

2/14/2019
SDNY @ 2025

- MG gave warning @ 2024
"I have no choice to let go"
- asked if any questions - NO

Employee 2

IBOP 12/11/1994

OP LT 2010? EARLY 2001/2002
to LT. 1-5 years 2010 Rank OGS9
→ GS11

[REDACTED] direct supv.

1 supv staff

↳ staff that work under
more around on roster - supv daily duties
resp for their safety and inmates
safety.

currently on morning watch
they put you where they want
shift 12x8 usually Release 10x6



→

Relieve at 10 AM duties start
at 10 - when you relieve you
start.

Daily Lt. log

Daily Activity log

Lt. log → most important things of day
Daily Act log - Brief synopsis of
importance

Lt. log - computer entries

start every month - follow

Enter information as it occurs as
much as possible - All others may
do different

↳ lots of duties at same time
OT, coverage, medical etc

You do the log as you can when free
some do at end "I try and do

it as it happens but times at late

date → call control and they will
have correct times





Example of calling in Ambulance

Supervision of Count

We are Resp for 1 count / shift

Compare to EI sheet total #

Assigned to each Unit

Where - who and total

Compare to your paperwork

Contact control off tot all others

How count happens:

Intendant off or any mobile

will collect those slips

Different from calling control
call 1st

place slips after

*

if no count slips out MOB. IR office

calls to control to get slips

call control via phone for count



→

Clear vs Good Verbal
Verbal all calls match
Clear All matches slips and calls

Count never become final?

Good Verbal
+ count slips are correct
Count cleared!

Officer ensuring do count
Expect officer knows importance
on own

only 1 person - "you hope"
for the most part we do.

Staffing issues @ MCC
things happen - it's a prison

Staff to Maguire?
short of staff drastically
for years
Peter to pay Paul ↪

→
Constantly having to shift to
fill our required duties resp now w/
Additional now obligated duties

Short staff → lets can happen
can't do duties the way
you should - overwhelming →
constant.

"Work to live" - Problems but Nothing
Done can't always give
110%

My life does not revolve around me
Not required to give you our
lives. Our body's can't give that
much. Better things to do than work
16 hrs or 16+ hours.

Inmates Aren't Angels - Drugs, Phones
Shanks - Adds to stress

We walk in no guarantee walk out
→

→

Do things happen because tired
you make mistakes - they get
bigger - things "just happen"

Ever caught Anyone NOT doing A
count → No

NEVER HEARD Anyone discussing

Training on count ?

BoP 101 importance on
taking count - Rely on living
Breathing people

If environment is great you
are creating opportunities for things
to happen

No one would tell me no counts

→

→
When they call it in we know
I see them walking around

Not All done @ same time
I see them walking around

* Usually I take midnight count
30 min rounds → when I get there
I make them
lots to do and check - No specific
time I thing to next

Green bag Book?
gone for years

They made one like a tablet and
yes you are resp. to sign - no
time tentay. You need to match
what I am doing to see it that's
my count.

→



Normal Round

talk w/ officers - Daily Activity
take about instit. - Range sheets
Admin work

Officer Rounds in SHY

2 officers @ same time

Not sure depends on shift

Not sure however they usually do.

2 sets of keys not both @

same time allowed

More than 1 down Range

Morning shift.

Count 1 at grill 1 enters

and then switch

DOES internal help - NO REASON

NOT REQUIRED

You can't call in good verbod

w/out call

shown log of log for 8/10
M/W - morning watch
this concerns inmates on psych
↳ sensitive to the T

Beginning of gen pop
count 105

12 AM of Anderson assumes

evening watch log if I come in
early 12 is my official time
End log w/ to relieve

12 AM count progress

1230 watch calls count

ensure safe

calls officers make to ensure
SAFE

Any Body in institution to call for
SAFE

Remember 8/9 - 8/10

I was in control @ 12

1235 - 1 Shu - Dry Cell

Count wrong

→

inmate dry cell R/O inmate
in SHU count realize not in
R/O count but SHU count
was adjusted he was not in
SHU he was in R/O w/ staff

Count slip 12 AM 2/A #73
Should have said #72

Ran NEW EI we changed his info
from SHU to RA

I don't know I wasn't there
inmate was not in SHU

inmate in R/O NOT psych then
make changes

Count was actually 72
signatures - count Ricoy
[redacted] + Nord

Recall 12 @ SHU 8/10
Thomas + Nord

→

CONVERSATION ABOUT R/S INMATE
V/S SHU

I think it was THOMAS
I spoke to

1234 good verbal count
Accurate

1249 good inst count - slips ✓

3 AM Recall of control
5 AM "

TODAY you RAN like I WAS NOT
I on Rounds

3 AM is the white witching the
Always M. NIGHT count
CAMERAS you can see them out
AND ABOUT

Remember SHU CAMERAS count
SHU camera is placed
you know inherent I AM NOT
FIXED on it →

→

SHU CAMPED Bureay cont
SRR OFFER

ONT count section PPR 1
tells what count should be

Your sig - yes

sign init

Good verand

+ class count

3Am is control room OFFER

out count

↳ psych Unit

Friday Aug 9 2019 document

looks like the way SHU inmate

Housing - NOT sure if I have
Access

SHU OFFER initiates that

2 phones in STU desk + wall

Night of 8/10 in the morning
shift

Nexl + Thomas

Nexl MANDATED

Thomas Always on OT

UPDATES OF 5 OT 5 DAYS 5 OT

Any to be MANDATED - NO -
Admin lt could Answer

NEVER SAW it LISTED

SELECT POST IF NOT MANDATED

1 wife in Building PHARMACY

STU in shift AT LEAST 1x

Nothing happened All quiet

We talked Nexl + Thomas

Explain new staff told

them - sign OT

got there late

they were sure yes they

were there

→

All working an Additional 8 hrs
Unusually tired?

they All - they are all
Exhausted - I Document - not
Every night - Blends in,
Mentally Exhausted
No BREAKS DAYS OFF TO REST

Any other discussions w/
Thomas + Noel

I don't REMEMBER - too much

How many hours of work before
deems too many - NOBODY cares
until this dude dies.

there's no one to Blame
only good as your training
I can't spray out all the
directives - I am Resp to ensure
they do what supposed to - I
wake people up.

→

→

OFFICERS didn't Ask for that to sit there they didn't Ask for that due to me - when your Boray tells you you too need to get up what do you do - theres tons of posts Empty - Always filling in MEDICAL Example - R/D task R/D shuts down @ 10pm - Asst Central Centre - pull out to pick up stool

that night we didn't even have a Sanitation officer - couldn't even go to Bathroom

"Somebody was going to have to die"
And here you are
we all said that we just hoped it wasn't us.

This is why
Nobody cares its unfortunate
But here we are

→

I can do jobs Am handle it.

Those officers could have checked on
him inmates don't deserve
Being watched

Don't think Dorey Rums would have
stayed restrained

Maybe yes it could have helped
if Dorey 30 min Rums

Purpose is to see But could still
Be DEAD

Cells are dark

You go you tell me

Something out of ordinary
positioning

Actions

look

Any # of things →

→

Attempt on July 23

Yore MEMOS

EP on floor like snoring
just lay there - start out of
cell

EP open eyes to see us - snoring
nothing wrong

Closes eyes when makes contact

OFF COURSE he was faking

Red mark around neck

took him to psych

Sucaine smok

Acting can't stay on BED only

When look @ him

told him to stop threaten CORES

Thomas three thumbs up

THETAglione attack - I have NO IDEA

→

MAYBE TRYING TO GO TO KASP.?

MARK ON NECK IS WORSE

MORE PICS BETTER BEHAVIOR

THAT MY NECK LOOKS BAD
RIGHT

LIGATURE WASN'T ON NECK

@ SOME PT I GOT IT

SHOULD PANELS + COUNT HAVE BEEN

DONE - SURE

IF THEY WEREN'T DONE IT WASN'T

BECAUSE LAZY

THOMAS ALWAYS WORKS W/ ME

NECK IS NEW AND TRAINING AND

MAKING REPORT

I DON'T THINK IT WAS BLATANT

I HAVE A SENSE OF WHO MY OFFICERS

ARE - THESE 2 WOULD NOT

SAY RICHIT - I HAVE NOT SPOKE

TO THEM, THOMAS GONE - NOT

NOT OK - SPOKE TO HER ABOUT HER

FEELINGS

→

I'VE BEEN @ institutions w/
suicide have to address feelings

INTERACTION w/ Epstein
other than 1st attempt
Asks me for something
You supposed to be sleeping

HEAR ANY OFFER COMPL - NO NOT
MORE THAN OTHERS
BY PASS RULES + FELT PRIVILEGES

His Attorney ENCOURAGED IT → Epstein

You want things to go smooth
You don't want DRAMA
Other inmates would want want
Epstein HAD

→

Aware of Epst. Bk to stay
After psych

- No I wasn't specifically
I know where he is NOT

I would have seen - @ some
point he was removed - he
probably should have been
some when else

Epst like any other inmate

A → B

Never thought about Epstein that
night

Epstein never cell mate - No

04/01 [REDACTED] - NO

typically upon release

that doesn't always
occur

→ Suicide → psych ops
9/10 → No Risk

psych typicall cellmate
↳ yes

Does that mean 24/7

Does he always need to be
there

↳ No psych has not made
it known - cellmate keeper

I know Eps no longer on
Suicide I assume sth
I never really thought about it

Theres alot of system

Aware rec cellmate for Rpt.

"they" - psych
info just swirling around
1st incident in [REDACTED]
why high profile

→

Somebody requested
outside institution

No longer psych watch
high profile
1 of most high prof. he
Naura said I don't care
Why treat him any different

Did you know SHU
"I don't know where
he was"

El Chapo and ??? → NOT DATA

IF HE WAS supposed to have callmate
Arrival check → should be suicide

Aware no callmate - NO

I probably would have
Ask officers why

No officers are required to
Report no call - NO NOT req
No officer stated

→

Admin does that they pick cell
mates - like inmates of same
charge / Background

Unaware no cell mate - No

1 Do not touch the tire
NOT REQUIRED TO

NEVER WALKED BY CELL

[REDACTED]

Bop Email

Refuse

Possible Alone UNCOVERED

END: 2205 Hrs