

Junk Mail Handling Evaluation Results Message is not eligible for Junk Mail handling Message is from an internal sender

Junk Mail settings when this message was delivered

Junk Mail handling disabled by User

Junk List is not enabled

Junk Mail using personal address books is not enabled Block List is not enabled

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From:	Phillip Koestel		
To:	Chavez, Ricardo; Sabol, Carolyn		
Date:	4/26/2006 6:07:42 PM		
Subject:	Union Representative		

#### Warden's,

this is sent to serve as our formal notice, that effective immediately Mr. Leroy Smith, is designated to represent AFGE Local 3955 as our Safety Representative. He will attend all meetings in which this local takes part under the contract, including the ongoing meetings with OSHA, on behalf of this local.

Thank you, Phil Koestel, President AFGE Local 3955

CC:

Lamb, Christopher

Hachmanta



U.S. Department of Justice

Federal Bureau of Prisons

Federal Correctional Institution

Tucson, Arizona 85706

May 03, 2006

MEMORANDUM TO: L. Smith, Lead Safety Specialist

an K. Coleman, S.O.S.

FROM:

SUBJECT:

Union Business

As per your request. On 29 April 2006, I was summoned to report to the Unicor Factory to meet with/represent this Union Local #3955 during the on going OSHA inspection. Upon my arrival there, and in the presence of A.W. Roy, Mr. D. Clifton, and the OSHA enforcement officer it was made clear that per the Union President (P. Koestel) that in my stead Mr. L. Smith would be called upon to represent the Union and I agreed to respond only in the event that Mr. Smith is not available. The OSHA rep had no objections and I returned to my assigned post.

Attachment#34

### ARTICLE 27 - HEALTH AND SAFETY

<u>Section a.</u> There are essentially two (2) distinct areas of concern regarding the safety and health of employees in the Federal Bureau of Prisons:

- the first, which affects the safety and well-being of employees, involves the inherent hazards of a correctional environment; and
- 2. the second, which affects the safety and health of employees, involves the inherent hazards associated with the normal industrial operations found throughout the Federal Bureau of Prisons.

With respect to the first, the Employer agrees to lower those inherent hazards to the lowest possible level, without relinquishing its rights under 5 USC 7106. The Union recognizes that by the very nature of the duties associated with supervising and controlling inmates, these hazards can never be completely eliminated.

With respect to the second, the Employer agrees to furnish to employees places and conditions of employment that are free from recognized hazards that are causing or are likely to cause death or serious physical harm, in accordance with all applicable federal laws, standards, codes, regulations, and executive orders.

<u>Section b.</u> The parties agree that participation in and monitoring of safety

programs by the Union is essential to the success of these programs. The Union recognizes that the Employer employs Safety and Health Specialists whose primary function is to oversee the safety and health programs at each institution.

1. it is understood by the parties that the Employer has the responsibility for providing information and training on health and safety issues. The Union at the appropriate level will have the opportunity to provide input into any safety programs or policy development; and 2. although the Employer employs Health and Safety Specialists whose primary function is to oversee the health and safety programs at each facility, representatives of the Occupational Safety and Health Administration (OSHA), **Environmental Protection Agency** (EPA), Centers for Disease Control (CDC), and other regulatory and enforcement agencies that have a primary function of administering the laws, rules, regulations, codes, standards, and executive orders related to health and safety matters are the recognized authorities when issues involving health and safety are raised.

<u>Section c.</u> The Employer will establish a safety and health committee at each institution. The committee will serve in an advisory capacity to the Chief

Attachment #127

56

Executive Officer and be composed of equal numbers of representatives of the Employer and the Union. The primary duties of the safety and health committee shall be to:

- develop and recommend specific goals and objectives designed to reduce the number and severity of on-the-job accidents and occupational illnesses;
- 2. review reports of on-the-job accidents, injuries and occupational illnesses, to identify specific hazards and adverse trends, and to formulate specific recommendations to prevent recurrences;
- review findings of inspections, audits, and program reviews to assist in the formulation of recommendations for corrective action; and
- 4. review plans for abating hazards.

Safety and health committees will meet quarterly. More frequent meetings may be held at the discretion of the Chief Executive Officer.

Written minutes of each meeting will be maintained and made available to all committee members. All information necessary for the effective conduct of the safety and health committee will be made available to the committee.

<u>Section d.</u> Official time will be granted to the Union representative(s) to attend

the safety and health committee meetings and to participate in any health and safety activity under laws, rules, regulations, executive orders, and this Agreement.

 any costs incurred to participate in any local area meetings or activities referenced in this article will be reimbursed by the Employer in accordance with the Federal Travel Regulations.

<u>Section e.</u> Unsafe and unhealthful conditions reported to the Employer by the Union or employees will be promptly investigated. Any findings from said investigations relating to safety and health conditions will be provided to the Union, in writing, upon request. No employee will be subject to restraint, interference, coercion, discrimination, or reprisal for making a report and/or complaint to any outside health/safety organization and/or the Agency.

Section f. When a safety and health inspection is being conducted by an outside agency such as OSHA, the National Institution for Occupational Safety and Health (NIOSH), or a private contractor, the Union will be invited and encouraged to have a local representative participate.

<u>Section g.</u> Material Safety Data Sheets for all hazardous materials in use will be maintained in the Safety Office.

<u>Section h.</u> If an employee is injured in the performance of duty, the employee will be informed of the procedures to be followed for filing a claim for benefits

#### WALK-THROUGH SURVEY REPORT: ELECTRONIC RECYCLING OPERATION

At

# FEDERAL CORRECTIONAL INSTITUTION TUCSON, ARIZONA

PRINCIPAL AUTHOR: G. Edward Burroughs, Ph.D., CIH, CSP

> REPORT DATE: February 2009

FILE NO.: EPHB 326-18a

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention National Institute for Occupational Safety and Health Division of Applied Research and Technology 4676 Columbia Parkway Cincinnati, Ohio 45226

Attachment # 28

#### SITES SURVEYED:

UNICOR Recycling Operations Federal Correctional Institution Tucson, AZ

NAICS:

SURVEY DATE:

SURVEY CONDUCTED BY:

562920

June 27 - 28, 2007

Edward Burroughs, PhD, CIH, CSP (NIOSH) Paul Pryor, MS, CIH (FOH)

"The findings and conclusions in this report have not been formally disseminated by the National Institute for Occupational Safety and Health and should not be construed to represent any agency determination or policy."

2

### DISCLAIMER

Mention of company names or products does not constitute endorsement by the Centers for Disease Control and Prevention.

3

The findings and conclusions in this report do not necessarily reflect the views of the National Institute for Occupational Safety and Health.

# INTRODUCTION

On June 27 - 28, 2007 a researcher from the National Institute for Occupational Safety and Health (NIOSH), accompanied by a representative from Federal Occupational Health (FOH), conducted a walk-through evaluation of exposures to metals and other occupational hazards associated with the recycling of electronic components at the Federal Prison Industries (aka, UNICOR) facility in the Federal Correctional Institution (FCI), Tucson, AZ. The principal objectives of this visit were:

a. To observe potential exposures to metals including barium (Ba), beryllium (Be), cadmium (Cd), lead (Pb) and nickel (Ni).

b. To evaluate contamination of surfaces in the work areas that could create dermal exposures or allow re-entrainment of metals into the air.

c. To identify and describe the control technology and work practices used in operations associated with occupational exposures to toxic substances, and to determine additional controls, work practices, substitute materials, or technology that can further reduce these exposures.

d. To evaluate the use of personal protective equipment in operations involved in the recycling of electronic components.

# **PROCESS DESCRIPTION**

The recycling of electronic components at this prison is done in a facility located within the Federal Correctional Institution (FCI). A diagram of that facility is shown in Figure I. This figure provides a general layout of the work process, although workers often moved throughout their respective areas in the performance of their tasks. The population of the UNICOR facility was approximately 86 in the FCI factory with an additional 25 in the camp warehouse.

The recycling of electronic components at this facility can be organized into three production processes: a) receiving and sorting, b) disassembly, and c) packaging and shipping. Incoming materials to be recycled are received at a warehouse where they are examined and sorted. During this evaluation it appeared that the bulk of the materials received were computers, either desktop or notebooks, or related devices such as printers. Some items, notably notebook computers, could be upgraded and resold, and these items were sorted out for that task.

After electronic memory devices (e.g., hard drives, discs, etc.) were removed and degaussed or destroyed, computers' central processing units (CPUs), servers and similar devices were sent for disassembly; monitors and other devices (e.g., televisions) that contain cathode ray tubes (CRTs) were separated and sent for disassembly and removal of the CRT. Printers, copy machines and any device that could potentially contain toner, ink, or other expendables were segregated and those expendables were removed prior to the device being sent to the disassembly area.

In the disassembly process external cabinets, usually plastic, were removed from all devices and segregated. Valuable materials such as copper wiring and aluminum framing were removed and sorted by grade for further treatment if necessary. Components such as circuit boards or chips that may have value or may contain precious metals such as gold or silver were removed and sorted. With few exceptions each of the workers in the main factory will perform all tasks associated with the disassembly of a piece of equipment into the mentioned components with the use of powered and un-powered hand tools (primarily screwdrivers and wrenches), with a few workers collecting the various parts and placing them into the proper collection bin. Work tasks included removing screws and other fasteners from cabinets, unplugging or clipping electrical cables, removing circuit boards, and using whatever other methods necessary to break these devices into their component parts. Essentially all components currently are sold for some type of recycling.

The final process, packing and shipping, returned the various materials segregated during the disassembly steps to the warehouse to be sent to contracted purchasers of those individual materials. To facilitate shipment some bulky components such as plastic cabinets or metal frames were placed in a hydraulic bailer to be compacted for easier shipping. Other materials were boxed or containerized and removed for subsequent sale.

A fourth production process, the glass breaking operation where CRTs from computer monitors and TVs were sent for processing, was not currently being done at Tucson. CRTs are shipped, unbroken, from Tucson to other locations for breaking and recycling. This process was observed and evaluated at other UNICOR facilities as part of this research and those reports are available.

# POTENTIAL HAZARDS

Computers and their components contain a number of hazardous substances. Among these are "platinum in circuit boards, copper in transformers, nickel and cobalt in disk drives, Ba and Cd coatings on computer glass, and Pb solder on circuit boards and video screens" [Chepesiuk 1999]. The Environmental Protection Agency (EPA) notes that "In addition to lead, electronics can contain chromium, cadmium, mercury, beryllium, nickel, zinc, and brominated flame retardants" [EPA 2008]. Schmidt [2002] linked these and other substances to their use and location in the "typical" computer: Pb used to join metals (solder) and for radiation protection, is present in the CRT and printed wiring board (PWB). Aluminum, used in structural components and for its conductivity, is present in the housing, CRT, PWB, and connectors. Gallium is used in semiconductors; it is present in the PWB. Ni is used in structural components and for its magnetivity; it is found in steel housing, CRT and PWB. Vanadium functions as a red-phosphor emitter; it is used in the CRT. Bervllium, used for its thermal conductivity, is found in the PWB and in connectors. Chromium, which has decorative and hardening properties, may be a component of steel used in the housing. Cadmium, used in Ni-Cad batteries and as a blue-green phosphor emitter, may be found in the housing, PWB and CRT. Cui and Forssberg [2003] note that Cd is present in components like SMD chip resistors, semiconductors, and infrared detectors. Mercury may be present in batteries and switches, thermostats, sensors and relays [Schmidt 2002, Cui and Forssberg 2003], found in the housing and PWB. Arsenic, which is used in doping agents in transistors, may be found in the PWB [Schmidt 2002].

# **EVALUATION TECHNIQUES**

Observations regarding work practices and use of personal protective equipment were recorded. Information was obtained from conversations with the workers and management to confirm this was a typical workday to help place conclusions in proper perspective.

Bulk material samples were collected by gathering a few grams of settled dust or material of interest and transferring this to a glass bottle for storage and shipment. These samples were analyzed for metals using NIOSH Method 7300 [NIOSH 1994] modified for bulk digestion.

Surface wipe samples were collected using Ghost<sup>TM</sup> Wipes for metals (Environmental Express, Mt. Pleasant, SC) to evaluate surface contamination. These wipe samples were collected in accordance with ASTM Method D 6966-03 [ASTM 2002], using a disposable paper template with a 12 inch by 12 inch square opening. The templates were held in place by hand or taped in place to prevent movement during sampling. Wipes were placed in sealable test tube containers for storage and then sent to the laboratory to be analyzed for metals according to NIOSH Method 7303 [NIOSH 1994].

An assessment of noise levels in various locations was made using a hand held sound level meter (Model 2400, Quest Technologies, Oconomowoc, WI) calibrated on-site prior to use with a 110 dB source. All noise measurements were weighted on an "A" scale, slow response.

Ambient dry bulb temperature and humidity measurements were made periodically with a Velocicalc Plus (TSI Inc., Shoreview, MN) air meter.

# MEASUREMENTS AND OBSERVATIONS

The measurements and observations described here were made in June, 2007 at the UNICOR recycling operation at FCI Tucson. During this visit, surface wipe and bulk dust samples were collected in locations where the electronics recycling operations were taking place or had taken place in the past. Results of surface wipe samples are presented in Table 1 and bulk material sample results are presented in Table 2 for the metals of primary interest. Observations are presented below.

The highest measurements for lead by wipe samples were those taken from the top of light fixtures in locations accessible only from a ladder. Six of the 17 wipe samples were taken from these locations, and 5 of these 6 samples were >300  $\mu$ g Pb/sq ft. One of these samples (TFMWW-1) was in excess of the 1,000  $\mu$ g Pb/sq ft concentration recommended by Lange for final clearance of floors in commercial and industrial buildings (the most applicable recommendation found). Of the 11 other surfaces tested, all but one were below 200  $\mu$ g Pb/sq ft, the most stringent recommendation found and a level which OSHA "would not expect surfaces to be any cleaner than." [Fairfax 2003], Additionally, the 200  $\mu$ g/sq ft recommendation applies to clean areas such as lunch areas, change areas, and storage areas, rather than work areas where lead containing materials are actively processed.

The highest Cd surface measurement (TFMWW-4) was 100  $\mu$ g/sq ft., with all others below 80  $\mu$ g/sq ft. Although there are no published criteria for use in evaluating wipe samples, the OSHA Cadmium standard [29 CFR 1910.1027] mandates that "All surfaces shall be maintained as free as practicable of accumulations of cadmium," that, "all spills and sudden releases of material containing cadmium shall be cleaned up as soon as possible," and that, "surfaces contaminated with cadmium shall, wherever possible, be cleaned by vacuuming or other methods that minimize the likelihood of cadmium becoming airborne."

Ni surface contamination was highest in samples TFMWW-1 and TFMWW-4 at 780 and 670  $\mu$ g/sq ft, respectively. All other measurements were at or below 460  $\mu$ g/sq ft, and the maximum work surface measurement was 210  $\mu$ g/sq ft. Like Cd, there are no published criteria for use in evaluating wipe samples for Ni and while the toxicity of this metal is somewhat dependent on species no compound identification was conducted.

Wipe samples did not indicate levels of Ba in any wipe samples at levels of concern, with the highest Ba concentrations (TFMWW-1 & 4) at 410 and 460  $\mu$ g/sq ft. All other Ba measurements were 200  $\mu$ g/sq ft or below. There are no published criteria for use in evaluating wipe samples.

No Be was detected in any sample from the Tucson FCI above the limit of detection of 0.06  $\mu$ g/sq ft.

The five bulk samples showed no discernable pattern of contamination in this facility. No Be was detected in any bulk sample above the limit of detection of 0.3 mg/kg. The highest metal concentrations were Pb at 1,000 mg/kg and Ni at 880 mg/kg in samples TFMWB-1 and 4, respectively. These two samples were collected from opposite corners of the factory area, as shown on Figure 1.

Operations at the Tucson FCI were similar to procedures observed at other UNICOR recycling facilities where personal exposures have been evaluated and at which there were few significant exposures in the receiving and sorting, disassembly, and packaging and shipping processes.

No local exhaust ventilation systems were in use at the time of this visit nor were any needed. Work areas were kept reasonably clean, primarily by the use of brooms and brushes which can be a source of airborne dust, so the use of HEPA vacuums and wet mopping is recommended in the next section. Care must be taken when using wet methods to assure no electrical or other safety hazard is introduced.

Safety glasses were used in most operations. Hearing protection was available where needed (primarily near the bailer) and disposable respirators were available to workers who chose to use them although respirators were not required at this facility.

Spot measurements of noise made with a hand-held sound pressure meter suggested the need for a more comprehensive noise study. Peak levels up to 103 dBA near the plastic bailer and 86 dBA near the metal bailer were measured with durations of 20 to 40 seconds. In the area

where hard discs were being destroyed by puncturing, shorter duration (<2 seconds) peaks over 100 dBA (up to 112) were common and the background noise level was in the range of 80 to 85 dBA.

Ambient indoor temperatures ranged from 71 to  $81^{\circ}$ F in the factory and to  $91^{\circ}$ F in the warehouse, with relative humidity's from 30 to 60%. Outdoor temperatures in excess of  $100^{\circ}$ F were measured.

# CONCLUSIONS AND RECOMMENDATIONS

Based on measurements and observations presented, the following recommendations are made.

- 1. Training of workers should be scheduled and documented in the use of techniques for dust suppression, personal protection equipment (e.g., respirators, gloves, etc.) and hazard communication. Additional training, recordkeeping and other restrictions apply if a formal respiratory protection program is implemented.
- 2. Frequently while conducting the on-site work, NIOSH researchers observed tasks (such as lifting and using screwdrivers) being conducted in an awkward manner which could produce repetitive stress injuries. Tasks should be evaluated to determine if they are biomechanically taxing and if modifications in procedures or equipment would provide benefit to this workplace.
- 3. Ambient temperature measurements indicate that heat stress should be periodically evaluated to ensure proper precautions are in place to prevent problems associated with a hot environment.
- 4. A program should be established within the Bureau of Prisons to assure that all UNICOR operations, including but not limited to recycling, should be evaluated from the perspective of health, safety and the environment in the near future. This program should be overseen by competent, trained and certified individuals.
- 5. Due to the levels of surface contamination of Pb measured in the recycling facility, workers should wash their hands before eating, drinking, or smoking.
- 6. Daily and weekly cleaning of work areas by HEPA-vacuuming and wet mopping should be conducted, taking care to assure no electrical or other safety hazard is introduced.
- A comprehensive noise survey should be conducted focusing on the bailing and diskdestroying areas since spot measurements showed these are the most likely areas for potential noise problems.

# REFERENCES

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# Table 1.

# TUCSON WIPE SAMPLES

Sample Location*	Sample I D	Sample Description**	Ba ug/sq ft	Be ug/sq ft	Cd ug/sq ft	Pb ug/sq ft	Ni ug/sq ft
1	Top of Light Fixture Near Work           1         TFMWW-1           Stations 16 & 18		410	<0.06	76	1,300	780
2	TFMWW-2	Top of Light Fixture Center of Shop near WS 8+25	69	<0.06	20	83	53
3	TFMWW-3	Top of Light Fixture Behind W S 7	290	<0.06	74	290	300
4	TFMWW-4	Top of Light Fixture Beside W S 19	460	<0.06	100	900	670
5	TFMWW-5	Top of Light Fixture Behind W S 28	190	<0.06	47	460	170
6	TFMWW-6	Top of Light Fixture in Bailing Room Between Bailers	100	<0.06	74	310	460
7	TFMWW-7	Work Surface W S 4	48	<0.06	8	73	170
8	TFMWW-8	Work Surface W S 10	37	<0.06	14	58	91
9	TFMWW-9	Inside trough in front of W S 10	75	<0.06	37	99	210
10	TFMWW-10	Work Surface W S 15	49	<0.06	13	210	100
$\sim 11^{\circ}$	TFMWW-11	Work Surface W S 20	40	<0.06	6	51	120
12	TFMWW-12	Trough in Front of W S 20	15	<0.06	4	23	43
13	TFMWW-13	Top of Work Surface W S 26	10	<0.06	3	150	42
14	TFMWW-14	Work Surface W S 30	12	<0.06	4	24	32
15	TFMWW-15	Work Surface W S 33	29	<0.06	3	32	43
16	TFMWW-16	Trough in Front of W S 33	54	<0.06	6	110	110
17	TFMWW-17	Inside Metal (Blue) Bailer	81	<0.06	. 14	32	130

\* Location identifiers correspond with Figure I

\*\* "W S" indicates work station

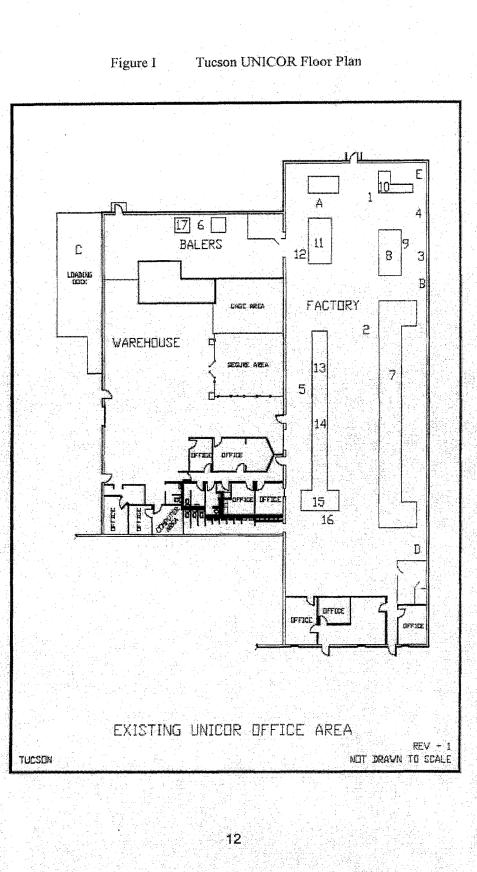
# Table 2. TUCSON BULK SAMPLES

Diagram location*	Sample I D	Description**	Ba mg/kg	Be mg/kg	Cd mg/kg	Pb mg/kg	Ni mg/kg
A	TFMWB-1	Bottom of Trash Can at W S 20	290	<0.3	52	1000	140
B	TFMWB-2	Top of Conduit Along Wall, near W S 14	440	<0.3	130	590	310
		Dirt from Floor of Semi-Trailer used to haul					
C	TFMWB-3	product between warehouse & shop	240	<0.3	5	110	. 31
D	TFMWB-4	Dust from HEPA Vac Near W S 1	380	<0.3	42	790	880
E	TFMWB-5	Dust from HEPA Vac Near W S 14	20	<0.3	14	34	60

11

\* Location identifiers correspond with Figure I

\*\* "W S" indicates work station





# **U.S. Department of Justice**

Federal Bureau of Prisons

Federal Correctional Institution

Office of the Safety Department

Tucson, Arizona 85706

March 30, 2006

# MEMORANDUM FOR KEITH ROY, ASSOCIATE WARDEN OF OPERATIONS

# MIKE SZAFIR, ASSOCIATE WARDEN OF CUSTODY

# CONNEE THYGERSON, EMPLOYEE SERVICES MANAGER

THRU:

# CHRIS LAMB, HEALTH SERVICES MANAGER

FROM: Leroy A. Smith, Lead Safety Specialist

SUBJECT: Position and Responsibilities

On March 24, 2006, Warden Chavez spoke with Mr. Cuestes and I on our current positions, responsibilities, non-bargaining, and bargaining status. On March 29, 2006, Warden Chavez again addressed these issues to ensure we continue to move in the right direction to comply with the organizational chart. The following Warden Chavez clarified the following to be met according to meet the Director's directive:

- 1. Mr. Lamb will assume the Safety Manager role and take all responsibilities that come with this position.
- 2. I will be the Lead Safety Specialist, which will release me from all Safety Managers responsibilities and Management obligations.

Attachment & 11

- 3. Mr. Cuestes will be the Safety Specialist, which will release him of all Safety Manager responsibilities and Management obligations.
- 4. We will not attend any Department Head meetings nor be on the Duties Officer schedule.
- 5. We both are classified as a bargaining staff members.
- 6. We will attend all Activation meetings.

Finally, At this time we have not received a Notification of Personnel Action SF-50 nor Position Descriptions. Also, there is nothing that would preclude us from being bargaining staff, which includes working with OWCP files. Safety Specialist through out the Bureau work with OWCP files on a daily bases and are bargaining staff. We are required by Law to enforce all HIPPA and OWCP guidelines.

cc: Ricardo E. Chavez, Warden Joseph Gunja, Western Regional Director Harley Lappin, Director Bureau of Prisons Ron Day, National Safety Administrator Dave Clements, Regional Safety Administrator Ramon Cuestes, Safety Specialist

H11

# Mail Envelope Properties (442C0966.991 : 7 : 45988)

Subject:	Position and Responsibilities
<b>Creation Date</b>	3/30/2006 9:37:58 AM
From:	Leroy Smith

# Created By:

lasmith@bop.gov

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bop.gov PO2.BOPMSCO	Delivered	3/30/2006 9:38:13
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PM BOP8624 CC (Ron Day)	Opened	3/30/2006 6:31:35
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PM TCN9257 CC (Ramon Cuestes)	Opened	3/30/2006 10:13:40
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**U.S. Department of Justice** 

Federal Bureau of Prisons

Federal Correctional Institution

Office of the Safety Department

Tucson, Arizona 85706

March 30, 2006

# MEMORANDUM FOR CHRIS LAMB, HEALTH SERVICES MANAGER

FROM: Leroy A. Smith, Lead Safety Specialist

SUBJECT: Program Statement 1600.08

On March 24, 2006, Warden Chavez asked for me to provide a copy of Program Statement 1600.08. He also requested that I highlight some of the Safety Managers duties, which the entire safety program falls under the same umbrella. I was asked to provide you any assistance necessary to help you through this process.

cc: Ricardo E. Chavez, Warden Keith Roy, Associate Warden of Operations Ramon Cuestes, Safety Specialist

Attachment #13

From:	Ramon Cuestes
To:	Lamb, Christopher
Subject:	Fwd: RE: USP Tucson Evac signage

Chris,

On March 24, 2006, I was demoted to Safety Specialist, L. Smith to Lead Safety Specialist, and you to Safety Manager, per Warden Chavez. Since you are the expert in Life Safety issues, please be advised the Camp evacuations plans are ready for you to pick-up and do a walk through for you to identify the emergency symbols.

>>> "Bryan Spiegel" <BSpiegel@signplanning.com> 4/4/2006 7:36 AM >>> Just following up on the maps that were sent, we are in need of the evac routes and markups you have. Otherwise, we will send them out to you with the labels for application upon arrival.

We are scheduled to install soon, and we are waiting on your instruction.

Bryan Spiegel - Planning Support Tech. Architectural Sign Associates P.O. Box 11716 Pittsburgh, PA 15228 t. 412.563.5657 x16 f. 412.563.5664 bspiegel@signplanning.com www.signplanning.com

Attachment #14

From:Ramon CuestesTo:Wickliffe, EllynSubject:Re: Reminder - Monthly Safety Inspection Book

Please be advised, as of Friday, March 24, 2006, I was demoted to Safety Specialist, L. Smith to Lead SafetySpecialist, Per Warden Chavez. This is a Safety Manager issue. Please forwarded all messages pertaining to the Safety Program to the HSA/Safety Manager. THX!

>>> Ellyn Wickliffe 4/4/2006 9:12 AM >>>

- due to Warden Sabol by 5th of every month. Thanks.

Attachment #15

Date: 5/10/2006 Time: 11:34:30

Page 1 of 19

# Fax Cover

To: 0935000

Company: San Francisco CA Area Office Fax Number: 914159754319

λ<sub>.</sub>.,

From: Salt Lake Technical Center Company: USDOL/OSHA Fax Number: 801-233-5000

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If you have received this fax in error or it is incomplete, please call Ray Abel (801-233-4929) or Maggie Davies (801-233-4935). You can also refax or print out your results by visiting the CSHO Home Page.

Attachment #129

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Reporting ID 935000	2. Inspection Number 309845071	3. Samplin Numbor	<sup>g</sup>  > 912	397098
, Establishment, Name	(FCI) FEDERAL CORRECTIO TUCSON	N INSTITUTE		
. CSHO ID	6. Sampling Date	7. Shipping Date	8.Date	Result Received
R4531	27 APR 2006	01 MAY 2	006	
I. JOD TITLE Not applicable			10.Occupational Code	11. Number Exposed

.2. Frequency of Exposure

Exposure Summary

	15.	16.	17.Exp	18.Exp	19.	20.	21.	22.	23.	Cital	tion :	infor	matic	21		
14. ubstance Code	Rqstd	Smpl Type	Туре	Level	Units	PEL	Adj	Severity	No Cit	FTA	Over Exp	Eng	dde	Trng M	₽đ	OT
0360	Ŷ	A	c	0.00000	м	0.005		0							•	
0360	Y	A	P	0.00000	м	0.025		0								
1620	Ŷ	A	c	0.00000	М	5.000		D								
2571	Y	А	C	0.00000	м	0.100		0						•		
0230	Y	A	T.	0.00000	М	0.500		0								
0360	Y	Λ	T	0.00000	М	0.002		0								
0685	Y	A	т	0.00000	M	1.000		0								
0720	Y	A	т	0.00000	м	0.100		0								
0731	Y	A	т	0.00000	м	0.100		0								
1520	Y	A	T	0.00000	М	10.000		0								
1790	¥	A	r	0.00000	м	15.000		0								
1840	Y	A	т	0.00000	м	1.000		0							-	
2610	Y	A	T	0.00000	м	5.000		0								
C141	Y	A	т	0.00000	м	0.005		0								
1591	Y	A	т	0.00000	м	0.050		0								

IWA calculated on actual time sampled

The T. H. is Free to make changes on the Form 91B and submit them directly to TMTS

26.Analyst's Comments OSHA ID-125G (Analytical Method)	27. Chain of Custody a. Seals Intact	Init.	Date Y
Reporting Limits for Air Samples (ug):	b. Rec'd In Lab	LLD	02 MAY 2006
Be 0.1 Cd 0.5 Co 2.5	c. Rec'd by Anal.	BJA	03 MAY 2006
Cu 2.5 Pb 5.0	d. Anal. Completed	BJA	05 MAY 2006
Zn 25.0 Cr 10.0	a. Calc. Checked	DE	08 MAY 2006
Fe 25.0 Mn 2.5	f. Supr. OK'd	куо	08 MAY 2006
Mo 25.0 Ni 25.0 Sd 25.0	· · · ·		
V 1.5	•		

Reporting Limits for Wipo Samplos (ug): Re 0.2 Cd 1.0 Co 5.0 Cu 5.0 Pb 10.0 Zn 50.0 Cr 20.0 Fe 50.0 Mn 5.0 Mo 50.0 Ni 50.0

Sampling Number:

From: Salt Lake Technical Center To: 0935000

Date: 5/10/2006 Time: 11:34:30 AM

veries was not the local standard with

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# \$ර 50.0 V 3.0

No field blank was submitted for wipe samples P89938, P89940-P89944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

numb 9 Lab	Sample No.	P89	931									
Alnute	es/Type)	423	A									
3	0. Analyte			31.	Analysis	Results/	32.	Sample	Included	l In	calculation	los
0230	Antimony and Compounds (as Sb)	М	ND				•					
0360	Beryllium and Beryllium Compounds (as Be)	М	ND									
0685	Chromium, Metal and Insoluble Salt	, M	ND									
0720	Cobalt, Metal, Dust and Fume (as Co)	M	ND		• .							•
	Copper Fume (as Cu)	М	ND			•			· . ·		· · · ·	•
	Iron Oxide Fume	M	ND		•	•						
	inorganic (as Pb)	M	ND								· .	
.620	Manganese Fume (as Mn)	м	ND									•
	Molybdenum (as Mo), Insoluble Compounds	M	ND.	•								
840	(Total Dust) Nickel, Metal and Insoluble compounds (as Ni)	м	ND									
	Vanadium fume (as V2O5)	M	ND							^		
	Zinc Oxidə Fumə	м	ND									
141 (	Cadmium	м	ND							•		

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Sampling Number:

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Date: 5/10/2006 Time: 11:34:30 AM

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Because the results for air samples are used in further calculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for wipe samples and for bulk material samples justify rounding results to no more than two significant figures.

2X62)9

The Sampling and Analytical Error (6AE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Sait Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

0230	0,1035	4	Sangle	& Esul	5		
0360	0.0947						
0685 .	0.0930						
0720	0.0991						
0731	0.0995						
1520	0.0970	•					
1591	0.0920			· .			
1620	0.0935						
1790	0.0966						
1840	0.0909						
2571	0.0936						
2610	070939						
C1 41	0.0981						
					·	 	 

- 3 FIBERS PER CUBIC CENTIMETER
- ٩ MILLIGRAMS PER CUBIC METER
- Z MILLIGRAMS
- NONE

lampling Number:

- х MICROGRAMS
- ₽ PERCENT в
  - FIBERS PER MM2
  - MILLION PARTICLES PER CUBIC FOOT (MPPCF)

3M/S Bar Meters per Second

ND The results are below the detection limits.

912397098

malyte codes are chosen by the laboratory. The I. H. should review them for applicability. if there are any fuestions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may ave sampled for dust).

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From: Salt Lake Tech	inical Center To; 0935000		Time: 11:34:30 AM		, Page 5 of 19
RINGAAD ING RE	22 Martin Carlston Carlston Carlston Carlston	n millen der Kannan millen Stationen	o featill. A		-
			Pac	ge 1 of 3	
Reporting ID 935000	2. Inspection Number 309845071	3. Sampling Numbor	)> 9	12397049	<u>،</u> ،
. Establishment Nam	e (FCI) FEDERAL CORRECTIO TUCSON	N INSTITUTE		• .	·
. CSHO ID	6. Sampling Date	7. Shipping Date	8.D	ate Result Received	
R4531	27 APR 2006	01 MAY 200	6		
a. Job Title aborers, except	construction (8769)		0.Occupational ode	11. Number Exposed	

.2. Frequency of Exposure

Exposure Summary

	15.	16.	17.Exp	18.Exp	19.	20.	21.	22.	23.	Cital	tion :	infor	matic	n.		
14. ubstance Code	Rqstd	Smpl Type	Туре	Level	Units	PEL	Ađj	Severity	No Cit	fta	Over Exp	Eng	PPE	Trng M	ed C	OTI
0360	. Ā	P	c	0.00000	М	0.005		0								
0360	Y	P	· P	0.00000	М	0.025		0								
1620	Ŷ	·۳	C	0.00000	М	5.000		٥								
2571	Y	P	c	0.00000	М	0.100		0								
0230	. ¥	ч	т	0.00000	м	0.500		0					. •			
0360	Y	₽	т	0.00000	М	0.002		0								
0685	Y	P	т	0.00000	М	1.000		0								
0720	Y	P	т	0.00000	M	0.100		0								
0731	Y	P	т	0.00000	м	0.100		0								
1520	Y	P	т	0.00000	м	10.000		0 .				•				
1790	¥	P	' T	0.00000	м	15.000	. •	0	·							
1840	Y	P	т	0.00000	м	1.000		0								
2610	Y	P	т	0.00000	м	5.000		0								
C141	Y	P	T	0.00000	м	0.005		0								
1591	Y	Р	т	0.00000	м	0.050		0								

٩

The T. H. is free to make changes on the Form 91B and submit them directly to TMTS

a. Seals Intact		Date Y
b. Rec'd In Lab	LLD	02 MAY 2006
c. Rec'd by Anal.	BJA	0.3 MAY 2006
d. Anal. Completed	BJA	05 MAY 2006
e. Calc. Checked	DE	08 MAY 2006
f. Supr. OK'd	KVO	08 MAY 2006
0.14		
	<ul> <li>b. Rec'd In Lab</li> <li>c. Rec'd by Anal.</li> <li>d. Anal. Completed</li> <li>e. Calc. Checked</li> </ul>	b. Rec'd In Lab LLD c. Rec'd by Anal. BJA d. Anal. Completed BJA e. Calc. Checked DE f. Supr. OK'd KAO

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912397049

Reporting Limits for Wipe Samples (ug): Re 0.2 Cd 1.0 Co 5.0 Pb 10.0 Zn 50.0 Cr 20.0 Fe 50.0 Mn 5.0 Mo 50.0 Ni 50.0

lampling Number:

From: Salt Lake Technical Center To: 0935000

CYNIPALMON NAM ALYNAN ARAL N

1872) <del>-</del> 1873

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Sb 50.0 V 3.0

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No field blank was submitted for wipe samples P89938, P89940-P89944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

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-	er Semula Na	1289	037																					
	Sample No. s/Type)	461																		•				-
3	0. Analyte			31.	Ana	lyslı	ыR	ເອຍແ	lts/	32.	San	wple.	lucl	uded	in o	Jalou	ılat.	Lous	οſ					
230	Antimony and Compounds (as Sb)	М	ND									•										·		
	Beryllium and Beryllium Compounds (as Be) Chromium,	М	ND			·																-		· ·
	Metal and Insoluble Salts	М	ND																					
	Cobait, Metal, Dust and Fume (as Co)	м	ND																				•	
	Copper Fume (as Cu)	M	ND																					
	irən Oxidə Fume	м	ND																				۰.	
	Lead, Inorganic (as Pb)	М	ŃD	· .						•														
20	Manganese Fume (as Mn)	м	ND																					
1	Compounds	м	ND						•															
40 l 1	rompounds	M	ND			•																		
ו בי f	as Ni) /anadium iume (as /205)	M	ND						•															
	inc Oxide une	M	ND																					
1 0	admium .	uni	2115	-															·		•			
	ı	VI	ND																					

From: Salt Lake Technical Center, To: 0935000

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### Date: 5/10/2006 Time: 11:34:30 AM

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Because the results for air samples are used in further calculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for wipe samples and for bulk material samples justify rounding results to no more than two significant figures.

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Salt Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

33	. Analyte Code SAE Value	Loipe Sample Results
	0230 0.1035	p - sample Kesults
	0360 0.0947	
	0685 0.0930	
	0720 0.0991	
	0731 0.0995	
	1520 0.0970	
	1591 0.0920	
	1620 0.0935	
	1790 0.0966	
	1840 0.0909	
	2571 0.0936	
	2610 0.0939	/
	C141 0.0981	

	MILLIORAMS PER LITER (URINE)	U	MICROGRAMS PER DECILITER (BLOOD)
3	PTCO CURTES PER LITTER (RADON GAS)	P	PARTS PER MILLION
3	FIBERS PER CUBIC CENTIMETER	x	MICROGRAMS
শ	MILLIGRAMS FER CUBIC METER	*	PERCENT
ł.	MILLIGRAMS	E	FIBERS PER MM2
N	NONE	G	MILLION PARTICLES PER CUBIC FOOT (MPPCF)
3m/s	Bar Meters per Second		
ND '	The results are below the detection limits.		

malyte codes are chosen by the laboratory. The I. II. should review them for applicability. if there are any nestions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may have sampled for dust).

### Sampling Number: 912397049

	Fechnical Center To: 09			Date:	5/10/200	6 Time:	11:34:30		HAT IL C. LIN	Page 8 of 1	9
								Page 1			
Reporting ID 9350		nspection Number 845071			Sampli imbor	ng	$\triangleright$	912	39705	6	
. Establishment. 1		DERAL CORRECTI	on in	ISTITUTE	<u> </u>						
. CSHO ID	6. Sampling	] Date	7.	Shipping I	ale		1	8.Date 1	Result Recei	ived	
R4531	27	APR 2006		01	MAY 2	006			. L		
. Job Title						10.00	ccupati	onal	11. Number	Exposed	

Laborers, except construction (8769) .2. Froquoncy of Exposure

Exposure Summary

	15.	16.	17.Exp	18.Exp	19.	20.	21.	22.	23.	Cital	tion :	Infor	matic	m		
14. Substance Code	Rqstd	Smpl Type	Туре	Level	Units	PEL	Adj	Severity	No Cit	FTA	Over Exp	Eng	PPE	Trng	Međ	OTH
0360	Y	P	С	0.00000	M	0.005		Ò								
0360	Y	P	P	0.00000	м	0.025		0								
1620	۲	P	с	0.00000	М	5.000		0								•
2571	Y	P	C	0.0000	М	0.100		0								
0230	x	Ч	т	0.00000	м	0.500		0								
0360	Y	P	т	0.00000	м	0.002		0								
0685	Y	P	T	0.00000	м	1.000		0								
0720	Y	P	T	0.00000	м	0.100		0							· .	
0731	Y	P	т	0.00000	м	0.100		0								
1520	Y	P	T	0.00000	м	10.000		0								
1790	¥	ų	ч	0.00000	м	15.000		.0								
1840	Y	P	т	0.00000	М	1.000		0								
2610	Y	P	т	0.00000	М	5.000		0								
C141	Y	P	т	0.00000	м	0.005		0								
1591	٣	<b>P</b> `	Т	0.00000	М	0.050		0							•	

I'WA calculated on actual time sampled

The T. H. is Free to make changes on the Form 91B and submit them directly to IMTS

	-	Init.	Date Y	9		
Rec'd In 3	Lab	LLD	02	MAY	2006	
Rec'd by	Anal.	BJA	0.3	MAY	2006	
Anal. Com	pleted	BJA	05 1	MAY	2006	
Calc. Che	cked	DE	08 1	MAY	2006	
Supr. OK'	đ	КУО	08 1	YAM	2006	
	eals Intac Rec'd In 3 Rec'd by Anal. Comy Calc. Che	hain of Custody eals Intact Rec'd In Lab Rec'd by Anal. Anal. Completed Calc. Checked Supr. OK'd	eals Intect Rec'd In Lab Rec'd by Anal. BJA Anal. Completed DE	sals Intact     Y       Rec'd In Lab     LLD     02       Rec'd by Anal.     BJA     03       Anal. Completed     BJA     05       Calc. Checked     DE     08	sals Intact     Y       Rec'd In Lab     LLD     02 MAY       Body Anal.     BJA     03 MAY       Anal. Completed     BJA     05 MAY       Calc. Checked     DE     06 MAY	Pails Intact     Y       Rec'd In Lab     LLD     02 MAY 2006       Rec'd by Anal.     BJA     03 MAY 2006       Anal. Completed     BJA     05 MAY 2006       Calc. Checked     DE     08 MAY 2006

Reporting Limits for Wipe Samples (ug); Re 0.2 Cd 1.0 Co 5.0 Cu 5.0 Fb 10.0 Zn 50.0 Cr 20.0 Fe 50.0 Mn 5.0 Mo 50.0 Ni 50.0

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912397056 Sampling Number:

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From: Salt Lake Technical Center To: 0935000

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Date: 5/10/2006 Time: 11:34:30 AM

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# また 50.0 V 3.0

No field blank was submitted for wipe samples 289938, 289940-P89944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

88.81

28 Sui numb	omission er	BR	IAN O	01		•		•				
	Sample No. es/Type)	P89 476	934 5 I	,								
3	0, Analyte			31.	Amalysis	Results/	32.	Sample	included	in calculati	lo ano.	
	Antimony and Compound <del>s</del> (as Sb)	M	ND									
0360	Beryllium and Beryllium Compounds (as Be)	M	ND			•						
•	Chromium, Metal and Insoluble Salt	, М	ND		,				•			
0720	Cobalt, Metal, Dust and Fume (as Co)	М	ND								•	
	Copper Fume (as Cu)	М	ND	•								
1520	lron Oxide Fume	М	ND									
1591	Lead, Inorganic (as Pb)	м	ND						• •			
	Manganese Fume (as Mn)	м	ND							•		
	Molybdenum (as Mo), insoluble Compounds (Total Dust)	М	ND.								•	
1840	Nickel, Matal and Insoluble compounds (as NI)	м	ND	•								
	Vanadium fume (as V2O5)	М	ND				,					
	Zinc Oxide Fume	M	ND									
<b>C141</b>	Cadmium	M	ND					,				

912397056 lampling Number:

### From: Salt Lake Technical Center To: 0935000

Date: 5/10/2006 Time: 11:34:30 AM

MICROGRAMS FER DECILITER (BLOOD)

MILLION PARTICLES PER CUBIC FOOT (MPPCF)

PARTS PER MILLION

MICROGRAMS

FIBERS PER MM2

PERCENT

Page 10 of 19

Page 3 of 3

Because the results for air samples are used in further calculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for whe samples and for bulk material samples justify rounding results to no more than two significant figures.

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Salt Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

¥ 13. Analyte Code	SAE Value	Luipe	Sumle	Regulte		
0230	0.1035	.,	Jee ye	2010 3		
0360	0.0947					•
0685	0.0930					,
0720 ,	0,0991		·			
0731	0.0995		,			
1520	0,0970					
1591	0.0920			. ,		
1620	0,0935					
1790	0.0966					
1840	0.0909					
2571	0.0936					
2610	0.0939	•				
C141	0.0981					

- MILLIGRAMS PER LITER (URINE)
- л. PTCO CURTES PER LITTER (RADON GAS)
- FIBERS PER CUBIC CENTIMETER
- ví. MILLIGRAMS PER CUBIC METER
- 7
- MILLIGRAMS
- NONE

lampling Number:

3M/S Bar Meters per Second

ND The results are below the detection limits.

912397056

malyte codes are chosen by the laboratory. The I. H. should review them for applicability. if there are any puestions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may ave sampled for dust).

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From: Salt La	ke Techni	cal Cente	To: 0935000	Date: 5/10/2006 Time: 11:34:30 AM									Pag	je 11 d		
	nomiteron			<b>1401 (</b>	9.0000000	2001 201 Ministra	a ne ny m	ender före etter som		. <b>1</b>	<b>itte</b> t					
										Page	1 0	£З			-	
. Reporting ID 93	5000		2. Insp 309845	ection Numb	er	3. S. Num	amplin bor	19 [.	>	91	23	97	064	4		
Est.abl   shuen	1. Name	1		······································												
		(FCI TUCS	•	AL CORREC	TION	INSTITUTE						-				
CSHO ID	1	6. 38	ampling Da	te	I	7. Shipping Da	le		1	8.Dat	e Res	ult F	eceiv	ređ		
R4531			27 APR					000				-	_			
4714JL		N		2000			AY 20						1	-		
. Job Title ot applicab	le							10.0ccu Code	patio	onal	111	. Nur	nber i	Expos	ed	
. Frequency o	f Expos	uro		······												
xposure Summar	Y						•									
	15.	16.	17.Exp	18.Exp	19.			22.	23.		tion :					
14.	-	16. Smpl Type	17.Exp Typs	18.Exp Level	19. Unite			22. Severity	1	FTA	tion : Over Exp			n Trng	Med	OTH
14. Ubstance Code	15.	Smpl				, PEL	Adj 8	Severity	No	FTA	Over				Med	OTH
- 14.	15. Rqstd	Smpl Type	Тура	Level	Unite	9 PEL 0.005	Adj s 0	Severity	No	FTA	Over				Med	OTH
14. Ubstance Code	15. Rgstd Y	Smpl Type A	Тура	Level 0.00000	<b>Unit</b> e M	9 PEL 0.005 0.025	Adj [8 0 0	Severity	No	FTA	Over				Med	OTH
14. ubstance Code 0360 0360	15. Rqstd Y Y	Smpl Type A A	Type C P	Level 0.00000 0.00000	Unite M M	9 PEL 0.005 0.025 5.000	Adj [8 0 0 0	Severity	No	FTA	Over				Med	OTH
14. ubstance Code 0360 0360 1620	15. Rqstd Y Y Y	Smpl Type A A A	Type C P C	Level 0.00000 0.00000 0.00000	Unite M M	9 PEL 0.005 0.025 5.000 0.100	Adj [8 0 0 0	Severity	No	FTA	Over				Med	OTH
14. Ibstance Code 0360 0360 1620 2571	15. Rqstd Y Y Y Y Y	Smpl Type A A A A	Type C P C C	Level 0.00000 0.00000 0.00000 0.00000	Unite M M M M M	PEL 0.005 0.025 5.000 0.100 0.500 0.002	Adj 8 0 0 0 0	Severity	No	FTA	Over				Med	OTH
14. ubstance Code 0360 0360 1620 2571 0230	15. Rqstd Y Y Y Y Y	Smpl Type A A A A A	Type C C C T T T	0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M	PEL 0.005 5.000 0.100 0.500 0.002 1.000	Adj (8 - 0 0 0 0 0	Severity	No	FTA	Over				Med	OTH
14. Ibstance Code 0360 0360 1620 2571 0230 0360	15. Rqstd Y Y Y Y Y Y Y	Smpl Type A A A A A A A	Type C C C T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M	PEL 0.005 5.000 0.100 0.500 0.002 1.000	Adj (10) 0 0 0 0 0 0 0 0 0 0 0	Severity	No	FTA	Over				Med	OTH
14. bstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731	15. Rqstd Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A	Type C P C C T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M M M M M	PEL 0.005 0.025 5.000 0.100 0.500 0.002 1.000 0.100 0.100	Adj (10) - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Severity	No	FTA	Over				Med	OTH
14. ubstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731 1520	15. Rqstd Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A	Type C P C C T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M	PEL 0.005 0.025 5.000 0.100 0.500 0.002 1.000 0.100 0.100	Adj (1000) 0 0 0 0 0 0 0 0 0 0 0 0 0	Severity	No	FTA	Over				Med	OTH
14. bstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731	15. Rqstd Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A	Type C P C C T T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M M M M M M	PEL 0.005 0.025 5.000 0.100 0.500 0.002 1.000 0.100 0.100 0.100 10.000 15.000	אַפֿן (בּ י ס ס ס ס ס ס ס ס ס ס ס ס ס ס ס ס ס ס ס	Severity	No	FTA	Over				Med	OTH
14. batance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731 1520	15. Rqstd Y Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A A A A	Type C P C C T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M M M M M M M	PEL           0.005           0.025           5.000           0.100           0.500           0.100           0.100           0.100           0.100           0.100           0.100           1.000           10.000           15.000           1.000	אַפֿן (בּ י	Severity	No	FTA	Over				Med.	OTH
14. bstance Code 0360 1620 2571 0230 0360 0685 0720 0731 1520 1790	15. Rqstd Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A A A A A A	Type C P C C T T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M M M M M M	PEL           0.005           0.025           5.000           0.100           0.500           0.100           0.100           0.100           0.100           0.100           0.100           1.000           10.000           15.000           1.000	Adj - 0 0 0 0 0 0 0 0 0 0 0 0 0	Severity	No	FTA	Over				Međ	OTH
14. ubstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731 1520 1790 1840	15. Rqstd Y Y Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A A A A A A	Type C P C T T T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Unite M M M M M M M M M M M M M M	PEL           0.005           0.025           5.000           0.100           0.500           0.100           0.100           0.100           0.100           0.100           1.000           10.000           15.000           1.000           5.000	Adj ( - 0 0 0 0 0 0 0 0 0 0 0 0 0	Severity	No	FTA	Over				Med	OTH
Ubstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731 1520 1790 1840 2610	15. Rqstd Y Y Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A A A A A A	Type C P C T T T T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Onite M M M M M M M M M M M M M M	PEL           0.005           0.025           5.000           0.100           0.500           0.100           0.100           0.100           0.100           0.100           1.000           10.000           10.000           15.000           1.000           5.000           0.005	Adj         f           .         .           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0	Severity	No	FTA	Over				Med	OTE
14. ubstance Code 0360 0360 1620 2571 0230 0360 0685 0720 0731 1520 1790 1940 2610 C141	15. Rqstd Y Y Y Y Y Y Y Y Y Y Y	Smpl Type A A A A A A A A A A A A A A A A A A A	Type C P C T T T T T T T T T T	Level 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	Units M M M M M M M M M M M M M M M M M M M	PEL           0.005           0.025           5.000           0.100           0.500           0.100           0.100           0.100           0.100           0.100           1.000           10.000           15.000           1.000           5.000           0.005	Adj         6           .         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0           0         0	Severity	No	FTA	Over				Med	OTE

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(Analytical Method)	27. Chain of Custody a. Seals Intact	Init.	Date Y
Reporting Limits for Air Samples (ug):	b. Rec'd In Lab	LLD	02 MAY 2006
Be 0.1 Cd 0.5 Co 2.5	c. Rec'd by Anal.	BJA	03 MAY 2006
Cu 2.5 Pb 5.0	d. Anal. Completed	BJA	05 MAY 2006
Zn 25.0 Cr 10.0	e. Calc. Checked	DE	08 MAY 2006
Fe 25.0 Min 2.5 Mio 25.0	f. Supr. OK'd	KVO	08 MAY 2006
NL 25.0 Sb 25.0			
V 1.5			• .
Roporting Limits for Wipe Samples (ug): Be 0.2		•	

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 Roportin

 Ref 0.2

 Cd 1.0

 Co 5.0

 Cu 5.0

 Fb 10.0

 Zn 50.0

 Cr 20.0

 Fe 50.0

 Mn 5.0

 Mc 50.0

 Ni 50.0

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lampling Number: 912397064 From: Salt Lake Technical Center To: 0935000

Date: 5/10/2006 Time: 11:34:30 AM

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Page 2 of 3

Sb 50.0 V 3.0

No field blank was submitted for wipe samples P89938, P89940-P89944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

28 Sub numb	omission er	CPU		•			•	ESK 002		IPER		ITH 00		
	Sample No.	P.89			P89		P89	941	P89		P89	943	P895	
-	o, Analyte	374	A	31.	Dan	W	Depul	W L5/ 32,	Saury	W	urluded	W	alculati	W OUN OF
0230		м	ND	<u> </u>	X	ND	X	ND	X	ND	X	ND	X	ND
0360	Beryllium and Beryllium Compounds (as Be)	М	ND		x	ND	x	ND	х	ND	x	ND	х	ND
0685	Chromium, Metal and Insoluble Salts	М	ND		x	ND	X	ND	х	ND	x	DIN D	х	ND
0720	Cobalt, Metal, Dust and Furne (as Co)	М	ND		x	ND	x	ND	X	ND	x	ND	X	ND
0731	Copper Fume (as Cu)	M	ND		x	ND	15. X	9900.	x	ND	x	ND	284.7 X	7000
1520	iron Oxide Fume	M	ND		x	ŅФ	´ <b>x</b>	ND	83.7 X	863	х	ND	21898 X	.8000
1591	Inernania (on	м	ND		х	ND	x	ND	х.	ND	x	ND	46.5 X	000
1620	Manganese Fume (as Mn)	M	ND		x	ND	x	ND	x	ND	x	ÌND	118.3 X	000
	Compounds	M	ND		x	ND	` x	ND	x	ND	x	ND	x	ND
840	compounds (as Ni)	M	ND	2	x	ND	X	ND	x	ND	x	ND	х	ND
1	Vanadium fume (as V2O5)	M	ND	. 3	x	ND	x	ND	x	ND	х	ND	х	ND
	Zinc Oxide Fume	M	ND	;	ĸ	ND	x	ND	x	ND	x	ND	2423.4 X	000
141 (	Cadmium I	VI.	ND	. )	¢	ND	x	ND	<b>x</b>	ND	 Х	ND	1.440 X	00

Sampling Number: 912397064

**199007881** 

Date: 5/10/2006 Time: 11:34:30 AM

Page 3 of 3

Because the results for air samples are used in further calculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for wipe samples and for bulk material samples justify rounding results to no more than two significant figures.

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Sait Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

33. Analyte Code	SAE Value	uste Constants 14
0530	0.1035	whe simple Desults
0360	0.0947	
0685	0.0930	
0720	0.0991	
0731	0.0995	
1520	0.0970	
1591	0.0920	
1620	0.0935	
1790	0.0966	
1840	0.0909	
2571	0.0936	
2610	0.0939	
C141	0.0981	

CONTRACTOR OF

MILLIGRAMS PER LITER (URINE)

- 2 PTCO CURTES PER LITTER (RADON GAS)
- FIBERS PER CUBIC CENTIMETER
- MILLIGRAMS PER CUBIC METER
- ۲ MILLIGRAMS
- V NONE
- BM/S Bar Meters per Second

ND The results are below the detection limits.

malyte codes are chosen by the laboratory. The I. H. should review them for applicability. if there are any mestions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may have sampled for dust).

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PERCENT FIBERS PER MM2

MICROGRAMS PER DECILITER (BLOOD)

E FIBERS PER MM2 G MILLION PARTICLES

MICROGRAMS

PARTS PER MILLION

MILLION PARTICLES PER CUBIC FOOT (MPPCF)

From: Salt Lake Tech	nical Center To: 0935000	Date: 5/10/2006	Time: 11:34:30 AM	Page 14 of 19
			Page	1 of 3
., Reporting ID 935000	2. Inspection Number 309845071	3. Sampling Numbor	) 🗇 91:	2397072
. Establ shment Name	(FCI) FEDERAL CORRECTIO TUCSON	N INSTITUTE		
. CSHO ID	6. Sampling Date	7. Shipping Date	8.Date	Result Received
R4531	27 AFR 2006	01 MAY 20	06	
). Job Title Not applicable	· · · · · · · · · · · · · · · · · · ·		10.Occupational Code	11. Number Exposed

.2. Frequency of Exposure

Exposure Summary

	15.	16.	17.Exp	18.Exp	19.	20.	21.	22.	23.	Cita	tion :	infor	matio	n		
14. Substance Code	Rgstå	Smpl Type	Туре	Level	Unita	PEL	Adj	Severity	No Cit		Over Exp	Eng	ppe	Trng	Međ	OTH
0360	Y	A	c	0.00000	M	0.005		0								
0360	Y	A	P	0.00000	м	0.025		0								
1620	Ŷ	A	a	0.00000	м	5.000		0								
2571	Y	A	C	0.00000	м	0.100		0								
0230	¥	A	Τ.	0.00000	м	0.500		0								
0360	Y	λ	т	0.00000	м	0.002		0						•		
0685	Y	A	r	0.00000	м	1.000		0								
0720	Y	A	т	.0.00000	М	0.100		0								
0731	Y	A	т	0.00000	М	0.100		0						•		
1520	Y	A	T	0.00000	м	10.000		0								
1790	¥	A	Ŧ	0.00000	м	15.000		0	-							
1840	. r	A	r	0.00000	M	1.000		0 .								
2610	Y	A ·	т	0.00000	M	5.000		0								
C141	Y	A	т	0.00000	м	0.005		0.								
1591	Y	A	т	0.00000	м	0.050		0								

IWA calculated on actual time sampled The T. H. is free to make changes on the Form 91B and submit them directly to TMTS

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26.Analyst's Comments OSHA ID-125G (Analytical Method)	27.Chain of Custody a. Seals Intact	Init. Date Y
Reporting Limits for Air Samples (ug):	b. Rec'd In Lab	LLD 02 MAY 2006
Be 0.1 Cd 0.5 Co 2.5	c. Rec'd by Anal.	BJA 03 MAY 2006
Cu 2.5 Cu 2.5 Pb 5.0	d. Anal. Completed	BJA 05 MAY 2006
Zn 25.0 Cr 10.0	e. Calc. Checked	DE 08 MAY 2006
Fe 25.0 Mn 2.5 Mo 25.0	f. Supr. OK'd	KYO 08 WAX 5000
NJ 25.0 Sb 25.0 V 1.5		

# Reporting Limits for Wipe Samples (ug); Re 0.2 Cd 1.0 Co 5.0 Cu 5.0 Pb 10.0 Zn 50.0 Cr 20.0 Fe 50.0 Mn 5.0 Mo 50.0 Ni 50.0

912397072 ampling Number:

From: Salt Lake Technical Center To: 0935000

Date: 5/10/2006 Time: 11:34:30 AM

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denstration.

### Sb 50.0 V 3.0

No field blank was submitted for wipe samples 989938, 989940-989944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

	28 Su numb	bmission Ior	SPI		BL	ANK 001	BL	ANK 002	W E	BACK	1										
		Sample No. es/Type)	P89 369		P8:	9936 A	P83	937 A	P89	938 W									·		
		0. Analyte			. Au	alysis F	leeul		Samp		uclud	ed In c	alcul	atio	ns of						
×	0230	Antimony and Compounds (as Sb)	M	ND	x	BLK	x	BLK	x	ND	τ.	رمع)	ije	2	, c	~p'	E	$\nabla_{i}$	esu	149	2
		Beryllium and Beryllium Compounds (as Be)	М	ND	x	BLK	X	BLK	x	ND			•								·
	0685	Chromium, Metal and Insoluble Salts	M	ND	х	BLK	х	BLK	x	ND										•	
(	0720	)Cobalt, Metal, Dust and Fume (as Co)	м	ND	x	BLK	x	BLK	x	ND											,
	0,731	Copper Fume (as Cu)	M	ND	x	BLK	x	BLK	20. X	1600											
(	1520	Iron Oxide Fume	M	ND	x	BLK	х	BLK	675. X	.7234		•		•							
¥,	1591	<u>Pead.</u> Inorganic (as Pb)	М	ND	х	BFK -	x	BLK	13.I X	6000			÷	•							
	1620	)Manganese Fume (as Mn)	М	ND	x	BLX	x	BLK	5.9 X	500											
	1790	Molybdenum (as Mo), Insoluble Compounds (Total Dust)	М	ND	x	BLK	x	BLK	x	ND			,								
		Nickel, Metal and Insoluble compounds (as Ni)	М	ND	<b>X</b> .	BLK	x	BLK	x	ND											
	2571	Vanadium fume (as V205)	М	ND	x	BLK	х	BLK	х	ND											
	2610	Zinc Oxide Fume	М	ND	x	BLK	x	blk	599.8 X	209											
×	C141	Cadmium	М	ND	х	BLK	x	BLK	3.07 X	700					-	,					

Jampling Number: 912397072

Date: 5/10/2006 Time: 11:34:30 AM

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Page 3 of 3

Because the results for air samples are used in further calculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for wipe samples and for bulk material samples justify rounding results to no more than two significant figures.

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Salt Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

3. Analyte Code	s SAE Value	Wipe	C. a	$L$ $\nabla$	> M			
0230	0.1035		- Sunp	e e	esotte	Ś		·
0360	0.0947					-	1	
0685	0.0930							
0,720	0.0991							
0731	0.0995							
1520	0.0970							
1591	0.0920							
1620	0.0935				•			· · ·
1790	0.0966							
1840	0,0909							
2571	0.0936		•					
2610	0.0939							
C141	0.0981		•				,	
								·····

- MILLIGRAMS PER LITER (URINE)
- з PTCO CURTES PER LITER (RADON GAS)
- FIBERS PER CUBIC CENTIMETER
- MILLIGRAMS PER CUBIC METER
- Ľ MILLIGRAMS
- NONE v.

ampling Number:

3M/S Bar Meters per Second

- MICROGRAMS PER DECILITER (BLOOD)
- P PARTS PER MILLION
- x MICROGRAMS
- \* PERCENT
  - FIBERS PER MM2
- G MILLION PARTICLES PER CUBIC FOOT (MPPCF)

ND The results are below the detection limits.

912397072

malyte codes are chosen by the laboratory. The I. H. should review them for applicability. if there are any fuestions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may ave sampled for dust).

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From: Salt Lake Tech	nical Center To: 0935000	Date: 5/10/2006 Ti	ime: 11:34:30 AM	Page 17 of 19
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Control of the Source Control of the Sour			Page 1 of 3	
., Reporting ID 935000	2. Inspection Number 309845071	3. Sampling Numbor	> 9123970	80
. Establishment. Nam	+ (FCI) FEDERAL CORRECT: TUCSON	ION INSTITUTE		÷ .
. CSHO ID	6. Sampling Date	7. Shipping Date	8.Date Result Re	ceived
R4531	27 APR 2006	01 MAY 200	6	
Job Title Jot applicable			U.Occupational 11. Numb ode	per Exposed

Exposure Summary

	15.	16.	17.Exp	18.Exp	119.	20.	21.	22.	23.	Cita	tion :	infor	matic	'n		
14. Substance Code	Pasta	Smpl Type	Туре	Level	Unite	Pel		No Cit		over Exp	Eng	PPE	Trng	Med	OTH	
0360	Y	A	c	0.00000	. м	0.005		0								
0360	Y	A	P	0.00000	М	0.025		0								
1620	Y	А	Ċ	0.00000	м	5.000		0								
2571	Y	A	C	0.00000	м	0.100		0								
0230	Y	А	` T	0.00000	м	0.500	•	0								
. 0360	Y	л	T	0.0000	м	. 0.002		0								
0685	Y	A	т	0.00000	м	1.000		0								
0720	¥	A	т	0.00000	м	0.100		0								
0731	· Y	A	т	0.00000	м	0.100		0								
1520	Y	A	T	0.00000	м	10.000		0								
1790	¥	A	ч	0.00000	M	15.000		Ū								
1840.	Y	A	T	0.0000	м	1.000		0	•							
2610	Y	A	T	0.00000	м	5.000		0								
C141	Y	A	T.	0.00000	м	0.005		0								
1591	Y	A	T	0.00000	м	0.050		0								

IWA calculated on actual time sampled

The T. H. is Free to make changes on the Form 91B and submit them directly to TMTS

26 Analyst's Comments OSHA ID-125G (Analytical Method)	27.Chain of Custody a. Seals Intact	Init.	Date
Reporting Limits for Air Samples (ug):	b. Rec'd In Lab	LLD	02 MAY 2006
Be 0.1. Cd 0.5 Co 2.5	c. Rec'd by Anal.	BJA	03 MAY 2006
Cu 2.5 Cu 2.5 Pb 5.0	d. Anal. Completed	BJA	05 MAY 2006
Zn 25.0 Cr 10.0	e. Calc. Checked	DE	08 MAY 2006
Fe 25.0 Mn 2.5	f. Supr. OK'd	KVO	08 MAY 2006
Mo 25.0 Ni 25.0		I	
Sb 25.0 V 1.5			

Reporting Limits for Wipe Samples (ug); Re 0.2 Cd 1.0 Co 5.0 Cu 5.0 Pb 10.0 Zn 50.0 Cr 20.0 Fe 50.0 Mn 5.0 Mo 50.0 Ni 50.0

Sampling Number: 912397080 From: Salt Lake Technical Center To: 0935000

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Date: 5/10/2006 Time: 11:34:30 AM

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### Sb 50.0 V 3.0

No field blank was submitted for wipe samples P89938, P89940-P89944, so results could not be blank corrected. A laboratory media blank co-analyzed with these samples was none detected for all analytes.

	mission	STA		17												
numbe 29 Lab	er Sampie No.	P89		• •												
(Minute	s/Type)	426	А													
3	0. Analyte			31.	Analysi	s Result	ъ/ 32.	Sample	Included	1n	calcu	lations	10	-		
0230	Antimony and Compounds (as Sb)	M	ND													•
0360	Beryllium and Beryllium Compounds (as Be)	М	ND										*.	•		
0685	Chromium, Metal and Insoluble Salts	M	ND													
	Cobalt, Metal, Dust and Fume (as Co)	M	ND											÷		
	Copper Fume (as Cu)	м	ND						· .						· .	
	iron Oxidə Fum e	М	ND													
1591	Lead, Inorganic (as Pb)	М	ND		• •				•							
	Manganese Fume (as Mn)	M	ND													
	Molybdenum (as Mo), insoluble Compounds (Total Dust)	M	ND.													
(	compounds (as Ni)	М	ND		· ·						•			•	. •	
1	203)	М	ND													•
	Zinc Oxide Fume	M	ND													
C141 (	Cadmium	M	ND													

Jampling Number: 912397080

Date: 5/10/2006 Time: 11:34:30 AM

Page 3 of 3.

Because the results for air samples are used in further celculations, the number of figures reported in section 31 may not reflect the actual precision of the analysis. Calculated confidence limits (UCL & LCL) should be rounded to no more than three significant figures. The precision of analysis for wipe samples and for bulk material samples justify rounding results to no more than two significant figures.

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for the calculations. Blank values are reported for reference only. Appropriate blank corrections have been applied to the samples by the Sait Lake Technical Center. Blank results are less than the reporting limit(s) unless otherwise noted.

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33. Analyte Code	SAE Value
0230	0.1035
0360	0.0947
0685	0.0930
0720	0.0991
0731	0.0995
1520	0.0970
1591	0.0920
1620	0,0935
1790	0.0966
1840	0.0909
2571	0.0936
2610	0.0939
C141 .	0.0981

MILLIORAMS	PER	LITER	(URINE)	
------------	-----	-------	---------	--

- C PTCO CURTES PER LITTER (RADON GAS)
- FIBERS PER CUBIC CENTIMETER
- MILLIGRAMS PER CUBIC METER
- / MILLIGRAMS
- V NONE

lampling Number:

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- MICROGRAMS PER DECILITER (BLOOD)
- P PARTS PER MILITON
- X MI CROGRAMS
- \* PERCENT
- E FIBERS PER MM2
- G MILLION PARTICLES PER CUBIC FOOT (MPPCF)

3M/S Bar Meters per Second

ND The results are below the detection limits,

912397080

malyte codes are chosen by the laboratory. The I. H. should review them for applicability. if there are any questions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may ave sampled for dust).

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Federal Bureau of Prisons

Federal Correctional Complex

Office of the Safety Department

Tucson, Arizona 85706

May 25, 2006

### MEMORANDUM FOR CAROLYN A. SABOL, WARDEN

### PHILLIP KOESTEL, LOCAL UNION PRESIDENT

FROM: Leroy A. Smith Safety Manager

**SUBJECT:** Violation of Law, Policy, Abuse of Authority, and Master Agreement

On Thursday, April 27, 2006, at approximately 8:30 p.m., I walked the UNICOR Factory floor awaiting for Ms. Clark, OSHA Inspector and Associate Warden Roy to return from the UNICOR Warehouse. I was speaking with Ms. Michelle Strickland, when Mr. Jeff Ornstein walked towards us and requested Ms. Strickland to stop moving the gaylord boxes and shut down the forklift because the OSHA inspector and Mr. Roy are in the factory. I asked Mr. Ornstein to let Mr. Roy and Ms. Clark know that I was in the UNICOR Factory.

After Mr. Ornstein informed Mr. Roy, I heard him calling for Mr. Salazar, Executive Assistant (My Supervisor) on channel four (radio). Mr. Roy asked Mr. Salazar for an extension that he could be reached. When I approached the work station area, I observed Mr. Roy on the phone. I then proceeded to walk towards Ms. Clark, which Mr. Roy then hung up the phone and headed towards Ms. Clark and I.

Allachment #37

At this point, I informed Ms. Clark and Mr. Roy, that I have been appointed by the Mr. Koestel, Union President to be the Safety Representative for the Union. Ms. Clark stated, "that's good, I look forward to working with you." I then asked, would there be a closure meeting? Ms. Clark replied, "there won't be any closure meeting, but I will hold an exiting meeting." I them mentioned, I would like to be present during the exiting meeting and be informed of any concerns that may arise during this inspection. Ms. Clark replied, "sure you will be part of the exiting meeting."

Ms. Clark then began to speak with Ms. Strickland. Mr. Roy called me to the side and stated, "Mr. Salazar looking for you, he wants you to return to the USP immediately." I asked, are you sure Mr. Salazar is requesting for me to return to the USP? Mr. Roy replied, "yes." I then mentioned, that I have been monitoring channel 4, which I have not heard Mr. Salazar call for me over the radio, except when you called for Mr. Salazar. Mr. Roy then stated, "I'm just telling you what he told me."

I then mentioned, that by having me removed from the factory is clearly in violation of Executive Order 12196, OSHA 29 CFR 1960, Program Statement 1600.08, Occupational Health and Environmental Safety, Master Agreement Article 27 - Health and Safety, Section f. Mr. Roy replied, "I don't know what you are talking about!" I mentioned, that you are discriminating, interfering, and restraining me from representing the Local Union and the Safety Program during the OSHA inspection. Mr. Roy then walked away towards the OSHA inspector.

When I reported to the USP, I asked, Mr. Salazar did you request to see me? Mr. Salazar replied, "No".

On Friday, April 28, 2006, Warden Chavez request to see me in his office. During this meeting, Warden Chavez asked, "If the actions of Mr. Salazar being involved were in line with Mr. Roy's action the day before?" I replied, "No." I then mentioned, I believe Mr. Salazar was not involved with Mr. Roy's decision to have me removed from the OSHA inspection being conducted in the UNICOR Factory.

I believe Mr. Roy deliberately removed me from the UNICOR Factory to prevent me from participating as the Local Union's Safety Representative. This is the continued restraint, interference, discrimination, and reprisal I have received from Mr. Roy and other Executive staff at FCI Tucson.

If there are any questions, please do not hesitate to let me know.

cc: Western Regional Director Senator McCain Warden Chavez Executive Assistant Salazar Associate Warden Roy Safety Manager Cuestes Attorney Mary Dryovage Office of Special Counsel Office of Inspector General

### Mail Envelope Properties (44763767.DB1:7:45988)

Subject:	Executive Staff Misconduct
<b>Creation Date</b>	5/25/2006 4:01:59 PM
From:	Leroy Smith

### Created By:

lasmith@bop.gov	
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Recipients	Action	Date & Time
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	Forwarded	5/26/2006 4:57:31
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bop.gov		
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TCN0717 CC (Kenneth Coleman)		
TCN3024 CC (Phillip Koestel)	Opened	5/25/2006 9:21:53
PM		
TCN5587 (Carolyn Sabol)	Opened	5/26/2006 5:17:46
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	Forwarded	5/30/2006 8:27:44
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TCN5909 CC (Keith Roy) PM	Opened	5/25/2006 4:04:26
TCN7228 CC (Ricardo Chavez)	Opened	5/25/2006 4:06:46
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TCN9257 BC (Ramon Cuestes)	Opened	5/26/2006 7:35:08
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Page

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Subject: Creation Date From: Executive Staff Misconduct 5/25/2006 4:06:57 PM Leroy Smith

lasmith@bop.gov

Created By:

### Recipients

bop.gov PO2.BOPMSCO PM BOP0420 (Harley G. Lappin) PM

### AM

AM

Post Office PO2.BOPMSCO

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MESSAGE	
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AWROY4272006.wpd	

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Concealed Subject: Security:

To Be Delivered: Status Tracking: No 6/9/2006 Yes Standard

**Size** 320

336 162967

No None

No Standard

Immediate All Information

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Date & Time

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 5/25/2006 4:07:06 PM
 bop.gov

Date & Time 5/25/2006 4:06:57 PM

Action

5/25/2006 3:53:38 PM

Page

#37

From:Carolyn SabolTo:Chavez, Ricardo; Clifton, Daryl; Cuestes, Ramon; Gunja,Joseph;Schwalb, SteveDate:5/15/2006 1:50:01 FMSubject:OSHA Inspector Report

Kenneatha L. Clark, Compliance Officer from OSHA, telephoned today to tell us that the air and wipe samples came back with no detectable levels of problems in our UNICOR factory and warehouse. She did state one inmate's hands had a trace amount of dirt on them and recommended that we continue to encourage and remind inmates to wash their hands before leaving the factory.

she stated that she will not be issuing any citations to us as a result of her visit. There will be no report as they are only issued with negative findings.

Hijar, Sandra; Lamb, Christopher; Roy, Keith; Sibal, Phil;

Thank you all for your assistance with this visit and keep up the good work.

CC:

Winn, Louis A. BONER Z. ESFIBOZA. ..... .......... RONALD. RDUEZ, RAMIRE RTINEZ, ISMAEL, C 541 8 8 8 4 - RUIZ. 201 NORALES, ARTURO CAMPER REVIN NEWTON, DAVID ALLEN • • manus CHAVES . NANUEL ADILLA TOBY. C -----ERALTA, EMARCO ELING, FRANCISCO PEREZ, CARRILLO,A. ESCARCERA, JUAN.A RIVERA, STYRAM FROFRISCH DANIEL RASCON, MANCHUGA, 108 RGDRIAUEZ, JUAN nAH GONZALES, ANTRON' GONZALEZ.ABEL.T. GONNIE "NELSON GRAJEDA.WARIO.H .COLLIN WAYNI GREEN.RAUL . JOBEA. GUTIERREZ.LEAL.J E. HIGHAEL HARRIS, WILLIE SON. PAUL HUNTERS. EDGAR WOOSS, TYSON P JACKSON NASTIN SR. GABRIEL RRIPA, C.VILLESC. -----

Attachment C

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From:Carolyn SabolTo:Chavez, Ricardo; Clifton, Daryl; Cuestes, Ramon; Gunja,Joseph;Schwalb, SteveDate:5/15/2006 1:50:01 PMSubject:OSHA Inspector Report

Kenneatha L. Clark, Compliance Officer from OSHA, telephoned today to tell us that the air and wipe samples came back with no detectable levels of problems in our UNICOR factory and warehouse. She did state one inmate's hands had a trace amount of dirt on them and recommended that we continue to encourage and remind inmates to wash their hands before leaving the factory.

She stated that she will not be issuing any citations to us as a result of her visit. There will be no report as they are only issued with negative findings.

Thank you all for your assistance with this visit and keep up the good work.

CC: . Hijar, Sandra; Lamb, Christopher; Roy, Keith; Sibal, Phil; Winn, Louis

ALLESON, KIRK-S ARTH, TERRENCE ASSAF, FRANK-JR BERNAL, ANDRES BUELNA, OCTAVIO FEDERLE-CHRISTOPHER GAMINO, RAMON GELLERT, THOMAS GONZALEZ-LUIS HUERTA, RAMON MARRUFO, JUAN MOTTER, RONALD. PEREZ, JUAN ROCHA, G, DOROTEO STETZEL, ERIC TRIGUERAS, EFRAIN VILLA, CHARLIE YOUNG, LEE

0 0 0 8 38-008 9 5 5 06-008 12-180 0-208 5 3 8 4 8 242-0 206-112



Federal Bureau of Prisons

Federal Correctional Institution

Office of the Associate Warden

Tucson, Arizona 85706

May 23, 2006

MEMORANDUM FOR CAROLYN A. SABOL, WARDEN FROM: Jose L Sanchez JL, Associate Warden, (I&E)

SUBJECT: Training Memo

After reviewing Mr. L. Smith, Lead Safety Specialist memo dated May 17, 2006, and discussing with Mr. R. Cuestes, FCI Safety Manager, and Ms. T. Swepson, Deputy Captain. We have concluded that at the present time no training is required. <u>No hazards have</u> <u>been identified</u> during OSHA inspection and the wipe sample sampling test came back with a negative result.

Presently the only personal protective equipment required at the rear gate are the support belt and safety glasses.

CG\* Ricardo E. Chavez, Warden AW/FCC Ramon Cuestes, FCI Safety Manager Tanya Swepson, Deputy Captain

Attachment #130



Federal Bureau of Prisons

Federal Correctional Institution

Office of The Safety Department

Tucson, Arizona 85706

May 17, 2006

MEMORANDUM FOR KEITH ROY // ACTING ASSOCIATE WARDEN OF UNICOR FROM: Smith, Lead Safety Specialist

SUBJECT :

Training

It has been brought to the Safety Departments attention, that staff working the rear gate have not received any formal training on the hazards associated with computer recycling products being searched through prior to entering the institution. Also, this includes staff who man the rear gate as a relief post. UNICOR needs to identify proper personal protective equipment (PPE) for the rear gate officer. The purchasing of the PPE equipment shall be at UNICOR's expense.

I recommend UNICOR to provide each staff formal training of the hazards associate with the computer recycling products to Executive Order 12196, OSHA 29 CFR 1910.1025, Lead and 29 CFR 1910.1025, Cadmium Standards, and Bureau Policy.

If I can provide any further assistance, please do not hesitate to let me know.

cc: Ricado E. Chavez, Warden Carolyn A. Sabol, Warden Joe Salazar, Executive Assistant John Barnhart, Captain Daryl Clifton, Production Controller Ramon Cuestes, Safety Manager Phil Koestel, UNION President

Attachment # 35



Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

### July 26, 2007

MEMORANDUM FOR JOSE SANCHEZ, ASSOCIATE WARDEN OF UNICOR

FROM:

Leroy A. Smith, Safety Manager

**SUBJECT:** Training

This is a second request to have the staff working the rear gates receive formal training on the hazards associated with computer recycling products being searched through prior to entering the institution(i.e., Harmful Dust etc.). This was initially requested on May 17, 2006, which the Executive staff disapproved. Also, this should include staff who man the rear gate as a relief post. UNICOR should identify proper hygiene and personal protective equipment (PPE) for the rear gate officer and ensure this training is properly documented. The purchasing of the PPE equipment and training shall be at UNICOR's expense.

I recommend UNICOR to provide each staff formal training on the proper hygiene and hazards associate with the computer recycling products to comply with OSHA 29 CFR 1910.1025, Lead and 29 CFR 1910.1025, Cadmium Standards, OSHA 1910, Subpart H & Z, Hazardous Materials/Toxic and Hazardous Substances, and Bureau Policy.

If I can provide any further assistance, please advise.

cc: Ricado E. Chavez, Warden Louis W. Winn, Warden Keith Roy, Associate Warden John Barnhart, Captain UNION President

Attachment F

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From:	Leroy Smith
To:	Sanchez, Jose
Subject:	Training Memo Response

Mr. Sanchez,

I want to thank you for providing document dated May 23, 2006, which appears to respond to my awareness training concerns for the rear-gate officers when they search the computer recycling trailers. I have the following concerns with the document:

The document reads - No hazards have been identified during the OSHA inspection and the wipe sample sampling test came back with a negative results.

Note: In Ms. Sabol's document it reads - that the air and wipe samples came back with no detectable levels of problems in our UNICOR factory and warehouse.

My professional interpretation to this statement - the air and wipe samples were below the OSHA action level and/or permissible exposure limit. This does not mean that the wipe sampling tests came back with negative results. This is why it's so important for UNICOR and the Agency to request for a copy of the OSHA air and wipe sampling results for our records, which will allow us to notify our staff and inmate workers of the individual personal air and wipe sampling results.

Note: 1. On June 20, 2006, ACT Environmental Incorporated conducted air, personal, and wipe sampling tests, which cover the same and other areas of the factory and warehouse that OSHA conducted their own sampling results. On page 2 - personal air sampling was conducted on inmates Caldera and Nichols, which shows low concentration levels of barium, magnesium, zinc, sodium, iron, and calcium. Also, inmate Caldera had traces of lithium, titanium, and manganese, which inmate Nichols has individual traces of copper as well.

2. Air sampling results showed low concentrations of barium air sampling west area, east area and crusher bailer area, cadmium in the east area, lead in the east area and other metals etc.

3. The wipe sample results showed low concentrations of barium at the east bailer, east disassembly work bench, front of transport trailer, rear of transport trailer, east CPU sorting area benches at warehouse, cadmium at the east disassembly work bench, rear transport trailer, and copper at the east bailer, east disassembly work bench, rear of transport trailer, and east CPU sorting area benches at bailer, east disassembly work bench, rear of transport trailer, and east CPU sorting area benches at warehouse, and other metals etc, which were above the lab reporting limit.

The OSHA and ACT air and wipe sampling were conduct within one to two months of each other. When the rear-gate officer searches the transport trailers, they are required to go into the trailer from rear to front and back again. When the recycled material is disturbed, this potentially allows the hazardous metals to become airborne. The metals potentially remain in the officer hair and on their clothes as well, which proper hygiene procedures at work will not prevent this material from being transported home with the employee. We all know that OSHA clear mentions that even low concentration of exposure may still health affects etc.

Note: I still strongly recommend the toxic substance metal awareness training be provide to the rear-gate officer on a quarterly basis or put something in their post-orders. Also, I would recommend some type of protective clothing to be provided to the rear-gate officer, which will help reduce the potential transfer of the hazardous metals to the employee's home.

If there are any question or if I can be of any assistance, please advise.

CC: askdoj@usdoj.gov; BOP-HRM/OMBUDSMAN~, BOP-HRM/OMBUDSMAN~; Chavez, Ricardo; Clements, John; Cuestes, Ramon; Humm, Randall; Lappin, Harley G.; McFadden, Robert;

Attachment G

Leroy Smith - Re: Respond to July 26, 2007, Memo

From:Leroy SmithTo:Sanchez, JoseSubject:Re: Respond to July 26, 2007, Memo

Mr. Sanchez,

Thank you for your response, but we must all read the entire report more closely. It is recommended that you read the air and wipe sampling results as well, before making a determination that no hazardous metals were found. This statement would not be true. There were low concentrations of hazardous metals found in several areas throughout the factory, transport trailer and UNICOR warehouse. I provided you some additional information in my August 1, 2007, memorandum, which was sent to you and the Executive staff for review. I will provide technical advice and assistance, when you have any questions or concerns in your development of UNICOR's Awareness Training guide.

. ... . ....

If you read the August 1, 2007, memorandum and still have any questions or concerns, please advise.

>>> Jose Sanchez 8/2/2007 3:47 PM >>> see attachment

CC: askdoj@usdoj.gov; BOP-HRM/OMBUDSMAN~, BOP-HRM/OMBUDSMAN~; Chavez, Ricardo; Clementa, John; Humm, Randall; Lappin, Harley G.; McFadden, Robert; mdryovage@igc.org; Winn, Louis

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Attachment GZ

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lasmith@bop.gov

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Attachment - H



Federal Bureau of Prisons

Attachment #131

Federal Correctional Institution

Office of the Associate Warden

Tucson, Arizona 85706

August 1, 2007

### MEMORANDUM FOR LEROY A. SMITH, SAFETY MANAGER

/s/ FROM: Jose L. Sanchez, Jr., AW (I&E)

SUBJECT: Training

Leroy,

This is in response to your memo, dated July 26, 2007, concerning training for the Rear Gate Officer. The ACT Environmental Incorporated report concerning the air and wipe sample test cover letter, mailed to Mr. Cuestes on July 10, 2006, states, "<u>All exposures were below OSHA permissible exposure</u> <u>limits (PELs)</u>. Also, TABLE 3, that you highlighted, per the report states, "<u>All metal concentrations that were detected were</u> <u>low. The metals that were found are commonly used in paints,</u> <u>coatings, and lubricants. Samples were collected from painted</u> <u>surfaces and surfaces that were oil stained. The results of</u> <u>surface sampling do not indicate concentrations of concern."</u>

Per the note, I will need your assistance in creating or developing a training for the rear gate officer as a proactive measurement in checking the recycling material boxes. I believe you have more experience concerning the topic and suggestions for protective clothing.

I will look forward to work with you in setting up the training agenda.

Thanks.



From:	Leroy Smith
To:	Krupinski, Dale; Sanchez, Jose
CC:	Barnhart, Jonathan; brlaw@hotmail.com; Clements, John; cmcmullen@osc
Date:	3/2/2009 8:37 AM
Subject:	Re: Fwd: Rear Gate Procedure
Attachments:	Leroy Smith.vcf

As previously discussed the OSHA and other wipe sampling reports did identify hazardous metals present in the trailers, gaylord boxes and other areas in the factory. These samples were below the action and permissible level according to the OSHA standards, which means a full blown program does not have to be implemented. I have been the Safety Manager since August of 2006, which I have expressed my concerns of awareness training, hygiene procedures, ppe requirements to control the low concentrations of the hazardous metals exposure to our staff, which still may cause liver, kidney, respiratory health concerns to our staff over a longer period of time according to OSHA. It has been well documented through analytical data gather through previous operations at other institutions and most recently NIOSH reports that training should be provided to staff concerning the hazards that exist with the handling, transporting and dismanteling of Computer Unit Processors (CPUs) and Cathode Rey Tubes (CRTs). This training has never been discussed or presented to the Safety Department for review during the past three years. This training was initial supposed to be developed by UNICOR, which UNICOR Central Officer never followed through. Most recent the NIOSH report identified hazardous metals in the factory and other areas, which the results would have identified other areas throughout the Factory if the ceiling and rafters were not cleaned prior to the testing. This does not support the most recent OIA report concerning this matter as well. The Safety Department will continue to take the pro-active to ensure UNICOR meets their program goals.

Thanks.

Leroy A. Smith, Safety Manager FCC Tucson, Arizona 520-663-5190 (Office) 520-663-5189 (Fax)

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for its return to me.

>>> Jose Sanchez 2/27/2009 3:08 PM >>> Gentlemen.

in May 2008, we put together a rear gate procedure for the correctional staff that oversee the rear gate. The procedure did not get implemented due to Mr. Cuestes memo. I would like for both of you to review and add any comments to Rear Gate Procedure...This procedure is been created as a precaution. Per Mr. Cuestes, (Retire Safety Manager) memo dated May 19, 2006, "at present time no hazards have bee identified per OSHA site inspection and air sampling test with negative results.

Htchment# 132

Jose

### Mail Envelope Properties (49AB9AC9.B3A : 217 : 45988)

Subject:	Re: Fwd: Rear Gate Procedure
<b>Creation Date</b>	3/2/2009 8:37:30 AM
From:	Leroy Smith

**Created By:** 

lasmith@bop.gov

Recipients bop.gov TCNADM1.TCNDOM1 TCN1279 CC (Louis Winn)

TCN3083 CC (Jonathan Barnhart) PM

bop.gov WXR\_ADM1.WXR\_DOM1

WXR5719 CC (John Clements)

AM

- central.unicor.gov NC\_PO1.ENSD dkrupins (Dale Krupinski)
- central.unicor.gov COPO.GWPD Inovicky CC (Larry Novicky)

central.unicor.gov TUPO.LOSD jornstei CC (Jeff Ornstein)

AM

AM jsanchez (Jose Sanchez)

Action	Date & Time
Delivered	3/2/2009 8:37:30 AM
Opened	3/2/2009 8:39:45 AM
Forwarded	3/2/2009 9:57:03 AM
Retracted	3/6/2009 12:53:00
Delivered	3/2/2009 8:37:38 AM
Post Office Deleted	3/4/2009 3:08:43 PM
Opened	3/2/2009 8:53:23 AM
Deleted	3/4/2009 11:51:07
Emptied	3/4/2009 3:08:42 PM
Delivered	3/2/2009 8:37:39 AM
Replied	3/2/2009 8:37:39 AM
Opened	3/2/2009 8:37:41 AM
Forwarded	3/2/2009 8:40:53 AM
Forwarded	3/2/2009 1:35:41 PM
Delivered	3/2/2009 8:37:37 AM
Opened	3/3/2009 8:28:47 AM
Forwarded	3/3/2009 8:34:23 AM
Delivered	3/2/2009 8:37:39 AM
Opened	3/2/2009 8:45:29 AM
Deleted	3/5/2009 10:25:54

3/5/2009 10:36:09

Opened

Emptied

3/4/2009 8:00:03 AM

From:Jeff OrnsteinTo:Sanchez, Jose; Sanchez, JoseDate:2/26/2009 3:28 PMSubject:Rear Gate ProcedureAttachments:Rear Gate Correctional Officers Training and Hazardous Materials Recognitio<br/>n Guide.doc

The Rear Gate Procedure was first created on May 12, 2008.

iAttachment # 1324

### FOH QUESTIONS FOR FCI TUSCON SAFETY SPECIALIST and/or FACTORY MANAGER February 2009

- 1. Regarding the nuisance dust respirator used by UNICOR at FCI Tuscon, is the "single strap" respirator used that is not tight fitting to the face, or is it a different type. Please describe. The single strap is what TCN 1600.8F5, Respiratory Protection calls for.
- 2. The FCI Tuscon hearing conservation program, dated October 7, 2002 states that the Occupational Safety and Health and Environmental Department will perform annual noise evaluations throughout the institution to determine which areas have noise levels above 85 dBA. Has this noise monitoring by the OSHE Dept ever been performed for UNICOR recycling operations? If so, we would like the test results.
- ✗ 3. During an OSHA inspection of April 2006, OSHA reported that UNICOR/FCI Tuscon was in the process of scheduling an industrial hygiene baseline study. Was such a study ever performed for UNICOR's recycling operations? If so, we would like the results of the study.
  - 4. In 2006, Lead Safety Specialist correspondence mentioned that inspections and walkthroughs of the factory and warehouse found occasions where dust levels were visible to the eye and where dust masks worn by workers had turned black. Please describe this in more detail. For instance, for what types of operations, conditions, and circumstances did this occur? Was the visible dust long lasting or fleeting? How frequent or infrequent was it? Does this condition still exist today?
  - 5. In 2006, Lead Safety Specialist correspondence also noted that workers must be informed of monitoring results. Were workers informed and what is the process currently used to inform workers of monitoring results?

Attachment #133

Leroy Smith - Conference Call with FOH Wed. 2/25 at 8am (Tucson time)
-----------------------------------------------------------------------

From:	"Fitzpatrick, Frank G." < Frank.G.Fitzpatrick@usdoj.gov>
To:	<lasmith@bop.gov></lasmith@bop.gov>
Date:	2/24/2009 10:47 AM
Subject:	Conference Call with FOH Wed. 2/25 at 8am (Tucson time)
CC:	"Gottfried, Gary J" < Gary J Gottfried@RL.gov>, "Humm, Randall (OIG)"
	<rhumm@washdc.oig.com></rhumm@washdc.oig.com>
Attachments:	2-23-09_TUC_QuestionsforFOHRpt.doc

Mr. Smith-

Good speaking with you just now.

Per our discussion, I'd like to confirm our conference call to be held Wed. at 8am Tucson time (10am eastern). On the call for FOH will be myself and my associate, Gary Gottfried.

The call-in number is: 218-339-4300; then enter code: 352666#

I've attached a list of several questions that will be the focus of our discussion. The list may not be all-inclusive but it gives you a better idea about the kinds of things we want to talk about...

Look forward to speaking with you tomorrow.

Frank G. Fitzpatrick, CIH Senior Industrial Hygienist Federal Occupational Health c: 301-873-6137

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Subject:	Conference Call with FOH Wed. 2/25 at 8am (Tucson time)
<b>Creation Date</b>	2/24/2009 10:46:21 AM
From:	"Fitzpatrick, Frank G." <frank.g.fitzpatrick@usdoj.gov></frank.g.fitzpatrick@usdoj.gov>

Created By:

Frank.G.Fitzpatrick@usdoj.gov

### Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

### WASHDC.OIG.com rhumm CC (Randall (OIG) Humm)

### RL.gov

. .

Gary J Gottfried CC (Gary J Gottfried)

### Post Office

TCNADM1.TCNDOM1

### FilesSizeMESSAGE989TEXT.htm46822-23-09\_TUC\_QuestionsforFOHRpt.docMime.82244473

Options	
<b>Expiration Date:</b>	
Priority:	
<b>Reply Requested:</b>	
<b>Return Notification:</b>	

None Standard No None

Concealed Subject:NoSecurity:Standard

### Junk Mail Handling Evaluation Results

Message is eligible for Junk Mail handling This message was not classified as Junk Mail

### Junk Mail settings when this message was delivered

**Date & Time** 2/24/2009 10:46:21 AM

25600

Route

Junk Mail handling disabled by User Junk List is not enabled Junk Mail using personal address books is not enabled Junk iCal Mail using personal address books is not enabled Block List is not enabled From:Leroy SmithTo:Anderson, JosephSubject:Re: Recreation Office (Palo Verde)

Joseph,

I would like to know what supplies and who approved you to re-enter the rec-trailers? If there has been any additional requests for anything to come out of the rec-trailer it has not been mentioned to me. At this time any other items in the rec-trailer need to remain there and not to be disturbed. We had a window of opportunity to get rec-equipment (ONLY)out of the trailer last week. This was all ready agreed up by Management, which we will stay the course. This area needs to still be off limits to all staff and inmates, until the air sampling and bulking has been conducted. Also, until we receive analytical data stating what type of mold we are dealing with.

If there are any questions, please do not hesitate to let me know.

Thanks.

>>> Joseph Anderson 9/25/2006 3:22 PM >>>

We've been advised to commence moving supplies and equipment from the recreation trailers to the Palo Verde day room. Please advise as to whether or not we can do that and how you want that carried out. Thanks!

CC:

Chavez, Ricardo; Jones, Walter; McKissic, Marcus; Sabol, Carolyn; Szafir, Michael

allechand \$47

From:	Leroy Smith	
To:	Anderson, Joseph	
Date:	9/26/2006 8:34:03 AM	
Subject:	Re: Recreation Office (Palo Verde)	

Joseph,

During town hall we were asked by the inmate population if they could get their arts and craft items etc. Mr. Szafir and I both replied that no staff or inmates will be allowed into the rec-trailer until proper testing can be conducted. Then based off the testing results will allow us to make further decisions in how we continue to handle the current situation.

At this time according to the memorandum that was put out by Facilities and the Safety Departments, this area has be closed to all staff and inmate workers until testing can be conducted by an outside source, which is scheduled for Wednesday, September 27, 2006.

Thanks,

:04 AM >>>

We have not moved anything other than the cardio-cycles and mats but AW Szafir wanted me to start moving office equipment/supplies, files, computers to Palo Verde. I informed him that I needed to get with you first, so as not to step on your toes, before doing anything. He told me to do that then start moving everything into Palo Verde.

>>> Leroy Smith 9/26/2006 7:51 AM >>> Joseph,

I would like to know what supplies and who approved you to re-enter the

rec-trailers? If there has been any additional requests for anything to come out of the rec-trailer it has not been mentioned to me. At this time any other items in the rec-trailer need to remain there and not to be disturbed. We had a window of opportunity to get rec-equipment (ONLY)out of the trailer last week. This was all ready agreed up by Management, which we will stay the course. This area needs to still be off limits to all staff and inmates, until the air sampling and bulking has been conducted. Also, until we receive analytical data stating what type of mold we are dealing with.

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CC:

Chavez, Ricardo; Jones, Walter; Sabol, Carolyn; Szafir, Michael



Federal Bureau of Prisons

Office of the Recreation Department

Federal Correctional Complex Tucson, Arizona 85706

October 2, 2006

MEMORANDUM FOR LEROY SMITH, SAFETY MANAGER

FROM: sor of Recreation Supervis

SUBJECT: Plan of Action

This memorandum serves to inform you of my understanding concerning the meeting on September 20, 2006, with Warden Sabol. I recall Warden Sabol asking you what your plan of action was pertaining to the mold found in the Recreation Trailer. You described to her that originally you were going to have all staff and inmates removed from the trailer and have it secured. You also described your decision was based off that you were not able to locate Warden Sabol or Warden Chavez initially, which you decided to hold off until you were able to speak with them. Warden Sabol responded by telling you that she was glad you did not implement your initial plans because you have no authority to make decisions like that in her institution.

On September 20, 2006, Warden Sabol and Warden Chavez instructed AW Sanchez, AW Szafir, you and myself that no Recreation staff or inmates will be allowed to enter the Recreation Trailer. This was also discussed during the meeting on September 21, 2006, with Warden Sabol, Warden Chavez, AW Szafir, AW Jones, AW Roy, Deputy Captain, Health Services Administrator, Facilities Manager, you and myself until you received direction from the Regional and Central Offices. At this meeting you informed us that we could remove the v-bikes and yoga equipment from the trailer per

(1)

Attachant of 48

Mr. Korbelak, Central Office. You also described that Mr. Korbelak recommended the equipment to be placed out in the sun for four to eight hours and then use a disinfectant to clean the equipment. We all discussed the office equipment and other inmate items in the trailer, which we all agreed would not be removed until proper testing could be conducted. They also have not provided the recreation staff any real direction or support in conducting our normal duties in a conducive working environment.

On September 21, 2006, Warden Sabol also stated that she wanted AW Szafir to coordinate a town hall meeting in the housing units with unit team, safety, and recreation. Knowing that I was going to be off the following two days, I instructed recreation specialist Kitzman to prepare for a possible town hall meeting Thursday or Friday, on September 21-22, 2006. I also instructed him what to say and how to answer recreation related questions only.

On Sunday, September 24, 2006, recreation specialist Kitzman informed me that the town hall meeting was not conducted on Thursday or Friday. On Monday, September 25, 2006, I instructed recreation specialist Timothy Gillooly to assist with a possible town hall meeting that day. The meeting was eventually carried out after the 3:15 p.m. recall on Monday.

In addition, I was approached by AW Szafir on Monday morning, September 25, 2006, and was instructed to move office supplies, files, and computers from the trailer to the Palo Verde day room, which was being converted into an office for recreation staff. I informed him that I needed to talk to Safety prior to doing so because I did not want to break protocol especially after we were ordered not to move anything, other than the v-bikes and yoga mats, out of the trailers. AW Szafir told me to do so, then move the items into Palo Verde. I electronically mailed you about this and you responded by saying nothing goes in or out of the trailers until inspected.

On Wednesday, September 27, 2006, I asked AW Szafir if he had seen the memorandum, which he replied, Yes. I mentioned to him that I was not going to do anything until Safety gives me a green light to do so. AW Szafir responded by saying that there was a misunderstanding between you two (Mr. Smith and AW Szafir), that he (AW Szafir) did not like the attitude conveyed in the e-mail! AW Szafir then responded that he was going to meet with you to straighten things out!

(2)

I then went to the Education building, which my supervisor informed me that AW Szafir advised her of a mix-up involving the movement of trailer office supplies and equipment to Palo Verde. I informed her that there was no mix-up, which I then began to tell her what AW Szafir wanted me to do.

This memorandum should explain my concern of properly protect my staff and inmates, which I have no intentions of breaking protocol until I receive specific instructions from you regarding a plan of action on the mold currently in the recreation trailer.



Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

October 6, 2006

MEMORANDUM FOR RICARDO E. CHAVEZ, WARDEN

CAROLYN SABO WARDEN Smith, Safety Manager Lerov

FROM:

### SUBJECT: Mold Sampling Results

On September 27,2006, air and bulk sampling was conducted in the recreation trailer, lieutenants office, compound officer office, psychology, medical records, Mr. Madrid's office, mesquite unit and palo verde unit by Applied Environmental Solutions.

On October 5, 2006, the Safety Department received verbal confirmation and faxed copy addressing the air and bulk sampling results. The air sampling results showed Aspergillus/Penicillium, Ascospore, Trichoderma, Paecilomyces, and Torula in the recreation trailer. Also, the bulk sampling results showed Bipolaris/Drechslera, Stachybotrys/Memnoniella, and Alternaria, which an account of mold spores could not be determined due to heavy amounts of mold being present in the walls but are known human pathogens.

The bulk sampling results showed Stachybotrys, Aspergillus/Penicillium, and Bipolaris/Drechslera in the lieutenants office, psychology, and medical records. Also, the bulk sampling results showed Alternia and Ulocladium mold spores and Mycelial Fragments in the office of Mr. Paul Madrid.

Attachement # 49

The following precautionary measures were discussed and supported by Dave Clements, Regional Safety Administrator and Mr. Martin, Applied Environmental Solutions:

- 1. The trailers will need be temporally closed and all items in the trailers be cleaned by an outside source.
- 2. As a precautionary measure the medical records office will need to be temporally closed. Need to conduct air sampling, the crawl space in these areas need to cleaned by an outside source, and the leaks on the roof needs to be repaired.
- 3. As a precautionary measure Mr. Madrid's and Ms. Avery's office will need to be temporally closed. Need to conduct air sampling, the crawl space needs to be cleaned by an outside source, and the leaks on the roof needs to be repaired.
- Additional air and bulk sampling needs to be conducted in the lieutenants office, compound officer office, psychology, to determine the extent of the mold throughout their trailer.
- 5. As a precautionary measure no equipment or materials should be removed from the trailers until an outside source can conduct proper cleaning, which will help prevent the spread of mold spores in other areas in the institution
- 6. Abatement or demolition of the trailers may need to be considered based off the high concentrations of mold. An abatement and cleaning analysis will need to be requested from an outside source.

The precautionary measures are paramount to the safety and health of staff and inmates. The recommended trailer areas will remain closed until precautionary environmental measures can be implemented.

If there are any questions, please do not hesitate to let me know.

cc: Associate Warden, Jones Associate Warden, Sanchez Associate Warden, Roy Associate Warden, Calcote Associate Warden, Szafir Dave Clements, Regional Safety Administrator

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Management Engineering Impact Statement Vulnerability Safety	Environmental:	
Mr. Leroy Smith Bureau of Prisons, FCI Tucson 8901 S. Wilmot Rd. Tucson, AZ 85706	September 27, 2006	Mailing Address PO Box 2005 Tempe, A2 65265
		Main Office 325 E. Southern Ave., \$115 Tempe, A2 85282 Tel: (\$50) 639-7000
		Tucson Office 7017 E. 3rd St. Tucson, AJ 85710 Tel: (520) 575-7100

# Re: Mold Survey and Sampling

Dear Mr. Leroy Smith

Services

Teating

Permitting Compliance Modeling

Monitoting Hydrogeology

the samples. the prison. Below are results of the visual inspections and laboratory analysis of The purpose of this sampling was to identify mold in the specified locations of the areas requested. Please see attached floor plan for location of samples taken. samples including seventeen bulk samples and deven air cassette samples from at the 8901 S. Wilmot Road in Tucson, AZ. AES staff took twenty-eight total Per your request, on September 27, 2006 Applied EnviroSolutions Inc. (AES) staff conducted limited mold sampling at the Bureau of Prisons facility located

## I. Visual Inspections

Mold

Lead

Decontaminohion Leaking USI Risk Assessment Roining SO-14000 Support ISO-14000 Support ISO-14000 Support Asbestos

rot. Please see figures 1 & 2 for your reference. It seems that storm water soaked in through the roof and windows allowing moisture to become trapped On September 27, 2006 AES staff, conducted a visual survey and sampling of the above structures. The Annex Building consists of East Trailer and West Trailer. The East Trailer currently used as the Band, Exercise, and Arts and within the walls and floors of the building The floor in front of the entry inside the Arts & Crafts room also has noticeable noticeable rot around the toilet to the extent that the toilet was no longer stable. walls. FCI personnel stated that the musty odor and black mold growth had been and inner wall structures, below and near the windows in their cast and west time. The floor within the lattine located in the Arts and Crafts room had present on the cast wall between the windows of the exercise room for some Exercise and Arts & Crafts rooms had noticeable decay or not of the paneling Crafts rooms, and an Office. The rooms had a detectable musty odor. The Band,

Site

Assessment

Characterization Remediation

Fox (480) 820-5030 WWW.Desaticiten odmin@gesot.com Toll Free (800) 478-7611 Licensed Contractor:

199996

54450

office No bulk samples were collected from the inner office or the carpet in the Psychology office. In the psychology office stain was found and sampled from around the windows. around the windows of offices. Only bulk samples were taken from each location Psychology offices were in significantly better condition. However, stains were found Additionally, one sample was collected from the cabinets located in the lioutenant's The West Annex Building contains the Officers Station, Lieutenants Station and the

nowever, no further suspect material was found. location. Other locations were visually inspected within the reception building; office stated that "the ceiling is always wet" as is the floor directly beneath this Mr. Paul Madrid's office ceiling. The FCI staff member that provided access to this cciling, and the showers located in Palo Verde and Mesquite Housing Units and finally Additional samples were taken from the Medical Records Office ceiling, Dental Office

During the visual inspection, the inspector observed the following issues:

- Floor buckling (rotten wood) in the East Trailer and Psychology office
- Office, Denial Office and the Office of Mr. Paul Madrid. Wet carpeting and ceiling tiles in the Psychology office, Medical Records
- Musty odor in the East Trailer
- Portion of notten paneling exposed with model in the Exercise Room. Ceiling tile stains in Medical, Dental and Paul Madrid's Offices
- Discolored painted & textured surfaces throughout West Trailer.

# II. Sa ple Analysis

were transported to Fiberquant Analytical Services, a certified laboratory, for further dry wall, floor tiles, grout and oriling tiles. The samples collected from the buildings plan for your sample locations. Bulk samples were also collected from floor, paneling, comparison and ten others were taken from inside the rooms. Please see attached floor One Air Cassette sample was taken from ambient air outside of East Trailer for analysis.

and bulk samples analysis. Our color definition of Blue means mold is more than the a large amount of various mold types on them. Tables 1 & 2 show the results of the air 10 and 14) were not analyzed because accurate counts of mold spores could not be the analytical results of each sample. A few of the wall check samples (FCI-06-07, 09, Ascospore, Trichodorma, Paocilomyces, and Torula. Picase see the attached Table 1for higher indoor levels then were present in the ambient air. Aspergillus / Penicillium most indoor samples compared to the ambient air. The following types of sports had The analytical results showed that levels of Aspergillus / Penicillium, was higher in etermined due to heavy loading from inside the wall. However these samples showed

N

anything more than twice as much as the ambient air sample e.g. (PCI-06-03). Significant (Red) is for mold when it is ten times as much as the ambient air sample. ambient air but less than twice the ambient air value, moderate (yellow) means

important air samples were:

of Aspagillus/Penicillium FCI-06-01 was taken inside the Band room. Analysis found a moderate amount

Room. Analysis found a significant amount Aspergillus/Penicillium FCI-06-02 was a wall check taken from within the West wall of the Band

the remainders of the air samples are compared with FCI-06-03 was taken from the outside and is the reference air sample by which

found a significant amount of Aspergillus/Penicillium. FCI-06-04 was taken from within the East wall of the Band Room. Analysis

moderate amount of Basidiospores. FCI-46-12 was taken from within the Arts & Crafts Room. Analysis found a

FCI-06-18 was taken from the Office adjoining the Arts & Crafts Room. Analysis found a moderate amount of Aspergillus/Penicillium.

Crafts Room. Analysis found a significant amount of Aspergillus/Penicillium. PCI-46-19 was taken from within the West Wall in Office adjoining the Arts &

the bulk samples with a significant presence in the samples are Bipolaris / Drechslera, Stachybotrys / Mennoniella and Alternaria which are known human pathogens. Other species of mold were identified in the bulk samples please refer to table 2 for the analytical results of The collected bulk samples also contained various forms of mold. The types of mold

significant amount of Torula mold spores. FCI-06-05 was collected from Band Rocan West Wall. Analysis found a

moderate amount of Ulocladium mold spores PCI-06-06 was collected from Exercise Room East Wall. Analysis found a

PCI-96-08 was collected from Exercise Room flooring. Analysis found a Trace amount of Bipolarias' Decensiera mold spores

found no mold spores. FCI-06-11 was collected from Excreise Room NW corner flooring, Analysis

دي:

S

FCI-86-13 was collected from Arts & Crafts Room flooring. Analysis found a small amount of Mycelial Fragments.

found no mold spores. FCI-06-15 was collected from Arts & Crafts Room, West Window. Analysis

found a Trace amount of Bipolaris/ Drechslera mold spores. PCI-06-16 was collected from Arts & Craft Room ceiling S. Wall. Analysis

Room. Analysis found a small amount of miscellaneous mold spores. PCI-06-17 was collected from the Bathroom flooring in the Arts & Crafts

no mold spores FCI-96-20 was collected from the officers station East Window. Analysis found

found a significant amount of Stachybotrys mold spores FCI-06-21 was collected from the licutenant's station East Window. Analysis

found a significant amount Aspergillus/Penicilium. PCI-46-22 was collected from the lieutenant's station cabinet door. Analysis

Analysis found a significant amount of Stachyborrys mold spores FCI-46-23 was collected from the Psychology Main Room East Window.

FCI-46-24 was collected from the Medical Records Room ceiling. Analysis found a significant amount of Bipolaris/Drechslera spores

mold spores. FCI-46-25 was collected from the Dental Office Ceiling. Analysis found no

found no mold spores. FCI-46-26 was collected from the showers Palo Verde Housing Unit. Analysis

PCI-96-27 was collected from the showers Mesquite Housing Unit. Analysis found no mold spores.

Fragments PCI-96-28 was collected from the Office of Mr. Paul Madrid. Analyzis found small amounts of Alternaria and Ulocladium mold spores and Mycelind

III. Mold Characteristics

not particularly affected common outdoor molds that can induce allergies and asthnia; however, most people are (poisonous) effects depending on pre-existing health situations, length of exposure and In general, exposures to molds can cause allergic reactions, infections and even toxic amount of molds in the environment. Species such as Cladosporium and Alternaria are

check US EPA websites (http://www.epa.gov/mold/ and Species such as Aspergillus, Penicilium and Bipolaris/Dreschlera are capable of producing mycotoxins, which can cause a variety of health effects to human such as Type I allergies (hay fever, ashma) and Type III Hypersensitivity Pneumonitis. Please

http://www.ena.gov/iag/molds) for more information about characteristics of molds.

# IV. Conclusions and Recommendations

walls of the structure allowed mold to grow over time. rain and remained trapped within the walls of the Trailer. This moisture within the walls of the Trailer. Moisture for the mold has penetrated the roof and windows, by the East Trailer in the Amer. Buildings. The main problem appears to be the East and West AES staff collected eleven Air Cassette samples and seventeen bulk samples in the buildings as shown on the attached maps. The worst area of the mold seems to be the

to rain water leakage The West trailer in the Annex Buildings appeared to be vulnerable around the windows

growth inside therefore, AES recommends the following measures: The laboratory results and visual inspection of the buildings showed evidence of mold

that all items in the rooms in this Trailer be professionally cleaned (remediated) mold growth. However, if the cost of all these repairs for this old trailer is too significant and need to be repaired in order to stop further water leaks and future and the mot in all rooms. Physical damage to the trailer walls and floor seem before they are relocated to a new location. high, then FCI may save money by demolishing the trailer. AES recommends significant quantities. These molds were due to water leaks from the windows The East Trailer, in the Annex Building, showed dangerous moids in

professionally cleaning the affected areas collected from the window sills. It appears that these mold growth was caused amounts. The samples were from the Psychology Office and Middle Office by leaks from the windows. AES recommends repairing the leaks and Bulk samples from the west Trailer showed Stachybourys in significant

(A

There were Cladosporium type spores that can cause allergies and intensify asthum. This cabinet door is adjacent to the HVAC return vent and we are suspecting that the mold growth may have been caused by condensation from the vent. AES recommends cleaning the cabinet and air duct by a professional contractor. Another bulk sample was taken from inside the cabinet door in the Lt's Office.

the crawl space above the ceiling. Bipolatis/Drechstera mold spores from the bulk sample taken from the ceiling tile. This mold type is an allergenic and may cause hay fever and asthma. AES recommends repairing the leaks from the roof and cleaning the affected areas in ų Regarding the Medical Records Room, AES staff discovered

4 above the ociling be professionally cleaned. FCI-06-28). AES recommends repairing the leak on the oriling then crawl space of his office. This leak from the roof had caused some mold growth (Sample Mr. Paul Madrid's Office had leaks from above the ociling tile at the center

sampling of the rooms in the West Trailer, the Medical Records Rooms and Mr. Madrid's Office. In order to save money, FCI may first repair the above leaks, ş clean the molds and then request for the sampling AES recommends, additional bulk sampling of the rooms with leaks, air

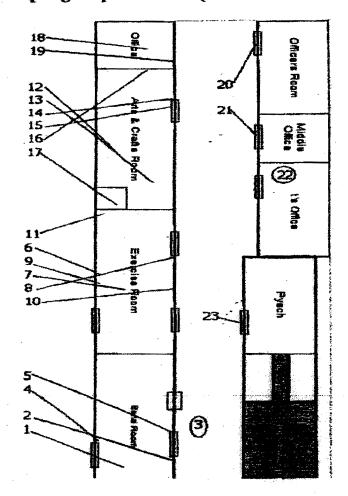
provide status of mold abatement effectiveness. P Request a professional contractor to conduct post-abatement sampling to

abatement procedures. AES is a qualified professional contractor to conduct mold related services including abatement. If you have any questions regarding this report, please do not hesitate to contact AES at (480) 839-7000. Therefore, the amount of molds can increase, unless it is ceased immediately by proper Please note that the growth rate of mold is a function of time, temperature and moisture.

Thank you.

Sincered, W

Robert D. House Jr. [ Environmental Technician



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# Sampling Map for Annex (East and West Trailer Units)



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Table 1

#### AIR SAMPLES

TABLE 1	T	J	I					
	1			FCI-06-	FCH06-	FCI-06-	FCI-06-	
Sample Number	FCI-06-03	FCI-06-02	FCI-06-01	04	12	18	19	
	Air	Ar	Air	AF	Ar	Ax	Air	
(Туре)	Cassette	Cassette	Casselle	Cassette	Cassette	Cassette	Cassette	
Sample Location	Outdoor Ambient Air Sample	WC <b>Hend S</b> an West w <b>u</b> li	inioir Band Raon	WC East wai	Astud Crafts Fun	A&C Room Adj.Office	A&C Office WC West Wall	
Type of Spores	(Constains <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Countes/co <sup>29</sup>	(Connts/as <sup>17)</sup>	(Countsine <sup>3)</sup>	(Connesine <sup>70</sup>	Countsim
Altemaria	13							
Arthrinium								
Ascospores.	140		210					
Aspergillus / Penicillium	71	1,899	140	2400		190	1400	
Basidiospores	1600		360	1200	190	360	280	
Bipolaris / Drechslera	67			13	13	13		
Cadosponum								
Botrytis								
Chaelomium	27		13				13	
Cladosponium	1100		436		240		71	
Cercospora								• •
Curvularia	27		27	13		-		
Epicoccum				1				
Foserium								1
Mennonielle								
Nigrospora			· · · · · · · · · · · · · · · · · · ·					
Didium / Peronospora								
Paecilomyces	110	250		230			580	
Pithomyces								
Trichoderma				11000				
SmutsAllyzomycelles	53	40	27	40		27	27	-
StachyboliyaMiemnoniella		13		18				
Spegazzinia						-		
Stemphylium								
Tetrapioa		1						
<b>Forula</b>			i			49		
liocladium								
Aiscellaneous		İ	13	27	360		5800	
Aycelial Fragments			1.7					
Inclassified Conidia		ł						

Note for Air-Casertie Semples: Red and Bold: Significantly High Yellow and Boid: Mederate

WC = Wall Check



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#### **BULK SAMPLES**

TABLE I						
Sample Number	FCI-06-05	FCI-06-06	FCI-06-08	FCI-06-11	FCI-06-13	FCI-06-15
	Bulk	Bulk	Balk	Bulk	Buk	Bulk
(Туре	Sample	Sample	Sample	Sample	Sample	Sample
Somple Location	Band Room West Wall	Exercise Room- East Wall Paneling	Exercise Room Floating West W	NW Comer Bulk Flooting	Arts&Craft Room Flooring	West window
Type of Spores	100%	100%	Trace	0%	5%	0%
Alternaria					-	
Arthrinium						
Ascospores						
Aspengillus / Penicillium						
Basidiospores						
Bipolaris / Drechslera			100			
Cadosporium						
Botytis						
Sheebonium						
Cladosporium						
Cercospora						
Suvularia						
piedecum						
บรสทัพก						
<b>lemnoniella</b>						
lignospora						
Didium / Peronospora						
'aecilomyces						
ithomyces						
lusis						
inuts / Myxomycetes						
achybotrys / Memnoniela						
pegazzinia						
temphylium						
etraploa						 
onuia	98		1			
lociadium		100				
liscellaneous	2				-	÷
vcelal Fragments					100	
Inclassified Conidia						

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#### BULK SAMPLES

TABLE I		1	1		F	· · · ·
Sample Number	FCI-05-16	FCI-06-17	FCI-06-20	FCI-06-21	FCI-06-22	FCI-06-23
	Bedik	Bulk	Bulk	Bulk	Bulk	Bulk
(Type)	Semple	Sample	Sample	Sample	Sample	Semple
	Ans&Craft	Flancing	Officer's	I fe Office	Lt's Room	Pysch
Sample Location		From	Station	East	Cabinet	Main
Complex Rectange	Wall	Latine	East	Window		Room E.
			Window	TRANSPORT		Window
Type of Spores	Trace	10%	0%	60%	100%	60%
Altemaria					tance:	
Arthrinium						
Ascospores		·····				
Aspergillus / Penicillium						
Basidiospores						
Bipolaris / Drechslera						
Cadosporium					· · · · · · · · · · · · · · · · · · ·	
Boltytis						
Chaetomium						
Cladosporium				-	100	·
Cencospora						
Curvularia	1				· ·	
Epicoecum						
Fusanium						
Memnoniella						
Nigrospora						
Oidium / Peronospora	. 1					
Paecilomyces						
Pithomyces						
Rusts						
Smuts / Myotomycetes		1	1			
Stachyboliys / Memnomelia	1			100	-	100
Speciela						
Stemphylium	1				2 N	
etraploa	Ī					
lonula	T	T	1	•		
Jiocladium		1				
liscellaneous	100	100				
Aycelial Fragments	1		1		·	
Inclessified Conidia			t			

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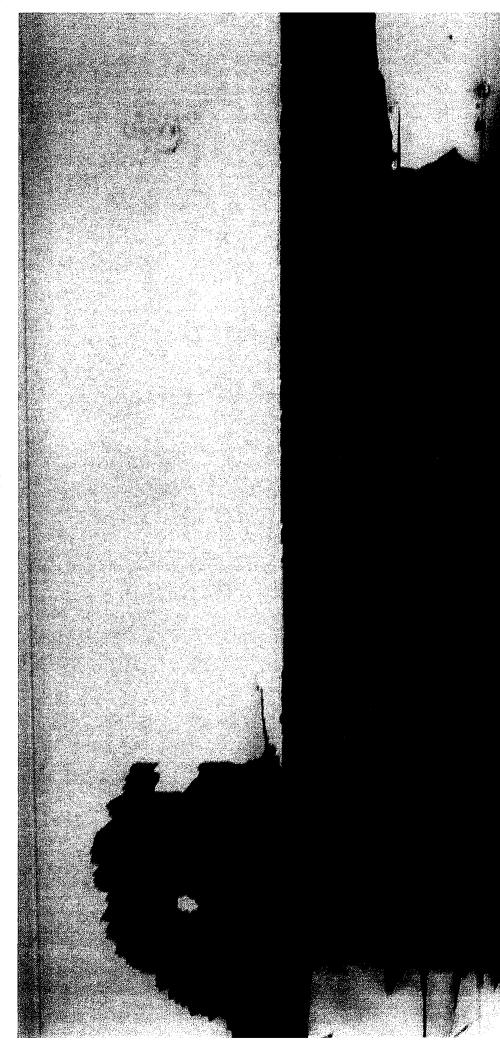
Table 2

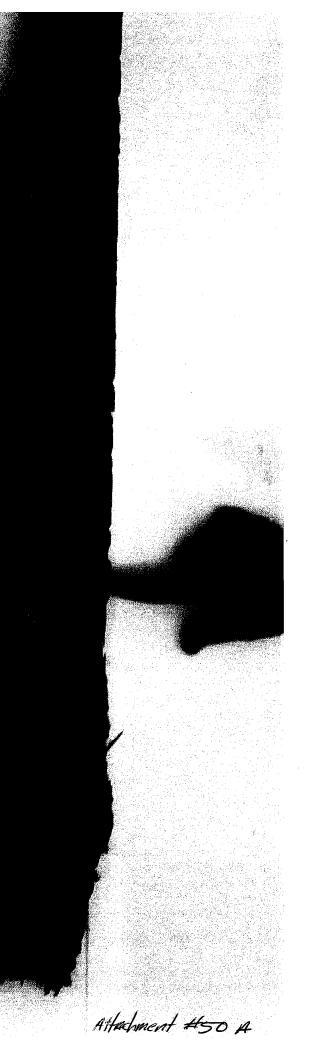
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#### **BULK SAMPLES**

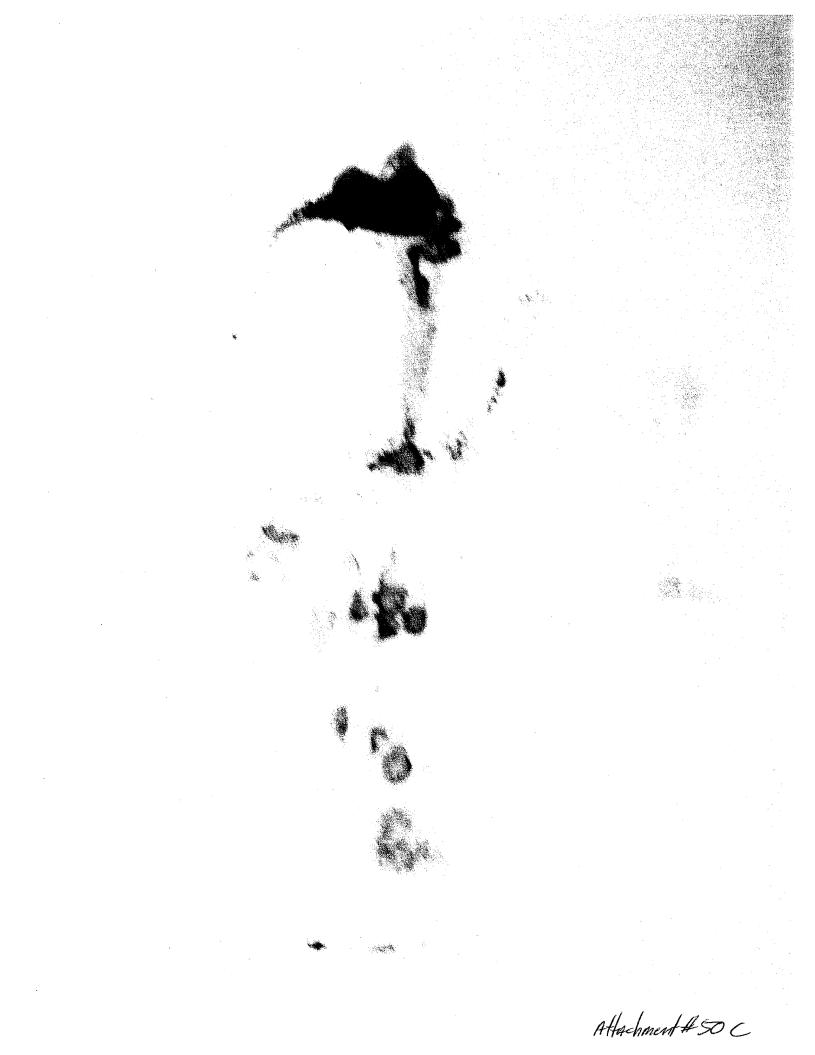
TABLE I	1	I	I	-		
Sample Number	FCI-06-24	FCI-06-25	FCI-06-26	FCI-06-27	FCI-06-28	
	Bulk;	Beik	Balk	Balk	Balk	
(Type)	Sample	Sample	Sample	Sample	Sample	
	Medical		Showers		Paul	
Sample Location	Records	Dental	Palo	Showers-	Madrid	· · · ·
	Room	Ceiling	Verde	Mesquite	Office	
Type of Spores	Trace	0%	0%	0%	%	%
Allemaria					25	
Arthrinium						
Ascospores						
Aspergilius / Penicilium						
Basidiospores						
Bipolaris / Drechsiera	100			- 1		
Cadosporium					. 1	
Botrytis						
Chentomium				žak,		
Cladosporium						
Cercospora						
Curvularia						
Epiceceun						
Fusatium						
Mennoniella						
Nigrospora						
Oidium / Peronospora				1		
Paacilomyces						
Pithonyces						
Rusts						
Smuts / Myoomycetes						
Stachybotrys / Memnonielia					1	
Spegazzinia						
Stemphylium	1	1				
Tetrapica						
Tonula	· 1					
Jiociadium	Í				40	
Miscellaneous	t t				35	
Avcelial Fragments	t i					
Unclassified Conidia	1					















#### **U.S. Department of Justice**

Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

Safety Manager

September 21, 2006

MEMORANDUM FOR CAROLYN A. SABOL, WARDEN

Gearde E. Gay RICARDO E. CHAVEZ, WARDEN

FROM:

Marcus McKissic, Facility Manager

SUBJECT:

Closure of the Recreation Trailer

As of September 20, 2006, there has been a black mold substance identified in between the Recreation Trailer walls. As a precautionary measure the recreation trailer will be closed to staff and inmates. The Facility Department and Safety Department will schedule an Independent Outside Certified Industrial Hygienist to conduct sampling. These measures are paramount to ensure the safety and health of staff and inmate workers. The following measures need to be followed:

1. Outside Independent Certified Industrial Hygienist

- 2. Random bulk sampling will be conducted throughout the Recreation Trailer, Lieutenants Office, Psychology, Compound Officer Station, Business Office, and Health Services.
- 3. Draft a proposal for corrective action to be reviewed by the Administration and Regional Office.

Attachment # 134

4. Take corrective measures of recommendations identified by the Industrial Hygienist, Facility Manager, and Safety Manager.

The recreation trailer will remain closed until the Facility Manager and the Safety Manager has conducted a thorough review of the sampling results and appropriate corrective action has been taken to abate any safety or health concerns. The Facility Manager and Safety Manager will then put in writing to all concerned, if any additional actions maybe necessary prior to re-opening the recreation trailer.

If there are any questions, please do not hesitate to let me know.

cc: Associate Warden, Jones Associate Warden, Szafir Associate Warden, Sanchez

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U.S. Department of Justice

Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

November 8, 2008

#### MEMORANDUM FOR MICHAEL B. MUKASEY UNITED STATES ATTORNEY GENERAL

FROM:

FCC Safety Manager

SUBJECT:

Reprisal, Unprofessional Conduct, Coercion, Restraint, Conspiracy, Obstruction and Interference

I Leroy A. Smith Jr., Safety Manager, at Federal Correctional Complex, Tucson, Arizona, do hereby make the following declaration without any promises or assurances:

On October 24, 2008, I spoke with Mr. Ron Day, National Safety Administrator concerning asbestos training for my new staff, which he immediately in a threatening manner tells me, you need to be careful about making untrue accusations about Mr. Flannery. I asked, what are you talking about? Mr. Day replied, the mold questionnaire you responded too. I asked, what about the questionnaire? Mr. Day then stated, "I need to change out my phone equipment, which we may be disconnected, you will need to call me back." (We were disconnected, which gave me impression the phone call was being recorded or someone was present) (See attachments #1 Questionnaire dated 9-16-08, #2 dated 10-29-08)

Mr. Day continued to talk about, he and Mr. Flannery were not aware of any mold concerns at FCI Tucson. Mr. Day went on to say, Mr. Matthew Korbelak, Former National Industrial Hygienist may have been working with Mr. Dave Clements, Regional Safety Administrator, which didn't include him or Mr. Flannery. I replied, you, Mr. Flannery and Mr. John Lee, Former Assistant National Safety Administrator were fully aware of the mold issues at FCI Tucson.

Attachment #135

I asked you, if Mr. Korbelak could come out to FCI Tucson to conduct a staff assistance visit, which you denied. Mr. Korbelak even expressed his concerns about not being onsite, which would allow him to conduct a proper risk assessment and again you, Mr. Lee and Mr. Flannery rejected his professional recommendation, you even strongly recommended that Mr. Korbelak should not provide me any guidance in writing. Mr. Day then mentioned, like I said, you should speak with your Regional Safety Administrator. Mr. Day went on to say, Mr. Flannery called and asked Mr. Clements, if he needed any assistance concerning the mold, which Mr. Clements told him no, that you and Mr. Clements were working together, with no concerns. I replied, I don't believe that conversation ever happened. Again, Mr. Day mentioned, you need to speak with your administrator.

(See attachments #3 dated 01-19-07, #4 dated 12-05-06)

Mr. Day went on to say, we at the National Safety Branch are here to help you. I replied, like you have helped me with the past and present mold concerns at FCI Tucson for the last two years or like the way you helped me at USP Atwater as well. Mr. Day then mentioned, you should talk with Mr. Clements and if he requests for our assistance we will get involved. I replied, Mr. Robert McFadden, Regional Director and Mr. Rick Batten, Regional Facilities Administrator already requested for the National Safety Branch assistance through Mr. Newton Kendig, Assistant Director, Health Services Division, which you and Mr. Flannery decided to counsel your trip at the last minute to counsel your trip to Tucson. Mr. Batten became aware of the counseled staff assist in transit, which you never contacted Mr. Clements or the Institution Safety Department. (See attachment #4 dated 12-05-06)

On October 29, 2008, Mr. Day's e-mail to me stated, "I understand that you have been working with your Regional Safety Administrator for the past two year on mold issues at FCC Tucson. If additional assistance is necessary, please follow the guidance outline in Program Statement 1600.09 concerning technical assistance visits."

1. **TECHNICAL ASSISTANCE VISITS.** The CEO or Regional Director may request technical assistance visits. Requests for Central Office technical support are routed through the Regional Director to the Assistant Director, HSD.

Mr. Robert McFadden, Regional Director did request technical assistance visit through Mr. Kendig, which prompt Mr. Day and Mr. Flannery to conduct a technical assistance visit at FCC Tucson. Mr. Kendig is Mr. Day's and Mr. Flannery's immediate supervisor. Also, according to this policy Mr. Clements would not be able to request or decline a technical assistance visit by the National Safety Branch, which conflicts with Mr. Day's account of Mr. Flannery and Mr. Clements conversation. As part of the technical assistance visit a questionnaire was sent to the Chief Executive Officers, which was provided to me for response. The Institution has not received any response from the National Safety Branch concerning the mold questionnaire, which outlines the need for a technical assistance visit, additional project funding needed for repairs or replace of roofs, conduct health and environmental risk assessments through air, bulk and wipe sampling and the cleaning of ventilation ducts throughout the institution, which currently the Regional Director has denied adequate funding.

(See attachments #5 dated 9-18-08, #6 dated 9-19-08)

I also recommended that we request the services of Dale Kruppinski, CSP, CIH, Environmental, Health and Safety Manager for UNICOR out of FCI Englewood, through Mr. Craig Apker, Complex Warden and Mr. Louis W. Winn Jr., Warden without any support. (See attachment #7 dated 07-17-08)

2. National Safety Administrator. He/she: Consults with institution Safety Managers when issues cannot be resolved at institution or regional levels.

The Regional Director requested a technical assistance visit through Mr. Kendig, which Mr. Rick Batten, coordinated the logistics with Mr. Day and Mr. Flannery.

Mr. Clements was not consulted by the Regional Director or Facilities Administrator prior to requesting for the National Safety Branch getting involved. At this point it would be acceptable for me to seek assistance and guidance from the National Safety Administrator. (Confirm with Mr. Clements)

Mr. Day and Mr. Flannery canceled the technical assistance visit without notifying the Regional Safety Administrator, Institution Chief Executive Officers or the Safety Department. (Confirm with Mr. Louis Winn, Warden and Mr. Clements)

It was Mr. Clements who called Mr. Flannery, I believe Mr. Clements asked, who contacted them (National Safety Branch) to conduct a technical assistance visit?, which I believe he replied, Mr. Batten. Also, I believe Mr. Clements was asked by Mr. Flannery, if it was necessary for him to still come out to FCI Tucson?, which he replied, I am not in a position to tell you to come or not to come out, that's up to you, Mr. Day and the Regional Director. (Confirm with Mr. Clements) Approximately October 29, 2008, Mr. Flannery e-mailed Mr. Clements concerning the technical assistance visit. I believe he wanted Mr. Clements to confirm that he told Mr. Flannery not to come to Tucson, which he denies that particular conversation ever happened. (Confirm with Mr. Clements)

Approximately October 29 or 30, 2008, Mr. Greg Myers, Environmental Attorney, Office of General Counsel e-mailed back a response to Mr. Flannery concerning Mr. Flannery's conversation with Mr. Clements and the technical assistance by the National Safety Branch. I believe Mr. Myers conveyed to Mr. Flannery, that we are trying to get Mr. Clements to commit, that Mr. Clements or FCC Safety staff have not requested any assistance from the National Safety Branch concerning mold at FCC Tucson for the past two years. (Confirm with Mr. Clements)

In Conclusion: Mr. Day's continued hostile attacks, seems to be personally and professionally motivated. Mr. Day's harassment and retaliation against Mr. Korbelak and me has continued because of the lack of action taken by Mr. Harley Lappin, Director and other Executive staff, which they continue to conspire to conceal reported allegations of reprisal, unprofessional conduct and employee misconduct. Mr. Meyer's correspondence to Mr. Flannery conveys the corruption throughout the Agency, which questions the motive, confidence and integrity of the Office of General Counsel. The retaliation, interference, harassment, coercion, obstruction and discrimination by the Agency has to come to an end. We all must comply with the law, rule and regulations that guide and protect us from reprisal.

I want to thank you for your assistance and reviewing these document to ensure appropriate action is taken. If you have any guestions or concerns, please contact me at (520) 574-7113.

cc: Harley G. Lappin, Director Robert McFadden, Regional Director Office of Inspector General Office of Special Counsel

From:	Matthew R. Korbelak
To:	Clements, John
Date:	10/12/2006 8:08:34 AM
Subject:	Mold Notes

I've reviewed the memo from Tucson and the report on the mold sampling/assessment you sent in your email. I've also spoken with a facilities staff member from Tucson and tried to contact AES, Inc.

I believe the air conditioning units, trailer construction/insulation, and leaks have provided conditions where moisture condenses around the trailers and promotes mold growth. The remediation recommendations of cleanup and leak repair may not solve the whole problem - mold growth could reoccur. HVAC timers may be necessary to allow building surfaces to dry out. Depending on the mold contamination within the walls, re-insulation may be needed and could also be good in preventing mold growth reoccurance.

It would be very helpful to see photographs of the mold in the trailers as well as to speak with the Environmental Technician that did the sampling.

It may be more cost effective to replace the trailers than to remediate them.

Attachment #136

#### FROM : Applied EnviroSolutions, Inc.

FAX NO. :480 820 5030

Oct. 05 2006 07:26PM P2



Mailing Address	Main Office	Tucson Office
PO Box 28085	325 E. Southern Ave., #115	7012 E. 3rd St.
Tempe, AZ 85265	Tempe, AI 85282	Tueson, AZ 85710
	Tel: (480) 839-7000	Tel: (520) 575-7100

#### September 27, 2006

Environmental: Management Engineering Impact Statement Vulnerability Satety

Mr. Leroy Smith Bureau of Prisons, FCI Tucson 8901 S. Wilmot Rd. Tucson, AZ 85706

#### Services:

Permitting Compliance Modeling Testing Monitoring Hydrogeology Decontamination Leaking UST Risk Assessment Training ISO-14000 Support Indoor Air Quality Asbestas Lead Mold

#### Site:

Assessment Characterization Remediation

Licensed Contractor: 150268 Re: Mold Survey and Sampling Dear Mr. Leroy Smith,

Per your request, on September 27, 2006 Applied EnviroSolutions Inc. (AES) staff conducted limited mold sampling at the Bureau of Prisons facility located at the 8901 S. Wilmot Road in Tucson, AZ. AES staff took twenty-eight total samples including seventeen bulk samples and eleven air cassette samples from the areas requested. Please see attached floor plan for location of samples taken. The purpose of this sampling was to identify mold in the specified locations of the prison. Below are results of the visual inspections and laboratory analysis of the samples.

#### **I. Visual Inspections**

On September 27, 2006 AES staff, conducted a visual survey and sampling of the above structures. The Annex Building consists of East Trailer and West Trailer. The East Trailer currently used as the Band, Exercise, and Arts and Crafts rooms, and an Office. The rooms had a detectable musty odor. The Band, Exercise and Arts & Crafts rooms had noticeable decay or rot of the paneling and inner wall structures, below and near the windows in their east and west walls. FCI personnel stated that the musty odor and black mold growth had been present on the east wall between the windows of the exercise room for some time. The floor within the latrine located in the Arts and Crafts room had noticeable rot around the toilet to the extent that the toilet was no longer stable. The floor in front of the entry inside the Arts & Crafts room also has noticeable rot. Please see figures 1 & 2 for your reference. It seems that storm water soaked in through the roof and windows allowing moisture to become trapped within the walls and floors of the building.

Fax (480) 820-5030

www.aesaz.com

odmin@cesaz.com

Toll Free (800) 478-7611

Altachment#137

nolie i Lovins Solutions, itte

The West Annex Building contains the Officers Station, Lieutenants Station and the Psychology offices were in significantly better condition. However, stains were found around the windows of offices. Only bulk samples were taken from each location. Additionally, one sample was collected from the cabinets located in the lieutenant's office. In the psychology office stain was found and sampled from around the windows. No bulk samples were collected from the inner office or the carpet in the Psychology office.

Additional samples were taken from the Medical Records Office ceiling, Dental Office ceiling, and the showers located in Palo Verde and Mesquite Housing Units and finally Mr. Paul Madrid's office ceiling. The FCI staff member that provided access to this office stated that "the ceiling is always wet" as is the floor directly beneath this location. Other locations were visually inspected within the reception building; however, no further suspect material was found.

X During the visual inspection, the inspector observed the following issues:

- 1 Floor buckling (rotten wood) in the East Trailer and Psychology office
- 2 Wet carpeting and ceiling tiles in the Psychology office, Medical Records
- Office, Dental Office and the Office of Mr. Paul Madrid.
- 3 Musty odor in the East Trailer
- 4 Portion of rotten paneling exposed with mold in the Exercise Room.
- 5 Ceiling tile stains in Medical, Dental and Paul Madrid's Offices
- 6 Discolored painted & textured surfaces throughout West Trailer.

#### **II.** Sample Analysis

One Air Cassette sample was taken from ambient air outside of East Trailer for comparison and ten others were taken from inside the rooms. Please see attached floor plan for your sample locations. Bulk samples were also collected from floor, paneling, dry wall, floor tiles, grout and ceiling tiles. The samples collected from the buildings were transported to Fiberquant Analytical Services, a certified laboratory, for further analysis.

The analytical results showed that levels of Aspergillus / Penicillium, was higher in most indoor samples compared to the ambient air. The following types of spores had higher indoor levels than were present in the ambient air: Aspergillus / Penicillium Ascospore, Trichoderma, Paecilomyces, and Torula. Please see the attached Table 1 for the analytical results of each sample. A few of the wall check samples (FCI-06-07, 09, 10 and 14) were not analyzed because accurate counts of mold spores could not be determined due to heavy loading from inside the wall. However these samples showed a large amount of various mold types on them. Tables 1 & 2 show the results of the air and bulk samples analysis. Our color definition of Blue means mold is more than the

2

ambient air but less than twice the ambient air value, moderate (yellow) means anything more than twice as much as the ambient air sample e.g. (FCI-06-03). Significant (Red) is for mold when it is ten times as much as the ambient air sample.

Important air samples were:

FCI-06-01 was taken inside the Band room. Analysis found a moderate amount of Aspergillus/Penicillium.

FCI-06-02 was a wall check taken from within the West wall of the Band Room. Analysis found a significant amount Aspergillus/Penicillium.

FCI-06-03 was taken from the outside and is the reference air sample by which the remainders of the air samples are compared with.

FCI-06-04 was taken from within the East wall of the Band Room. Analysis found a significant amount of Aspergillus/Penicillium.

FCI-06-12 was taken from within the Arts & Crafts Room. Analysis found a moderate amount of Basidiospores.

FCI-06-18 was taken from the Office adjoining the Arts & Crafts Room. Analysis found a moderate amount of Aspergillus/Penicillium.

FCI-06-19 was taken from within the West Wall in Office adjoining the Arts & Crafts Room. Analysis found a significant amount of Aspergillus/Penicillium.

The collected bulk samples also contained various forms of mold. The types of mold with a significant presence in the samples are Bipolaris / Drechslera, Stachybotrys / Memnoniella and Alternaria which are known human pathogens. Other species of mold were identified in the bulk samples please refer to table 2 for the analytical results of the bulk samples.

FCI-06-05 was collected from Band Room West Wall. Analysis found a significant amount of Torula mold spores.

FCI-06-06 was collected from Exercise Room East Wall. Analysis found a moderate amount of Ulocladium mold spores.

FCI-06-08 was collected from Exercise Room flooring. Analysis found a Trace amount of Bipolaris/ Drechslera mold spores.

FCI-06-11 was collected from Exercise Room NW corner flooring. Analysis found no mold spores.

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FCI-06-13 was collected from Arts & Crafts Room flooring. Analysis found a small amount of Mycelial Fragments.

FCI-06-15 was collected from Arts & Crafts Room, West Window. Analysis found no mold spores.

FCI-06-16 was collected from Arts & Craft Room ceiling S. Wall. Analysis found a Trace amount of Bipolaris/ Drechslera mold spores.

FCI-06-17 was collected from the Bathroom flooring in the Arts & Crafts Room. Analysis found a small amount of miscellaneous mold spores.

FCI-06-20 was collected from the officers station East Window. Analysis found no mold spores.

FCI-06-21 was collected from the lieutenant's station East Window. Analysis found a significant amount of Stachybotrys mold spores

FCI-06-22 was collected from the lieutenant's station cabinet door. Analysis found a significant amount Aspergillus/Penicillium.

FCI-06-23 was collected from the Psychology Main Room East Window. Analysis found a significant amount of Stachybotrys mold spores

FCI-06-24 was collected from the Medical Records Room ceiling. Analysis found a significant amount of Bipolaris/Drechslera spores.

FCI-06-25 was collected from the Dental Office Ceiling. Analysis found no mold spores.

FCI-06-26 was collected from the showers Palo Verde Housing Unit. Analysis found no mold spores.

FCI-06-27 was collected from the showers Mesquite Housing Unit. Analysis found no mold spores.

FCI-06-28 was collected from the Office of Mr. Paul Madrid. Analysis found small amounts of Alternaria and Ulocladium mold spores and Mycelial Fragments.

**III. Mold Characteristics** 

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In general, exposures to molds can cause allergic reactions, infections and even toxic (poisonous) effects depending on pre-existing health situations, length of exposure and amount of molds in the environment. Species such as Cladosporium and Alternaria are common outdoor molds that can induce allergies and asthma; however, most people are not particularly affected.

Species such as Aspergillus, Penicillium and Bipolaris/Dreschlera are capable of producing mycotoxins, which can cause a variety of health effects to human such as Type I allergies (hay fever, asthma) and Type III Hypersensitivity Pneumonitis. Please check US EPA websites (http://www.epa.gov/mold/ and

http://www.epa.gov/iaq/molds) for more information about characteristics of molds.

#### IV. Conclusions and Recommendations

AES staff collected eleven Air Cassette samples and seventeen bulk samples in the buildings as shown on the attached maps. The worst area of the mold seems to be the East Trailer in the Annex Buildings. The main problem appears to be the East and West walls of the Trailer. Moisture for the mold has penetrated the roof and windows, by the rain and remained trapped within the walls of the Trailer. This moisture within the walls of the structure allowed mold to grow over time.

The West trailer in the Annex Buildings appeared to be vulnerable around the windows to rain water leakage.

The laboratory results and visual inspection of the buildings showed evidence of mold growth inside therefore, AES recommends the following measures:

1. The East Trailer, in the Annex Building, showed dangerous molds in significant quantities. These molds were due to water leaks from the windows and the roof in all rooms. Physical damage to the trailer walls and floor seem significant and need to be repaired in order to stop further water leaks and future mold growth. However, if the cost of all these repairs for this old trailer is too high, then FCI may save money by demolishing the trailer. AES recommends that all items in the rooms in this Trailer be professionally cleaned (remediated) before they are relocated to a new location.

2. Bulk samples from the west Trailer showed Stachybotrys in significant amounts. The samples were from the Psychology Office and Middle Office collected from the window sills. It appears that these mold growth was caused by leaks from the windows. AES recommends repairing the leaks and professionally cleaning the affected areas.

5

Another bulk sample was taken from inside the cabinet door in the Lt's Office. There were Cladosporium type spores that can cause allergies and intensify asthma. This cabinet door is adjacent to the HVAC return vent and we are suspecting that the mold growth may have been caused by condensation from the vent. AES recommends cleaning the cabinet and air duct by a professional contractor.

3. Regarding the Medical Records Room, AES staff discovered Bipolaris/Drechslera mold spores from the bulk sample taken from the ceiling tile. This mold type is an allergenic and may cause hay fever and asthma. AES recommends repairing the leaks from the roof and cleaning the affected areas in the crawl space above the ceiling.

4. Mr. Paul Madrid's Office had leaks from above the ceiling tile at the center of his office. This leak from the roof had caused some mold growth (Sample FCI-06-28). AES recommends repairing the leak on the ceiling then crawl space above the ceiling be professionally cleaned.

5. AES recommends, additional bulk sampling of the rooms with leaks, air sampling of the rooms in the West Trailer, the Medical Records Rooms and Mr. Madrid's Office. In order to save money, FCI may first repair the above leaks, clean the molds and then request for the sampling.

6. Request a professional contractor to conduct post-abatement sampling to provide status of mold abatement effectiveness.

Please note that the growth rate of mold is a function of time, temperature and moisture. Therefore, the amount of molds can increase, unless it is ceased immediately by proper abatement procedures. AES is a qualified professional contractor to conduct mold related services including abatement. If you have any questions regarding this report, please do not hesitate to contact AES at (480) 839-7000.

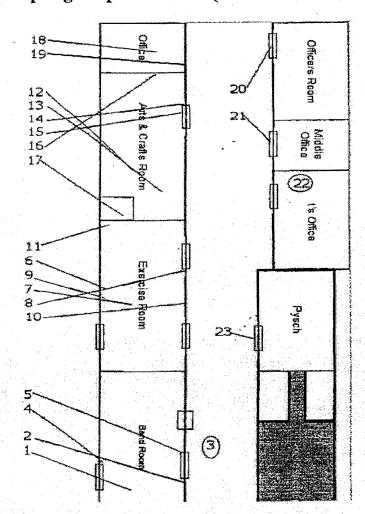
Thank you.

Sincerely

IN Hannes

Robert D. House Jr. ( Environmental Technician





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# Sampling Map for Annex (East and West Trailer Units)



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#### Table 1

#### AIR SAMPLES

TABLE 1	1		[ · · · · ·		T · · · ·	I	[	1
	1			FCI-06-	FCI-06-	FCI-06-	FCI-06-	1
Sample Number	FCI-06-03	FCI-06-02	FCI-06-01	04	12	18	19	
	Air	Air	Air	Air	Ar	Air	Air	1
(Турс)	Cassette	Cassette	Cassette	Cassette	Cassette	Cassette	Cassette	Į.
Sample Location	Outdoor Ambient Air Sample	WC Hand Rm West wall	ladoor Hand Room	WC East wall	Arts&Crafts Rm	A&C Room Adj.Office	A&C Office WC West Wall	
Type of Spores	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	Counts/m
Altemaria	13							
Arthrinium								
Ascospores	140		210	[				
Aspergillus / Penicillium	71	1,800	140	2400		190	1400	
Basidiospores	1600		360	1200	190	360	280	
Bipolaris / Drechslera	67			13	13	13		
Cadosporium		1. 1.						
Botrytis								
Chaetomium	27		13			S. C. N. S	13	
Cladosporium	1100		480		240		71	
Cercospora								
Curvularia	27		27	13				
Epicoccum								
Fusarium								
Memnoniella								
Nigrospora		<u> </u>				an an an an Daoine an an an		
Oidium / Peronospora							animia anim ni	
Paecilomyces	110	290		230			500	
Pithomyces								
Trichoderma				11000				
Smuts/Myxomycetes	53	40	27	40		27	27	
Stachybotrys/Memnoniella		13		13			and the second	
Spegazzínia	1							
Stemphylium	1	-						
Tetrapica	i			1				
Torula		Í		1		40		
llocladium	T							
Miscellaneous	1	t i i i i i i i i i i i i i i i i i i i	13	27	360		5800	
Mycelial Fragments								
Jnclassified Conidia								haran en de antikana and

Note for Air-Cassette Samples: Red and Bold: Significantly High Yellow and Bold: Moderate

WC = Wall Check

## BULK SAMPLES

TABLE 1						
Sample Number	FCI-06-05					FCI-06-15
	Bulk	Bulk	Bulk	Bulk	Bulk	Bulk
(Туре)	Sample	Sample	Sample	Sample	Sample	Sample
Sample Location	West Wall	Exercise Room- East Wall Paneling	Exercise Room Flooring West W	NW Corner Bulk Flooring	Arts&Craft Room Flooring	West window
Type of Spores	100%	100%	Trace	0%	5%	0%
Alternaria						
Arthrinium			1			
Ascospores						
Aspergillus / Penicillium			-			
Basidiospores						
Bipolaris / Drechslera			100			
Cadosporium						
Botrytis					е С	
Chaetomium						
Cladosporium						
Cercospora						A
Curvularia						
Epicoccum						
Fusarium						
Memnoniella						
Nígrospora						
Oidium / Peronospora						
Paecilomyces						
Pithomyces					, ett e stelle	
Rusts						
Smuts / Myxomycetes		ĺ				
Stachybotrys / Memnoniella		1				
Spegazzinia						
Stemphylium						
Tetraploa						
Torula	98					
llocladium		100				
Miscellaneous	2	1		1		2 <b>4</b>
Mycelial Fragments					100	
Unclassified Conidia	1	t see see al		1		

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TABLE 1						
Sample Number	FCI-06-16	FCI-06-17	FCI-06-20	FCI-06-21	FCI-06-22	FCI-06-23
	Bulk	Bulk	Bulk	Bulk	Bulk	Bulk
(Туре)	Sample	Sample	Sample	Sample	Sample	Sample
Sample Location	Arts&Craft Ceiling S. Wall	Flooring From Latrine	Officer's Station East Window	East Window	Lt's Room Cabinet Door	Pysch Main Room E. Window
Type of Spores	Trace	10%	0%	60%	100%	60%
Alternaria					trace	
Arthrinium						
Ascospores						
Aspergillus / Penicillium						
Basidiospores						
Bipolaris / Drechslera						
Cadosporium						
Botrytis	1					
Chaetomium		and sharing the				
Cladosporium					100	
Cercospora						
Curvularia						
Epicoccum						
Fusarium						
Memnoniella	-					
Nigrospora		ant free a light				
Oidium / Peronospora					Marka (Arrang	
Paecilomyces						
Pithomyces						
Rusts			1			
Smuts / Myxomycetes						
Stachybotrys / Memnoniella	1			100	2449 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 2 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244 - 244	100
Spegazzinia						
Stemphylium					n na an an Ang	
Tetraploa						
Torula				İ		
Jlocladium						
Viscellaneous	100	100				
Mycelial Fragments		1				<del>alan dan dan dan dan dan dan dan dan dan d</del>
Inclassified Conidia						an ann an ann an an an an an an an an an

## BULK SAMPLES



### **BULK SAMPLES**

TABLE 1						***********
Sample Number			the second second second second second second second second second second second second second second second s	in the second second second second	the state of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	
	Bulk	Bulk	Bulk	Bulk	Bulk	
(Type)	Sample	Sample	Sample	Sample	Sample	·
	Medical	Dental	Showers-	Showers-	Paul	
Sample Location	Records Room	Ceiling	Palo Verde	Mesquite	Madrid Office	
Type of Spores	Trace	0%	0%	0%	⁰∕₀	%
Altemaria					25	
Arthrinium						
Ascospores						
Aspergillus / Penicillium						
Basidiospores						
Bipolaris / Drechslera	100					Noise 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1997 A. 1
Cadosponum						in an
Botrytis						
Chaetomium						, and the second second second second second second second second second second second second second second se
Cladosporium						
Cercospora						
Curvularia						
Epicoccum						
Fusarium						
Memnoniella			a here a the state			
Nigrospora						
Didium / Peronospora						
Paecilomyces						
Pithomyces			1	1	1	
Rusts		1. A				
Smuts / Myxomycetes	1					
Stachybotrys / Memnonielia	1					e gan de s
Spegazzinia						
Stemphylium						
l'etraploa		le la la la la la la la la la la la la la				
Torula		1	T.			
Jlociadium	T				40	
<i>l</i> iscellarieous		1			35	
Aycelial Fragments						
Inclassified Conidia						





Mailing Address	Main Office	Tucson Office
PO Box 28085	325 E. Southern Ave., #115	7012 E. 3rd St.

Tempe, AZ 85285

October 23, 2006

Mr. Leroy Smith

8901 S. Wilmot Road

Dear Mr. Leroy Smith,

Tucson, AZ 85706

Environmental and Safety Manager

Re: Second Mold Survey and Sampling

laboratory analysis of the samples.

**I. Visual Inspections and Sampling** 

Bureau of Prisons, FCI Tucson

325 E. Southern Ave., # Tempe, AZ 85282 Tel: (480) 839-7000 7012 E. 3rd St. Tucson, AZ 85710 Tel: (520) 575-7100

#### Environmental:

Management
 Engineering
 Impact Statement
 Vulnerability
 Safety

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# Services: Permitting Compliance

- Modeling
   Testing
   Monitoring
- Hydrogeology
   Decontamination
   Leaking UST
- Risk Assessment
   Training
   ISO-14000 Support
- Indoor Air Quality
   Asbestos
   Lead
- 🗕 Mold

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Site:

Assessment
 Characterization
 Remediation

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Licensed Contractor: 150268 199996

floor plan for your reference.

the apparent roof leaks.

Per your request, on October 13, 2006 Applied EnviroSolutions Inc. (AES) staff

conducted limited mold sampling at the Bureau of Prisons Facility located at the

8901 S. Wilmot Road in Tucson, AZ. AES staff collected a total of thirty

taken. The purpose of this sampling was to identify mold in the specified

locations of the prison. Below are results of the visual inspections and

During the visual inspection, the inspector observed the following issues:

samples including seventeen bulk samples and thirteen air cassette samples

from the areas requested. Please see attached floor plan for location of samples

On October 13, 2006 AES staff, conducted a visual survey of the above location.

1. In the Psychology Offices, the Doctor's offices (shown as office A

and office B) contained visible mold growth in the HVAC ducts and

the windows. Office A, had a large (approx 4ft diameter.) weak spot

in the floor that could be rotten. Please see attached West Trailer

2. The Psychology Office A has several large stains in the carpet from

3. The Medical Office entry has a strong musty smell near the patient

waiting area. It appears that the crawl space above the drop ceiling is

utilized as the air return for the HVAC system; therefore any mold

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outbreak in the building could potentially spread throughout the building.

4. At the time of the inspection the Business Offices were having the carpeting replaced so that most of the cove base (baseboard trim) was removed. Because of this there were three areas of visible mold growth exposed and identified. The offices of the Controller and Financial Programs, and Mr. Paul Madrid's previous office.

The West Trailer consists of the Lieutenants Offices (called Compound, Records Room and Lieutenants Offices) and the Psychology Offices (three main offices and the two Doctor's offices). See attached floor plan with sampling locations. Air cassette and bulk samples were collected from the walls and offices including those not previously inspected in the Psychology Offices.

Samples were also collected from the Medical/Dental Building. Air cassettes were collected from the Medical Records room and the Dental Exam room. Additional Bulk samples were collected from the Clinical Director's Office, the examination room directly across from the Director's office and the HVAC ducts in the hallways of the Medical/Dental Building. Although there was no apparent visible signs of mold growth; there was however a strong musty odor in the Patient Waiting Room which could indicate mold growth.

Finally, the Business Offices were sampled due to high mold counts previously sampled (see mold sampling report of 9/27/06) from Mr. Paul Madrid's office. Samples were collected from Ms. Avery's Office, the Office of the Controller, the Financial Programs office, and the HVAC duct above the hallway. For more information, please see list of air and bulk samples in Table 1 and Table 2, respectively.

#### **II. Sample Analyses**

One Air Cassette sample was taken from the ambient air outside of the West Trailer for comparison and twelve additional samples were collected from inside rooms. Please see attached West Trailer's floor plan for your sample locations.

Bulk samples were also collected from floor, dry wall, and the HVAC ducts. Please see attached floor plan for your reference.

The samples collected from the structures were transported to Fiberquant Analytical Services, a certified laboratory, for further analysis. The following types of spores had higher indoor levels than in the ambient air: Aspergillus / Penicillium, Smuts/Myxomycetes, and Torula. Please see the attached Table 1 for the analytical results of each sample. A few of the samples (FCI-06-02-9 & 26) were no detect for any of the common forms of mold.

Our color definition of blue (for moderate) means mold is about twice the value of ambient air. Red color (for significant) means amount of mold is about ten times as much as the ambient air sample.

Important air samples were:

**FCI-06-02-1** was taken from the outside and is the reference air sample by which the remainders of the air samples are compared with.

FCI-06-02-13 was collected from inside air in the Doctor's office B. Analysis found a moderate amount of Aspergillus/Penicillium.

**FCI-06-02-14** was collected from a wall check in the Doctor's office B. Analysis found a significant amount Aspergillus/Penicillium.

The collected bulk samples also contained various forms of mold. The types of mold with a significant presence in the samples are Bipolaris / Drechslera, Stachybotrys / Memnoniella and Alternaria which are known human pathogens. When Alternaria and Cladosporium are present together they are a significant allergen. Other species of mold were identified in the bulk samples. Please refer to Table 2 for the location and analytical results of the bulk samples.

FCI-06-02-5 was collected from the Lieutenants Office in side HVAC duct. Analysis found a moderate amount of Cladosporium and Alternaria mold spores.

**FCI-06-02-20** was collected from the HVAC in the Medical Records Office. Analysis found a moderate amount of Alternaria and Aspergillus/Penicillium mold spores.

**FCI-06-02-23** was collected from the HVAC in the Dental Hallway. Analysis found a significant amount of Alternaria mold spores.

FCI-06-02-24 was collected from the HVAC of the Clinic Director Office. Analysis found significant Aspergillus/Penicillium mold spores.

FCI-06-02-27 was collected from the HVAC in the Business Offices. Analysis found a moderate amount of Aspergillus/Penicillium and Chaetomium mold spores. FCI-06-02-29 was collected from the base board of the Controller's Office north wall, West Window. Analysis found significant Stachybotrys mold spores.

FCI-06-02-30 was collected from Financial Programs Office, South Wall. Analysis found moderate amounts of Aspergillus/Penicillium, Stachybotrys, Alternaria and Ulocladium mold spores.

#### **III. Mold Characteristics**

In general, exposures to molds can cause allergic reactions, infections and even toxic (poisonous) effects depending on pre-existing health situations, length of exposure and amount of molds in the environment. Species such as Cladosporium and Alternaria are common outdoor molds that can induce allergies and asthma; however, most people are not particularly affected.

Species such as Aspergillus, Penicillium and Bipolaris/Dreschlera are capable of producing mycotoxins, which can cause a variety of health effects to human such as Type I allergies (hay fever, asthma) and Type III Hypersensitivity Pneumonitis. Please check US EPA websites (<u>http://www.epa.gov/mold/</u> and <u>http://www.epa.gov/iaq/molds</u>) for more information about characteristics of molds.

#### **IV. Conclusions and Recommendations**

AES staff collected thirteen Air Cassette samples and seventeen bulk samples in the buildings as shown on the attached maps.

Samples were collected throughout the west trailer including the two doctor's offices at the north end of the psychology unit which were previously not inspected. Bulk sampling particularly from the HVAC ducts shows active growth of mold spores. This is important because HVAC system can spread the spores throughout the trailer.

The Medical and Dental Building were also inspected and the Bulk samples collected showed active growth in several areas of the HVAC ducts.

The Business Offices were inspected again and due to the renovation occurring on the day of sampling obvious mold growth was uncovered behind the cove base (trim) in several offices.

Based on the laboratory results and visual inspection of the buildings, There were evidence of mold growth inside areas. Therefore, AES recommends the following measures to be considered:

1. Bulk samples from the West Trailer showed active mold spores. The samples were collected from the Lieutenant's Office and the Doctor's Offices from the HVAC. Analysis of the air samples collected from the Doctor's Offices showed significant levels of Aspergillus/Penicillium mold spores. Therefore, AES recommends cleaning the offices and the HVAC ducting by a professional contractor.

2. Regarding the Medical Records room in the Medical/Dental Building, AES staff discovered significant mold growth in the HVAC duct, specifically Alternaria and Aspergillus/Penicillium types of molds. Both of these mold types are an allergenic and may cause hay fever and asthma. There is a strong musty odor in the waiting room near the Medical Records room that crawl space should be further investigated. AES recommends repairing any leaks from the roof, inspecting and cleaning the affected areas in the crawl space above the ceiling in this building.

3. Mr. Madrid's office in the Business Offices building had leaks. This was probably started from above the ceiling tile and showed on the floor at the center. This leak that may originally started from the roof had caused some mold growth. AES recommends first repairing the leak(s), second inspecting the crawl space above the ceiling, and third cleaning all the mold professionally.

Additionally at the Business Office building, controllers and Financial Programs offices had Stachybotrys and Aspergillus/Penicillium types of molds. These molds were caused from leaks due to the nearby windows. AES recommends repairing the leaks and having the entire office area professionally cleaned.

4. AES recommends further investigation to determine the source of the mold growth in the Medical/Dental building. In order to save money, FCI may first repair the above leaks, clean the molds and then request final air sampling.

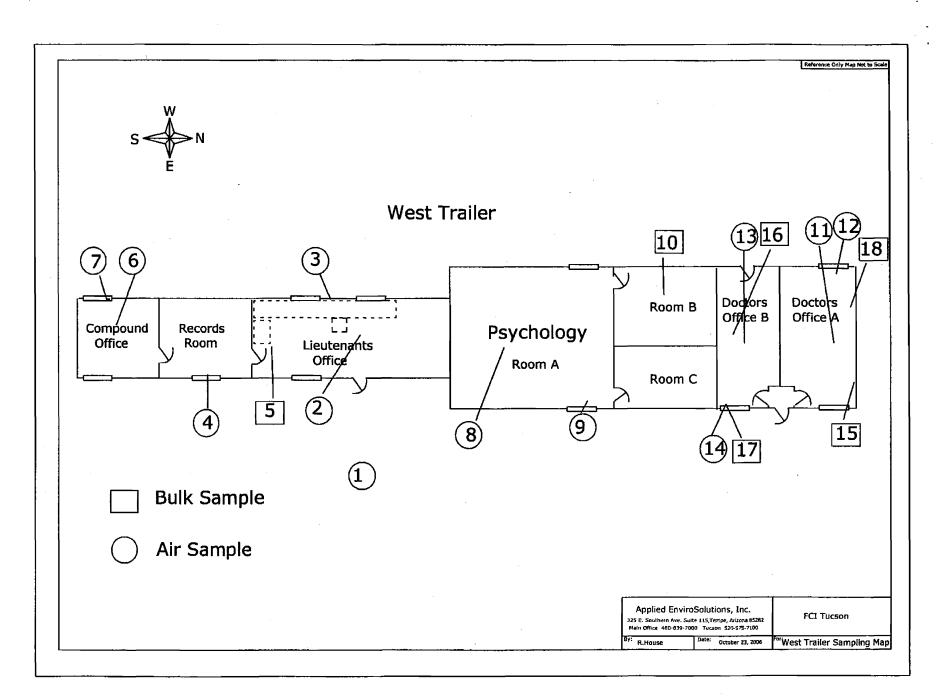
5. Request a professional contractor to conduct post repair/abatement sampling to provide status of mold abatement effectiveness.

Please note that the growth rate of mold is a function of time, temperature and moisture. Therefore, the amount of molds can increase, unless it is ceased immediately by proper abatement procedures. AES is a qualified professional contractor to conduct mold related services including abatement. If you have any questions regarding this report, please do not hesitate to contact AES at (480) 839-7000. Thank you.

Sincerely,

Robert D. House Jr.





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AIR SAMPLES		501.00					501.00	
	FCI-06-		FCI-06-02-	1	FCI-06-		FCI-06-	
Sample Number	02-1 Air	02-2 Air	3 Air	02-4 Air	02-6 Air	02-7	02-8	-
( <b>T</b>		Cassette	Cassette			Air	Air	
(Туре)	Cassette	Casselle	Casselle	Cassette	Cassette	Cassette	Cassette	
Sample Location	Outdoor Ambient Air Sample	Air Cassette, Lt's Office	Wall Check, Lt's Office	Wall Check,S.W indow Lt's Office	Compound Officer's Air	Wall Check Window, Psycholog y	Air Cassette, Psych Office	
Type of Spores	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	
Alternaria								
Arthrinium								
Ascospores								
Aspergillus / Penicillium								
Basidiospores								
Bipolaris / Drechslera	1	1						
Cadosporium								
Botrytis								
Chaetomium								
Cladosporium	18	7						
Cercospora								
Curvularia			_					
Epicoccum	-							
Fusarium								
Memnoniella						-		
Nigrospora								
Oidium / Peronospora								
Paecilomyces	-							
Pithomyces								
Trichoderma								
Smuts/Myxomycetes	1	2		1	2			
Stachybotrys/Memnoniella								
Spegazzinia								
Stemphylium								
Tetraploa								
Torula			1					
Ulocladium								
Miscellaneous				1			<u>l</u>	
Mycelial Fragments	1	3	8	4	2	9		
Unclassified Conidia								

Note for Air-Cassette Samples: Red and Bold means indoor spore count is greater than ambient air spore count

Blue and Bold indoor spore count is greater than half of the ambient air spore count,

but less than and equal to ambient air spore count

\* Indactes samples that were not analyzed due to excessive debris

Page 1 of 3

AIR SAMPLES								
TABLE I	FCI-06-	FCI-06-	FCI-06-02-	FCI-06-	FC1-06-	FCI-06-	FCI-06-	FCI-
Sample Number		02-11	12	02-13	02-14	02-19	02-21	02-
Sample Rumber						Air		
(Type)	Air	Air	Air	Air	Air	Cassett	Air	Air
(1900)	Cassette	Cassette	Cassette	Cassette	Cassette	e	Cassette	Cass
······································	Psych	Psych	Psych	Psych	Psych	Air	Dental	Madi
Sample Location	WC	Office A	Office A	Office B	Office B	Medical	Room Air	Offic
-	VVC	Air	wc	Air	wc	Records	Room Air	Ai
Type of Spores	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>	Counts/m <sup>3</sup>	Counts/m <sup>3</sup>	Counts/m	Counts/m <sup>3</sup>	Count
Alternaria								
Arthrinium								
Ascospores								
Aspergillus / Penicillium				8	18			
Basidiospores								
Bipolaris / Drechslera				2			1	
Cadosporium								
Botrytis								
Chaetomium				1				
Cladosporium				14				
Cercospora		-						-
Curvularia		1		1			1	
Epicoccum								_
Fusarium								
Memnoniella	,							
Nigrospora								
Oidium / Peronospora								
Paecilomyces								
Pithomyces								
Rusts								
Smuts/Myxomycetes			2			1		
Stachybotrys/Memnoniella								
Spegazzinia				1				
Stemphylium								
Tetraploa								!
Torula								
Ulocladium								
Miscellaneous						2	1	
Mycelial Fragments			3	2	6		7	2
Unclassified Conidia								

Note for Air-Cassette Samples:

Red and Bold means indoor spore count is greater than ambient air spore count Blue and Bold indoor spore count is greater than half of the ambient air spore count, but less than and equal to ambient air spore count

\* Indactes samples that were not analyzed due to excessive debris

Page 2 of 3

Та	ble	1
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TABLE 1					
· · · · · · · · · · · · · · · · · · ·	FCI-06-	FCI-06-	 		
Sample Number	02-26	02-28			
	Air	Air			
(Туре)	Cassette	Cassette			
Sample Location	Madrid Office WC	Avery Office			
Type of Spores	(Counts/m <sup>3)</sup>	(Counts/m <sup>3)</sup>			
Alternaria					
Arthrinium					
Ascospores					
Aspergillus / Penicillium					
Basidiospores					
Bipolaris / Drechslera		1			
Cadosporium					
Botrytis					
Chaetomium					
Cladosporium					
Cercospora					
Curvularia					
Epicoccum					
Fusarium					
Memnoniella					
Nigrospora					
Oidium / Peronospora					
Paecilomyces					
Pithomyces					
Trichoderma					
Smuts/Myxomycetes					
Stachybotrys/Memnoniella					
Spegazzinia					
Stemphylium					
Tetraploa					
Torula					1
Ulocladium					
Miscellaneous					
Mycelial Fragments					
Unclassified Conidia					

<u>Note for Air-Cassette Samples:</u> Red and Bold means indoor spore count is greater than ambient air spore count Blue and Bold indoor spore count is greater than half of the ambient air spore count, but less than and equal to ambient air spore count

\* Indactes samples that were not analyzed due to excessive debris

Page 3 of 3

BULK SAMPLES						
	FCI-06-	FCI-06-	FCI-06-	FCI-06-	FCI-06-	FCI-06-
Sample Number	02-05	02-10	02-15	02-16	02-17	02-18
	Bulk	Bulk	Bulk	Bulk	Bulk	Bulk
(Туре)	Sample	Sample	Sample	Sample	Sample	Sample
	Lt's Office		Psych,N.	Psych,N.	Swab	Swab
Sample Location		Pysch,	Office	Office	Window	HVAC
Sample Location	Swab	Floor Bulk	HVAC	HVAC	Sill, S.	Return.
			Swab	Swab	Office	N. Office
Type of Spores	%	%	%	%	%	%
Alternaria	9				trace	
Arthrinium				_		
Ascospores					<b>9</b> 9	
Aspergillus / Penicillium						
Basidiospores					1	
Bipolaris / Drechslera	1					
Cadosponium						
Botrytis						
Chaetomium			1			
Cladosporium	90		99	<u>1</u> 00		98
Cercospora						
Curvularia						
Epicoccum						
Fusarium						
Memnoniella						
Nigrospora						
Oidium / Peronospora						
Paecilomyces						
Pithomyces						
Rusts						
Smuts / Myxomycetes						
Stachybotrys / Memnoniella						-
Spegazzinia						
Stemphylium						
Tetraploa						
Torula						
Ustilago						2
Ulocladium						
Miscellaneous						
Mycelial Fragments						
Unclassified Conidia						

Page 1 of 3

BULK SAMPLES						
	FCI-06-	FCI-06-	FCI-06-	FCI-06-	FCI-06-	FCI-06-
Sample Number	02-20	02-22	02-23	02-24	02-27	02-29
	Bulk	Bulk	Bulk	Bulk	Bulk	Bulk
(Туре)	Sample	Sample	Sample	Sample	Sample	Sample
Sample Location	Records Room	HVAC Dental Exam Room	HVAC Hall, Dental	HVAC Clinic Director Office	HVAC Business Office	Controlle Office, Wall bas
Type of Spores	%	%	%	%	%	%
Alternaria	50		100			trace
Arthrinium						
Ascospores						
Aspergillus / Penicillium	50			100	40	
Basidiospores						
Bipolaris / Drechslera						
Cadosporium						
Botrytis						
Chaetomium					60	
Cladosporium						
Cercospora						
Curvularia						
Epicoccum						
Fusarium						
Memnoniella						
Nigrospora						
Oidium / Peronospora						
Paecilomyces						
Pithomyces	······					
Rusts						
Smuts / Myxomycetes						
Stachybotrys / Memnoniella						100
Spegazzinia						
Stemphylium						· · · ·
Tetraploa						
Torula						
Ustilago				· · · · · · · · · · · · · · · · · · ·		
Ulocladium						
Miscellaneous					- 1 X	
Mycelial Fragments		<u>, , , , , , , , , , , , , , , , , , , </u>				
Unclassified Conidia						

Page 2 of 3

BULK SAMPLES						
	FCI-06-	-			[	
Sample Number						
	Bulk	Bulk	Bulk	Bulk	Bulk	
(Туре)		Sample	Sample	Sample	Sample	
	Financial	-				
Sample Location					1	
	Floor					
Type of Spores	%					
Altemaria	40					
Arthrinium						
Ascospores						
Aspergillus / Penicillium	10					
Basidiospores						
Bipolaris / Drechslera			-			
Cadosporium						
Botrytis						
Chaetomium						
Cladosporium						
Cercospora						
Curvularia						
Epicoccum						
Fusarium						
Memnoniella						
Nigrospora						
Oidium / Peronospora						
Paecilomyces						
Pithomyces						
Rusts				-		
Smuts / Myxomycetes						
Stachybotrys / Memnoniella	10					
Spegazzinia						
Stemphylium						
Tetraploa						
Torula						
Ustilago						
Ulocladium	40					
Miscellaneous						
Mycelial Fragments						
Unclassified Conidia						

Page 3 of 3



Tucson 7012 E. 3rd St. Tucson, AZ 85710 Tel: (520) 575-7100 Main Office

325 E. Southern Ave., #115 Tempe, AZ 85282 Tel: (480) 839-7000 Mailing Address PO Box 28085 Tempe, AZ 85285

### November 6, 2006

Environmental:

Management Engineering Impact Statement Vulnerability Health & Safety Mr. Leroy Smith Federal Bureau of Prisons, FCI Tucson 8901 S. Wilmot Rd. Tucson, AZ 85706

Re: Equipment Clean up Report

Dear Mr. Smith:

#### Services:

Permitting Compliance Modeling Testing Monitoring Archaeology Hydrogeology Decontamination Leaking UST **Risk Assessment** Training ISO-14000 Support Indoor Air Quality Asbestos Lead Mold

Site: Assessment

Characterization Remediation

Licensed Contractor: 150268 199996 Per your request on October 31, 2006 Applied EnviroSolutions, Inc. (AES) provided a mold consulting and a cleaning crew to the Federal Correctional Institute (FCI) facility located at 8901 S. Wilmot Rd. Tucson, AZ. The purpose of this project was to conduct cleaning and disinfection of the office equipment in the East Trailer, West Trailer, Dental Exam Room, Medical Records Room, and Mr. Paul Madrid's Office. All of the equipment in the above areas were cleaned and disinfected per industry standards and then removed outside.

AES crew completed all the work per our October 23<sup>rd</sup> contract except the areas that were not accessible during the cleaning days. These areas were the following:

1. The Arts & Crafts Room in the East Trailer contained personal effects of both the FCI staff and Prisoners. Per our agreement, these equipment were disinfected however, it was not removed from the room.

2. Items that were mounted to walls or floors were not removed. They were:

- a. A wall-mounted cabinet in the Band Room
- b. Tool Rack in the Arts and Crafts Room closet
- c. Shelving in the Exercise Room closet
- d. Bookshelves in the Psychology Office closet.

3. The Dental Exam Room had a few equipment that required to be disassembled. Per your suggestion, the equipment were disinfected but not removed from the room.

Fax (480) 820-5030

www.aesaz.com

admin@aesaz.com

Toll Free (800) 478-7611

4Hachment #139

Page2 Letter to Mr. Smith November 6, 2006

Also, Psychology Rooms A, B, and C contained large amounts of printed materials. The materials were treated with a fungicide and removed from the offices. One set of bookshelves were fixed to the wall in the storage room and were not removed. The television in room A was disinfected but was not removed as it was fixed to the wall.

However, there were three closets that were not previously inspected by AES and we had to provide extra services. These areas included the storage closets in the Exercise Room, in the Arts and Crafts Room, and in the Psychology Room A. These closets contained large amounts of supplies and printed materials. Per our discussion with your staff, we agreed to utilize an airborne fungicide. The areas were professionally disinfected.

Should you have any questions regarding this report, please do not hesitate to contact me or Mr. Martin Godusi at 520-575-7100 or at 480-839-7000. Thank you.

Sincere

Robert House, Jr. // Environmental Sampling Specialist



#### Leroy Smith - Mold Concerns in FCI Warden's Office area

From:	Ellyn Wickliffe
To:	James Marchetti; Leroy Smith
Date:	5/13/2008 1:12:11 PM
Subject:	Mold Concerns in FCI Warden's Office area

At the onset of last summer's monsoon season, the leaky roof poured rain into Warden Chavez' FCI office in many areas. Facilities staff patched the roof and replaced the stained ceiling tiles.

However, since approximately last September, I have noticed a smell in that office that I liken to "fresh cut grass." I've complained about this more vocally recently since my allergies and asthma have been aggravated and seem worse at work than at home. My eyes sometimes burn when I enter that office, so for the last week or so, I've kept that office door closed when no one is in there.

I was unable to find information about if this smell might really be mold so I called Arizona Mold Dog Detection Services (203.6616). The gentleman indicated this is a mold smell.

I shared this information with Warden Winn and he told me to have you gentlemen check into it. Due to the leaky roof, I know mold was eradicated from the Business Office area in the last year or so.

Thank you for your attention to this matter. ~Ellyn

CC:

Ellyn Wickliffe

Page

Attachment # 140

### C:\DOCUME~1\TCN3409\LOCALS~1\Temp\GW}00001.TMP

### **Mail Envelope Properties** (4829F61B.27C : 107 : 45412)

Subject:	Mold Concerns in FCI Warden's Office area
<b>Creation Date</b>	5/13/2008 1:12:11 PM
From:	Ellyn Wickliffe

**Created By:** 

#### EWickliffe@bop.gov

5

# Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith) TCN5257 (James Marchetti) TCN7089 CC (Ellyn Wickliffe)

### **Post Office**

and a second

TCNADM1.TCNDOM1

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Options	
Expiration Date:	5/28/2008
Priority:	Standard
ReplyRequested:	No
Return Notification:	None
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Concealed Subject: No Security: Standard

### Junk Mail Handling Evaluation Results

Message is not eligible for Junk Mail handling Message is from an internal sender

Junk Mail settings when this message was delivered Junk Mail handling disabled by User Junk List is not enabled Junk Mail using personal address books is not enabled Block List is not enabled Route bop.gov

Date & Time 5/13/2008 1:12:11 PM



Tucson 7012 E. 3rd St. Tucson, AZ 85710 Tel: (520) 575-7100 Main Office 325 E. Southern Ave., #115 Tempe. AZ 85282 Tel: (480) 839-7000 Mailing Address PO Box 28085 Tempe, AZ 85285

Environmental: Management Planning Impact Statement Vulnerability Health & Safety Mr. Jim Marchetti Facilities Manager Federal Corrections Institution 8901 S. Wilmot Road Tucson, AZ 85706

Re: Mold Sampling

### Introduction

On June 26, 2008 Applied EnviroSolutions, Inc. (AES) took air samples for mold spores, due to numerous water leaks from the roof. At that time, the highest concentration of mold spores was found to be in the air in the office areas. As a result, on July 22, 2008, AES conducted additional sampling, but concentrated efforts on the air handling systems. AES took seven samples for airborne mold spores and took ten swab samples from the ventilation diffusers. Samples were taken at the Administration Building, the Commissary and the two Safety offices. Air samples and swab samples were taken from the ventilation diffusers in the unoccupied Warden's office, Warden Winn's office and the Warden's reception area. Sampling was also performed in the file room, the equipment room and in Ms. Haag's office. After testing in the Administration Building, testing was performed in the two offices in the Safety Building and in the Commissary. The samples were then transported to a certified laboratory for analysis, and the resulting lab reports are attached.

### Sampling Results and Recommendations

AES reviewed the laboratory analytical results, which indicate the presence of some level and type of mold in all of the air ventilators tested. Please see the table below for the sampling results. The types of mold identified were Penicillum Aspergillus, Cladoporium, Basidiospores, Alternaia, Curvularia, Smuts and Ascospores.

The sampling results of June 26, 2008 were compared to ambient mold concentrations and proved that there was mold growth in the building. The purpose of the sampling conducted on July 22, 2008 was to evaluate the mold concentrations in the air handling system, and were therefore not compared to the outside ambient air.

Permitting Compliance Enforcement Modeling Testing Monitoring Archaeological Biological Decontamination **Risk Assessment** Training ISO-14000 Support Indoor Air Quality Asbestos Lead Mold

Services:

Site: Assessment Testing Clean Up

Licensed Contractor: 150268 199996

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Attachment #141

The wipe sample showed very high numbers of Cladosporium spores in the return air vent in the southern most Safety Office. The wipe samples also detected yeast and bacterial growth in the Administration Building ventilation system and yeast growth in the Commissary.

The number of fungal spores found at each sample location were as follows:

SAMPLE LOCATION	SPORES PER WIPE SAMPLE	SPORES PER AIR SAMPLE
Vacant Warden's office air		
vent	77	4
Warden's reception area air		
vent	77	75
Warden Winn's office air		
vent	Yeast	144
Supply room air vent	227 and bacteria	115
File room air vent	77 and bacteria	93
Ms. Haag's office air vent	538	No air sample taken
Commissary air vent one	774 and yeast	564
Commissary air vent two	154	No air sample taken
Safety office one air vent	11,000	417
Safety office two air vent	300	No air sample taken

AES recommends that all the related ventilation systems be thoroughly cleaned by a professional mold remediation company. Following that, it is also recommended that confirmatory testing be conducted to ensure that the cleaning was effective.

Pleased be advised that the routine maintenance and duct cleaning performed by HVAC companies may not be adequate to eliminate the mold completely. If requested, AES can recommend a reputable mold remediation company and oversee the cleaning activities.

The physical health effects of exposure to mold can vary from person to person, depending upon the amount and types of mold present, and one's sensitivity and general state of health. There are no state or federal numerical standards for mold in Arizona Please see <u>www.epa.gov/mold/</u> and <u>www.OSHA.gov</u> web sites for further information regarding mold and its effects on health and building materials.

If you have any questions regarding this report, resampling, remediation or any other indoor air quality related services, please do not hesitate to contact AES at (480) 839-7000.

Sincerely,

SHP OR

Steve Olson Project Manager



# EMLab P&K

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 Fax (623) 780-7695 www.emlab.com

Client: Applied EnviroSolutions, Inc. C/O: a/p Martin Godusi Re: FCI-TUS-7-08; FCI Mold Date of Sampling: 07-22-2008 Date of Receipt: 07-23-2008 Date of Report: 07-25-2008

# QUANTITATIVE SPORE COUNT REPORT

Location:		1:				2:				3:				4:		
		Vacant			Sec. Office WS Office		Supply Diffuser									
Comments (see below)		Nor	ne			No	ne		<u> </u>			B				
Sample type		Swab sa	ample			Swab sample			Swab sample			Swab sample				
Lab ID-Version <sup>‡</sup> :		1969365-1			19693	66-1			19693	67-1		1969368-1				
Background debris (1-4+)		2+			2-	+			2-			2+				
Sample size		1 swab			1 sv	vab			1 sw	/ab		l swab				
Reporting unit	_	1 sw	vab			1 sv	vab			1 sw				1 sw		
Detection limit/unit						4								40		
	Count	Count/sample	Count/unit	%	Count	Count/sample		%	Count	Count/sample		%	Count			%
Hyphal fragments		< 40	< 40	n/a		< 40	< 40	n/a		< 40	< 40	n/a		< 40	< 40	n/a
TOTAL FUNGAL SPORES	1	77	77	100	1	77	77	100		< 40	< 40	100	3	227	227	100
Alternaria	1	77	77	100												
Arthrinium																
Ascospores																
Aureobasidium																
Basidiospores													L			
Bipolaris/Drechslera group																
Botrytis																
Chaetomium																
Cladosporium													2	150	150	66
Curvularia																
Epicoccum															l	
Fusarium																
Myrothecium																
Nigrospora																
Other brown													1	77	77	34
Other colorless									-							
Penicillium/Aspergillus types				<u> </u>	1	77	77	100								
Pithomyces				ļ												
Rusts			<u></u>	ļ												
Smuts, Periconia, Myxomycetes								ļ								
Stachybotrys					1										<u> </u>	
Stemphylium					ļ							+		_	<u></u>	
Torula			L												<u> </u>	
Ulocladium			ļ										<u> </u>		<u> </u>	
Zygomycetes															<u> </u>	

Comments: A) Yeast Observed. B) Bacteria Observed. Yeast Observed.

‡ A "Version" greater than 1 indicates amended data.

EMLab ID: 446971, Page 1 of 3

## EMLab P&K

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 Fax (623) 780-7695 www.emlab.com

### Client: Applied EnviroSolutions, Inc. C/O: a/p Martin Godusi Re: FCI-TUS-7-08; FCI Mold

Date of Sampling: 07-22-2008 Date of Receipt: 07-23-2008 Date of Report: 07-25-2008

# QUANTITATIVE SPORE COUNT REPORT

Location:		5:					6:				.7:				8:		
		File Di					<u>Ms. H (</u>			Comissary In				Comissary Diffuser			
Comments (see below)		C					Not			A				None			
Sample type		Swab sa	ample		Swab sample			Swab sample			Swab sample						
Lab ID-Version <sup>‡</sup> :		1969369-1				1969370-1				19693	71-1		1969372-1				
Background debris (1-4+)		2+				3-	-		2+				2+				
Sample size		l swab					l sw	vab			1 sw	'ab		1 swab			
Reporting unit		1 sw	/ab				1 sw	vab			1 sw	vab			1 sw	vab	
Detection limit/unit		40	)				4(	)			-40	)			4(	)	
	Count	Count/sample	Count/unit	%	Cou	int Cou	int/sample	Count/unit	%	Count	Count/sample	Count/unit	%	Count	Count/sample	Count/unit	%
Hyphal fragments		< 40	< 40	n/a			< 40	< 40	n/a		< 40	< 40	n/a		< 40	< 40	n/a
TOTAL FUNGAL SPORES	1	77	77	100	7		538	538	100	10	774	774	100	2	154	154	100
Alternaria					1		77	77	14								
Arthrinium																	
Ascospores					1		77	77	14	1	77	77	10				
Aureobasidium																	
Basidiospores																	
Bipolaris/Drechslera group										ļ							
Botrytis										ļ			ļ			<u> </u>	44
Chaetomium									ļ								
Cladosporium					3	3	230	230	43	8	620	620	80	1	77	77	50
Curvularia	_									· · · · · · · · · · · · · · · · · · ·							l
Epicoccum											4		ļ			L	
Fusarium									ļ				<u> </u>			ļ	
Myrothecium																	
Nigrospora									ļ								
Other brown						1	77	. 77	14				ļ				
Other colorless																	_
Penicillium/Aspergillus types			-			1	77	77	14	1	77	77	10	1	77	77	50
Pithomyces																	-
Rusts		_															
Smuts, Periconia, Myxomycetes	1	77	77	100				· · · · · · · · · · · · · · · · · · ·									
Stachybotrys		·			_									1			
Stemphylium																	
Torula	_																-
Ulocladium																	
Zygomycetes			<u> </u>		<u> </u>						1		1	1			

Comments:C) Bacteria Observed. A) Yeast Observed.

EMLab ID: 446971, Page 2 of 3

‡ A "Version" greater than 1 indicates amended data.

### EMLab P&K

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 Fax (623) 780-7695 www.emlab.com

# Client: Applied EnviroSolutions, Inc. C/O: a/p Martin Godusi Re: FCI-TUS-7-08; FCI Mold

Date of Sampling: 07-22-2008 Date of Receipt: 07-23-2008 Date of Report: 07-25-2008

# **QUANTITATIVE SPORE COUNT REPORT**

Location:		9: Safety	One		10: Safety Two					
Comments (see below)		None			None					
Sample type		Swab sa	····		Swab sample					
Lab ID-Version <sup>‡</sup> :					1969374-1					
			3-1				4-1			
Background debris (1-4+)		2+	-			2+				
Sample size		1 swab				1 swa	and the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of the second statement of th			
Reporting unit		1 swa	ıb			1 swa	. <u>b</u>			
Detection limit/unit		40				40				
	Count	Count/sample	Count/unit	%	Count	Count/sample	Count/uniț	%		
Hyphal fragments	17	1,300	1,300	n/a		< 40	< 40	n/a		
TOTAL FUNGAL SPORES	146	11,077	11,077	100	4	300	300	100		
Alternaria										
Arthrinium						~				
Ascospores										
Aureobasidium										
Basidiospores										
Bipolaris/Drechslera group										
Botrytis										
Chaetomium										
Cladosporium	145	11,000	11,000	99	2	150	150	50		
Curvularia										
Epicoccum										
Fusarium										
Myrothecium										
Nigrospora										
Other brown										
Other colorless			······································							
Penicillium/Aspergillus types	1	77	77	11	2	150	150	50		
Pithomyces										
Rusts										
Smuts, Periconia, Myxomycetes			•							
Stachybotrys										
Stemphylium										
Torula										
Ulocladium										
Zygomycetes										

**Comments:** 

‡ A "Version" greater than 1 indicates amended data.

EMLab ID: 446971, Page 3 of 3

CHAIN OF CUSTODY www.EMLabPK.com Cherry Hill, NJ: 1936 Olney Avenue, Cherry Phoenix, AZ: 1501 West Knadsen Drive, Ph San Bruno, CA: 1150 Bayhill Drive, #100, S San Diego, CA: 5473 Kearny Villa Road, #1	otnic, AZ 85027 * (800) 651-4802	Moderate Heavy	Wind Clear Norrs Spore Trap	000446971	
PQ Number: SAMPLE ID 1 VQ4 2 Sec 3 $15$ $54$ Supp 5 FM 6 MS 1 Comis 7 Comis 8 Comis	Address: 32 Special Instructions 2N 2-08 5TD-Standard (DE ND-Next Business -22-08 SD-Same Business WH-Weakend/Hol NH-Weakend/Hol Sample ND-Next Business WH-Weakend/Hol Sample ND-Same Business WH-Weakend/Hol Sample ND-Sample ND-Sample SD-Same Business WH-Weakend/Hol Sample ND-Sample ND-Sample SD-Same Business WH-Weakend/Hol Sample ND-Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Sample Samp	5 E. Southern Ave, #119         ns: Tempe, AZ 85282         TURN AROUND TIME CODES (TAT)         FAULT)       Rushes received after weekends, will be to received the next bus Please alert us in ac weekend analysis	born of our contract of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second se	instruptic Eram (Quue Spore Count Di urfsce Fung) (Genu arfiace Fung) (Genu arfiace Fung) (Genu 1 Air Fung) (Genu 1 Air Fung) (Genu 1 Air Fung) (Genu 1 Air Fung) (Cuth	At PN IBLERFIS     At PN IBLERFIS     At PN IBLERFIS     At PN IBLERFIS     At PN IBLERFIS       At Diversion     Quantitities     Sewage 5 Green     At At PN IBLERFIS     At At PN IBLERFIS       At Diversion     At At At At At At At At At At At At At A
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4



Tucson 7012 E. 3rd St. Tucson, AZ 85710 Tel: (520) 575-7100

January 12, 2009

Mr. Jim Marchetti

Tucson, AZ 85706

Introduction

Re:

8901 S. Wilmot Road

Federal Corrections Institution

Mold Sampling

spores in the following areas:

Main Office

325 E. Southern Ave., #115 Tempe, AZ 85282 Tel: (480) 839-7000

Mailing Address PO Box 28085 Tempe, AZ 85285

### Environmental:

Management Engineering Impact Statement Vulnerability Health & Safety

### Services:

Permitting Compliance Modelina Testing Monitoring Archaeology -Hydrogeology Decontamination Leaking UST **Risk Assessment** Training ISO-14000 Support Indoor Air Quality Asbestos Lead Mold

Site: Assessment Characterization Remediation

Licensed Contractor: 150268 199996

1. The Warden's office: One airborne mold sample and one swab sample.

- 2. Storage room: One air sample and one swab sample.
- 3. One air sample outside the Property Room in the Receiving and Departure (R & D) building:

On December 30, 2009 Applied EnviroSolutions, Inc. (AES) took a total of 9

samples, including seven air samples and two swab samples for mold and mold

- 4. Records Office in the R & D Building.
- 5. Outside Holding Cell #5 in the R & D building
- 6. Staff Office in the R & D Building
- 7. Receiving and Departure R & D Building

The total number of fungal spores found at each swab sample location is shown in Table 1, as follows:

### **TABLE 1**

SAMPLE LOCATION	TOTAL SPORES PER SWAB SAMPLE
Wardens Office Carpet	77 Basidiospores
Business Office Storage Room	150 Penicillium Aspergillus

admin@aesaz.com

Toll Free (800) 478-7611

Attachment #142

The different types of mold spores per cubic meter of air and their locations are provided in Table 2 below:

Sample Locations	Warden's Office	Storage Room	Outside Property Room	Records Office	Outside Holding Cell #5	Staff Office	Outdoors (Control sample)
Type of Spores	Spores	Spores	Spores	Spores	Spores	Spores	Spores
Alternaria							
Arthrinium						,	
Ascospores							
Aspergillus / Penicillium							
Bipolaris / Drechslera							
Basidiospores							7
Chaetomium						67	
Cladosporium	7		13				150
Curvularia							
Epicoccum							
Fusarium							
Memnoniella							
Nigrospora							
Other brown							20
Paecilomyces							
Penicillium / Aspergillus							
types		7		· · ·	13		27
Smuts / Myxomycetes							27
Stachybotrys							
Stemphylium							
Torula							
Ulocladium							
Miscellaneous							

# TABLE 2

2

### **Sampling Results**

AES reviewed the laboratory analytical results of the air samples, which indicate that there are no elevated levels of mold spores in any of the areas tested when they were compared to the outside levels.

The two wipe samples showed that some Basidiospores (in Warden Office carpet) and Penicillium Aspergillus (in the Business Office Storage Room) spores are present, but in relatively low concentrations. The mold levels in the Storage Room are still concerning us. *Basidiospores* are produced by Basidiomycota, which include mushrooms, puffballs, stinkhorns, bracket fungi, other polypore, jelly fungi, boletes, chanterelles, earth stars, smuts, bunts, rusts, mirror yeasts, and the human pathogenic yeast, *Cryptococcus*.

*Penicillium* is one of the first fungi to grow on water-damaged materials and has been implicated in causing allergic reactions, hypersensitivity pneumonitis, and a variety of severe lung complications. *Penicillium* is a mold commonly found where water intrusion has occurred. This mold is also capable of producing mycotoxins. *Penicillium* is a mold that is widely distributed in nature, and is often found living on foods and in indoor environments. It is the source of several antibiotics, significantly penicillin.

Please see <u>www.epa.gov/mold/</u> and <u>www.OSHA.gov</u> web sites for further information regarding mold and its effects on health and building materials.

### **Conclusions and Recommendations:**

Considering the extremely high levels of mold in previous samples, the remediation efforts taken by the client seemed relatively successful. Based on our inspection and the lab results, samples from R & D Building did not showed presence of molds in a concerned level.

However, presence of Penicillium Aspergillus in the Business Office Storage Room walls and carpet were still our concern. We recommend more samples should be taken from the air registers and walls in the related 14 Business Office areas, before us being able to conclude the presence or absence of the molds.

Meanwhile, AES recommends the following maintenance procedures at the areas of concern:

- 1. Maintain the humidity below 60%, if possible.
- 2. Maintain adequate ventilation.
- 3. Allow the proper amount of make-up air from the outdoors, per standards.
- 4. Change air filters frequently, or as recommended by the manufacturer of the air handling systems.

If you have any questions regarding this report, re-sampling, remediation or any other indoor air quality related services, please do not hesitate to contact Mr. Martin Godusi or me at (480) 839-7000.

Sincerely,

Ronald Barnett Industrial Hygienist



# N.E.B.B. CERTIFIED BALANCE REPORT For

FEDERAL CORRECTIONS Tucson, Arizona

7-00-1-7943



4633 South 36<sup>th</sup> Street Phoenix, AZ 85040 (602) 437-8110 Fax (602) 437-3894



Tucson 7012 E. 3rd St. Tucson, AZ 85710 Tel: (520) 575-7100 Main Office

325 E. Southern Ave., #115 Tempe, AZ 85282 Tel: (480) 839-7000 Mailing Address PO Box 28085 Tempe, AZ 85285

### October 6, 2008

Environmental: Management Planning Impact Statement Vulnerability Health & Safety Mr. Leroy Smith Federal Corrections Institution 8901 S. Wilmot Road Tucson, AZ 85706

Re: Mold Sampling

### Introduction

### Services:

Permitting Compliance Enforcement Modeling Testing Monitoring Archaeological Biological Decontamination **Risk Assessment** Training ISO-14000 Support Indoor Air Quality Asbestos Lead Mold

On September 26, 2008 Applied EnviroSolutions, Inc. (AES) took a total of 14 samples, including air samples, swab samples and bulk samples for mold and mold spores in the following four structures:

- 1. Yucca Building, North Officer's Station
- 2. Palo Verde Building, Bathroom
- 3. Hospital Building, Hallway
- 4. Carpentry Shop Office

AES took one sample for airborne mold spores in each of the four building, one swab sample from a ventilation diffuser in each building and a bulk sample from each building. At the request of Mr. Leroy Smith, an additional bulk sample was taken in the Palo Verde Building. The samples were then transported to a certified laboratory for analysis, and the resulting lab reports are attached.

The total number of fungal spores found at each sample location was shown in Table 1, as follows:

### TABLE 1

Site: Assessment Testing Clean Up	SAMPLE LOCATION	TOTAL SPORES PER WIPE SAMPLE	TOTAL SPORES PER AIR SAMPLE	TOTAL SPORES PER BULK SAMPLE	
ciculi up	Yucca Office Ceiling	<40	900	290,000	
	Palo Verde Wallboard	51,000	290	67	
	Palo Verde Shower Stall	NA	NA	320,000	
Licensed	Hospital Hallway	77	170	None	
Contractor:	Carpentry Shop Office	82,000	4,700	140,000	

150268

The different types of mold, their locations and descriptions are provided in Table 2 below:

Fax (480) 820-5030

admin@aesaz.com

Toll Free (800) 478-7611

Attachment#143

# TABLE 2

Sample Locations	Yucca Office Ventilator Swab	Palo Verde Bathroom Ventilator Swab	Hospital Hallway Ventilator Swab	Carpentry Office Ventilator Swab	Yucca Ceiling Tile Bułk	Palo Verde Wallboard Bulk	Palo Verde Shower Bulk	Hospital IOP Office Window Putty Bulk
Type of Spores	Spores	Spores	Spores	Spores	Spores	Spores	Spores	Spores
Alternaria								
Arthrinium								
Ascospores				520				
Aspergillus / Penicillium								
Bipolaris / Drechslera								
Basidiospores								
Chaetomium					290,000	67		
Cladosporium		51,000		1,600				
Curvularia	······································							
Epicoccum			······································					
Fusarium								
Memnoniella	•							
Nigrospora								
Paecilomyces						·		
Penicillium / Aspergillus types				80,000				
Smuts / Myxomycetes			77	30,000				
Stachybotrys			•				320,000	
Stemphylium	5							
Torula								
Ulocladium								
Miscellaneous								



Sample Number and Location	Carpentry Office Ceiling Tile Bulk	Yucca Office Air Sample	Palo Verde Bathroom Air Sample	Hospital Hallway Air Sample	Carpentry Office Air Sample	Outdoor Air Reference Sample
Type of Spores	Spores	Spores / m <sup>3</sup>	Spores / m <sup>3</sup>	Spores / m <sup>3</sup>	Spores / m <sup>3</sup>	Spores / m <sup>3</sup>
Alternaria	7,000					31
Arthrinium						
Ascospores						49
Aspergillus / Penicillium						
Bipolaris / Drechslera						22
Basidiospores						227
Chaetomium		513	156	62		4
Cladosporium	57,000			27		618
Curvularia						4
Epicoccum					· · · · · · · · · · · · · · · · · · ·	
Fusarium						
Memnoniella	•					
Nigrospora						
Paecilomyces						·
Penicillium / Aspergillus types	79,000	358	40	58		18
Smuts / Myxomycetes						76
Stachybotrys						70
Stemphylium						
Torula						4
Ulocladium						
Miscellaneous			•			

### **Sampling Results**

AES reviewed the laboratory analytical results, which indicate that there are elevated levels of mold spores in all of the buildings tested. The laboratory also noted that there are unidentified species of bacteria growing in both the Palo Verde bathroom ventilator and the Carpentry Shop office ventilator, and yeast mold is growing in the Yucca office ceiling tile.

The Yucca office sample results revealed high levels of *Chaetomium* in both the ceiling tile and in the air. *Chaetomium* is a fungus type that includes approximately 80 different species. It is allergenic and an agent of onychomycoses (nasal infection), peritonitis, cutaneous lesions and potential agent in fatal systemic mycoses. Fatal deep mycoses due to *Chaetomium* have been documented. Brain abscess, peritonitis, and cutaneous lesions may also develop due to *Chaetomium*. *Chaetomium* are found on a variety of substrates containing cellulose, including paper and plant compost. It has been reported to play a major role in the decomposition of cellulosemade materials. These fungi are able to dissolve the cellulose fibers in cotton and paper and thus cause the materials to disintegrate. The process is especially rapid under moist conditions. Commonly found on deteriorating wood products, *chaetomium* frequently emits a musty odor and is frequently found on water-damaged drywall and other construction products often used in the United States.

The samples taken in the Palo Verde building bathroom and shower also showed elevated levels of *chaetomium* in the air, as well as very high levels of *Cladosporium* in the ventilation system. *Cladosporium* is a common fungus that is a known and documented allergen which is usually associated with plants, wood products, and leather goods. The spores are easily made airborne and as such are a common cause of respiratory problems, allergic reactions and can be an agent for hypersensitivity diseases. It is as a parasite in infections of the skin, soft tissues and nails.

The sample taken in the Palo Verde shower also showed very high levels of *Stachybotrys*. *Stachybotrys* is a greenish-black, slimy mold found only on cellulose products (such as wood or paper) that have been wet for several days or more. It is common on plant debris and in soil, and is capable of producing one or more mycotoxins (chemicals that may cause symptoms or illness and death in people). It can grow on paper, sheet rock, and other high cellulose materials. Spores of wet mold do not easily enter the air, and are found where warm, moist air comes into contact with cooler air. Toxic effects at relatively low doses include rashes, mild neurotoxin effects such as headache, nausea, muscle aches and pains, and fatigue. The immune system may also be affected resulting in a decreased resistance to infections.

Other types of mold found in the Palo Verde samples include *Basidiospores, Curvulaia* and *Pennicillium*.

*Basidiospores* are produced by Basidiomycota, which include mushrooms, puffballs, stinkhorns, bracket fungi, other polypore, jelly fungi, boletes, chanterelles, earth stars, smuts, bunts, rusts, mirror yeasts, and the human pathogenic yeast, *Cryptococcus*.

*Curvularia* are among the causative agents of <u>mycetoma</u>, <u>onychomycosis</u>, keratitis, allergic sinusitis, cerebral abscess, cerebritis, pneumonia, allergic bronchopulmonary disease, endocarditis, dialysis-associated peritonitis, and infections may develop due to *Curvularia*. Importantly, infections may develop in people with intact immune system. However, similar to several other fungal genera, *Curvularia* has emerged as an opportunistic pathogen that infects immunocompromised hosts.

The swab sample taken in the Carpentry office showed very high levels of *Pennicillium Aspergillums* in the ventilation system. *Penicillium* is one of the first fungi to grow on waterdamaged materials and has been implicated in causing allergic reactions, hypersensitivity pneumonitis, and a variety of severe lung complications. *Penicillium* is a mold commonly found where water intrusion has occurred.



This mold is also capable of producing mycotoxins. *Penicillium* is a mold that is widely distributed in nature, and is often found living on foods and in indoor environments. It is the source of several antibiotics, significantly penicillin.

Very high levels of *Cladosporia*, as discussed above, were also found in the Carpentry Shop ventilator swab and in the air sample.

There is visible mold growing on the ceiling tiles in the Carpentry Office, which were identified as *Pennicillium and Cladosporia* by the laboratory.

The physical health effects of exposure to mold can vary from person to person, depending upon the amount and types of mold present, and one's sensitivity and general state of health. There are no state or federal numerical standards for mold in Arizona

Please see <u>www.epa.gov/mold/</u> and <u>www.OSHA.gov</u> web sites for further information regarding mold and its effects on health and building materials.

### **Recommendations:**

AES recommends the following procedures:

- 1. Disinfect all areas of the buildings.
- 2. Repair any and all water leakages.
- 3. Have a professional remediation firm clean all visible molds.
- 4. Conduct post-abatement sampling to verify mold abatement effectiveness.
- 5. Maintain the humidity below 60%, if possible.
- 6. Maintain adequate ventilation.
- 7. Allow the proper amount of make-up air from the outdoors, per standards.
- 8. Change air filters frequently, or as recommended by the manufacturer of the air handling systems.

If requested, AES will recommend a reputable mold remediation company and/or take the responsibilities of supervising the cleaning activities.

If you have any questions regarding this report, re-sampling, remediation or any other indoor air quality related services, please do not hesitate to contact AES at (480) 839-7000.

Sincerely,

Un Steve Olson

Project Manager

iked EconoSolutions in

### **U.S. Department of Justice**

Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

September 16, 2008

afety Manager

MEMORANDUM FOR STEPHEN FLANNERY, ENVIRONMENTAL PROGRAM MANAGER

FROM:

 $\bigvee$ 

SUBJECT:

Mold Questionnaire

This is in response to the Mold Questionnaire received from the National Safety Branch. The responses to the survey addresses the Western Regional and Cental Offices staff assistance, needed funding and actions taken to address past and present environmental conditions concerning occupational and indoor air quality exposure to mold toxins at FCC Tucson. The following is presented for your review and any recommendations would be well received.

I trust this response addresses your questions and concerns.

cc: Complex Warden, Apker Warden, Winn AW, Salazar Facility Manager, Marchetti General Foreman, Cobb Regional Director, McFadden Director, Lappin Regional Administrator, Clements Chief of OIA, Dignam OIG, Humm OSC, Bloch Local Union

AHachment #144

- 1. How did this situation come to the attention of your staff?
  - A. As a former Safety Trainee at FCI Tucson, you know first hand that the Safety and Facility offices, Lieutenant, Psychology, Recreation trailers, Health Services, Cholla Unit, Administration Building, Commissary and Yucca Unit roofs have leaked for many years, causing severe mold growth in the ceilings, walls, floors, air ventilation and swamp cooling ducts as a result of the water damage.
  - B. The physical health effects have varied from employee to employee causing severe allergies, severe asthma, headaches, skin and eye irritation, severe coughing and coughing of blood, severe congestion etc., which has the attention of our staff for several years.
  - C. Air sampling results were disseminated to the Executive staff, affected staff and local Union.
- 2. What steps were initially taken to address the situation?
  - A. As you are aware former Executive, former Safety and former Facility staff at FCI Tucson denied any mold concerns and refused to conduct air and wipe samples to determine indoor air quality and occupational exposure to staff and inmates.
  - B. As you are aware, in October, 2006, the services of Mr. Matthew Korbelak, Industrial Hygienist, Central Office, were requested to conduct occupational exposure and indoor air quality assessments to determine the level of mold exposure, health risks and the potential sick building syndrome. The request was denied by the National Safety and Environmental Administrators.
  - C. As you are aware, in 2006, the Facility Department requested additional funding to repair or replace the FCI Administration building roof, which was denied by the Western Regional Office for over two years. The Regional Offices decision went against the recommendations of Applied EnviroSolutions, Inc, who conducted our mold assessments. The lack of action by the Regional and Central offices allowed mold growth to continue exposing our staff to unsafe and unhealthy working conditions.

(See Test Results dated June 28, 2008)

- D. On July 17, 2008, the services of Mr. Dale Kruppinski, CSP, CIH, Environmental Health Safety Manager for UNICOR were requested to conduct occupational exposure and indoor air quality assessment to determine staff and inmate exposure levels. The request has been ignored or denied by Complex Warden Apker and Mr. Robert McFadden, Western Regional Director.
- E. In September, 2008, the Facility Department requested additional funding to replace the FCI Commissary roof, which was denied by the Western Regional Office. The roofs age and severe structural problems warrant the replacement. Again, it appears the safety and health of our staff and inmates, is a distant concern.
- 3. What specific areas of the institution need to be investigated? (Include both areas known to contain mold and any additional suspect areas.)
  - A. Occupational exposure and indoor air quality exposure assessments need to be conducted throughout the entire institution. Especially, due to the age of the institution, minor and severe roofs leaks affecting all buildings and air conditioning and swamp cooler ventilation ducts that have never been cleaned since the institution activated.
  - B. The Administration, Commissary, Safety/Facility buildings need immediate roof replacement/repairs, and remediation of mold throughout, as well as air conditioning and swamp cooler ventilation ducts.
  - C. The attached pictures were taken in the Carpentry Shop, Yucca, Palo Verde and Mesquite housing units on September 11 and 12, 2008. You will see the mold growth is from within the dry wall, ceiling tiles and around the air ducts, which demonstrates the mold has been growing throughout the FCI buildings for a very long period of time. Air and wipe sampling assessments need to be conducted to ensure the Safety and Health of our staff and inmates. (See Attachments)

Note: The Operations Lieutenant reported possible mold in Yucca North, Unit office. It has a leak in the ceiling which appears to be turning into mold.

- D. Air and wipe sampling needs to be conducted concerning the air ventilation ducts in Health Services. Staff have addressed some health concerns associated with their illnesses that appears to be associated to mold exposure. The Safety Department will be providing a CA-2 and a copy of the sampling results to those affected staff who have requested a copy. (See Attachment)
- 4. What initiatives have been implemented in response to the recommendations made by Applied EnviroSolutions, Inc.
  - A. The trailers, with dangerous molds, were removed from the institution grounds and properly disposed of at the landfill two years ago.
  - B. A new roof has been installed on the Health Services building. Medical records crawl spaces and ceiling were cleaned of mold two years ago.
  - C. Additional funding to conduct further occupational exposure and indoor air quality assessments concerning mold exposure has been denied by the Western Regional Office.
- 5. What other assistance has **he** sought regarding the identification and/or remediation of mold? (Please provide copies of any correspondence, summaries of any conversations, and a list of contacts.)
  - A. (See paragraph 2 (B)) The only qualified employee with the Bachelor Science degree in Natural Resource (Industrial Hygienist), that has the background in environmental and industrial hygiene functions prior to employment with the Bureau of Prisons, has been reduced to a Workers' Compensation Coordinator. This type of experience is priceless and desperately needed in assisting the field, especially with the Agency's current environmental noncompliance status with the Federal Environmental Protection Agency (EPA). This person was hired on as the Regional Industrial Hygienist and later promoted to the National Industrial Hygienist position. Most Industrial Hygienist position hired by Federal Agency's don't require the applicant to be a Certified Industrial Hygienist, this is something that is usually obtained after many hours in the field and additional schooling that is normally subsidized by the employee's employer. This position will be able to assist the field by providing technical assistance and advise in the development of the Environmental Management System, Occupational and Environmental Exposure Assessments and other concerns like Emergency Preparedness Bureau-wide.

B. The following "Mold Notes" from the National Industrial Hygienist dated October 12, 2006, were deliberately withheld from the Safety and Facility Departments by the National Safety Branch. (See Attachment)

**Note:** The remediation recommendations of cleanup and leak repair may not solve the whole problem - mold growth could reoccur. HVAC timers may be necessary to allow building surfaces to dry out. Depending on the mold contamination within the walls, re-insulation may be needed and could also be good in preventing mold growth reoccurrence.

C. On July 18, 2008, MEC, INC - Demolition/Environmental Re-mediation Services, Government Services Division. (See Attachment)

D. See Paragraph 2 (D).

- 6. Why did it become necessary to close the administration building as a precautionary measure?
  - A. As you are aware, the closing of our initial buildings with mold toxins were the direct recommendation of the National Safety Branch and supported by the Western Regional Office and the Institution Safety Department.
  - B. As you are aware, the Wardens office and staff from the Business office have previously expressed personal health concerns, for which additional sampling was conducted, and, again confirmed mold growth throughout the administration building. This was the concern shared by the Safety and Facility Departments, Local Union and other staff with the denial of the roofs replacement or repairs by the Western Regional office. The exposure to high levels of airborne mold spores demonstrates the continued unsafe and unhealthy working conditions by lack of responsiveness from Western Regional and Central offices concerning the FCI occupational and indoor air quality conditions.
  - C. As you are aware from the sampling report provided to the Western Regional and Central offices, from review and recommendations, the mold characteristics provided by Applied EnviroSolutions, Inc, expressed mold exposure can cause allergic reactions, infections and even toxic (poisonous) effects depending on pre-existing health situations, length of exposure and amount of molds in the environment. Species such as Cladosporium and Alternaria are common outdoor molds that can induce allergies and asthma.

Species such as Stachybotrys, Aspergillus, Penicillium and Bipolaris/Dreschlera are capable of producing mycotoxins, which can cause a variety of health effects to humans such as Type I allergies (hay fever and asthma) and Type III Hypersensitivity Pneumonitis. (Dated September 27, 2006)

- D. As you are aware from the sampling reports provided to the Western Regional and Central offices from review and recommendations the types of mold growth identified from air, wipe and bulk sampling that were much higher indoors than were present in the ambient air has been Stachybotrys, Aspergillus/Penicillium, Cladoporium, Basidiospores, Curvularia, Ascospore, Trichoderma, Paccilomyces, Torula, Bipolaris, Drechslers, Memnoniella, Alternaria, SMUTS/Myxomycetes, which requires Safety, Facility and Senior Management staff to take precautionary measures in safeguarding the staff and inmates from continues exposure to mold toxins.
- E. As you are aware from the sampling reports provided to the Western Regional and Central offices from review and recommendations, the growth rate of mold is a function of time, temperature and moisture. Therefore, the amount of molds can increase, unless it is ceased immediately by proper abatement procedures.
- F. On January 30, 2007, the Complex Controller (Financial Manager) expressed the following concerns with the snow last week the roof in the Business Office is still leaking. I confirmed the roof in Medical is also still leaking. With the rain we received today and are forecast to receive tomorrow, I'm sure these roofs will leak again. Are we sure we want to spend a minimum of \$7,200 to clean up mold that will soon reappear? The vendor expressed the same concern. In my humble opinion, this seems like a waste of money. If you still want the mold cleaned up without repairing the roofs, we will continue to process the Request for Purchase. I am not trying to make things difficult, I just want to make sure everyone has all the facts before this decision is made.
- 7. What additional steps do you or your staff believe need to be taken to address this situation?
  - A. Occupational exposure and indoor air quality exposure assessments need to be conducted throughout the entire institution. Especially, due to the age of the institution, minor and severe roofs leaks affecting all the buildings and the air ventilation ducts that have never been cleaned since the institution activated.

- B. All air ducts throughout each building need to be cleaned by an outside professional.
- C. The Administration, Commissary, Safety and Facility buildings need immediate roof replacement and repairs, remediation of mold throughout the buildings and air ventilation ducts.
- D. The attached pictures were taken in Carpentry Shop, Yucca, Palo Verde and Mesquite housing units. Air, wipe and bulk sampling needs to be conducted to determine the occupational and indoor air quality exposure level to staff and inmate workers. (See Attachments)
- E. Air and wipe sampling should be conducted concerning the air ventilation ducts in Health Services. Staff have addressed some health concern that potential association with mold exposure. (Supporting Documentation will be provided upon request)
- 8. Has any staff member at FCC Tucson received formal mold training?
  - A. No. This is currently being scheduled through an outside independent source for Facility staff.
- 9. What guidance/authoritative resources were followed in the institution's response to the identification of mold?
  - A. As you are aware, we received verbal recommendations by Central office through the Regional office.
  - B. As you are aware, there is no national policy addressing mold, which affects many institutions. The need for occupational and indoor air quality assessment concerning mold is a grave need Bureau-wide.
  - C. Any real guidance or direction came from Federal OSHA, EPA, CDC websites and Applied EnviroSolutions, Inc.
- 10. What testing, if any, has the institution conducted?
  - A. As you are aware, several air, wipe and bulk sampling reports have been conducted of the outside air, inside air, ceiling tiles, walls, floor materials. All of which has been provided to the Central Office for review and recommendations.

B. We have agreed locally to conduct additional sampling of ceilings, walls, air ventilation and swamp cooling ducts to determine how wide spread the mold growth has developed throughout our other institution buildings. This plan of action and corrective action to conduct the occupational exposure and indoor air quality mold exposure to staff and inmates has been denied by the Western Regional Director.

Recently, the Safety/Facility Departments air ventilation ducts were tested with the result of 11,000 spore count, which was twenty time greater than the exposure outside the building. (See Attached Sampling Reports)

- 11. Was the presence of mold ever identified during regular monthly inspections?
  - A. Yes. The potential for mold was identified and air and wipe sampling was recommended to confirm the presence of mold.
- 12. Has staff filed hazardous condition complaints relating to mold?
  - A. No. They have requested copies of the testing results and a CA-2.
  - B. The local Union and other line staff have addressed the mold issues for several years.
- 13. How has the mold issue been addressed at the work programming meetings?
  - A. Requesting funding to replace and repair roofs.
  - B. Requesting funding to re-mediate mold from ceilings, walls, floors and air ventilation ducts.
  - C. Facilities staff is currently being scheduled to received formal mold training by an outside independent source.
- 14. What other information would be important for the upcoming staff assist visit?
  - A. Understanding that a standardized National Mold Procedure Program should be established Bureau-wide.
  - B. The need to establish funding for roof replacement or repairs, remediation of mold and air, wipe and bulk sampling needs.

# Mail Envelope Properties (48CFD688.B3A : 217 : 45988)

Subject: Creation Date From: Mold Questionnaire 9/16/2008 3:53:48 PM Leroy Smith

# Created By:

lasmith@bop.gov

<b>Recipients</b> bop.gov	Action	Date & Time
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BOP0420 CC (Harley G. Lappin) PM	Opened	9/16/2008 4:51:39
AM	Deleted	9/17/2008 4:18:05
BOP2841 (Stephen Flannery) AM	Opened	9/18/2008 9:31:56
BOP5000 CC (John T. Dignam) AM	Opened	9/17/2008 7:47:11
AM	Forwarded	9/17/2008 7:47:33
bop.gov		
TCNADM1.TCNDOM1 PM	Delivered	9/16/2008 3:53:50
TCN0607 CC (Josias Salazar) AM	Opened	9/18/2008 7:26:42
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TCN2212 CC (Craig Apker) PM	Opened	9/16/2008 5:40:21
TCN5205 CC (Paul Cobb) TCN5257 CC (James Marchetti) PM	Opened	9/16/2008 3:59:27
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PM TCN8420 BC (Susan Mastin)	Opened	9/16/2008 4:12:53
PM TCN9834 CC (Mark Barnard)	Opened	9/17/2008 11:57:12
AM	Deleted	9/18/2008 9:12:28

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100_0522.JPG	1057239	9/11/2008 1:40:54 PM	
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Black Mold 006.jpg	452848	9/20/2006 2:21:10 I	
Black Mold 001.jpg	468083	9/20/2006 2:21:02 I	
Black Mold 002.jpg	461682	9/20/2006 2:21:04 I	
Black Mold 003.jpg	440725	9/20/2006 2:21:06 I	
Black Mold 004.jpg	463765	9/20/2006 2:21:06 I	
Black Mold 005.jpg	488451	9/20/2006 2:21:08 1	
Leroy Smith.vcf	208	9/16/2008 3:53:44 1	PM
Options			
Auto Delete:	No		
Expiration Date:	None		
Notify Recipients:	Yes		
Priority:	Standard		
Reply Requested:	No		
<b>Return Notification:</b>	None		
Concealed Subject:	No		
Security:	Standard		
-	T T		
To Be Delivered:	Immediate		
Status Tracking:	All Information		

From:BOP-HSD/Occupational SafetyTo:Smith, LeroyDate:10/29/2008 7:13 AMSubject:Re: Training Information

Leroy,

You are welcome. Please let me know if you need assistance in developing a training plan for your staff or yourself. Additionally, the National Safety Branch continues to provide training opportunity announcements (TOA's) for all safety staff. I encourage both you and your staff to take advantage of these TOA's. In addition, there are a number of safety classes available on the Internet and also in most local communities. I would encourage you to research both internet classes and local training opportunities.

I understand that you have been working with your Regional Safety Administrator for the past two years on mold issues at FCC Tucson. If additional assistance is necessary, please follow the guidance outlined in Program Statement 1600.09 concerning technical assistance visits.

Ron

#### >>> Leroy Smith 10/27/2008 12:59 PM >>>

I want to thank you for your help. I have a new administrative assistant and safety specialist. I thought by receiving information from the National Safety Branch would help to be consistent in ensuring my new staff receive the same training that you send our other safety brothers and sister too.

I spoke with Mr. Clements about our phone call and specifically the conversation between him and Mr. Flannery, which he recalls their conversation being quit different then your version. Also, you and Mr. Flannery new about FCI Tucson's mold concerns since 2006, which Mr. Korbelak was trying to address our concerns with little support at the National level. You mentioned that Mr. Korbelak was working with Mr. Clements without you or Mr. Flannery's knowledge. This would be hard to believe since you have made it very clear to the field that every correspondence in response to the field from the National Safety Branch is reviewed by you or Mr. Flannery for approval. The Regional Director and Regional Facilities Administrator requested your assistance through Mr. Kendig, which at the last minute Mr. Flannery terminated his staff assistant visit without making the Regional Facility Administrator aware of his decision. Also, we have not received any response from the National Safety Branch concerning the last minute Mold Questionnaire sent to FCI Tucson by either the Central Office Environmental Attorney or your office. The Team that you talked about on the phone has never included me since USP Atwater's hazardous toxic exposures. A team can't have blind loyalty as you have conveyed to me on many occasions, without serious consequences.

Again, thank you. All I wanted was some information concerning training for my staff, but you had to address your personal and unprofessional concerns with me on the phone prior to attempting to assist me in the field.

God Bless.

Leroy A. Smith, Safety Manager FCC Tucson, Arizona 520-663-5190 (Office) 520-663-5189 (Fax)

SENSITIVE/PRIVILEGED COMMUNICATION This e-mail is covered by the Electric Communication Privacy Act, 18 U.S.C. 2510-2521 and is legally

Attachment #145

privileged.

The information and/or documents with this transmission are confidential. The information is intended only for the

use of the individual/entity named above. If you are not the intended recipient or recipients, you are hereby notified

that any disclosure, copying, distribution of this communication, in any form, or the taking of any action in reliance upon

its contents, is strictly prohibited. If you receive this message in error, please notify me immediately to make arrangements

for its return to me.

>>> BOP-HSD/Occupational Safety 10/24/2008 11:44 AM >>> Leroy,

As discussed on the telephone a few minutes ago, I am providing some training information to you for the purpose of developing a training plan for your staff. Please feel free to call me at 202-353-8192, if you require any assistance developing the training plan.

Ron

#### Training Resources & Information:

#### PS 1600.09, dated 10/31/2007, Chapter1, Pages 3-4

OM 002-2007 (3906), dated 1/24/2007, Bureau Mandatory Training Standards

Arizona Division of Emergency Management http://www.dem.state.az.us/calendar/wc20060329.html

Columbia Southern University http://www.columbiasouthern.edu/

#### **Compliance Solutions**

http://www.csreqs.com/

Eastern Michigan University http://emuworldwide.net/

Environmental Protection Agency http://www.epa.gov/

#### FEMA

http://www.fema.gov/government/training/index.shtm

#### **Aarcher Institute of Environmental Training**

http://www.aarcherinstitute.com/index.php

#### WorldWideLearn

http://www.worldwidelearn.com/business-course/leadership-training.htm

#### **National Environmental Trainers**

http://www.natlenvtrainers.com/main.htm

## **National Institute of Corrections**

http://www.nicic.org/\_

OSHA Directorate of Training and Education Training Resources http://www.osha.gov/dcsp/ote/index.html

## **OSHA Training Institute**

http://www.osha.gov/dcsp/ote/oti.html

#### OSHA Training Institute (OTI) Education Centers http://www.osha.gov/fso/ote/training/edcenters/index.html

#### OWCP

Purdue Pest Control https://www.continuinged.purdue.edu/media/pest/pesttech/

Training Exchange Website http://www.trainex.org/\_

## **Mail Envelope Properties** (49083756.777 : 167 : 30584)

Subject: Creation Date From: Re: Training Information 10/29/2008 7:13:43 AM BOP-HSD/Occupational Safety

Created By:

BOP-HSD/Occupational Safety@bop.gov

## Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

## Post Office

TCNADM1.TCNDOM1

Files	Size
MESSAGE	9660

OptionsExpiration Date:NonePriority:StandardReply Requested:NoReturn Notification:NoneConcealed Subject:NoSecurity:Standard

#### Junk Mail Handling Evaluation Results

Message is not eligible for Junk Mail handling Message is from an internal sender

## Junk Mail settings when this message was delivered

Junk Mail handling disabled by User Junk List is not enabled Junk Mail using personal address books is not enabled Junk iCal Mail using personal address books is not enabled Block List is not enabled Route

**Date & Time** 10/29/2008 10:13:42 AM



Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

January 19, 2007

FROM: MEMORANDUM TO JOHN DIGNAM, CHIEF OFFICE OF INTERNAL AFFAIRS Leroy A. Smith, Safety Manager

SUBJECT:

OIA Complaint No. 2007-C-00312

I Leroy A. Smith Jr., Safety Manager, at Federal Correctional Complex, Tucson, Arizona, do hereby make the following declaration without any promises or assurances:

During the week of December 3 - 9, 2006, I observed Mr. Ron Day, National Safety Administrator and Mr. Dave Clements, Regional Safety Administrator approaching me at the table I was setting at during training. Mr. Ron Day, National Safety Administrator stated, "I need to speak with you and Dave." Mr. Day then escorted use outside the training room into the hall corridor and then into a vacant office. Mr. Day began by asking, "do you have any problems, Leroy?" I informed Mr. Day, that I wasn't clear on what he meant by his question. Mr. Day then stated, "I observed you nodding off in the training room." I informed Mr. Day, that several staff have been nodding off in the training room as well. Mr. Day then stated, "I didn't see anyone else, I just only observed you." Mr. Clements then stated, "Ron, myself and others have been nodding off as well." Mr. Day then replied, "I'm not speaking about anyone else other then Leroy." Mr. Day then asked, "are you on any type of medications?"

I hesitated to answer Mr. Days question, because I believe my medical history isn't any of his concern.

I then replied, Yes Mr. Day. Mr. Day then asked, "what type of medications are you taking?" I replied, I'm not going to tell you what type of medication, but I will say that they may cause drowsiness Mr. Day. Mr. Day then asked, "is there anything else

Attachment #146

wrong with you, which would cause you to be unprofessional and disrespectful to the instructors?" I replied, that I also have sleep apnea Mr. Day. I informed Mr. Day, that I never intended to disrespect anyone. Mr. Day then stated, "you better find away to stay awake and show some respect to the instructors. I then asked Mr. Day, if he would like me to stop taking my medication? Mr. Day then stated, "I don't care what you do, but you will not continue to nod off in training room."

Mr. Day then asked, "if there was anything else, I would like to talk about?" I replied, Yes. I then informed Mr. Day, that I wanted to know why Mr. Matthew Korbelak, National Industrial Hygienist was prevented in providing recommendations concerning the mold issues at FCC Tucson. Mr. Day then asked, "who told you that?" I replied, that Mr. Korbelak informed me that two ghost hands had tied his up, which prevented him from responding back. I also informed Mr. Day, that when I asked Mr. Korbelak why he never sent any recommendations, Mr. Korbelak replied that beside his hands being tied, two ghosts told him that it wouldn't be a good idea for him to provide me anything in writing to me.

After speaking with Mr. Clements at a later time, he stated, "that Mr. Korbelak had told him the same thing."

Mr. Day then asked, "Dave, didn't you receive the memorandum we sent you?" Mr. Clements replied, Yes. Mr. Clements then stated, "this was a separate issue." Mr. Clements also stated, "I provided Mr. Korbelak a copy of the sampling results, which Mr. Korbelak was going to review them and provide some recommendations to Leroy." I informed Mr. Day, that my Executive staff were waiting for me to provided Mr. Korbelak's recommendations to them, which would of allowed them to make necessary decisions in remediation of the mold. Mr. Day then asked, "did you put anything in writing?" I replied, No. Mr. Day then stated, "you might want to address your concerns in writing next time and request that you receive a response back writing." I replied, that policy doesn't require the field to put anything in writing when needing assistance from the Regional or National Safety Administrators. I then informed Mr. Day, that I followed the procedures he sent to all Safety staff in the field, which was to follow the Chain of Command. Mr. Clements then stated, "Leroy did call me about the mold issues at Tucson, which I'm not to familiar with mold, so I contacted Mr. Korbelak." Mr. Day then stated, "I don't know what to say." I then informed Mr. Day, that this was the same type of responses or lack of by the National Safety Division when addressing the concerns at USP Atwater.

The next week, I receive a call from Mr. Clements, which we discussed the incident with Mr. Day. Mr. Clements stated, "Mr. Day approached me about you nodding off prior to our meeting." I informed Mr. Clements, that I still believe Mr. Day was singling me out. Mr. Clements replied, "I don't know, but I told Mr. Day that others including myself were

nodding off as well." I informed Mr. Clements, that Mr. Day had no wright to ask me about my medical history. Mr. Clements replied, "that's one of the reasons why I called you." Mr. Clements then stated, "I want to tell you that Mr. Day was out of line and that you didn't have to answer his questions concerning your medical history." I informed Mr. Clements, that I answered Mr. Day's questions out of fear of retaliation and that I don't want anymore trouble. Mr. Clements then stated, "Mr. Day's questions were unprofessional. I then informed Mr. Clements, that Mr. Day was making this a personal issues with me and I didn't want to give him the opportunity to write me up for insubordination. Mr. Clements stated, "I told Mr. Day that 1 didn't see that you were really having a problem staying awake, otherwise I would have asked you to stand up." Mr. Clements then stated, "I asked Mr. Day if he wanted me to speak with you about it, which Mr. Day replied no." I informed Mr. Clements, that if Mr. Day had him speak with me, Mr. Day wouldn't receive any satisfaction from harassing me. Mr. Clements then stated, "Mr. Day requested me to be present when he spoke with you." I replied, that he wanted to provoke me into making a mistake, which would allow him to write me up and that he would even have a witness to support him. Mr. Clements stated, "the truth is the truth and what he did was wrong." I replied, that I appreciated him protecting my back, which I haven't had that kind of support in a long time.

.....

I then informed Mr. Clements, that I immediately informed my supervisor, Associate Warden, Walter Jones about the incident that occurred with Mr. Day during training. I then informed Mr. Clements, that I will also be immediately notifying Mr. Jones about our conversation as well.

Finally, I believe once again Mr. Day personally isolated me for personal reasons. I believe Mr. Day's continued harassment and retaliation against me is directly related to USP Atwater, which violates my protected rights under the Whistleblowers Protection Act and No Fear Act. I believe Mr. Day's questioning of my medical history violates my rights to Patient and Doctor Privileged Information and Privacy Act. I believe Mr. Day's demeaning actions violates the Employee Code of Conduct. Also, Mr. Day interference and coercing towards Mr. Korbelak in preventing him in participating and providing technical assistance on environmental health concerns at FCC Tucson, violates Executive Order 12196 and OSHA 29 CFR 1960.

If there are any questions pertaining to this matter, please do not hesitate let me know.

cc: Harley Lappin, Director Bureau of Prisons
S. Randell Humm, Office of Inspector General
Mary Dryovage, Attorney

<u>SBU</u> - Sensitive But Unclassified



March 16, 2007

S. Randall Humm, Investigative Counsel Oversight and Review Division Office of the Inspector General 1425 New York Avenue, NW Suite 700 Washington, D.C. 20530

Dear Mr. Humm

I will provide you a chronological conversation with Mr. Matthew Korbelak, National Industrial Hygienist. This conversation took place during a break at the safety training being conducted at the North Central Regional Office. I believe the following information will show the interference and diversion fear he and other staff working at the UNICOR Recycling Factories have towards speaking out.

On December 5, 2006, at 9:00 a.m., I asked Mr. Korbelak, why hasn't he provided any technical assistance concerning the mold concerns, which he promised to provide?

Mr. Korbelak replied, "I'll speak to you during break."

During break Mr. Korbelak stated, "I want to first say that Stacey and I support what you have done about UNICOR Recycling Factory and protecting the staff and inmates." Mr. Korbelak then stated, "you have done what most people only think about, were very proud to be your friend."

I replied to Mr. Korbelak, that I am glade to hear that they support me, but what prevented him from providing me your recommendations concerning the mold at Tucson?

Mr. Korbelak replied, "two qhost hands had tied mine up."

I then asked Mr. Korbelak, are you telling me that Ron Day and John Lee stopped you from assisting me? Mr. Korbelak replied, "it's not hard to figure that out for

Attachment 4147

yourself." Mr. Korbelak then stated, "all I am going to say is the two who tied my hands were the same two ghosts that told me it wouldn't be a good idea for me to provide you anything in writing."

I then mentioned to Mr. Korbelak, that Steve Tussey and John Lee did the same thing to him concerning the USP Atwater toxic exposures.

Mr. Korbelak replied, "look at my recommendations I wrote concerning Atwater."

I mentioned to Mr. Korbelak, that his recommendations supported my safety and environmental concerns with the Cathode Ray Tubes (CRT's) process.

Mr. Korbelak then stated, "I want you to know that I never stopped supporting you, but things run differently in the Central Office.

I then mentioned to Mr. Korbelak, I noticed that shortly after my initial interview with the Office of Internal Affairs (OIA), which Mr. Lee, Ms. Cantwell and himself were allowed to participate as experts in the field.

Mr. Korbelak then stated, "you told the truth and you had documents to support your concerns about monitor recycling program."

I mentioned to Mr. Korbelak, that OIA had five of them at the initial interview, which four of them were employee's that had been combative with me concerning the computer recycling program at USP Atwater and other institutions.

Mr. Korbelak replied, "I notice you were not comfortable being out numbered during the interview."

I replied to Mr. Korbelak, I was uncomfortable, especially when I requested for a representative, which even my personal doctor requested that I have a representative there during my interview and OIA denied me representation, which is unconstitutional and violation of my civil rights as an American Citizen.

Mr. Korbelak then stated, "You and your family have went through a lot during the three to four years you were at USP Atwater, which should of never happened."

I then mentioned to Mr. Korbelak, that he is a true hero, by

standing up and writing the truth about the OSHA and EPA violations UNICOR continued to conduct at other Computer Recycling Programs, including USP Atwater.

Mr. Korbelak then replied, "I don't know if I could of stood up like you have nor could to many other employees."

I then mentioned to Mr. Korbelak, that after he disagreed with Ms. Cantwell about UNICOR having good communication between UNCIOR and Central Office Safety and other discrepancies in their version of the truth, which was noted as part of my avadavat, he seemed to be removed from the entire situation/case.

Mr. Korbelak replied, "I applied for the UNICOR Environmental position, which they used my Job Description for the development of the job announcement.

I mentioned to Mr. Korbelak, that I thought he would be the perfect person for the job.

Mr. Korbelak replied, "so did I, but I guess they had someone else in mind."

I then asked Mr. Korbelak, who did they finally select for the position?

Mr. Korbelak replied, "it may seem funny, but they hired an Industrial Hygienist from OSHA."

I then mentioned to Mr. Korbelak, that doesn't sound funny to me nor does it surprise me at all.

Mr. Korbelak replied, "well it did surprise me."

I then mentioned to Mr. Korbelak, again you're a true hero, you spoke the truth and wrote the truth about the current operating and environmental procedures not meeting OSHA and EPA standards. I also mentioned to Mr. Korbelak, that because of your high ethics and true concern for the safety and health of the staff and inmates, they deny you a promotion and begin to take duties and responsibilities away from you, it sounds like retaliation and a coverup to me.

Mr. Korbelak then stated, "the way things have happen, I would probably be better off as a Safety Manager in Colorado."

I then mentioned to Mr. Korbelak, that he will come out the better person for what he attempted to do in protecting the staff and inmate workers, which that's what we get paid for. Mr. Korbelak replied, "ya, I guess so." I finally mentioned to Mr. Korbelak, that it seems to very suspicious that OSHA gives UNICOR a clean bill of health and at the same time they hire a person from OSHA, which seems to put all the pieces together.

If there are any questions, please do not hesitate to let me know.

Sincerely, BOP Employee

cc: Congressman Pete Hoekstra Senator John McCain Senator Hilary Rodham Clinton Harley Lappin, Director Bureau of Prisons Mary Dryovoge, Attorney Dave Clements, Western Regional Safety Administrator Matthew Korbelak, Industrial Hygienist

Federal Bureau of Prisons



Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

September 18, 2008

## MEMORANDUM FOR ROBERT MCFADDEN, WESTERN REGIONAL DIRECTOR

CRAIG APKER, COMPLEX WARDEN

LOUIS W. WINN JR., WARDEN

afety Manader

FROM:

SUBJECT :

Occupational and Indoor Air Quality Assessments - Work Area (Mold)

The purpose of this memorandum is to clarify additional air, wipe and bulk sampling in the Facility shop areas, Health Services and Yucca Unit. The sampling should be conducted to determine the type and level of mold toxins, with the current mold remediation projects. Any delay can cause mold growth to increase over time.

Wipe samples were conducted to evaluate the mold concentrations in the Business, Commissary and Safety/Facility air ventilation ducts. The wipe samples showed evidence of Cladosporium and Basidiospores, Alternaia, Curvularia, Smuts and Ascospores. When Cladosporium and Alternaia are present together they can be significant allergen.

It is recommended that we request the services of a qualified mold remediation company to conduct additional sampling for the assessment of indoor air quality and the possible presence of mold toxins in identified areas. The additional sampling will verify if mold is present, what type of mold and how it must be dealt with if the sampling results are positive.

If you have any questions, please contact me.

Attachment #148



Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

September 19, 2008

MEMORANDUM FOR CRAIG APKER, COMPLEX WARDEN

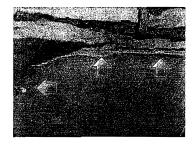
LOUIS W. WINN JR., WARDEN

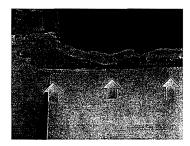
/S/
FROM: Leroy A. Smith Jr.,
FCC Safety Manager

SUBJECT: Occupational and Indoor Air Quality Assessments - Work Area (Mold)

As of September 18, 2008, there have been three new areas where a mold toxin substance has been identified:

Yucca Unit Officers (North) ceiling -

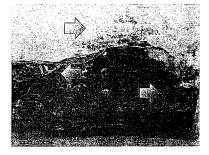


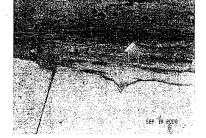




The whole has been sealed off with 6mil poly and duct taped to the ceiling to help minimize any potential mold spores becoming airborne until further sampling can be conducted to determine the type and level of mold toxins present.

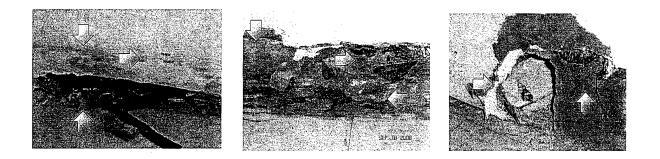
Palo Verde Unit Bathroom walls and ceiling -





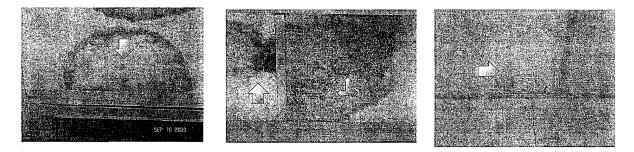


Affachmant #149



Sections of the drywall for the ceiling and wall areas have been removed and replaced recently, which mold growth appears not to be isolated in one location. No additional drywall should be removed and replaced until additional sampling is conducted to determine the type and level of mold toxins present.

Carpenter Foreman's Office ceiling -



The mold toxin growth has developed around the ventilation duct and right support wall area. Additional sampling needs to be conducted to determine the type and level of mold toxins present.

There has been an increase of mold toxin growth throughout the FCI buildings in the past three months. The mold growth has not been isolated to small surface areas, but severe growth has been identified in the ceilings and in between the walls. The mold growth has been developing over time and any continued delay will cause further mold growth, which in time can potentially affect the health of our staff and inmates.

It is recommended that we request the services of a qualified mold remediation company to conduct additional sampling for the assessment of indoor air quality and the possible presence of mold toxins in the ceiling, walls and ventilation ducts throughout the institution areas. The additional sampling will verify if mold is present, what type of mold and how it must be dealt with if the sampling results are positive.

If you have any questions, please contact me.

cc: AW, Salazar AW, Beckwith FM, Marchetti Robert McFadden, Western Regional Director Dave Clements, Regional Safety Administrator Local Union



Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

#### July 17, 2008

#### MEMORANDUM FOR CRAIG APKER, COMPLEX WARDEN

LOUIS W. WIMN JR WARDEN Wafety Manager SUBJECT: Work Areas (Mold)

FROM:

As a precautionary measure the Safety Department requests the FCI Commissary and Safety Department receive air and wipe sampling to determine the presence of mold. These work areas have been previously identified through monthly inspections. It is recommended that these areas be added to the current air and bulk sampling being collected at the FCI Administration building.

It is also recommended that we request the services of Dale Kruppinski, CSP, CIH, Environmental, Health and Safety Manager for UNICOR out of FCI Englewood, to help keep our costs to a minimum.

If there are any questions, please do not hesitate to let me know.

cc: AW, Calcote AW, Beckwith Marchetti, Facilities Manager Cobb, FCI General Foreman Clements, Regional Safety Administrator

Attachment #150

# Mail Envelope Properties (487F6D2F.B3A : 217 : 45988)

Subject: Creation Date From: Emailing: MOLD SAMPLE MEMO 7-17-2008 7/17/2008 4:02:56 PM Leroy Smith

## **Created By:**

lasmith@bop.gov

Recipients	Action	Date & Time
bop.gov		
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TCN2212 (Craig Apker) AM	Opened	///0/2000 //25.01
TCN5205 CC (Paul Cobb)	Opened	7/22/2008 3:23:55
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	Forwarded	7/18/2008 7:39:55
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bop.gov		
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# Page 2

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PM	-			
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Return Notification:	None			
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Security:	Standard			
· · · · · · · · · · · · · · · · · · ·				
To Be Delivered:	Immediate			
Status Tracking:	All Information			
Status TransP.				

From:	Louis Winn
To:	Leroy Smith
Date:	10/19/2008 9:15 AM
Subject:	Re: Mold

Thanks

-----Original Message-----From: Leroy Smith Cc: Josias Salazar <jxxsalazar@bop.gov> To: Louis Winn <lwinn@bop.gov> Cc: Esther White <exWhite@bop.gov> Cc: Craig Apker <capker@bop.gov> To: James Marchetti <jmarchetti@bop.gov> Cc: David Clifford <DClifford@bop.gov> Cc: Daniel Beckwith <dbeckwith@bop.gov> Cc: Mark Barnard <MBarnard@bop.gov> Cc: John Clements <jdclements@bop.gov>

Sent: 10/18/2008 2:17:27 PM Subject: Re: Mold

Warden, Winn

It is my understanding that we have attempted to repair a roof that needs to be replaced. Until we have a good rain day we will not know if all leaks have been repaired. I believe we have not conducted any mold abatement in the Commissary or Yucca Unit. We just received the mold analytical data on Yucca Unit. Palo Verde, Health Services and Carpentry Shop areas, which the bulk sample results were off the chart. We can't forget about the roof repairs, abatement and cleaning of the mold in the Facility and Safety Department areas, which had the highest concentrations of mold until the recent test results were received yesterday. Many of these areas will require the removal of the dry wall (Ceiling and Wall), insulation, ceiling tiles. Then the ceilings, walls, floors and office equipment will need to be properly cleaned to help prevent additional mold growth. These areas will need to be sealed off during the abatement and cleaning process. Once the removal and cleaning has been completed additional personal air sampling will need to be conducted for staff and inmate workers, outside and inside air sampling will need to be conducted and wipe sampling up in the ceiling, vents walls and equipment will need to be to ensure the mold abatement process was successful. We will need to ensure staff and inmate workers are provided proper Personal Protective Equipment (PPE), which may require medical clearance and fit testing. Also, a mold cleaning solution will need to be purchased and applied for proper cleaning, which will require the Safety Department to review and approve the type of chemical being purchased to ensure we comply with the new EMS program.

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I am requesting that additional funding be provided to conduct a thorough Health and Environmental Risk Assessment of all buildings at FCI, Tucson, which will ensure compliance with OSHA's and EPA's Occupational Exposure, Housekeeping and Indoor Air Quality regulatory guidelines. All of our analytical data from 2006 to present has shown mold growing in the drywall, ceiling tiles, insulation, ventilation ducts and to be airborne as well. There are several types of mold being found that will cause staff and inmates severe health affects over long term exposure, especially the staff and inmates that have preexisting health concerns. The same mold health concerns may affect other institutions Bureau-wide. The Arizona Department of Corrections has recently tom down at least one of their Housing Units for a variety of molds exposing their staff and inmates.

I trust this helps answer many questions or concerns.

Leroy A. Smith, Safety Manager FCC Tucson, Arizona

Attachment #151

520-663-5190 (Office) 520-663-5189 (Fax)

SENSITIVE/PRIVILEGED COMMUNICATION

This e-mail is covered by the Electric Communication Privacy Act, 18 U.S.C. 2510-2521 and is legally privileged.

The information and/or documents with this transmission are confidential. The information is intended only for the

use of the individual/entity named above. If you are not the intended recipient or recipients, you are hereby notified

that any disclosure, copying, distribution of this communication, in any form, or the taking of any action in reliance upon

its contents, is strictly prohibited. If you receive this message in error, please notify me immediately to make arrangements

for its return to me.

>>> Louis Winn 10/17/2008 4:31 PM >>>

As I understand it, we have repaired the commissary roof and completed remediation in the commissary. Additionally, we identified and repaired the source of the leak in the Yucca North office and completed remediation. Please provide me with final confirmation and then proceed with post abatement testing.

We also may want to conduct some additional training with orderlies to reinforce proper cleaning procedures, particularly in the bathrooms.

Lastly, if we have not already, change out any ceiling tiles that are discolored as the result of moisture.

Thank you

From:Leroy SmithTo:Winn, LouisCC:McClintock, SusanSubject:Fwd: Re: Business Office RelocationAttachments:Re: Business Office Relocation

I am a little concerned with this type of response. Especially, when it concerns the safety and health of our staff. It appears communication has broken down somewhere. The contractors recommendation was to ensure follow-up sampling was conducted once the remediation of the mold was complete. The need to conduct final air and wipe sampling was also identified on the Mold Plan of Action report dated 12-02-2008. Also, it appears we didn't even notify the Local Union. I will let the staff know that additional sampling still needs to be conducted and the results will be available for them to review when received. I would like to recommend that meeting minutes be taken for all future discussions concerning mold.

Altachment #152



## Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

## April 13, 2009

MEMORANDUM FOR ERIC H. HOLDER Jr., UNITED STATES ATTORNEY GENERAL mot FCC Safety Manager FROM: Smith Jr Leroy F Conspire, Conceal, Obstruction, Interference SUBJECT:

Working Conditions

This is in response to Newton E. Kendig, Assistant Director Health Services Division, letter dated December 15, 2008. Mr. Kendig's lack of candor response that after speaking with the Regional Director it was determined that staff from the Western Regional Office and FCC Tucson were addressing the issue and additional staff resources from the Central Office were not required.

with Prompt Abatement of Unsafe or Unhealthy

Mr. McFadden, Regional Director, Mr. Kendig and Mr. Batten, Regional Facility Administrator collaborated together without seeking any guidance from Mr. Clements, Regional Safety Administrator which serves as the subject matter experts for the field. Warden Winn stated, I was not consulted by Mr. McFadden or Mr. Kendig about having the Health Services Division conduct a staff assistance visit at FCI Tucson.

Warden Winn stated, Mr. McFadden denied your request for funding to conduct a complete health risk assessment and the cleaning the ventilation ducts. Mr. McFadden, Complex Warden Apker and Warden Winn never responded to my request to have the Agency's or UNICOR's Industrial Hygienists conduct a health risk assessment from 2006 through 2008.

The Health Services Division e-mailed a Mold Questionnaire to Warden Apker and Warden Winn, which was assigned to me and needed

Attachment #153

to be completed prior to their arrival. Mr. Batten "Only" became aware that the Health Services Division canceled the staff assistance visit while in transit to FCI Tucson. Mr. Apker, Mr. Winn, Mr. Clements, Facility Manager Marchetti and myself were made aware of the cancellation when Mr. Batten arrived the day of the visit.

Mr. Day, National Safety Administrator and Mr. Flannery, National Environmental Coordinator canceled the technical assistance visit without notifying Mr. McFadden, Mr. Clements, Mr. Apker, Mr. Winn, or myself. According to Mr. Clements, he called Mr. Flannery, which he asked, who contacted them (National Safety Branch) to conduct a technical assistance visit, which Mr. Flannery replied, Mr. McFadden and Mr. Batten. Mr. Flannery asked Mr. Clements, if it was necessary for him to still come out to FCI Tucson, which he replied, I am not in a position to tell you to come or not to come out, that's up to you, Mr. Day and the Regional Director. Mr. Flannery e-mailed Mr. Clements concerning the technical assistance visit. He wanted Mr. Clements to confirm that he told Mr. Flannery not to come to Tucson, which Mr. Clements denies that particular conversation ever happened. Then Mr. Clements received an e-mail from Mr. Greg Myers, Environmental Attorney, Office of General Counsel, which was suppose to be a response to Mr. Flannery concerning the conversation between Mr. Flannery and Mr. Clements. Mr. Clements stated, Mr. Myers conveyed to Mr. Flannery, that we are trying to get Mr. Clements to commit, that he (Mr. Clements) or FCC Safety staff have not requested any assistance from the National Safety Division concerning mold at FCC Tucson for the past two years.

In Conclusion: I believe the Agency is delaying this investigation do to the fact that Mr. Clements will be retiring in July, 2009. Also, it appears Mr. Kendig was ill informed by Mr. Day, Mr. Flannery and Mr. Meyers or Mr. Kendig actions or lack of continues to demonstrate the Bureau of Prisons cover-up of what I believe is corruption, gross mismanagement, obstruction and interference of my ability to make decisions necessary to correct unsafe and unhealthy working conditions. I believe Mr. Meyers actions violate the board of ethics and misconduct by attempting to coerce Mr. Clements in making false statements. Mr. Lappin and other Executive staff continue to conspire to conceal reported allegations of reprisal and employee misconduct.

I want to thank you for your assistance and reviewing this document to ensure appropriate action is taken. If there are any questions, please advise.



Federal Bureau of Prisons

Washington, D.C. 20534

December 15, 2008

Leroy A. Smith Jr. Safety Manager Federal Correctional Complex Tucson, Arizona 85706

Dear Mr. Smith:

Your memorandum to Michael Mukasey, United States Attorney General, has been forwarded to my office for response. You have raised questions regarding the scheduling of a staff assistance visit to FCC Tucson.

On August 26, 2008, Regional Director, Western Region, asked that Central Office staff visit FCC Tucson to evaluate the actions taken after mold was identified at the Federal Correctional Institution. After speaking with the Regional Director it was determined that staff from the Western Regional Office and FCC Tucson were addressing the issue and additional staff resources from Central Office were not required.

The other allegations you address in your letter were previously referred to the appropriate office for review.

I trust this information is responsive to your inquiry.

Sincerely,

RADM Newton. E. Kendig Assistant Director Health Services Division

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#### Environmental:

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#### September 16, 2008

Mr. Jim Marchetti Facilities Manager Federal Corrections Institution U.S. Bureau of Prisons 8901 S. Wilmot Road Tucson, AZ 85706

Re: Mold Remediation Meeting

#### Introduction

✗ On September 3, 2008, a meeting was held to discuss the procedures to properly remediate the growth of mold in three buildings that were previously identified as having mold growth at the above location. The three buildings were the Administration Building, the Commissary Building and the Safety Building. The meeting attendees were Steve Olson of Applied EnviroSolutions, Inc. (AES), Jim Marchetti, Leroy Smith, Rick Batten and Paul Cobb, all employees of the U.S. Bureau of Prisons.

#### Background

The Administration Building had been previously remediated for mold, but because the roof continued to leak, it was suspected that the mold growth may have returned. As a result, on June 26, 2008, AES took a few screening samples for airborne mold spores in various areas in the Administration building. Subsequent laboratory analysis revealed that mold spores inside the building exceeded the types and amounts of mold found outside the building. When this occurs, it can be assumed that there is mold growth somewhere within the structure. On July 22, 2008, additional sampling was performed to investigate the mold presence, with special attention to the air handling systems. This sampling showed that there was mold growth of different types in the air handling systems.

Toli Free (800) 478-7611

## **Meeting and Inspection Results**

After a brief meeting, a walk through was performed to examine the three buildings and the areas to be remediated. A visual inspection of the water damaged ceiling tiles in the Commissary Building was first performed. Following that, the flat roofs of all three Building roof were examined. The Commissary Building roof is approximately 25 years old, and in poor condition. There were areas with cracks and several areas of apparent failure.

The Administration Building roof also had several areas of apparent failure around the drains, flashings and penetrations. The Safety Building roof is metal, and therefore is theoretically impervious to leaks. However, the parapets around the circumference of the building are leaking and are in need of repair.

First inspect and repair the leaking roofs on all three buildings. Second, it is recommended that the ventilation systems, the mold affected ceiling tiles and the spaces above the ceiling tiles in the three buildings be thoroughly remediated by a professional mold remediation company.

The interior surfaces of the three buildings should also be wiped cleaned and affected areas fogged with a commercially available biocide by a professional remediation company. The stained and damaged ceiling tiles should also be immediately removed and replaced in all areas of all buildings to prevent the continued growth of existing mold.

While the workers that perform the interior cleaning do not require any certifications, the cleaning should be done in accordance with worker protection regulations, as promulgated by the federal Occupational Health and Safety Administration (OSHA) and Bureau of Prisons Policies.

Following the remediation and cleaning, it is further recommended that confirmatory air sampling be performed in the air handling systems and in the interior ambient air of all three buildings to verify that the cleaning was effective. After effective remediation and cleaning, the types and amounts of mold spores must not exceed the ambient outdoor levels.

AES can also assist in the remediation services by providing a subcontractor to perform the work and/or supervision of the remediation.

The physical health effects of exposure to mold can vary from person to person, depending upon the amount and types of mold present, and one's sensitivity and general state of health. There are no state or federal numerical standards for mold in Arizona. Please see <u>www.epa.gov/mold/</u> and <u>www.OSHA.gov</u> web sites for further information regarding mold and its effects on health and building materials.

If you have any questions regarding this report, re-sampling, remediation or any other indoor air quality related services, please do not hesitate to contact AES at (480) 839-7000.

Sincerely M K.OL

Steve Olson Project Manager



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520-663-5190 (Office) 520-663-5189 (Fax)

#### SENSITIVE/PRIVILEGED COMMUNICATION

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We also may want to conduct some additional training with orderlies to reinforce proper cleaning procedures, particularly in the bathrooms.

Lastly, if we have not already, change out any ceiling tiles that are discolored as the result of moisture.

Thank you

K

Attachment # 165

From:	Louis Winn
To:	Leroy Smith
Date:	10/19/2008 9:15 AM
Subject:	Re: Mold

#### Thanks

----Original Message-----From: Leroy Smith Cc: Josias Salazar <jxxsalazar@bop.gov> To: Louis Winn <lwinn@bop.gov> Cc: Esther White <exWhite@bop.gov> Cc: Craig Apker <capker@bop.gov> To: James Marchetti <jmarchetti@bop.gov> Cc: David Clifford <DClifford@bop.gov> Cc: Daniel Beckwith <dbeckwith@bop.gov> Cc: Mark Barnard <MBarnard@bop.gov> Cc: John Clements <jdclements@bop.gov>

Sent: 10/18/2008 2:17:27 PM Subject: Re: Mold

#### Warden, Winn

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I am requesting that additional funding be provided to conduct a thorough Health and Environmental Risk Assessment of all buildings at FCI, Tucson, which will ensure compliance with OSHA's and EPA's Occupational Exposure, Housekeeping and Indoor Air Quality regulatory guidelines. All of our analytical data from 2006 to present has shown mold growing in the drywall, ceiling tiles, insulation, ventilation ducts and to be airborne as well. There are several types of mold being found that will cause staff and inmates severe health affects over long term exposure, especially the staff and inmates that have preexisting health concerns. The same mold health concerns may affect other institutions Bureau-wide. The Arizona Department of Corrections has recently tom down at least one of their Housing Units for a variety of molds exposing their staff and inmates.

I trust this helps answer many questions or concerns.

Leroy A. Smith, Safety Manager FCC Tucson, Arizona

Attachment # 166

## Leroy Smith - Fwd: Re: Noise, Light, Ventilation Surveys

From:	Christi Andrews
To:	Smith, Leroy
Date:	4/20/2009 12:09 PM
Subject:	Fwd: Re: Noise, Light, Ventilation Surveys

>>> John Clements 4/20/2009 10:17 AM >>> These look good to me Leroy!

Dave

>>> Christi Andrews 4/17/2009 3:20 PM >>>

Hello. Leroy asked me to send you the 2007, 2008 & 2009 Noise, Light and Ventilation surveys. He would like you to review them to ensure they meet both ACA and Bureau standards. Please note 2009 was only a noise and light survey, no ventilation.

Attachment #177



Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

August 2, 2007

Complex Safety Manager

MEMORANDUM FOR LOUIS W. WINN JR., WARDEN

THRU:

n Roy, Associate Warden

FROM:

SUBJECT: Air Ventilation Flow Test

Per Mr. Roy's request, the Safety Department will explain the importance of conducting an air ventilation flow test at the FCI. The air ventilation flow test is to ensure compliance with Program Statement 1600.08, Occupational Safety and Environmental Health guidelines and the American Correctional Association (ACA) standards.

The Safety Department has repeatedly provided technical advice concerning the air ventilation flow/balance testing previously conducted at FCI, Tucson. This information has been disseminated to you through Mr. Roy, Associate Warden. It appears by the documentation reviewed by the Facilities and Safety Department that a complete air ventilation flow test has not been performed since the activation of the FCI. Also, the air ventilation flow, occupancy and space requirements become very important when you have especially authorized three (3) inmates to be bunked into one cell. We have two inmates are assigned to one bunk, which the third bunk does not reflect on sentry or on our annual rated capacity report. I will provide you the following information for your review:

(1)

Attachment #155

1. Documentation available showed that a H.V.A.C. Systems test and balance report was conducted on September 22, 1998 and N.E.B.B. Certified Balance Report conducted on March 14, 2000, which was conducted to balance the air ventilation system. These documents have been provided to Mr. Roy for your review.

2. According to Program Statement 1600.08, Occupational Safety and Environmental Health, chapter 2, page 10, section E-2, states the following: At least 10 cubic feet of outside or re-circulated filtered air per minute shall be provided for each occupant of each area except for dining rooms, which shall be provided with at least 20 CFM per occupant. **(Old Construction Only)** 

3. According to American Correctional Association (ACA) Indoor Air Quality, Standard 4-4152, states the following: Circulation is at least ten cubic feet of fresh or re-circulated filtered air per minute per occupant for inmate cell/rooms, officer stations, and dining areas, as documented by an independent, qualified source. (Existing)

**NOTE:** To ensure that we are in compliance, the Safety Department would like to recommend an outside independent contractor to conduct a complete air ventilation flow test of all ACA required areas at the FCI. If you approve this work to be conducted, we can have the work begin by August 20, 2007.

Also, yesterday Mr. Roy called the safety office to inquire on your behalf if Mr. Moriarty or myself have received formal training on the velometer meter, which we used to check the air flow in the units at the FCI. Mr. Moriarty nor I have received any formal training on this particular mandatory piece of test and support equipment. We have knowledge and generic training on other similar equipment, which was provided by the Bureau of Prisons at MSTC in Aurora, Colorado. We are trained enough to identify potential problems and recommend solutions, but we don't certify off on air ventilation flow tests, light or noise surveys. This would be contracted out and certified by an Industrial Hygienist, Civil or Mechanical Engineer.

I would like to ask, if there is anyone at FCC Tucson that has formal Occupational Safety and Environmental Health training, besides the safety staff? If there is, I would like to consult with this subject matter expert to squash any future interference or restraint, which would prevent the safety staff from addressing and correcting potential unsafe and unhealthful working and living conditions at FCC Tucson. If not, I believe that's why the Bureau of Prisons invested hundred and thousand of dollars in each of the safety staff to make them the institution representative subject matter expert. This continued restraint,

(2)

interference, and demeaning tactics by the Executive staff at this institution clearly violates Executive Order 12196, 29 CFR 1960, and Program Statement 1600.08, and the Civil Rights of the Safety staff.

1. The Chief Executive Officer shall - ensure that employees are not subject to restraint, interference, coercion, discrimination or reprisal for exercising their right under Executive Order 12196, 29 CFR 1960, or for participating in the Bureau's Safety and Environment Health Program, which Kenneatha Clark, OSHA Compliance Officer has already expressed her concerns about this law, rule and regulation being violated by Executive staff at FCC Tucson during her visit. Also, she provided an OSHA pamphlet to Mr. Roy and Warden Chavez, which she read to them the above reference information and told them that she hoped that she will not have to come back in a couple of weeks to address these issue.

If there are any questions or any additional information is needed, please advise.

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# Mail Envelope Properties (46B7B0D1.6A3 : 217 : 45988)

Subject:	Air Ventilation Flow Test
Creation Date From:	8/6/2007 4:37:53 PM Leroy Smith

Created By: lasmith@bop.gov

Recipients	Action	Date & Time
bop.gov	D - l'accurat	0/C/2007 4-29-27 DM
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HRM/UMBUDSMAN~)	Deleted	8/8/2007 5:45:40 AM
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BOF0420 CC (Harley O. Lappin)	Deleted	8/7/2007 4:50:57 AM
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TCN7228 (Ricardo Chavez)	Opened	8/6/2007 5:04:33 PM
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WXR6319 CC (Robert McFadden)	Opened	8/6/2007 8:37:23 PM
igc.org	Transferred	8/6/2007 4:39:00 PM
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Leroy Smith.vcf	217

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# CERTIFIED TEST, ADJUST, AND BALANCE REPORT

DATE: 3-14-00

PROJECT:

ADDRESS:

FEDERAL CORRECTIONS

8901 South Wilmont Tucson, Arizona

**PROJECT NUMBER:** 

7-00-1-7943

**PREPARED FOR:** 

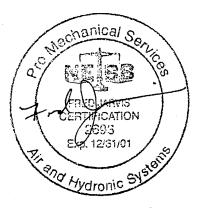
CRAIG OLIVER

MECHANICAL CONTRACTOR: NEBB TAB CONTRACTOR:

PRO MECHANICAL SERVICES, INC. 4633 South 36th Street Phoenix, Arizona 85040 (602) 437-8110 Fax (602) 437-3894 Tucson (602) 622-0907

National Environmental Balancing Bureau Report not valid unless stamped with NEBB Certification Seal

TAB 1-83 © Copyright, NEBB 1983



Attachment # 156

# CERTIFICATION



## PROJECT FEDERAL CORRECTIONS

ADDRESS 8901 South Wilmont Tucson, Arizona

THE DATA PRESENTED IN THIS REPORT IS AN EXACT RECORD OF SYSTEM PERFORMANCE AND WAS OBTAINED IN ACCORDANCE WITH NEBB STANDARD PROCEDURES. ANY VARIANCES FROM DESIGN QUANTITIES WHICH EXCEED NEBB TOLERANCES ARE NOTED THROUGHOUT THIS REPORT.

THE AIR DISTRIBUTION SYSTEMS HAVE BEEN TESTED & BALANCED AND FINAL ADJUSTMENTS HAVE BEEN MADE IN ACCORDANCE WITH NEBB "PROCEDURAL STANDARDS FOR TESTING - ADJUSTING - BALANCING OF ENVIRONMENTAL SYSTEMS" AND THE PROJECT SPECIFICATIONS.

# NEBB CONTRACTORPRO MECHANICAL SERVICES, INC.REG. NO. 2693CERTIFIED BY.FRED JARVIS<br/>(Air TAB Supervisor)DATE 3-14-00

THE HYDRONIC DISTRIBUTION SYSTEMS HAVE BEEN TESTED & BALANCED AND FINAL ADJUSTMENTS HAVE BEEN MADE IN ACCORDANCE WITH NEBB "PROCEDURAL STANDARDS FOR TESTING - ADJUSTING - BALANCING OF ENVIRONMENTAL SYSTEMS" AND THE PROJECT SPECIFICATIONS.

 NEBB CONTRACTOR
 PRO MECHANICAL SERVICES, INC.

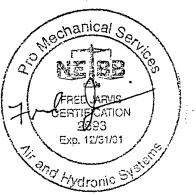
 REG. NO.
 2693 CERTIFIED BY
 FRED JARVIS
 DATE
 3-14-00

 (Hydronic TAB Supervisor)

SUBMITTED & CERTIFIED BY:

NEBB CONTRACTOR TAB SUPERVISOR REG. NO. DATE PRO MECHANICAL SERVICES, INC. FRED JARVIS 2693 3-14-00

National Environmental Balancing Bureau Report not valid unless stamped with NEBB Certification Seal



TAB 2-83 Copyright NEBB 1983



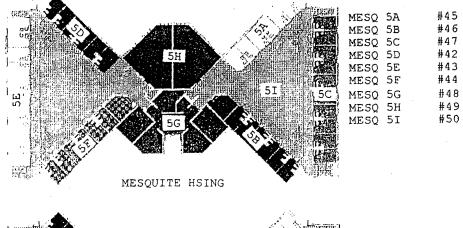
.4633 South 36th Street Phoenix, Arizona 85040 (602) 437-8110 Fax (602) 437-3894

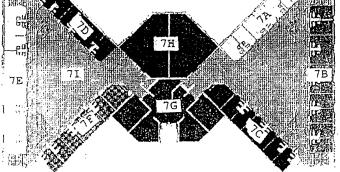
# FEDERAL CORRECTIONS INSTITUTION

# **TUCSON FACILITY**

# FRESH AIR VENTILATION SURVEY

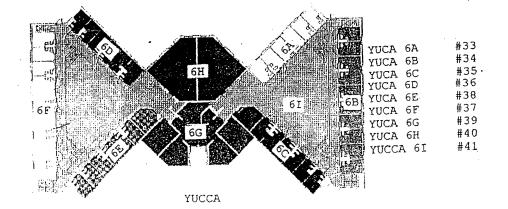
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CHOLLA HVAC 29A	38" X 12"	3.17 SQ FT	102 FPM	323 CRM
PALO VERDE HVAC 10E	38" X 12"	3.17 SQ FT	147 RPM	466 CFM
MEQUITE HAVC 5C	42" X 14"	4.08 SQ FT	109 FPM	445 CFM
YUCCA HVAC 6D1	42" X 14"	4.08 SQ FT	72 FPM	294 CFM
SAGUARO HVAC 7F	26" X 11"	1.99 SQ FT	155 FPM	308 CFM

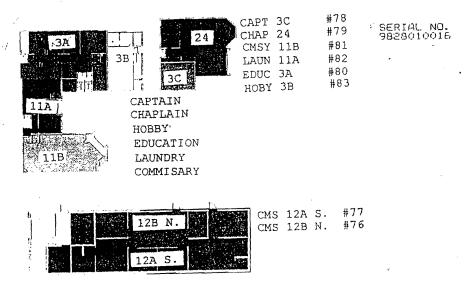




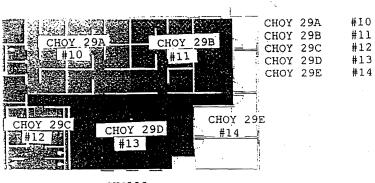
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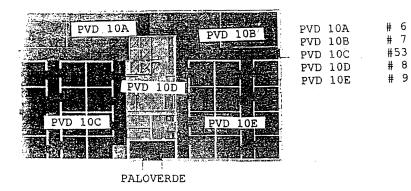
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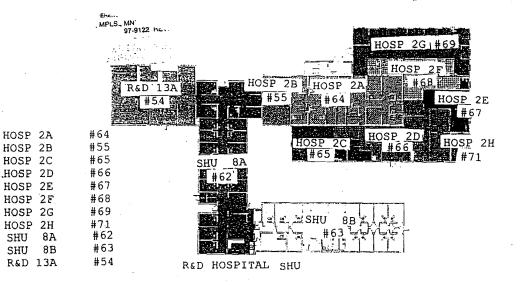
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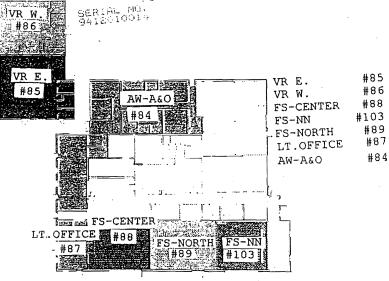
#106 TR-EDUC-E TR-EDUC-W #107 TR-LIBRY-E #105 TR-LIBRY-W #104 TR-PSHY-NE #109 TR-PSHY-NW #110 TR-PSHY.S #108



EDUCATION







VISITING RM. LT. OFFICE CAFETERIA

NEBB

# CERTIFIED TEST, ADJUST, AND BALANCE REPORT

DATE: 2-06-02

**PROJECT:** 

ADDRESS:

FEDERAL CORRECTIONS FOOD SERVICE BUILDING 8901 South Wilmont Tucson, Arizona

**REPORT NUMBER:** 

7-8242

**PREPARED FOR:** 

**CRAIG OLIVER** 

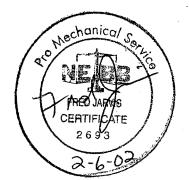
NEBB TAB CONTRACTOR:

## PRO MECHANICAL SERVICES, INC.

4633 South 36<sup>th</sup> Street Phoenix, Arizona 85040 (602) 437-8110 Fax (602) 437-3894 Tucson (520) 622-0907

National Environmental Balancing Bureau Report not valid unless stamped with NEBB Certification Seal

TAB 1-83 © Copyright, NEBB 1983



Attachment #157

# CERTIFICATION



PROJECT FEDERAL CORRECTIONS FOOD SERVICE BUILDING 8901 South Wilmont Tucson, Arizona

THE DATA PRESENTED IN THIS REPORT IS AN EXACT RECORD OF SYSTEM PERFORMANCE AND WAS OBTAINED IN ACCORDANCE WITH NEBB STANDARD PROCEDURES. ANY VARIANCES FROM DESIGN QUANTITIES, WHICH EXCEED NEBB TOLERANCES, ARE NOTED THROUGHOUT THIS REPORT.

THE AIR DISTRIBUTION SYSTEMS HAVE BEEN TESTED & BALANCED AND FINAL ADJUSTMENTS HAVE BEEN MADE IN ACCORDANCE WITH NEBB "PROCEDURAL STANDARDS FOR TESTING - ADJUSTING - BALANCING OF ENVIRONMENTAL SYSTEMS" AND THE PROJECT SPECIFICATIONS.

# NEBB CONTRACTORPRO MECHANICAL SERVICES, INC.REG. NO. 2693CERTIFIED BYFRED JARVISDATE 2-06-02(Air TAB Supervisor)

THE HYDRONIC DISTRIBUTION SYSTEMS HAVE BEEN TESTED & BALANCED AND FINAL ADJUSTMENTS HAVE BEEN MADE IN ACCORDANCE WITH NEBB "PROCEDURAL STANDARDS FOR TESTING - ADJUSTING - BALANCING OF ENVIRONMENTAL SYSTEMS" AND THE PROJECT SPECIFICATIONS.

NEBB CONTRACTORPRO MECHANICAL SERVICES, INC.REG. NO. 2693 CERTIFIED BYFRED JARVIS DATE 2-06-02<br/>(Hydronic TAB Supervisor)

SUBMITTED & CERTIFIED BY:

NEBB CONTRACTOR TAB SUPERVISOR REG. NO. DATE PRO MECHANICAL SERVICES, INC. FRED JARVIS 2693 2-06-02

National Environmental Balancing Bureau Report not valid unless stamped with NEBB Certification Seal

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4633 South 36th Street Phoenix, AZ 85040 (602) 437-8110 Fax: (602) 437-3894 www.pro-services-az.com

# FEDERAL CORRECTIONS INSTITUTION

# **TUCSON FACILITY**

FOOD SERVICE BUILDING 1-11-02

# FRESH AIR VENTILATION SURVEY

SYSTEM	OSA INTAKE DEMINSIONS	AREA	AVG VELOCITY	<u>OSA (CFM</u> )
FOOD SERVICE #88	31" X 19"	4.09 SQ FT	153 FPM	626 CFM
FOOD SERVICE #89	45" X 13"	4.06 SQ FT	186 FPM	744 CFM

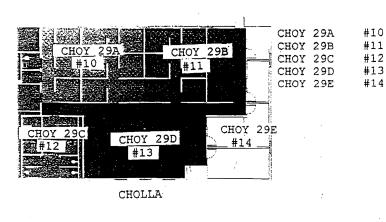
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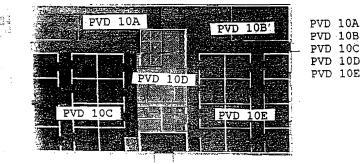


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			R-PSHY.S	<b>#108</b>

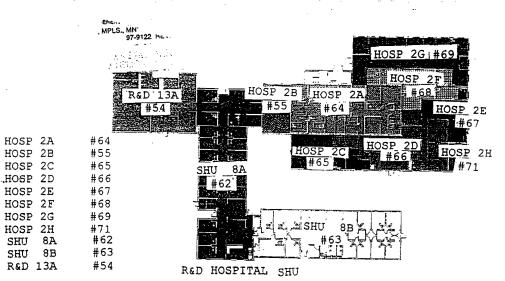
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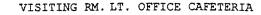








SERIAL NU. VR W. 5412010014 #86 🕱 VR E. #85 VR E. #85 #86 VR W. AW-A&O #88 FS-CENTER #84 #103 FS-NN #89 FS-NORTH #87 LT.OFFICE #84 AW-A&O TERE AND FS-CENTER LT.OFFICE #88 FS-NORTH FS-NN #87 #89 #103



U.S. Department of Justice



Federal Bureau of Prisons

Washington, D.C. 20534 August 15, 2007

MEMORANDUM FOR DAVE CLEMENTS, REGIONAL SAFETY ADMINISTRATOR WESTERN REGION

FROM: Cynthia DeAngelo, Acting National Safety Administrator

SUBJECT: Ventilation Rates

In reviewing the memorandum from LeRoy A. Smith, Safety Manager, FCC Tucson, Arizona, dated August 10, 2007, the information contained in this response should clarify any questions he may have of the ventilation rates and current testing procedures recognized by the Bureau of Prisons.

The American Correctional Association (ACA) Standards 4-4151 and 4-4152 and Program Statement, 1600.08, Occupational Safety and Environmental Health, Chapter 2, page 10, section E-2 is the guidance in which ventilation requirements are identified.

Through the guidance in ACA and the Program Statement 1600.08, there are specified areas requiring testing no less than every three years. Those areas in existing facilities are inmate rooms/cells, officer stations, and dining areas and are to be documented by an independent, gualified source. The utilization of staff from the Central Office, Region or from a facility other than the complex or stand-alone facility being tested would be considered an independent, qualified source.

The performance measure in which the test is performed at existing facilities 4-4152(prior to the fourth edition ACA Guidelines and Standards) is to meet the following criteria; Circulation is at least ten cubic feet of fresh or recirculated filtered air per minute per occupant for the following areas, inmate rooms/cells, officer stations, and dining areas.

The performance measure in which the test is performed at new construction or renovation or addition to facilities 4-4151(after

Page 1 of 2

Attachment #158

the fourth edition ACA Guidelines and Standards) is to meet the following criteria; Circulation is at least 15 cubic feet of outside or recirculated filtered air per minute per occupant for the following areas inmate rooms/cells, officer stations, and dining areas.

In conclusion, a representative sampling of inmate rooms/cells, officer stations, and dining areas must be tested and results documented no less than once every three years at all facilities based on the guidelines put forth in ACA and Program Statement 1600.08.

cc: Audrey M. Gill, Deputy Regional Director Louis Winn, Warden FCC Tucson Ricardo Chavez, Warden FCC Tucson RADM Newton E. Kendig, Assistant Director, HSD, Central Office Julie Wands, Deputy Assistant Director, HSD, Central Office Ron K. Day, National Safety Administrator Stephen Flannery, Environmental Program Manager

#### **Mail Envelope Properties** (46C48115.41B : 107 : 39274)

Subject:	Ventilation Requirements	
<b>Creation Date</b>	8/16/2007 9:53:41 AM	
From:	John Clements	

Created By:

jdclements@bop.gov

#### Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

#### **Post Office**

TCNADM1.TCNDOM1

Files	Size	Date & Time	
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AM			

## Options

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ReplyRequested:	No
<b>Return Notification:</b>	None
<b>Concealed Subject:</b>	No
Security:	Standard

#### Junk Mail Handling Evaluation Results

Message is not eligible for Junk Mail handling Message is from an internal sender

#### Junk Mail settings when this message was delivered

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# Route

## bop.gov

Date & Time	
8/16/2007 9:53:41	AM
122803	8/15/2007 7:39:00



U.S. Department of Justice

Federal Bureau of Prison

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85607

August 10, 2007

## MEMORANDUM FOR DAVE CLEMENTS, WESTERN REGIONAL SAFETY ADMINISTRATOR

**FROM:** Leroy A. Smith, Complex Safety Manager

**SUBJECT:** Air Ventilation Flow Testing

This is in reference to the environmental conditions concerning indoor air quality for inmate occupying cells/rooms, officer stations, and dinning areas that affect FCI Tucson. The indoor air quality requirement is addressed in Program Statement 1600.08, of the Occupational Safety and Environmental Health, chapter 2, page 10, section E-2 and American Correctional Association (ACA) Indoor Air Quality, Standard 4-4152.

The Safety Department has provided technical advice and assistance to the Executive staff concerning the air ventilation flow/balance testing previously conducted at FCI, Tucson. The institution has not been able to provide the Safety Department for review any indoor air quality testing results that ensures compliance with Program Statement 1600.08 and the ACA Standard. It is my understanding that the Executive staff at FCC Tucson has provided you the following documents for review:

 Documentation on the H.V.A.C. Systems test and balance report that was conducted on September 22, 1998.
 Documentation on N.E.B.B. Certified Balance report that was conducted on March 14, 2000.

Also, the Safety Department has conducted a partial indoor air quality test, which was conducted March 8, 2007, which I believe was provided to you for review. As explained to the Executive

Attachment # 159

staff, which the indoor air quality testing was only conducted at saguaro unit, saguaro unit officer station, special housing unit, and food service dinning area. We have currently requested through the Executive staff, that we be allowed authorization to complete the indoor air quality testing in paloverde, paloverde officer station, cholla unit, cholla unit officer station, lieutenant/officer station, control center, and the staff dinning at the FCI. Again, there is no documentation at the institution that shows indoor air quality tests has ever been conducted.

I have been informed by Mr. Scott Sutton, Acting Associate Warden, on Tuesday, August 7, 2007, that Warden Winn and I believe Warden Chavez instructed him to tell me that based on the results of testing earlier this year, they are not convinced additional testing needs to be done at this time. As Acting Associate Warden, please inform Mr. Smith that no additional testing should occur without the concurrence of There is communication from the Safety Department Mr. Roy and I. to the Executive staff, but there is no communication from the Executive staff to me or my staff concerning safety and health concerns at this institution. As you are aware any safety and health concerns being addressed at FCC Tucson receives interference and restraint by the Executive staff and then these concerns are denied immediately awaiting approval by the Regional and Central Office.

The Executive staff continue to make inquiries about the Safety staff receiving formal training on particular mandatory pieces of test and support equipment as well. The Safety Department staff are the institutions subject matter experts concerning safety and environmental health concerns. The Executive staff continue to question our professional judgement and qualifications as subject matter experts, to have us justify our actions daily becomes demeaning and stressful. These actions taken by the Executive staff prevents the safety staff from addressing and correcting potential unsafe and unhealthful working and living conditions at FCC Tucson.

In conclusion, Program Statement 1600.08, Occupational Safety and Environmental Health, Chapter 1, Page 3, Section 4, states you provide first line guidance and technical supervision to institution safety personnel and assist in resolving problems that cannot be resolved at the institution level. With this said, the Safety Department would like to make a formal request that you review all the facts concerning the indoor air quality requirements and the Safety Departments jurisdiction and responsibilities to personally monitor and make decisions concerning unsafe and unhealthy conditions without interference, restraint or reprisal by the Executive staff, which will allow us to ensure compliance with federal, state, or local regulatory guidelines. The Safety Department would also like to request that your technical advise, direction and supporting facts be provided back in writing to the Safety Department, which will ensure your guidance is disseminated appropriately. Lastly, the Safety Department would still like to recommend additional indoor air quality testing be conducted at the FCI in addition to any future recommendations by the Regional or Central Offices.

If there are any questions, concerns, or additional information needed, please advise.

# Mail Envelope Properties (46BD0AF8.12D : 217 : 45988)

Subject:	Re: Indoor Air Quaility (Air Ventilation Flow Testing Requirements)
Creation Date	8/10/2007 6:03:52 PM
From:	Leroy Smith

Created By: lasmith@bop.gov

.

Recipients bop.gov	Action	Date & Time
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HRM/OMBUDSMAN~) AM	Opened	8/13/2007 4:41:25
	Deleted	8/15/2007 4:56:08
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	Deleted	8/10/2007 6:23:37
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bop.gov		
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bop.gov		
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bop.gov		
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TCN0607 BC (Josias Salazar) AM	Opened	8/13/2007 7:35:13
TCN1279 (Louis Winn)	Opened	8/10/2007 6:33:16

PM TCN5909 CC (Keith Roy) AM	Opened	8/13/2007 9:09:17
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Files	Size	Date & Time
MESSAGE	7707	8/10/2007 6:03:52 PM
Leroy Smith.vcf	217	8/10/2007 6:03:52 PM

Mr. Sutton: prior to Mr. Roy leaving on Friday, he indicated that Mr. Smith, Safety Manager, was routing a memorandum regarding additional air circulation testing at the FCI. Based on the results of testing earlier this year, we are not convinced additional testing needs to be done at this time. As acting Associate Warden, please inform Mr. Smith that no additional testing should occur without the concurrence of Mr. Roy and I.

Thank you

Attachment #160

From:	Louis Winn
To:	Smith, Leroy
Date:	8/10/2007 4:00:13 PM
Subject:	Re: Indoor Air Quaility (Air Ventilation Flow Testing Requirements)

Mr. Smith: Thank you for a copy of your memorandum to Dave Clements, Regional Safety Administrator regarding Air Ventilation Flow Testing.

There have been some questions about the necessity of additional testing, particularly in light of the April 2007 correspondence from Science Applications International Corporation (SAIC). The corrrespondence, addressed to you, provides the results of a survey they conducted at the FCI and USP which assessed ACA Standards for light, noise, and ventilation in the housing units, food service dining areas, and officer's stations, as applicable. They indicated all readings collected during the March 2007 site visit were within the ACA standards.

We are making arrangements for an Industrial Hygenist to conduct some testing in UNICOR, in the near future. When they visit the institution for that testing, we will have them conduct additional testing, for ventilation, in the areas you mention.

Thank you for your guidance and I trust this addresses your concern with respect to Air Ventilation Flow Testing.

>>> Leroy Smith 8/10/2007 3:05 PM >>> Please review the below attachment. If there are any questions, please contact me.

Leroy A. Smith, Safety Manager FCC Tucson, Arizona 520-663-5190 (Office) 520-663-5189 (Fax)

SENSITIVE/PRIVILEGED COMMUNICATION

This e-mail is covered by the Electric Communication Privacy Act, 18 U.S.C. 2510-2521 and is legally privileged.

The information and/or documents with this transmission are confidential. The information is intended only for the

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that any disclosure, copying, distribution of this communication, in any form, or the taking of any action in reliance upon

its contents, is strictly prohibited. If you receive this message in error, please notify me immediately to make arrangements

for its return to me.

Attachment #161

#### Mail Envelope Properties (46BCEDFD.2F5 : 220 : 45660)

Subject: Creation Date From: Re: Indoor Air Quaility (Air Ventilation Flow Testing Requirements) 8/10/2007 4:00:13 PM Louis Winn

Created By:

## lwinn@bop.gov

Size

2735

## Recipients

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

### Post Office

MESSAGE

Files

TCNADM1.TCNDOM1

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Date & Time	<u>.</u>
8/10/2007 4:0	0:13 PM

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Route

bop.gov

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<b>Return Notification:</b>	None
Concealed Subject:	No
Security:	Standard

#### Junk Mail Handling Evaluation Results

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#### Junk Mail settings when this message was delivered

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Requirements)	
<b>Creation Date</b>	8/10/2007 6:05:41 PM
From:	Leroy Smith

Created By: lasmith@bop.gov

Recipients		Action	Date & Time
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Files MESSAGE	<b>Size</b> 1358	<b>Date &amp; Time</b> 8/10/2007 6:05:41 P	M
Mail Leroy Smith.vcf	217	8/10/2007 6:05:41 P	PM

## Options

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<b>Expiration Date:</b>	8/25/2007
Notify Recipients:	Yes
Priority:	Standard
ReplyRequested:	No
<b>Return Notification:</b>	None
Concealed Subject:	No
Security:	Standard
To Be Delivered:	Immediate
Status Tracking:	All Information

Page

GENERAL MESSAGE POSITION. TO lovour FROM POSITION: DATE SUBJECT: MESSAGE: To meet the interest of 1600,08 and HCH Standard for indoor His quality testantie cell/ koons, office station, and food service, would I need to conduct An ventilation tests for a separate housing unit like Paloverde paloverde officer station, Cholla Unit, Cholla unit officer station, Sett dinning, and control Center, and lientermitoloffice stations There is no decumentation to revew that would demonstrate that Air vertilation How terting ever has been conducted. These areas are not similar buildings like our other housing whit, officer statums, or binning areas which air vertilation flow tests where conducted in much at 2007. I spoke with mr. clements today, it appears this intermution was not provided to both of your I would like to ask for your advise, which me lemette \* feit thate Air flow tecting should be conducted for the areas mentioned earlier. I look forward to your response. I know the way ACH standard requires it every these yours. SIGNATURE: POSITION REPLY: representative sampling of inmate Toons/cells, officer Stations, and diving areas must be tested and results documented No less than once every three years at all facilities based on the guidelines put forth in ACA and Based on my understanding of the housing units at Tucson program Statement 1600.08. there are significant differences in the design and construction of the area shat must be tested. Therefore a representative SAMPIINS for each of the Areas should be conducted. TIME: SIGNATURE/POSITIC DATE: Ground Supply Unitleader 8-17-07 0:05

ICS 213

Attachment #167

NFES 1336

## Leroy Smith - Fwd: Re: Noise, Light, Ventilation Surveys

From:Christi AndrewsTo:Smith, LeroyDate:4/20/2009 12:09 PMSubject:Fwd: Re: Noise, Light, Ventilation Surveys

>>> John Clements 4/20/2009 10:17 AM >>> These look good to me Leroy!

Dave

>>> Christi Andrews 4/17/2009 3:20 PM >>>

Hello. Leroy asked me to send you the 2007, 2008 & 2009 Noise, Light and Ventilation surveys. He would like you to review them to ensure they meet both ACA and Bureau standards. Please note 2009 was only a noise and light survey, no ventilation.

Attachement #175

From:	Keith Roy
То:	LEADERS OF TUCSON
Date:	8/15/2007 3:53:08 PM
Subject:	Warden's PWP

Please review the attached document and provide any input you may have regarding your department.

For example, 1.3.1 crowding can be addressed by the Unit managers and the CMC. 1.3.2 RRC utilization can be addressed by the Unit Managers and the CMC. 1.6.1 sex offenders can be addressed by the Unit Managers and the CMC. 2.1.1 staff performance can be addressed by all of you. 2.1.2 performance measures can be addressed by all of you. 2.2.1 program assessments can be addressed by all of you. 2.3.1 performance training can be addressed by all of you. 2.4.1 leadership development can be addressed by all of you.

This information is due to Salazar by August 27, 2007. Please forward this information to me as soon as possible, but before August 27, 2007. Please send a copy to Salazar. Thank you.

Note: I will be gone for 2 weeks starting next week. If you do not send this information to me before this Friday, then please send to Salazar before the due date. Thank you.

CC: Salazar, Josias

# Attechment #163

#### Element 1-Performance Work Plan:

1.3 - Provide oversight and management to ensure that BOP's inmate crowding systemwide is held at a manageable, safe and secure level. (Subordinate Managers: Associate Warden(s), Unit Managers, CMC )

Performance Measure 1.3.1- FCC Tucson will maintain crowding levels to assist in achieving an agency goal of 42% by the end of FY 2007.

#### Progress Update:

During FY 2007, FCI Tucson removed all bunks from the day rooms, which had previously been used to house inmates. In addition to the removal, all triple bunk cells were converted to double bunk cells.

Since the activation of the Satellite Prison Camp, FCC Tucson has ensured the population does not exceed the rated capacity, which will ensure the complex will not violate any ACA standards.

In preparation of the activation of the USP, all living areas have been properly established to house the appropriate amount of inmates and ensure that the rated capacity is not exceeded and the ACA standards are not violated.

Performance Measure 1.3.2 - FCC Tucson will maintain appropriate Residential Release Center (RRC) Utilization rates for eligible inmates for FY 2007. (Highs-65%, Med-70% and Min-85%)

#### Progress Update:

Since the activation of USP and the SPC, the unit management team has incorporated training to ensure that all unit team members understand the significance of making sure all offenders are referred. Additionally, the Western Regional Office staff presented Centra training for the Tucson unit managers and case managers on the requirements of referring all inmates without detainers to RRCs. To ensure that FCC Tucson improves it's RRC utilization, the Warden appointed the CMC to implement a Plan of Action in an effort to increase the RRC Utilization rate. The plan involves direct responsibility and notification to the Associate Warden over unit management and involves tracking by unit managers. As a direct result of the plan, in late March, 07, the RCC utilization report reflected 100% RRC utilization for the SPC.

1

1.6 - BOP will establish a Certification Review Panel to identify high risk sex offenders as "Sexually Dangerous Persons" (as required in the Adam Walsh Child Protection and Safety Act of 2006). (Subordinate Managers: Associate Warden(s), Chief Psychologist, CMC, Unit Manger(s))

Performance Measure 1.6.1 - FCC Tucson will continue review applicable inmate cases in order to identify which sex offenders must be reviewed by the Certification Review Panel, prior to release. This will support requirements directed by the Adam Walsh Child Protection and Safety Act of 2006.

#### Progress Update:

At FCC Tucson, all unit management staff have received extensive training on how to properly review cases for sexually dangerous behavior and how to load the proper Walsh Act assignments in SENTRY. Specifically, there were two formal training sessions conducted in January and February, 2007, and there was a Video Teleconference held by the Central Office in December, 2006. The staff at FCC Tucson have a good understanding of the law and all inmates have the appropriate assignments loaded into SENTRY. Since enacting the Walsh Act, there have been no discrepancies in identifying or releasing of inmates that fit the appropriate description of the Walsh Act.

#### Element 2-Performance Work Plan:

2.1 - Ensure performance plans of employees are aligned with organizational goals and appraised against measurable standards of performance. (Subordinate Associate Warden(s), Department Heads, Employee Services Manager)

Performance Measure 2.1.1 - 80% of staff performance reviews at FCC Tucson are prepared, discussed with employee, and finalized by required deadlines.

#### Progress Update:

In an effort to ensure that all performance reviews are conducted timely, all FCC Tucson supervisory staff have been briefed and deadlines have been moved up to ensure timliness. As a result, all "Outstanding" ratings were forwarded to the Warden's office for review on April 1, 2007. In addition, the Employee Service Manager is closely monitoring the progress of staff performance reviews and communicates with supervisory staff as necessary. Performance Measure 2.1.2 - 80% of employees at FCC Tucson have been made aware of their work strengths and weaknesses.

#### Progress Update:

In an effort to ensure all staff are made aware of their work strengths and weaknesses, a message was sent to all supervisory staff by the Employee Services department detailing the instructions on the requirements of work strengths and weaknesses.

Performance Measure 2.1.3 - 80% of employees at FCC Tucson have identified at least one training course or class to improve their performance or ready for advancement.

#### Progress Update:

All FCC Tucson supervisory staff have been instructed to ensure that at least two training courses or classes are identified. This has also been covered during department head meetings.

2.2 - Meet Human Capital scorecard objectives identified in the President's Management Agenda. (Subordinate Managaers: Associate Warden(s), Executive Assistant, Department Heads, Employee Services Manager, EEO Counselors)

Performance Measure 2.2.1 - At least 52% of all staff at FCC Tucson participate in program assessment activities consistent with the GPRA, PMA, AG Goals, DOJ Strategic Plan and BOP Strategic Plan.

#### Progress Update:

As in the previous year, annual training for FCC Tucson has incorporated staff participation in training and has ensured an appropriate feedback session.

Upon completion of the SPC and the USP, in November, 2006, FCC Tucson conducted specific hands-on training for all staff to ensure that all USP issues were properly discussed and thorough training was conducted. As a result, 90% of staff attended the USP training. Additionally, 178 staff have attended formal Bureau of Prisons Training, which encompasses Institutional Familiarization and job development training.

During the last 6 months, there have been a total of 5 staff that have participated in program reviews at other institutions, 2 Associate Wardens have served as Review in Charge of operational reviews for 3 operational reviews. A total of 12 staff have been involved in the aforementioned reviews.

3

2.3 - Ensure effective utilization of workforce through established diversity goals, recruitment and training strategies that identify skill gaps and shortages and efforts linked to Justice Virtual University. (Subordinate Managers: Assciate Warden(s), Employee Services Manager, Diversity Manager)

Performance Measure 2.3.1 - By the end of FY 07, revised FCC Tucson's training activities will address a minimum of 50% of the targeted skill gaps in the eight (8) identified core job series which will assist in the retention of a mission-essential and well-qualified workforce.

#### Progress Update:

In an effort to close the skills gaps, FCC Tucson has initiated the following training and programs:

- 1. The Mentor/Protege Program;
- Annual Refesher training that covers pat searching/strip searching and area searches;
- 3. FCC Tucson utilizes an "acting" program that requires all executive staff, department heads and supervisory staff to have an "acting" in thier absences; and
- 4. Continuing Medical Education for Midlevel Practitioners, Nurses and Physicians.

Additionally, FCC Tucson has made great progress in ensuring that job training is conducted. To date, 43 staff have been sent for formal job training during this rating periood. Also, during this rating period, there have been 9 Institutional Familiarization classes conducted that total 135 staff trained.

Currently, FCC Tucson has completed 38% of the required training to close the skills gap. A plan to ensure that FCC Tucson reaches 50% is being devised by the Employee Services Manager and the Associate Warden.

2.4 - Establish and implement succession plans that link to workforce analyses and out year staffing projections, ensure efficient transitions and maintenance of effective leadership. (Subordinate Managers: Associate Warden(s), Employee Services Manager)

Performance Measure 2.4.1 - 5% of staff at FCC Tucson participate in leadership development/skills building programs preparing them to assume leadership positions at all levels of the agency in accord with workforce analysis, succession planning and vacancy and talent projections.

#### Progress Update:

During this month, an Introduction to Supervision class will take place for staff requiring the class. Participants have been identified and will attend. Also, during the last few months, all FCC Tucson executive staff and department heads have completed the Federal Emergency Management Agency (FEMA) courses as required. Additionally, executive staff are involved in REDMAP and the Forward Thinking group.

#### C:\DOCUME~1\TCN3409\LOCALS~1\Temp\GW}00001.TMP

#### Mail Envelope Properties (46C383CD.5ED : 161 : 45316)

Subject:	Warden's PWP
Creation Date	8/15/2007 3:53:01 PM
From:	Keith Roy

Created By: kroy@bop.gov

#### Recipients

bop.gov TCNADM1.TCNDOM1 TCN0607 CC (Josias Salazar) TCN2345 (Stephen Pullen) TCN3036 (Jeff Miller) TCN3409 (Leroy Smith) TCN3751 (Anita Honeker) TCN5194 (Scott Sutton) TCN7534 (Jacqueline Rucker) TCN7703 (James Hayden) TCN9209 (Frank Foster) TCN9562 (Barbara Serrato)

#### Post Office

TCNADM1.TCNDOM1

Files	Size
MESSAGE	1396
PWP Attachment for Chavez.	wpd
PM	

#### **Options**

Security:

<b>Expiration Date:</b>	8/30/2007
Priority:	Standard
ReplyRequested:	No
<b>Return Notification:</b>	None
	<b>N</b> 7
Concealed Subject:	No

Standard

#### Junk Mail Handling Evaluation Results

Message is not eligible for Junk Mail handling Message is from an internal sender

#### Junk Mail settings when this message was delivered

## Route bop.gov

Date & Time 8/15/2007 3:53:01 PM 24989 8/15/2007 3:41:58 .....

Page

# Leroy Smith - Emailing: PWP Attachment for Chavez

From:Leroy SmithTo:Chavez, RicardoSubject:Emailing: PWP Attachment for Chavez

I spoke to Warden Winn about the triple bunk cells at the FCI, which is mentioned in the attachment below (Highlighted in Red.) I believed initially the performance work plan (PWP) affected Warden Winn. After Warden Winn reviewed the PWP with me, it was determined the performance work plan belonged to you. He asked that I speek with you about the triple bunk cells noted in your performance measure 1.3.1.

Note: The yearly performance measure mentions the following - In addition to the removal, all triple bunk cells were converted to double bunk cells. The triple bunk cells have not been reduced to double bunk cells.

I hope my review helps, Thanks Leroy.

8/29/2007 HHachment # 164

## C:\DOCUME~1\TCN3409\LOCALS~1\Temp\GW}00002.TMP

## Mail Envelope Properties (46D590BC.B3A : 217 : 45988)

Subject:	Emailing: PWP Attachment for Chavez
Creation Date	8/29/2007 3:29:01 PM
From:	Leroy Smith

Created By: lasmith@bop.gov

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		Emptied	8/30/2	007 1:27:16	
PM					
bop.gov					
WXR ADM1.WXR DOM1		Delivered	8/29/2007 3:29:13		
PM					
WXR5719 BC (John Clements)		Opened	8/30/2007 12:16:43		
PM					
		Transferred	8/29/2007 3:29:43		
igc.org PM		Tansieneu	0/29/2	007 3.29.43	
mdryovage BC (mdryovage@igc.org)					
worldtalk.bop.gov					
WTGATE.BOPMSP0		Transferred 8/29/2007 3:29:23			
PM					
wSHumm BC (Randall Hum	( <b>m</b> )				
Post Office		Delivered	Route		
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TEXT.htm	1933				
PWP Attachment for Chavez.wpd		24259	8/29/2007 2:53:55		



Info

Friday, April 17, 2009 2:30 PM

From: "Kent Wells" To: leroy2741@yahoo.com

Leroy,

Per your request, I have reviewed my files to determine the events that transpired prior to my site visit to conduct sampling of the Saguaro and Cholla Housing Units.

I was contacted by Mike Moriarty in early July 2007 who indicated that some changes had been made to the units and they were not similar to the Saguaro, Mesquite, and Yucca Housing Units. Also, he indicated that there was a certified test/adjustment and balance report that had been provided to Facilities (CMS). He read me the contents of the report and I indicated that the document did not satisfy ACA standards because it did not relate the amount of CFM per inmate in representative cells. More specifically, the report did not indicate compliance with the 10 CFM per inmate requirement. The test reports were simply documentation of a test regarding the mechanical performance of the system as compared to the design specifications. Furthermore, the reports did not include any sampling methodology or the specific areas tested.

As an aside, I also recall getting a phone call from Mike the day before I arrived (voice mail) asking if I could cancel the trip. I was already travelling to FCC Tucson when the call was made and I indicated to Mike that I did not receive his message until I landed in Tucson. When I arrived at FCC Tucson, I was denied entry to perform the surveys, so we went ahead and accomplished the Confined Space Entry Survey.

Kent Wells, Industrial Hygieniest (1080)

Attachment #1710



U.S. Department of Justice

Federal Bureau of Prison

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85607

July 31, 2007

MEMORANDUM FOR AUDREY GILL, DUTY REGIONAL DIRECTOR

FROM:

/S/ Leroy A. Smith, FCC Safety Manager

SUBJECT:

Chief Executive Officer Misconduct

Ms. Gill, I want thank you very much for allowing me the opportunity to address my current situation at FCC Tucson. I want to especially thank you for providing some good recommendations in resolving this matter on July 27, 2007. I don't believe any employee should have to come to work in fear of losing their job or let alone have one of their pears tell them that they have been directed by Warden Winn to tell them they will be written up for not doing their job, which is unjust and abuse of authority.

I did speak with Mr. Roy about setting up a meeting with Warden Winn as per our conversation. Mr. Roy stated, "Warden Winn has declined to have a meeting with you." I asked, did you mention to Warden Winn that the Deputy Regional Director recommended that we have a meeting to attempt to resolve any potential misunderstandings? Mr. Roy replied, "Yes, I did tell Warden Winn that." I then asked, was there anything else Warden Winn had to say? Mr. Roy replied, "Yes, Warden Winn wants you to address your concerns in writing for his review, which he will then determine if he will have a meeting with you to discuss your concerns." I also asked, if Warden Winn has nothing to hide, why wouldn't he have this meeting, instead he gives the appearance he did make the threat of writing me up for not doing my job. Mr. Roy replied, "I don't have an answer for you." I then mentioned, that Warden Winn's actions relate back to the ongoing reprisal, intimidation, coercion, for my whistleblower disclosure to the Office of Special Counsel and the ongoing (1)

Attachment # 170

Office of Inspector General Investigation, which Warden Winn has been involved with both cases. Mr. Roy replied, "I don't know what to tell you." I then asked, if Warden Winn won't talk to me, then what should I do? Mr. Roy replied, "I don't know, it's Warden Winn's choice to speak with you or not."

I believe no other action then to properly report these allegations to you, which should be acceptable according to Law, Rule, Regulation, and Bureau Policy. If you have any other questions or need any additional information, please advise.

PM WXR5445 (Audrey M. Gill)	Opened	7/31/2007 2:21:53
PM		
WXR5719 CC (John Clements) PM	Opened	7/31/2007 2:12:44
WXR6319 CC (Robert McFadden) PM	Opened	7/31/2007 2:24:38
igc.org PM mdryovage CC (mdryovage@igc.org)	Transferred	7/31/2007 2:02:51
worldtalk.bop.gov WTGATE.BOPMSP0	Transferred	7/31/2007 2:01:54

WTGATE.BOPMSP0 PM wSHumm CC (Randall Humm)

Post Office PO2.BOPMSCO

LEXADM1.LEXDOM1

SETADM1.SETDOM1

TCNADM1.TCNDOM1

WXR\_ADM1.WXR\_DOM1

#### WTGATE.BOPMSP0

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Leroy Smith.vcf	217
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Notify Recipients:	Yes
Priority:	Standard
ReplyRequested:	No
<b>Return Notification:</b>	None

 Delivered
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 bop.gov

 7/31/2007 2:01:40 PM

 bop.gov

 7/31/2007 2:01:38 PM

 bop.gov

 7/31/2007 2:01:20 PM

 bop.gov

 7/31/2007 2:01:37 PM

 bop.gov

**Date & Time** 7/31/2007 2:01:19 PM

7/31/2007 1:24:48

7/31/2007 2:01:18 PM

159646

# Mail Envelope Properties (46AFA31F.FBA : 217 : 45988)

Subject:	Emailing: MS GILL AND I JULY 31, 2007
<b>Creation Date</b>	7/31/2007 2:01:19 PM
From:	Leroy Smith

lasmith@bop.gov **Created By:** 

Recipients bop.gov	Action	Date & Time
PO2.BOPMSCO	Delivered	7/31/2007 2:01:39
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PM BOP5000 CC (John T. Dignam)	Opened	8/1/2007 11:00:30
AM	Deleted	8/1/2007 11:02:01
AM		
bop.gov LEXADM1.LEXDOM1 PM	Delivered	7/31/2007 2:01:40
LEX5249 BC (Gregory T. Kapusta)	Opened Replied Deleted	8/1/2007 7:05:04 AM 8/1/2007 7:12:14 AM 8/1/2007 7:12:17 AM
bop.gov SETADM1.SETDOM1 PM SET2375 BC (Phillip Rodriguez)	Delivered Opened	7/31/2007 2:01:38 8/1/2007 9:21:34 AM
bop.gov TCNADM1.TCNDOM1	Delivered	7/31/2007 2:01:20
PM TCN1279 CC (Louis Winn)	Opened	7/31/2007 2:07:56
PM	Opened	7/31/2007 2:11:50
PM TCN7228 CC (Ricardo Chavez) PM	Opened	7/31/2007 2:21:35
bop.gov WXR_ADM1.WXR_DOM1	Delivered	7/31/2007 2:01:37



Federal Bureau of Prisons

Federal Correctional Institution

#Hachment #171

Office of The Safety Department

Tucson, Arizona 85706

December 14, 2007

MEMORANDUM FOR LEROY SMITH, FCC SAFETY MANAGER

Woffarty, Safety Specialist

FROM:

SUBJECT:

Hot Work Permit

In the time frame of July 27 - 31, 2007, I was asked to come to the AW's Office at the U.S.P. Associate Warden Roy asked me, "Can you sign a Hot Work Permit?" I said, "sure, as long as I review it first to make sure the safety-related items are in check." I knew that you had refused to sign this Hot Work Permit for certain reasons and wondered why the Associate Warden was asking me to do it. At that point, I felt that I was being pressured into undermining my supervisor by signing the Hot Work Permit. After overhearing the conversation that you had with Mrs. Rucker, I felt I was helping you avoid any disciplinary action from the Warden by signing this Hot Work Permit. With these best intentions in mind, I signed the Hot Work Permit.



Federal Bureau of Prisons

Federal Correctional Institution

Office of The Safety Department

Tucson, Arizona 85706

December 14, 2007

MEMORANDUM FOR LEROY SMITH, FCC SAFETY MANAGER

Safety Specialist

SUBJECT :

FROM:

Telephone Conversation

On July 27, 2007, I overheard a telephone conversation that took place in my office at the U.S.P. From what I can remember, you were speaking with Unit Manager Rucker. I was working on the computer and you touched the back of my shoulder to get my attention and then you began to ask Mrs. Rucker a few questions. I remember you asking her, "so you're telling me if I don't sign the hot work permit, Warden Winn will write me up for not performing my job?" Then you asked her, "are you sure Warden Winn told you to tell me that?" I also remember you saying, "you know Warden Winn will deny everything and he used you to get to me." You then told her, "I had already told Mr. Roy I would sign the Hot Work Permit and add my comments to the form." The last part of the call I remember is you telling her you would not use her name to protect her from any backlash.

Attachment #172



#### Federal Bureau of Prisons

Office of the Safety Department

Federal Correctional Complex Tucson, Arizona 85706

July 31, 2007

MEMORANDUM FOR LEROY SMITH, FCC SAFETY MANAGER

FROM: Ramon Cuestes, Safety Manager

SUBJECT: Warden Winn

This memo is to inform you that on this day at approximately 9:45 am, Paul Cobb, Acting Facility Manager, called me to ask me questions about the ventilation testing at the FCI. We talked about the sampling and calculation(s) or lack of. Mr. Cobb advised me that he had a conversation with Warden Winn and he was told by him that we had a conversation in April about the ventilation at the FCI, and I specifically told him the ventilation system at the FCI was meeting the requirements. Ι have only talked to Mr. Winn one time at a meeting that took place on 4-11-2007, and the issue was about my work performance which you were present. As you remember, not once was the ventilation mention by myself or anyone because this was not a work performance issue. Nor, have we had or held a conversation for more that thirty seconds since then. I have been in this business since 1982, and I have always stood by my integrity. Mr. Winn on the other hand made a false statement to Mr. Cobb because we have never had a meeting or even talked to each other since April.

If there are any questions, please do not hesitate to let me know.

Attachment #173

#### **Mail Envelope Properties**

(46AF859D.636:176:46672)

Subject:	,
<b>Creation Date</b>	,
From:	]

Warden Winn 7/31/2007 11:55:25 AM Ramon Cuestes

**Created By:** 

RCuestes@bop.gov

#### **Recipients**

bop.gov TCNADM1.TCNDOM1 TCN3409 (Leroy Smith)

### **Post Office**

TCNADM1.TCNDOM1

#### Route bop.gov

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Priority:	Standard	
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<b>Concealed Subject:</b>	No	
Security:	Standard	
Junk Mail Handling Evalu	ation Results	

Message is not eligible for Junk Mail handling Message is from an internal sender

### Junk Mail settings when this message was delivered

Junk Mail handling disabled by User Junk List is not enabled Junk Mail using personal address books is not enabled Block List is not enabled

Concealed Subject: Security: No Standard

To Be Delivered: Status Tracking: Immediate All Information



Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

November 16, 2007

MEMORANDUM TO THE HONORABLE SCOTT J. BLOCH, SPECIAL COUNSEL

> S. RANDALL HUMM, INVESTIGATION COUNSEL OVERSIGHT

JOHN DIGNAM, CHIEF, OFFICE OF INTERNAL AFFAIRS

**FROM:** Leroy A. Smith, Complex Safety Manager

SUBJECT: Violation of Law, Rule, Regulation Abuse of Authority, Executive Staff Misconduct

I Leroy A. Smith Jr., Safety Manager, at Federal Correctional Complex, Tucson, Arizona, do hereby make the following declaration requesting an investigation, congressional hearing, and criminal hearing for continued reprisal for participating in protected activities, disclosure to the Office of Special Counsel and the ongoing investigation by the Office of Inspector General:

On July 27, 2007, I received a phone call in Mr. Michael Moriarty, Safety Specialists office from Ms. Jacqueline Rucker, Unit Manager. Ms. Rucker stated, "I was speaking with Warden Winn about the repairs to the third bunk in the inmate cells, which he told me that there was some type of problem." I asked, what type of problem? Ms. Rucker replied, "Warden Winn said there is something wrong about you signing a hot work permit." I then asked, what problem are you talking about? Ms. Rucker replied, "Warden Winn said that you were not going to sign the hot work permit because of air ventilation concerns." I replied,

(1)

Attachment #174

Yes, I have some concerns. I then mentioned, I am earring on the caution side, because if I sign the hot work permit to allow the work to be completed, I am afraid that an inmate will be assigned to the bunk immediately, which I am not sure that there is enough air flow coming through the vent for each inmate assigned to the cell. Ms. Rucker then stated, "You know Warden Winn seems to be very upset with you, because we have inmates needing to be assigned to these cells." I replied, I recommended to Warden Winn and Mr. Roy, that we should look at temporarily re-opening the bay rooms for inmate over crowding." Ms. Rucker then stated, "I even suggested the same thing to Warden Winn and Mr. Roy."

I then mentioned, Mr. Roy asked me to go ahead and sign the hot work permit, then write in the comment area, it is my strong recommendation that no inmate be assigned to the three inmate cells until an air ventilation flow test can be conducted. Ι also mentioned, that Mr. Roy stated, "this way the work can continue, which Warden Winn can accept your recommendation or not." Ms. Rucker then stated, "Your concern doesn't seem to be the hot work permit, you seem more concerned about the inmates getting enough air into their cells." I replied, Yes, when the cell is secured at night each inmate competes for the air flowing into the cell, which if we assign an inmate with respiratory or heart problems with not enough air being circulated into the cell, it could cause the inmates lungs and heart to work harder, which could cause an inmate to fall out or even die." Ms. Rucker then stated, "Now I can see why you are concerned." I then asked, do you understand that if something goes wrong, you and I will be held accountable, which the Warden Winn will forget about everything his told you? Ms. Rucker replied, "Yes, your probably right about that."

Ms. Rucker then stated. "I don't like being put in the middle." I asked, who's putting you in the middle of what? Ms. Rucker replied, "Warden Winn told me to tell you something." I asked, what did Warden Winn direct you to tell me? Ms. Rucker again stated, "I don't like being put in the middle, Leroy." I then mentioned, it's too late, you called me, I didn't call you. Ms. Rucker then stated, "Warden Winn direct me to tell you, that if you don't sign the hot work permit, he will right you up for not doing your job." I then asked, will you please repeat what Warden Winn direct you to tell me? Ms. Rucker then stated, "Warden Winn said he will right you up for not doing your job if you don't sign the hot work permit."

I touched Mr. Moriarty on the back to get his attention to lesson to my question to Ms. Rucker. I then asked, you're telling me that if I don't sign the hot work permit, Warden Winn will right me up for not doing my job? Ms. Rucker replied, "Yes." I then asked, are you sure Warden Winn direct you to tell me that? Ms. Rucker again replied, "Yes, that's what Warden Winn told me."

(2)

I then asked, you are aware that these comments to me are threatening, intimidating, and demeaning? Ms. Rucker replied, "I am only telling you what Warden Winn told me to say." I also asked, you are aware Warden Winn will deny everything? Ms. Rucker replied, "Yes, that's why I didn't want to tell you anything." I then mentioned, Warden Winn used you to get to me, which is very unprofessional.

I then mentioned, I already told Mr. Roy that I would sign the hot work permit, which I will add my recommendations as well. I also mentioned, it seems that Mr. Roy and Warden Winn are not talking to each other or both Wardens' are continuing to cause a hostile work environment for me to work in. Ms. Rucker stated, "I don't know what to tell you." I then mentioned, that I will call Mr. Roy and tell him what you have brought to my attention, I will not mention your name to protect you from any back lash or intimidation tactics from Warden Winn. Ms. Rucker replied, "Thank you." I then asked, I want to make sure that I am clear about what you told me before I speak with Mr. Roy, Warden Winn directed you to tell me that if I don't sign the hot work permit, he will right me up for not doing my job? Ms. Rucker replied, "Yes, that's what Warden Winn told me to tell you."

I immediately called Mr. Roy in his office. I asked, are you aware that Warden Winn wants to write me up for not doing my job? Mr. Roy replied, "I am not sure what you are talking about." Т then mentioned, I received a phone call from another department head telling me that Warden Winn directed this person to tell me that if I don't sign the hot work permit he will write me up for not doing my job. Mr. Roy then stated, "Warden Winn has not told me anything like that." Mr. Roy then asked, "Who told you this?" I replied, "I am not going to tell you who told me to ensure this person won't be retaliated or intimidated by Warden Winn, before I speak with the Regional Director. Mr. Roy asked, "Did you ask Warden Winn if he made the comment or not?" I replied, No, I called you first. Mr. Roy then stated, "You might want to talk to Warden Winn and find out for yourself." I replied, you know Warden Winn will deny he ever made the threatening, intimidating and demeaning comments and he will especially deny that he directed the department head to tell me (Ms. Rucker). Mr. Roy then asked, "Do you want me to talk to Warden Winn?" I replied, No, I will call to speak with the Regional Director about this. Mr. Roy replied, "You have the right to call the Regional Director." I then asked, why does the threats of reprisal and intimidation needs to continue by Warden Winn and doesn't the Executive staff do anything about? Mr. Roy replied, "I don't have an answer for you."

I called to speak with the Regional Director, which I was informed that he was busy and I could speak with Ms. Gill. I took Ms. Gill's advise to have Mr. Roy set up a meeting with Warden Winn to discuss my concerns, before taking any further action. (See Attachment #1)

I called Ms. Rucker shortly after speaking with Ms. Gill. I mentioned, that I had called to speak with the Regional Director about Warden Winn's threatening and intimidating comments. Ms. Rucker stated, "I know you spoke with the Regional Director and you gave my name to the Regional Director." I replied, I don't understand what you are talking about. Ms. Rucker stated, "Warden Winn called me, he told me that he just got of the phone with the Regional Director, which the Regional Director told Warden Winn about your conversation with him and that you mentioned my name during the conversation." I then mentioned, that Warden Winn is not telling you the truth, I did not speak with the Regional Director because he was to busy, I spoke with Ms. Gill, Assistant Deputy Regional Director. I also mentioned, that I never discussed your name with Ms. Gill or Mr. Roy. Ms. Rucker then stated, "Warden Winn asked, what did you tell Mr. Smith and you better think about how you're going to respond." I mentioned, this is why I promised not to mention your name to anyone, because I didn't want you to be subjected to threats or intimidation by Warden Winn or any of the Executive Ms. Rucker then stated, "I told Warden Winn his staff. conversation with me about the hot work permit, inmate bunking, and that he said he was going to write you up for not doing your job." I mentioned, I guess the truth hurts, truth sets the soul free. Ms. Rucker then stated, "Maybe Warden Winn was just venting." I replied, it doesn't matter if Warden Winn was venting or not, his comment to you or any other employee is inappropriate, unprofessional, threatening, intimidating, and demeaning towards me. Ms. Rucker then stated, "I hope everything just works out for everyone's sake."

I called Mr. Roy and mentioned that I did talk to Ms. Gill. I then mentioned, that Ms. Gill recommended that I ask you to set up a meeting with Warden Winn, which would include you and myself. I also mentioned, Ms. Gill also felt that I could have a representative of my own pear to be present during the meeting. Mr. Roy replied, "I will speak with Warden Winn and get back with you." I replied, thank you, because I would like to resolve this at the institution level.

I then went to speak to Warden Chavez in his office. Ι mentioned, that Warden Winn had made threatening, intimidating, and demeaning comments towards me through another Department Warden Chavez asked, "What did the Department Head tell Head. you?" I replied, that I received a phone call by another Department Head, which this person told me that Warden Winn directed this person to tell me if I don't sign the hot work permit, which will allow the work to continue on the three bunk inmate cells, that Warden Winn will write me up for not doing my job. Warden Chavez asked, "Who told you this?" I replied, that I will not mention the department heads name at this time, until after Mr. Roy, Warden Winn and I have a meeting to discuss the his threat of disciplinary action. Warden Chavez again asked, "Who told you this?" I again mentioned, that I have not given

(4)

the department heads name to Ms. Gill, Mr. Roy, nor will I give it to him, until I speak with the Office of Special Counsel, Office of Inspector General or the Office of Internal Affairs only.

I then mentioned, We (Warden Chavez) have had this conversation about Warden Winn before, which he uses staff against each other to do his dirty work, then he claims plausible deny-ability if things go wrong. Warden Chavez then stated, "I do recall our conversation." I then mentioned, Warden Winn has began to intimidate this person as well. Warden Chavez then asked, "How do you know this?" I replied, the department head told me, which I informed Mr. Roy as well. Warden Chavez then asked, "How do you know the department head is telling you the truth?" I replied, I believe the employee because the department head has a lot to loose, which the Executive staff at this institution continues to make false allegations or statements all the time. Warden Chavez then stated, "Your not telling me why you believe the employee telling you the truth."

I replied, that Ms. Gill and Mr. Roy was the only two that knew I tried to speak with the Regional Director, which the Regional Director was busy and they didn't have enough time to inform Warden Winn before I again spoke with the department head. Т then replied, that Warden Winn told this department head that he (Warden Winn) just got off the phone with the Regional Director, which they discussed my conversation with the Regional Director and that I gave the department heads name to the Regional Director during our conversation, per the department head (Ms. Rucker). Warden Chavez then asked, "Your telling me that you do believe the conversation did take place between Warden Winn and the department head? I replied, Yes. I then mentioned, as I said before there was not enough time between my conversation with Mr. Roy and Ms. Gill, before I spoke with the department head again. I also replied, that the conversation between Warden Winn and the department head to place during my conversation with Mr. Roy and Ms. Gill, which Warden Winn had already began to threaten and intimidate the department head. Ι finally replied, that you (Warden Chavez) need to remember, I never spoke with the Regional Director, which Warden Winn's statements to the department head never took place.

After the Executive closeout meeting I spoke with Mr. Roy about the meeting. Mr. Roy stated, "Warden Winn declined to have a meeting with you." I asked, did you mention to Warden Winn that the Deputy Regional Director recommended that we have a meeting to attempt to resolve any potential misunderstandings at the institution level? Mr. Roy replied, "Yes, I did tell Warden Winn that." I then asked, was there anything else Warden Winn had to say? Mr. Roy replied, "Yes, Warden Winn wants you to address your concerns in writing, which he will review your memorandum and determine if he will have a meeting with you to discuss your concerns." I then mentioned, that Warden Winn already knows what

I want to speak with him about, which his request is a stall tactic to allow him time gather information and gather himself enough to get his statements or answers correct. Mr. Roy replied, "I can't speak for Warden Winn, but I am surprised he won't speak with you." I then asked, if Warden Winn has nothing to hide, then why wouldn't Warden Winn have this meeting, instead Warden Winn gives the appearance he did make the threat of disciplining me for not doing my job, which again is not the truth. Mr. Roy replied, "I don't have an answer for you." Т then mentioned, that Warden Winn's actions relate back to the ongoing reprisal, intimidation, coercion, for my whistleblower disclosure to the Office of Special Counsel and the ongoing Office of Inspector General Investigation, which Warden Winn has been involved with both cases. Mr. Roy replied, "I don't know what to tell you." I then asked, if Warden Winn won't talk to me, then what should I do? Mr. Roy replied, "I don't know, it's Warden Winn's choice to speak with you or not." I then asked, should I put my allegations in writing to the Director, Regional Director, or Warden Chavez? Mr. Roy replied, "The choice is yours, I can't make the decision for you." I then mentioned, that I will take my time and think everything through before I make my final decision to go forward or not. Mr. Roy again stated, "Like I said, I can't make the decision for you."

Finally, I went back later to speak with Mr. Roy and Warden Chavez about the incident. I asked Mr. Roy, did you tell Warden Winn that I was going to speak with the Regional Director? Mr. Roy replied, "Yes, I told Warden Winn that you where going to contact the Regional Director." I then asked, did you tell Warden Winn why I was going to speak with the Regional Director? Mr. Roy replied, "Yes, I did, Why." I also asked, why would you tell Warden Winn of our conversation, especially when my allegation of Executive staff misconduct was against him? Mr. Roy replied, "Warden Winn is my immediate supervisor, I am obligated to tell him." I then asked, did you inform Warden Chavez or any other Executive staff that you deemed appropriate as well? Mr. Roy replied, "No, I didn't." I then asked, so you only reported my allegation of threats, intimidation, and demeaning comments to Warden Winn, which the allegations of Executive staff misconduct was against him? Mr. Roy replied, "Yes, like I said Warden Winn is my immediate supervisor." T then asked, You did not think that by informing Warden Winn and nobody else that he would not take any action to interfere, threaten, intimidate, or demean me or especially the department head that Warden Winn directed to threaten me with disciplinary action? Mr. Roy replied, "No, I would expect Warden Winn to conduct himself professionally." I replied, that's like telling a thief that two families on your block will be on vacation for two weeks and expect him not to burglarize the homes. Mr. Roy again replied, "Like is said, I would expect Warden Winn to conduct himself professionally." I then mentioned, You don't seem to care about the confidentiality of an employees right to report and you don't seem to care for the safety and welfare of

the department head nor myself by not reporting my allegation to Warden Chavez, Regional Director, or Director. Mr. Roy replied, "That's you opinion." I then mentioned, that maybe my opinion, but Warden Winn has already began to threaten and intimidate the department head I spoke with you about. Mr. Roy replied, "Again, that's your opinion."

I then spoke with Warden Chavez. I asked, did Mr. Roy tell you about my allegation against Warden Winn? Warden Chavez replied, "No, I have not spoken with Mr. Roy or Warden Winn, since our conversation." I then mentioned, Mr. Roy admitted that he told Warden Winn that I was going to speak with the Regional Director about his inappropriate actions. Warden Chavez asked, "Mr. Roy told you that he spoke with Warden Winn about your conversation with him (Mr. Roy)?" I replied, "yes." I then asked, why would Mr. Roy not tell you about Warden Winn's inappropriate action towards me? Warden Chavez replied, "I can't speak for Mr. Roy, but I will speak with him." I then asked, why does the Executive staff have such a problem in reporting official allegations of executive staff misconduct? Warden Chavez replied, "I don't understand what you mean." I then asked, do you want me to put my allegation of Executive staff misconduct against Warden Winn in writing to you? Warden Chavez didn't reply. Warden Chavez then stated, "I need to use the restroom, he then mentioned I need to head home, my family and I are going to New Mexico this weekend. I then asked, Warden Chavez, I guess our conversation is over with? Warden Chavez replied, "I do need to get on the road with my family, they have been waiting on me." I replied, you where the one who called to see me in your office at 3:55 p.m, which it is 4:35 p.m., now. I then mentioned, you and your family have a safe trip. Warden Chavez replied, "Thank you."

If there are any questions pertaining to this matter, please do not hesitate let me know.

cc: Harley Lappin, Director Bureau of Prisons Robert McFadden, Regional Director Mary Dryovage, Attorney Jeff Ruch, PEER

<u>SBU</u> - Sensitive But Unclassified



April 4, 2007

Mr. Leroy Smith, Safety Manager Federal Bureau of Prisons Federal Correctional Complex - Tucson 8901 S. Wilmot Road Tucson, AZ 85706

Subject: Noise, Light, and Ventilation Survey Federal Correctional Complex - Tucson

Dear Mr. Smith:

Science Applications International Corporation (SAIC) is pleased to submit the Noise, Light, and Ventilation Survey Report for the Federal Correctional Complex (FCC) located in Tucson, Arizona. The survey was conducted on March 8, 2007.

#### BACKGROUND

SAIC conducted the subject survey at FCC Tucson and assessed American Correctional Association (ACA) Standards for light, noise, and ventilation were assessed in housing units, food service dining areas, and officer's stations as applicable. All readings collected during the March 2007 site visit were within the ACA standards.

#### K METHODOLOGY

Levels of illumination were measured using a Sper Scientific Light Meter, Model 840020 (Serial Number 027887). Noise levels were determined using a Casella-CEL Model CEL-254 Sound Level Meter (Serial Number 2/11225138). Ventilation data was collected using a TSI Incorporated, AccuBalance Air Capture Hood, Model 8371 (Serial Number 01050464).

The ACA Standards for Adult Correctional Institutions, 4th Edition, requires the following:

- Lighting in inmate rooms/cells is at least 20 footcandles at desk level (i.e., reading) and in personal grooming areas.
- Noise levels in inmate housing units do not exceed 70 dBA (decibels, A-Weighted) in daytime and 45 dBA at night (collected during the evening shift between the hours of 4:00 p.m. and 12:00 a.m.).
- Air circulation is at least 15 cubic feet of outside or recirculated filtered air per minute per occupant for cells/rooms, officer's stations, and dining areas with a minimum of 5 cubic feet per minute (cfm) of outside air per person.

Noise, Light, and Ventilation Survey Report FCC Tucson Page 2 of 4

Representative sampling was conducted in each housing unit located at FCC Tucson. Housing units consists of an A & B side comprised of two levels and three sides. The Special Housing Units consist of two levels and two sides for all ranges. All cells are designed for two inmates, excluding handicapped cells which are designed for one inmate.

#### **RESULTS AND DISCUSSION**

#### Light, Noise, and Ventilation

Light levels at desks and personal grooming areas meet the ACA requirement of 20 footcandles. However, it should be noted that light fixture covers in most of the cells visited during the survey restrict lighting to below the 20 footcandle requirement. When the covers are removed, lighting adequately meets the ACA requirement. FCC Tucson staff indicated that the light covers will be removed. Measurements reflected in this survey are representative of this practice. It is further recommended that the fluorescent tubes be placed inside clear protective plastic sleeves to protect staff and inmates from injury associated with breakage of the glass bulb.

Noise levels in housing units did not exceed 70 dBA during the day or 45dBA at night. The purpose of the noise standard is to assure that housing areas do not have uncontrollable, excessive noise sources in close proximity such as turbulent air vents/grills, noisy pipes, fans, or mechanical rooms.

Ventilation rates exceeded the ACA minimum of 15 cfm of air and 5 cfm of outside air per person in all assessed areas. Measured airflows in inmate areas ranged from 130.0 to 290.0 cfm. ACA Standards require that "in no case should the outdoor air quality be less than 5 cubic feet per minute per person." Assuming the ACA minimum airflow is supplied (15 cfm per person), the outside air mixture would have to be 33.3% to achieve the standard requirement. For airflows measured during the survey, outside air mixtures would range would have to from 1.7% to 3.8% to supply the ACA required outdoor air. Facilities staff at FCC Tucson reported the minimum outside air mixture is set at 20%.

Summary tables providing data collected during the light, noise, and ventilation survey are presented in Tables 1 through 3 at the end of this report.

#### LIMITATIONS

This report was prepared by SAIC for the exclusive use of FCC Tucson in evaluating the lighting, noise, and ventilation levels and may not be distributed to or relied upon by any other party without SAIC's prior written consent. SAIC performed this assessment at FCC Tucson's direction and within the defined budget for this effort; therefore, the results may not adequately characterize exposures or conditions differing from those present at the time of the assessment. The results are valid only for the conditions that existed at the specific sampling locations at the time the samples were collected and do not represent the exposures in unsampled locations or operations at the facility. Given these limitations, SAIC may not have identified adverse conditions that potentially impact employee health and safety. Sample results, conclusions, and opinions were formed based on conditions at the time of the assessment which may not be representative of the manner in which current or past business practices are/were conducted, and

#### Noise, Light, and Ventilation Survey Report FCC Tucson Page 3 of 4

	Location	Noise (dBA)		Ventilation	Lighting (footcandles)	
		Day	Night	- (cfm)	Grooming	Reading
		Sag	uaro Housing U	Init		
	Cell 101	64.4	44.1	201.0	34.3	30.1
Ķ.	Cell 112	58.7	40.4	186.0	21.2	25.4
κ-	Cell 209	63.9	39.5	140.0	21.9	23,3
	Cell 223	60.2	42.6	180.0	32.3	27.4
	Officer's Station	-	-	147.0	-	-
		Spe	cial Housing U	nit		
	Cell A-5	55.8	41.0	217.0	27.7'	24.7
. L	Cell B-2	58.4	44.2	246.0	25.9'	21.9
¥	Cell C-1	57.1	42.9	290.0	26.8'	25.2
	Cell D-3	67.2	43.2	224.0	32.4'	21.2
	Officer's Station	-	-	318.0	-	-
			FCI			
K	Food Service Dining Area	-	*	25.9²		-

## Table 1 - Noise, Light, Ventilation Survey Results Federal Correctional Institution

"-" No measurement taken

<sup>1</sup> Measured in shower

<sup>2</sup> Dining area capacity is 264 inmates (18 diffusers measured at 380 cfm) "-" No measurement taken

#### Table 2 - Noise, Light, Ventilation Survey Results **United States Penitentiary**

Location		Noise (dBA)		Lighting (footcandles)	
	Day	Night	<b>- (cfm</b> )	Grooming	Reading
Unit 1B, Cell 104	56.4	43.8	130.0	32.2	46.2
Unit 1B, Cell 116	55.9	41.3	147.0	34.9	51.8
Unit 1B, Cell 125	56.2	40.9	158.0	30.7	78.4
Unit 1B, Cell 132	59.2	39.2	142.0	42.1	85.5
Unit 1B, Cell 201	67.3	43.7	138.0	45.4	44.0
Unit 1B, Cell 208	66.3	44.2	155.0	29.3	57.2
Unit 1B, Cell 216	55.4	39.7	162.0	34.7	37.6
Unit 1B, Cell 232	62.1	40.2	174.0	49.2	53.9
Food Service Dining Area	-	-	75.8 <sup>1</sup>	-	-
Officer's Station	-	-	180.0	-	-

"-" No measurement taken

<sup>1</sup> Dining area capacity is 76 inmates (12 diffusers measured at 480 cfm)

Noise, Light, and Ventilation Survey Report FCC Tucson Page 4 of 4

Location		Noise (dBA)		Lighting (footcandles)	
	Day	Night	- (cfm)	Grooming	Reading
· · · · · · · · · · · · · · · · · · ·	· · ·	House A			
Southeast desk	59,4	40.2	290.0	-	49.4
Southeast corner	60.7	43.1	-	-	21.1
Northeast corner	62.4	38.7	-	-	23.4
North center	-	-	-	-	21.7
Northwest corner	-	-	-	-	35.4
West center	-	-	-	-	30.9
Center	-	-	-	-	25.4
East center	-	-	-	-	23.3
South center	-	-	-	-	20.9
Center	-	-	-	-	25.2
Southeast corner	-	-	-	-	30.4
Restroom	-	-	-	21.2	-
Food Service Dining Area	-	-	234.0	-	-
Officer's Station	-	-	344.0	-	-

#### Table 3 – Nolse, Light, Ventilation Survey Results Satellite Prison Camp

"-" No measurement taken

may not reflect conditions which may have changed since the time of the assessment. Any attempt by FCC Tucson to apply the results of the assessment to conditions other than to those that specifically existed at the time of the assessment shall be at FCC Tucson's sole risk.

SAIC warrants only that project activities under this contract were performed within the scope of the assignment that SAIC and FCC Tucson have mutually agreed on and that SAIC has been tasked by FCC Tucson to analyze, with that degree of skill and judgment normally exercised by recognized professional firms performing services of a similar nature. SAIC specifically disclaims and client hereby waives any express or implied standards, guarantees, or warranties, including but not limited to warranties of merchantability or fitness for a particular purpose, custom or usage, or otherwise as to any goods or services that are the subject of this contract.

Thank you for the opportunity to assist the Federal Bureau of Prisons and FCC Tucson on this project. Please call if you have any questions regarding this submittal. You may reach me at (210) 731-2217.

Sincerely,

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION

T With

Kent R. Wells Project Manager



February 21, 2008

Mr. Leroy Smith, Safety Manager Federal Bureau of Prisons Federal Correctional Complex - Tucson 9300 South Wilmot Road Tucson, AZ 85706

Subject: Light and Ventilation Survey Federal Correctional Institution – Tucson

Dear Mr. Smith:

Science Applications International Corporation (SAIC) is pleased to submit the Light and Ventilation Survey Report for the Federal Correctional Institution (FCI) located at Federal Correctional Complex (FCC), Tucson, Arizona. The survey was conducted on February 19 and 20, 2008.

#### BACKGROUND

SAIC conducted the subject survey at FCI Tucson and assessed American Correctional Association (ACA) Standards for light, noise, and ventilation were assessed in housing units, food service dining areas, and officer's stations as applicable. All readings collected during the February 2008 site visit were within the ACA standards.

#### METHODOLOGY

Levels of illumination were measured using a Sper Scientific Light Meter, Model 840020 (Serial Number 027887). Ventilation data was collected using a TSI Incorporated, AccuBalance Air Capture Hood, Model 8371 (Serial Number 01050857).

The ACA Standards for Adult Correctional Institutions, 4<sup>th</sup> Edition, requires the following:

- Lighting in inmate rooms/cells is at least 20 footcandles at desk level (i.e., reading) and in personal grooming areas.
- Air circulation is at least 15 cubic feet of outside or recirculated filtered air per minute per occupant for cells/rooms, officer's stations, and dining areas with a minimum of 5 cubic feet per minute (cfm) of outside air per person.

In addition, task lighting was measured in work areas throughout FCI Tucson to determine if lighting was adequate for the various tasks being performed. Specifically:

• Task lighting was measured at several work stations located throughout the institution. Illumination levels were compared against the minimum requirements presented in American National Standards Institute, Industrial Engineering Society, RP7, Illumination, 1991.

Science Applications International Corporation

4242 East Piedras Drive, Suite 200, San Antonio, Texas 78228-1253 • (210) 731-2200 • (210) 731-2299

pHachment 468

Light and Ventilation Survey Report FCI Tucson Page 2 of 6

#### **RESULTS AND DISCUSSION**

#### Light and Ventilation

Light levels at desks and personal grooming areas meet the ACA requirement of 20 footcandles for the areas depicted in Tables 1 and 2. In addition, all task lighting was adequate for the tasks being performed.

Ventilation rates exceeded the ACA minimum of 15 cfm of air and 5 cfm of outside air per person in all assessed areas. Measured airflows in inmate areas ranged from 112.5 to 510.0 cfm. ACA Standards require that "in no case should the outdoor air quality be less than 5 cubic feet per minute per person." Assuming the ACA minimum airflow is supplied (15 cfm per person), the outside air mixture would have to be 33.3% to achieve the standard requirement. For airflows measured during the survey, outside air mixtures would have to range from 1.0% to 4.4% to supply the ACA required outdoor air. Facilities staff at FCI Tucson reported the minimum outside air mixture is set at 20%.

Summary tables providing data collected during the light and ventilation survey are presented in Tables 1 and 2 at the end of this report.

It is important to note that areas in the Special Housing Unit, specific to light levels for both grooming and reading were below the ACA requirement of 20 footcandles. Specifically, Cell 015 was measured at 13 footcandles for grooming and 11 footcandles in reading areas. Also, Cell 025 was measured at 8 footcandles for grooming and 7 footcandles in reading areas. Also, in Yucca South, several housing units did not comply with the ACA requirement due to dim bulbs, or no reading lights in reading areas.

#### LIMITATIONS

This report was prepared by SAIC for the exclusive use of FCI Tucson in evaluating the noise, light, and ventilation levels and may not be distributed to or relied upon by any other party without SAIC's prior written consent. SAIC performed this assessment at FCI Tucson's direction and within the defined budget for this effort; therefore, the results may not adequately characterize exposures or conditions differing from those present at the time of the assessment. The results are valid only for the conditions that existed at the specific sampling locations at the time the samples were collected and do not represent the exposures in unsampled locations or operations at the facility. Given these limitations, SAIC may not have identified adverse conditions that potentially impact employee health and safety. Sample results, conclusions, and opinions were formed based on conditions at the time of the assessment which may not be representative of the manner in which current or past business practices are/were conducted, and may not reflect conditions which may have changed since the time of the assessment. Any attempt by FCI Tucson to apply the results of the assessment to conditions other than to those that specifically existed at the time of the assessment shall be at FCI Tucson's sole risk.

•		Lighting				
Location	Ventilation	(footcandles)				
		Grooming	Reading			
Y	Yucca Housing Unit (North)					
Cell 101	435.0	24.7	21.6			
Cell 108	420.0	30.4	20.8			
Cell 121	440.0	28.4	22.6			
Cell 213	470.0	32.8	21.4			
Cell 224	410.0	22.1	22.8			
Officer's Station	455.0	-	-			
Yı	icca Housing Unit	(South)				
Cell 103	510.0	21.7	-			
Cell 113	380.0	20.6	-			
Cell 121	470.0	22.2	-			
Cell 201	425.0	23.3	-			
Cell 212	385.0	29.0	+			
Cell 220	415.0	21.9	-			
Reading Area	-	-	30.5			
Officer's Station	505.0	-	-			
1	Palo Verde Housin	g Unit				
Cell 108	184.9	-	37.0			
Cell 111	184.9	-	33.8			
Cell 114	112.5	-	36.0			
Cell 123	112.5	-	36.5			
Restroom	-	41.8	-			
Officer's Station	325.0	-	<u> </u>			
Mesquite Housing Unit (North)						
Cell 105	390.0	32.8	35.8			
Cell 110	500.0	25.2	21.8			
Cell 116	460.0	22.1	24.2			
Cell 202	3 <b>60</b> .0	25.6	22.7			
Cell 207	380.0	25.1	27.1			
Cell 212	470.0	25.7	27.2			
Officer's Station	640.0	~				

# Table 1 - Light and Ventilation Survey ResultsFederal Correctional Institution

"-" No measurement taken

Light and Ventilation Survey Report FCI Tucson Page 6 of 6

Thank you for the opportunity to assist the Federal Bureau of Prisons and FCC Tucson on this project. Please call if you have any questions regarding this submittal. You may reach me at (210) 731-2217.

Sincerely,

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION

Kart With

Kent R. Wells Project Manager

Federal Bureau of Prisons

#### Federal Correctional Institution

Office of The Safety Department

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**A**.

Tucson, Arizona 85706

May 17, 2006



FROM:

SUBJECT :

Notification of Monitoring

It has been brought to the Safety Departments attention, that staff who received personal air sampling and wipe sampling during the OSHA Inspectors periodic inspection have not been notified of their results verbally or in writing. Also, the inmate workers at the UNICOR Factory and UNICOR Warehouse have not been notified verbally or in writing of the air sampling nor wipe sampling results conducted in their affected areas. I recommend UNICOR provide to each staff and inmate workers writing the test results to comply with Executive Order 12196, OSHA 29 CFR 1910.1025, Lead and 29 CFR 1910.1025, Cadmium Standards, and Bureau Policy.

Smith, Lead Safety Specialist

If I can provide any further assistance, please do not hesitate to let me know.

cc: Ricado E. Chavez, Warden Carolyn A. Sabol, Warden Joe Salazar, Executive Assistant Daryl Clifton, Production Controller Ramon Cuestes, Safety Manager

Attachment # 56



Federal Bureau of Prisons

Office of The Safety Department

Federal Correctional Complex Tucson, Arizona 85706

July 28, 2009

MEMORANDUM TO LOUIS W. WINN JR., WARDEN Complex Safety Manager FROM:

SUBJECT: Mold Update #2

In addition to the mold update provided on July 27, 2009, the Safety Department has reviewed the Mold Plan of Action - Followup dated May 6, 2009. It was requested that we look at all documentation, including corrective measures. After reviewing this document, I am providing you the following additional information for review:

The July 30, 2008, report identified the following mold being present:

- Safety office one air vent (Safety Manager) wipe sample
   11, 000 spores and air sample 417 spores.
  - A. Cleaning was conducted six (6) months later with some of the highest mold counts that had been previously tested.
  - B. Wipe sampling was again conducted on March 5, 2009, which still identified continued mold growth.
  - C. Air sampling was not conducted on March 5, 2009, to determine the level of airborne mold spores since the last testing.
  - D. The roof began to be replaced in June 2008, which has been completed.
  - E. Additional cleaning needs to be conducted. Also, the cleaning will determine if the role type duct work can be properly cleaned.



- F. Additional ambient (outside) and indoor air sampling needs to be conducted to determine the effectiveness of the vent cleaning and airborne mold concentrations.
- G. Additional wipe sampling needs to be conducted to determine the effectiveness of the vent cleaning and to stay consistent with previous testing.
- H. Cleaning was conducted seven months after initial notification, testing and recommendations by AES on July 30, 2008.
- This project has been delayed for over one (1) year, which allows further mold exposure that should be eventually abated.
- 2. The March 5, 2009, report showed the initial cleaning was not effective.

The September 27, 2006, thru March 31, 2009, reports identified following mold being present:

- 1. None of the reports identify any air or wipe sampling being conducted in the Yucca Unit Laundry area, which conflicts with the information on the Mold Plan of Action Follow-up report dated May 6, 2009.
  - A. Wipe sampling has not been conducted since initial notification and cleaning for eight (8) months to determine the effectiveness.
  - B. This project has been delayed for over one (8) months, which allows further mold exposure that should be eventually abated.

The October 6, 2008, report identified the following mold being present:

- 1. Carpentry Shop the wipe sample taken showed a very high level at 80,000 spores of Pennicillium/Aspergillums and the air sample taken showed a very high level at 4,700 spores of Cladosporium.
  - A. The March 31, 2009, report again identified the following mold being present: The test results have not been correctly annotated on the Mold Plan of Action - Follow-up report dated May 6, 2009:
    - 1. Penicillium/Aspergillus group (Mold Growth).
    - Other comments A few bacteria-like organisms detected (Bacteria Growth).
    - 3. Cleaning was conducted four (4) months after the initial notification, testing and recommendation provided by AES.
    - 4. Air sampling has not been conducted to determine the concentration of airborne mold spores after the

cleaning to stay consistent with the initial testing.

- 5. Additional cleaning needs to be conducted.
- 6. Additional ambient air and indoor sampling will need to conducted to determined the effectiveness of the cleaning and to stay consistent with previous testing.
- 7. Additional wipe sampling will need to be conducted to determine the effectiveness of the cleaning and to stay consistent with previous testing.
- This project has been delayed for over one (1) year, which allows further mold exposure that should be eventually abated.

The March 31, 2009, report identified the following mold being present:

- Maintenance Office vent Cladosporium species (Mold Growth), which this is not currently identified on the Mold Plan of Action - Follow-up report dated May 6, 2009.
  - A. Additional cleaning will need to be conducted.
  - B. Additional air and wipe sampling will need to be conducted to determine the effectiveness of the cleaning and to stay consistent with previous testing.

This is additional information needing to be added to the Mold Plan of Action - Follow-up report. If there are any questions or concerns, please do not hesitate to let me know.

cc: McClintock, AW Hollembeak, AW Marchetti, Facilities Manager Cobb, General Foreman Schickel, General Foreman Local Union

- The two wipe samples showed that some Basidiospores (in Warden Office carpet) and Penicillium Aspergillus (in the Business Office Storage Room) spores are present, but in relatively low concentrations. The mold levels in the storage room are still concerning us.
- However, presence of Penicillium Aspergillus in the Business Office Storage Room walls and carpet were still our concern. We recommend more samples should be taken from the air registers and walls in the related 14 Business Office areas, before us being able to conclude the presence or absence of the molds.
  - A. The latest report dated May 18, 2009, identified that wipes samples were conducted for the USP Safety Offices and the Administrative Controller's office area.
  - B. To date there are no reports to review that identifies any additional sampling had been conducted for the following areas - 1. Warden's carpet, 2. Business Office storage area and 3. Fourteen (14) Business Office walls (inner walls).

The March 05, 2009, report identified the following areas with mold:

 Safety Tech, Safety Manager and CMS Office vents -Cladosporium species (Mold Growth), which would require the vent ducts to be cleaned and retested.

The March 31, 2009, report identified the following areas with mold:

- Maintenance Office vent Cladosporium species (Mold Growth), which would require the vent ducts to be cleaned and retested. This is not reflected on the Mold Plan of Action follow-up report dated May 6, 2009.
- Carpentry Shop vent Penicillium/Aspergillus group (Mold and Bacteria Growth) Other comments - A few bacterialike organisms detected, which would require the vents to be cleaned. This is not reflected on the Mold Plan of Action follow-up report dated May 6, 2009.

This is additional information needing to be added to the Mold Plan of Action. If there are any questions or concerns, please do not hesitate to let me know.

cc: McClintock, AW Hollembeak, AW Marchetti, Facilities Manager Cobb, General Foreman