ICE Detention Standards Compliance Review

Cobb County Adult Detention Center

September 29 - 30, 2008

REPORT DATE - October 7, 2008



Contract Number: ODT-6-D-0001 Order Number: HSCEOP-07-F-01016

Creative Corrections
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MEMORANDUM FOR:	James T. Hayes, Jr., Director Office of Detention and Removal Operations
FROM:	Reviewer-In-Charge
SUBJECT:	Cobb County Adult Detention Center Annual Detention Review
Detention Center, Marietta,	Georgia, on September 29 – 30, 2008. As noted on the attached ject Matter Experts (SME) included b6,b7c, SME for Security alth Services; SME for Environmental Health and SME for Food Service.
Col. b6,b7c , Detention	Concerns were discussed was held on September 30, 2008, with Center Commander; Lt. 66,67c; Major 66,

Type of Review:

October 7, 2008

This review is a scheduled Detention Standard Review to determine general compliance with established ICE National Detention Standards for facilities used for under 72 hours.

Review Summary:

The Cobb County Adult Detention Center is accredited by the National Commission on Correctional Health Care (NCCHC) and the Medical Association of Georgia. It is not accredited by American Correctional Association (ACA) or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Standards Compliance:

The following information summarizes the standards reviewed and the overall compliance for this review:

May 16 -17, 2007	September 29 – 30, 2008
Compliant - 28	Compliant - 27
Deficient - 0	Deficient - 1
At-Risk - 0	At-Risk - 0
Non-Applicable - 0	Non-Applicable - 0

Tool Control - Deficient

Policy: Every facility shall develop and implement a tool-control system. Tools are to be classified according to Restrictive and Non Restrictive status.

• Cobb County Adult Detention Center does not have an established tool classification system.

Recommendations

- The Maintenance Supervisor should develop and implement a tool classification system.
- Each tool should be marked making it readily identifiable.
- A computer-generated or typewritten inventory should be created for all tools, equipment, and storage locations.
- All appropriate tools should be mounted on shadow boards.

Recommended Rating and Justification

It is the RIC recommendation that the facility receive a rating of "Acceptable." It is also recommended by the RIC that a Plan of Action be required for this facility to develop and correct the deficiency identified during this review.

RIC Assurance Statement

All findings of this review have been documented on the Work Sheets and are supported by the written documentation contained in the review file.

A. Type of Facility Review	YED						
☐ ICE Service Processin							
ICE Contract Detenti					•		
	al Service Agreement	G. ACCREDITATION					
	•	List all State or Nati					
B. CURRENT INSPECTION		National Medical St	andards 20	07 & NCCHC 20	U8		
Type of Inspection		H. PROBLEMS / CO	MPT.ATNTS (COPIES MUST RE	ATTACHED)		
Field Office HQ Inspec	cuon	The Facility is under					
Date[s] of Facility Review September 29 – 30, 2008		Court Order		Class Action Find			
September 29 – 30, 2008		The Facility has Sig					
C. PREVIOUS/MOST RECENT	FACILITY REVIEW	☐ Major Litigation		Life/Safety Issues			
Date[s] of Last Facility Review		None					
May 16 – 17, 2007							
Previous Rating		I. FACILITY HIST	ORY				
☐ Superior ☐ Good ☒ Acce	eptable Deficient At-Risk	Date Built			ĺ		
		1984 - Completed 1		-			
D. NAME AND LOCATION OF	FACILITY	Date Last Remodele	ed or Upgra	ıded			
Name	_	1999 - Kitchen					
Cobb County Adult Detention C	Center	Date New Construc	tion / Bed S	Space Added			
Address		1997	~1 .				
1825 County Services Parkway		Future Construction					
City, State and Zip Code		Yes No Da		D 10 (//)	- D - I I - \		
Marietta, GA 30008		Current Bed space		Bed Space (# Ne			
County Cobb		1925	Numbe	r: 1,152 Date: 20	710		
Name and Title of Chief Execu	tive Officer	J. TOTAL FACILI	TY POPULA	ATTON			
(Warden/OIC/Superintendent)	live Officer	Total Facility Intake for Previous 12 months					
1 `	, _{b7c} Commander	36,660					
Telephone Number (Include Ar		Total ICE Man Day	s for Previo	ous 12 months			
770-499- b6,b7c	54 5545)	5,978					
Field Office / Sub-Office (List	Office with Oversight)						
Atlanta		K. CLASSIFICATION					
Distance from Field Office			L-1	L-2	L-3		
15 miles		Adult Male					
		Adult Female					
E. ICE Information		T Every war Cur	A COTOTT !				
Name of Inspector (Last Name		L. FACILITY CAP		Onevetional	Emanganav		
b6,b7c Reviewer-In-Charg		Adult Male	Rated	Operational 1961	Emergency		
Name of Team Member / Title	/ Duty Location		1589	1861	1964		
b6 / SME Medical / MN		Adult Female	336	310 enders 16 and Old	336		
Name of Team Member / Title		Facility Holds 30	ivenites Off	enders to and Oid	er as Adults		
b6 SME Food Service /		M. AVERAGE DAI	LY POPULA	ATION			
Name of Team Member / Title	/ Duty Location		ICI		Other		
b6,b7c / SME Security / NV	Adult Male	15		NA			
Name of Team Member / Title		Adult Female	3		NA		
b6 / SME Environmental H	eath and Safety / 1L						
F. CDF/IGSA INFORMATION	ONLY	N. FACILITY STA	FFING LEV	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Contract Number	Date of Contract or IGSA	Security:		Support:			
DRO-IGSA-08-0015	9/3/08	b2Hi	gh				
Basic Rates per Man-Day	7.5.00	•		•			
\$ 42.58	· .						
Other Charges: (If None, Indic	ate N/A)	•		•			
; ; ; N/A				-			
Estimated Man-days per Year		•					

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you <u>must</u> complete the following worksheet prior to your scheduled review dates. This worksheet must contain data for the past twelve months. We will use this worksheet in conjunction with the ICE Detention Standards to assess your detention operations with regard to the needs of ICE and its detainee population. Failure to complete this worksheet will result in a delay in processing this report, and may result in a reduction or removal of ICE detainees from your facility.

INCIDENTS	DESCRIPTION	Jan – Mar	Apr — Jun	Jul – Sep	Oct - Dec
Assault:	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	8	9	6	12
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	. 0	0	0	0
4	Without Weapon	30	19	12	29
Number of Forced Moves, incl. Forced Cell Moves ³		46	66	· 24	55
Disturbances ⁴		. 0	2	0	. 0
Number of Times Chemical Agents Used		25	15	6	10
Number of Times Special Reaction Team Deployed/Used		0	2	0	0
# Times Four/Five Point Restraints Applied/Used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	15	16	6	. 17
	Type (C=Chair, B=Bed, BB=Board, O=Other)	С	С	С	C.
Offender / Detainee Medical Referrals as a Result of Injuries Sustained.		84	94	42	90
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	91	153	232	72
	# Resolved in Favor of Offender/Detainee	N/A	N/A	N/A	N/A
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	I	I	I	I
	Number	1	1	1	1
Psychiatric / Medical Referrals	# Medical Cases Referred for Outside Care	185	227	165	221
	# Psychiatric Cases Referred for Outside Care	2 .	1	4	2

Any attempted physical contact or physical contact that involves two or more offenders

Routine transportation of detainees/offenders is not considered "forced"

Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. A	CCEPTABLE	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE	
LEG	AL ACCESS	STANDARDS	•			1. 2. 3. 4.
1.	Visitation		10000000000000000000000000000000000000			
2.	Telephone	Access				
DET	AINEE SERV	ICES				
3.	Admission	and Release				
4.	Classificati	ion System	io.			
5.	Detainee H	landbook		•1		
6.	Food Servi	ice				
7.	Funds and	Personal Property	•			
8.		Frievance Procedures			¥	
9.	Issuance ar	nd Exchange of Cloth	ing, Bedding, and To	owels		
10.	Religious I	Practices				
HEA	LTH SERVIC	CES				
11.	Medical Ca					
12.	Suicide Pre	evention and Intervent	tion			
SECU	JRITY AND	CONTROL				
13.	Contraban	d .	•			
14.	Detention !					
15.	Disciplina	.5	e e			
16.	Emergency		*	•		
17.		ental Health and Safet				
18.		ns in Detention Facili	ties			
19.		ock Control	8			
20.	Population			*		
21.	Security In		*			
22.		anagement Units (Ad				
23.		anagement Units (Dis	ciplinary Segregation	on)		
24.	Tool Contr					
25.		tion (Land management	ent)			
26.	Use of For			0.02		
27.		ainee Communication	, -	03)	•	
28.	Detainee T	ransfer (Added Septe	ember 2004)			

ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND WHAT IS NECESSARY TO REACH COMPLIANCE.

RIC REVIEW ASSURANCE STATEMENT

BY SIGNING BELOW, THE REVIEWER-IN-CHARGE (RIC) CERTIFIES THAT:

- 1. ALL FINDINGS OF NON-COMPLIANCE WITH POLICY OR INADEQUATE CONTROLS, AND FINDINGS OF NOTEWORTHY ACCOMPLISHMENTS, CONTAINED IN THIS INSPECTION REPORT, ARE SUPPORTED BY EVIDENCE THAT IS SUFFICIENT AND RELIABLE; AND
- 2. WITHIN THE SCOPE OF THIS REVIEW, THE FACILITY IS OPERATING IN ACCORDANCE WITH APPLICABLE LAW AND POLICY, AND PROPERTY AND RESOURCES ARE BEING EFFICIENTLY UTILIZED AND ADEQUATELY SAFEGUARDED, EXCEPT FOR ANY DEFICIENCIES NOTED IN THE REPORT.

REVIEWE	R-IN-CHARGE
Reviewer-In-Charge: (Print Name)	Signature
	b6,b7c
b6,b7c	Data b6,b7c
Title & Duty Location	
Reviewer-In-Charge/NM	10-15-08
TEAM	MEMBERS :
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
n n m n	C) C) C
SME Food Service/CO	b6,b7c , SME Security/NV
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
b6,b7c , SME Environmental Health and Safety/IL	b6 , SME Medical/MN
26	
RECOMMENDED RATING: ACCEPTABLE	
-	
DEFICIENT	, [
AT-RISK	•

COMMENTS: The facility is clean and well managed by experienced staff. The staff was exceptionally helpful and attentive to the review process. The staff's attitude was positive and it was apparent that all staff is well trained, efficient, motivated, and committed to providing a safe and secure facility for staff and detainees alike.

The facility does not use the Taser devise.

Deaths:

OCTOBER 24, 2007, ALLEN LEANDER

A 23 year old male arrested on drug charges. During booking procedures medical problems were encountered and he was transferred to hospital and died of drug ingestion possibly due to an attempt to conceal evidence.

FEBRUARY 4, 2008, RODNEY TRAVIT

A 41 year old male presented feeling drowsy. He stated he fell and hit his head in the pod. He was brought to the infirmary via wheelchair and was talking with staff. He stated he wanted to lie down. Seizure activity followed and a Code Blue was called. An M.D., Dr. Washing, was present. He was transported via ambulance to hospital and was pronounced dead. Diagnosis was questionable massive coronary.

June 5, 2008, PATRICK FRENCH

A 28 year old male sent to hospital on 6-5-08 with a rash accompanied by pain. He was diagnosed with Steven's Johnson Syndrome. After numerous days in intensive care with numerous complications he died on 6-25-08.

JUNE 26, 2008, JOSE FRAIRE

69 year old male arrived in intake confused, combative and displaying bizarre behavior. He was taken to Northside Hospital and pronounced dead at 0900. He was placed on life support pending organ harvest.

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Review Authority The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations. HQDRO EXECUTIVE REVIEW: (Please Print Name) Signature b6.67c Title Acting Chief Acceptable Deficient At-Risk Comments: The Review Authority concurs with the "Acceptable" rating. A Plan of Action is required to address the deficiencies noted in the Tool Control, Detainee Telephone Access, and Food Service standards.

Department of Homeland Security

Immigration and Customs Enforcement Office of Detention and Removal

Condition of Confinement Review Worksheet

(This document must be attached to each G-324B Inspection Form)

This Form to be used for Inspections of all Facilities Used Under 72 Hours



Detention Review Worksheet

State Facility – IGSA
ICE Contract Detention Facility
Name
Cobb County Adult Detention Center
Address (Street and Name)
1825 County Services Parkway
City, State and Zip Code
Marietta, GA 30008
County
Cobb
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
Sheriff Neal Warren/Col. Jail Commander
Name and title of Reviewer-In-Charge
b6,b7c
Date[s] of Review
September 29 – 30, 2008
Type of Review
☐ Headquarters ☐ Operational ☐ Special Assessment ☐ Other

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS
RELIGIOUS PRACTICES
Access to Telephones
Visitation
HEAT THE CERTIFICATION OF A STATE OF THE STA
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SUICIDE FREVENTION AND INTERVENTION
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ENVIRONMENTAL HEALTH AND SAFETY HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS SECURITY INSPECTIONS SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) TOOL CONTROL TRANSPORTATION (LAND)
ENVIRONMENTAL HEALTH AND SAFETY. HOLD ROOMS IN DETENTION FACILITIES. KEY AND LOCK CONTROL. POPULATION COUNTS. SECURITY INSPECTIONS. SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION). SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION). TOOL CONTROL. TRANSPORTATION (LAND). USE OF FORCE.
ENVIRONMENTAL HEALTH AND SAFETY HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS SECURITY INSPECTIONS SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION) SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION) TOOL CONTROL TRANSPORTATION (LAND)

NOTE: FOR EACH STANDARD RATED <u>BELOW</u> ACCEPTABLE, FACILITIES MUST ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, INCLUDING THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

SECTION I DETAINEE SERVICES STANDARDS

ADMISSION AND RELEASE POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING, A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS					
NECESSARY.	IIOTT WILL				
COMPONENTS	Y	N	NA	REMARKS	
In-processing includes an orientation of the facility.				·	
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	Ø			·	
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.					
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.				Supervisors must approve a strip search. If a strip search is completed, a report is generated and reviewed by a supervisor.	
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.					
Two officers are present during the processing of detainee funds and valuables during admissions processing to the facility. Both officers verify funds and valuables.				Up to \$149.00, one officer counts; \$150 – \$500, two officers; over \$500 two officers and a supervisor count the money.	
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	\boxtimes				
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	×				
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	×			-	
All releases are properly coordinated with ICE using a Form I-203.				The release process of 12 detainees was observed on 9/29/08, and a completed Form I-203 was utilized.	
Staff completes paperwork/forms for release as required.	×			All paperwork appeared to be properly prepared and used during the release process.	
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING	
REMARKS: CCADC policy and procedures provides for the intake and release of detainees according to ICE and facility standards. b6,b7c 9/30/08 AUDITOR'S SIGNATURE b6,b7c					

CLASSIFICATIO POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED DETAINEES IN OTHER CATEGORIES	ACCORDI	NG TO W		医三角 经国际公司 经基本证券 医二氏二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基
COMPONENTS	Y	N	NA	REMARKS
The facility has a system for separating criminal and non-criminal ICE detainees. Violent offenders are separated from non-violent offenders.	· 🗵			
Housing assignments are based on threat level.	X			
ACCEPTABLE DEFICIENT	AT-RI	SK	I	REPEAT FINDING

REMARKS:

The facility uses the "Tree Classification" outline for their classification process to separate non-violent from violent detainees and to assign housing. Male detainees, effective September 26, 2008, have been placed into one dormitory living area. Female detainees are housed with the Special Needs female population.

AUDITOR'S SIGNATURE / DATE

b6,b7c

b6,b7c

b6,b7c

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOO POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HOPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACIL	OK TO SER' ANDBOOK FACILITY	VE AS AN C WILL ALS	O DESCR	THE SERVICES, PROGRAMS, AND
COMPONENTS	Y	l n	NA	REMARKS
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	×			The current handbook was issued October 2004. The handbook is in English and Spanish.
The detainee handbook states in clear language the basic detainee responsibilities.		×		The current handbook does not address the basic responsibilities; however, the ICE National Detainee Handbook was provided to staff members who will begin issuing the handbook to all detainees.
 The handbook identifies: Initial issue of clothing and bedding, and personal hygiene items; When a medical examination will be conducted; The telephone policy, debit card procedures, direct and free calls, locations of telephones, policy when telephone demand is high, Policy and procedures for emergency phone calls, and the Detainee Message System; Facility search procedures and contraband policy; and Facility visiting hours and schedule, and visiting rules and regulations 				All topics are covered in the current Cobb County Jail Inmate Handbook, dated October 15, 2004.
 The handbook describes the detainee disciplinary policy and procedures, to include: Prohibited acts and severity scale sanctions; Time limits in the Disciplinary Process; Summary of Disciplinary Process; Sick call procedures for general population and segregation; and The rights and responsibilities of all detainees. 				All topics are addressed by the current Cobb County handbook.
ACCEPTABLE DEFICIENT	AT-RI	sk		REPEAT FINDING
REMARKS: The CCADC handbook is well written and addresses all required topics the English and Spanish versions of the new ICE generic handbook whi	s, except t	he basic re		ilities. Staff was provided a copy of

population.

AUDITOR'S SIGNATURE / DATE

FOOD SERV	ICE			
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUT	RITIOUS A	ND APPET	IZING MEA	LS, PREPARED IN ACCORDANCE WITH
COMPONENTS	Y	N*	NA	REMARKS
Trained staff supervises the food service program.				Aramark is the contract food provider and is under the direction of the Detention Cook Supervisor.
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	☒			The on-duty cook supervisor is the only person with a key to the knife cabinet.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils		×		b2High
Detainees are served at least three meals daily. No more than 14 hours elapse between the last meal served and the first meal of the following day.				Detainees are served at least two hot meals a day with the noon meal being a sack lunch. There is no more than 14 hours between dinner and breakfast of the next day. Breakfast - 0600 Lunch - 1100 (approximately) Dinner - 1800
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	×			There is a complete nutritional analysis conducted on all menus to include the master cycle menus as well as the diet menus and religious menus.
The food service program addresses medical diets.	Ø			The food service department provides medical diets when prescribed by the medical staff.

FOOD SERVICE					
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUT	RITIOUS A	ND APPETI	ZING MEAL	S, PREPARED IN ACCORDANCE WITH	
THE HIGHEST SANITARY STANDARDS. COMPONENTS	Y	N	NA	REMARKS	
Satellite-feeding programs follow guidelines for proper sanitation.				The staff follows satellite feeding guidelines for proper sanitation as well as the temperatures for food items. All foods are kept at the proper temperature prior to being fed, except the noon sack lunch. The two hot meals are prepared and plated and fed within the two hour time period. The sack lunch is being delivered at the breakfast meal time. There is no refrigeration in the units for the detainees/inmates to keep the sack lunch within a safe temperature range.	
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours. (140 degrees for hot – 40 degrees for cold)		∑		All foods are maintained at the proper temperatures, except the noon sack lunch. Cold foods are at 40 or below and hot foods are at 140 or above. The sack lunches that are sent down to the units at breakfast time for lunch are not being maintained at the	
All meals are provided in nutritionally adequate portions.	×			proper temperature. All foods and portions are nutritionally adequate.	
Food is not used to punish or reward detainees based upon behavior.	⊠			Foods are not used to reward or punish detainees.	
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.	×			All food service areas are inspected weekly by the food service staff, as well as monthly by the Director of the Medical Department and annually by the County Health Department.	
Equipment is inspected daily.	×			The food service staff does a daily inspection of all equipment. If any problems are noted they are reported to the Food Service Director so the needed repairs can be made.	
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	×			All incoming supplies are inspected by the detention/food service staff for damage, contamination, and pest infestation prior to storing the supplies	

POLICY: EVERY FACILITY WILL PROVID		DD SERVICE			
THE HIGHEST SANITARY STANDARDS. COMPONE		WITH NOTKITION		NA NA	REMARKS
Storage areas are locked.					When not in use by the staff, the storage areas are secured.
ACCEPTABLE	☐ DEFICIENT	□ Ат-	Risk		REPEAT FINDING

REMARKS:

The staff follows satellite feeding guidelines for proper sanitation as well as the temperatures for food items. All foods are kept at the proper temperature prior to being fed, except for the noon sack lunches. The two hot meals are prepared, plated, and fed within the two hour time period, with the proper temperature. The sack lunch is being delivered at the breakfast meal time. The sack lunches should be refrigerated to reduce the possibility of a food borne illness. There is no refrigeration in the units for the detainees/inmates to keep the sack lunch within a safe temperature range.

Colds foods are at 40° or below and hot foods are at 140° or above.

	b2High	
b6,b7c 9/30/08 AUDITOR'S SIGNATURE / DATE	b6,b7c	

POLICY: ALL FACILITIES WILL IMPLEMENT PROVIDE FOR THE SECURE STORAGE OF RECEIPTING OF SURRENDERED PROPERTY; OTHER PROPERTY;	UNDS, VALUABLES, BAGGAGE	SAFEGUARI AND OTHE	DETAINE R PERSOI	VAL PROI	PERTY; THE DOCUMENTATION AND
STANDARD NA: (IGSA ONLY) CHEC	K THIS BOX IF ALL ICE DETAIN FFICE OR SUB-OFFICE IN CON				
COMPONENT		YES	No	NA	REMARKS
Detainee funds and valuables are prope accessible only by designated supervisor(s).	×			Funds and valuables are properly separated, stored, and are accessible by the supervisor.
Detainees' large valuables are secured designated supervisor(s) or processing sta	off only.	×			Valuables are secured in a location accessible to the designated staff.
Two officers are present during the provaluables during in-processing to the faciliand valuables.		X			If the amount of monies is \$149.00 and under, only one officer verifies the amount. Anything over \$150.00 to \$500.00 is verified by two officers. Anything over \$500.00 is verified by two officers and a supervisor.
Staff forwards an arriving detainee's med					All medication is forwarded to the medical staff upon a detainee's arrival to the facility.
Staff searches arriving detainees and contraband.	their personal property for	\boxtimes			All detainees and their property are searched for contraband upon arrival at the facility.
Staff procedures follow written policy for detainees.	returning forgotten property to				Procedures are in place for taking care of property that may have been forgotten or lost.
Property discrepancies are immediately re Security.	ported to the CDEO or Chief of				Any discrepancies are noted immediately and reported to the Property Supervisor who reports it to the Chief of Security.
CDF/IGSA facility procedures for handling similar with the ICE standard.	g detainee property claims are				All procedures are followed by all staff when handling detainee property.
ACCEPTABLE	DEFICIENT	AT-RISE	ζ		REPEAT FINDING
REMARKS: The Detention Center maintains accurate and stored according to policy. The work b6,b7c / 9/30/08 AUDITOR'S SIGNATURE / DATE	area in which these functions				

DETAINEE GRIEVANCE PROCEDURES POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPS) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPS; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPS. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED. COMPONENTS Y N NA REMARKS Every member of the staff knows how to identify emergency grievances, Per Sgt. b6,b7c all staff receives including the procedures for expediting them. \boxtimes П training upon initial employment and annually thereafter. There are documented or substantiated cases of staff harassing, There have been no documented disciplining, penalizing, or otherwise retaliating against a detainee who cases reported of staff harassing, \boxtimes or otherwise retaliating, against a lodged a complaint: detainee who has lodged a • If yes, explain. complaint. Procedures include maintaining a Detainee Grievance Log. Presently, all grievances are If not, an alternative acceptable record keeping system is maintained in a computer log system. It was recommended to maintained. 図 П П Sgt b6,b7c that a system of "Nuisance complaints" are identified in the records. identifying and tracking detainee For quality control purposes, staff document nuisance grievances be included in the complaints received but not filed. existing program. Staff is required to forward any grievance that includes officer Per Sgt. b6,b7c any grievance involving officer misconduct misconduct to a higher official or, in a CDF/IGSA facility, to ICE. \boxtimes П would be reported to ICE.

AT-RISK

REMARKS:

ACCEPTABLE 1

The facility's grievance program is active and provides procedures for the general population to file complaints.

DEFICIENT

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G-324B Detention Inspection Form Worksheet for IGSAs - Rev: 07/09/07

REPEAT FINDING

ISSUANCE AND EXCHANGE OF CLOTH	IING, BE	DDING,	AND TO	OWELS
POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PRO ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE D TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.		and the second second	The second of the second	(おく) たいし (私話) しゅしょうしゃ (またが) むりじ とうしゃしき (ちょうしゃ)
COMPONENTS	YES	No	NA	REMARKS
All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing.	×			Detainees are issued clean clothing upon admission into the facility.
New detainees are issued clean bedding, linens, and a towel.	. 🛛			Detainees are issued clean bedding, linens, and a towel.
□ ACCEPTABLE □ DEFICIENT □	AT-RISH	ζ		REPEAT FINDING
REMARKS:		5		
REMARKS: Detainees are provided all required items listed in this standard.		× .		

RELIGIOUS PRACTICES					
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REAPPRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFET BUDGETARY CONSIDERATIONS.					
COMPONENTS	Y	N	NA	REMARKS	
Detainees are allowed to engage in religious services.	\boxtimes			Detainees are permitted to engage in their religious beliefs.	
The facility allows detainees to observe the major "holy days" of their religious faith.	×			Detainees are allowed to observe their holy days. They send a written inmate request to the staff Chaplain and he will arrange for the detainee to observe the holy day(s).	
Each detainee is allowed religious items in his/her immediate possession.	⊠			Detainees are allowed to have religious items in their possession limited only by constraints of safety, security, and the orderly operations of the facility.	
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING	

REMARKS:

The religious program is under the supervision of the staff Chaplain. He coordinates all religious services with volunteers from the community who have applied to the Detention Facility to be one of the volunteer clergy/chaplains. The facility provides detainees of all faiths with reasonable and equitable opportunities to participate in the practice of their faith.

b6,b7c (9/30/08 AUDITOR'S SIGNATURE / DATE b6,b7c

DETAINEE TELEPHONE ACCESS						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINE		Section (State of the	5 (66) No. 2007	ABLE ACCESS TO TELEPHONES.		
COMPONENTS	· Y	N	NA	REMARKS		
Detainees are allowed access to telephones during established facility waking hours.	\boxtimes			·		
Upon admittance, detainees are made aware of the facility's telephone access policy.	Ø			The information is available in the handbook.		
Detainees are afforded a reasonable degree of privacy for legal phone calls.	⊠			Stainless steel privacy dividers surround each telephone in all detainee living units.		
Emergency phone call messages are immediately given to detainees.	☒		<u>.</u>	Per Lt. b6,b7c emergency call messages are provided after verification of the emergency.		
Detainees are allowed to return emergency phone calls as soon as possible.	×			Per Lt. 66,670 emergency call messages are provided after verification of the emergency.		
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.		×		At the present time, per Lt. b6,b7c detainees who are in Disciplinary Segregation are not authorized to use the telephone.		
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.		\boxtimes		The OIG number was not programmed into the telephone system as of 9/29/08.		
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	×			Lt. b6,67c advised that if a verified emergency were received for a detainee in Disciplinary Segregation, a telephone call would be allowed.		
Detainees in administrative segregation and protective custody are afforded the same telephone privileges as that in general population.	×					
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	×			A message is available on the telephone advising that calls may be monitored. However, there is nothing posted on/adjacent to the telephones in English or Spanish advising the telephones may be monitored.		
ACCEPTABLE DEFICIENT	AT-RI	sk		REPEAT FINDING		

REMARKS:

There	are three telephones in the m	ale detainee dormitory availa	ble for detainee use.	All three have a stainle	ss steel privacy divider in
place.	Telephones are available for	r the females in their living ar	ea.	•	• •
	. <i>N</i>				

b6,b7c 9/30/08 AUDITOR'S SIGNATURE/DATE

VISITATI	ON			
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LI MEDIA:	GAL REPR	ESENTATIV	ÆS, SPECL	al interest groups, and the news
COMPONENTS	Y	N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	×			A written schedule is available at the Visiting Officer's desk and also on the CCADC website.
The visitation schedule and rules are available to the public.	×		· 🗆	This information is available at the Visiting Officer's desk, posted on a wall in the main visiting entrance area and also on the CCADC website.
A general visitation log is maintained.	×			The visiting log is computerized. There is also a separate sign-in sheet for legal and official visitors. Legal visits are recorded on the computer.
Visitors are searched and identified according to standard requirements.	⊠			Visitors pass through a metal detector en route to the visiting area. If they fail the metal detector three times, they are not allowed to visit.
ACCEPTABLE DEFICIENT] AT-RI	SK		REPEAT FINDING
REMARKS: The visiting program functions within the ICE standard and local police. The visiting hours posted in the main entrance visiting area are not currisiting hours. b6,b7c 9/30/08 AUDITOR'S SIGNATURE / DATE	-	e informa	tion shou	ld be replaced with the present

SECTION II HEALTH SERVICES STANDARDS

ACCESS TO MEDICAL CARE					
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ WELL-BEING OF ICE DETAINEES:	ACCREDIT	ATION-W	ORTHY HI	EALTH PROGRAM FOR THE GENERAL	
COMPONENTS	Ý	N	NA	REMARKS	
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.	⊠			The facility operates in conjunction with the Wellstar Health Systems (a group of area hospitals/clinics) that is under the auspices of the Georgia Department of Health and Human Services.	
The facility's in-processing procedures for arriving detainees include medical screening.	×			The Cobb County Adult Detention Center (CCADC) policy Chapter 6 # 6.02.01 states, "The Intake Detention Officer will ask and record the inmate's (detainee's) responses to the first 18 questions on the Health Screening formto ascertain if immediate medical attention is needed."	
All detainees have access to and receive medical care.	\square		<u> </u>	·	
Pharmaceuticals are stored in a secure area.	\boxtimes				
Medical screening includes a Tuberculosis (TB) test.	\boxtimes			·	
Detainees in the Special Management Unit have access to health care services.	\boxtimes				
The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	×	· 🗆		CCADC Policy 6.03.02 titled Emergency Medical Care; outlines steps to be followed.	
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	×			Yearly recertification is accomplished through the American Red Cross.	
Where staff is used to distribute medication, a health care provider properly trains these officers.			Ø	Nursing staff distributes all medications to detainees.	
The medical unit keeps written records of medication that is distributed.					
Detainees are required to sign a refusal to consent form when medical treatment is refused.				CCADC Policy 6.04.09 states, "If an inmate /detainee wishes to refuse medical treatment, then he or she will have to state their refusal in writing."	
ACCEPTABLE □ DEFICIENT □	AT-RIS	K		REPEAT FINDING	
REMARKS: The medical area is spacious and well lit. There is adequate staff to meet the needs of detainees. Sanitation is exceptional and staff morale is high. b6,b7c / 9/30/2008 AUDITOR'S SIGNATURE / DATE					

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SUICIDE PREVENTION AND INTERVENTION POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.						
COMPONENTS	Y	N'	NA	REMARKS		
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	×			This is covered in initial orientation, the Jail Academy, and yearly in-service training and roll calls.		
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.						
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

There have been no suicides at this institution in the last year. Suicidal inmates/detainees can be placed on suicide watch by any staff member in the institution according to CCADC Policy 6.08.04, titled "Psychological/Psychiatric." Detainees would be placed in the infirmary with a suicide blanket/smock and placed on a watch with 15 minute checks.

AUDITOR'S SIGNATURE / DATE

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SECTION III SECURITY AND CONTROL

EOD OFFICIAL LISE ONLY (LAW ENFORCEMENT SENSITIVE)

POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING CONTRABAND DESTRUCTION IS REQUIRED.	IG AND DI	SPOSAL (OF ALL CO	ONTRABAND. DOCUMENTATION OF		
COMPONENTS	Y	N	NA.	REMARKS		
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.	Ø			Cobb County Adult Detention Center Policy 4.02 addresses this component.		
Upon admittance, detainees receive notice of items they can and cannot possess.	\boxtimes			The detainee handbook addresses this component.		
ACCEPTABLE □ DEFICIENT □ AT-RISK □ REPEAT FINDING						

Contraband discovered during the initial arrest phase in booking area is turned over to the arresting/transporting officer for further action. Any other discovery of contraband after the completion of the booking process may be disposed of or kept as evidence if pending possible prosecution.

b6,b7c /9/30/08
AUDITOR'S SIGNATURE / DATE

b6,b7c

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DETENTION FILES							
POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS: THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.							
COMPONENTS	Y	N	NA	REMARKS			
A detention file is created for every new arrival whose stay will exceed 24 hours.	×			A file is created for each ICE detainee.			
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	×			· ·			
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same	⊠						
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.	\boxtimes			The ICE files are located in Sgt. b6,b7c office, which is a secure office in a secure area.			
The detention file remains active during the detaince's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.				The files remain active during a detainee's stay.			
The officer closing the detention file makes a notation that the file is complete and ready to be archived.			. 🗆				
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	×						
Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department. A file check out/in system has not been implemented.							
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING			
A file is created for all arriving ICE detainees. The files are maintained in Sgt. b6,b7c secure office. The files are reviewed and placed in an archive for two years after detainees are transferred from the facility. A file checkout system should be developed and utilized by staff to ensure the location and security of the files. A copy of a staff response to a detainee request for medical treatment, property, religious items, programs, or other such requests; should be forwarded to the ICE detainee file. Obs. b7c 19/30/08 December 19/30/08 December 29/30/08 Decembe							

DISCIPLINARY	POLICY			
POLICY: ALL FACILITIES HOUSING ICE DETAINERS ARE AUTHORIZED TO COMPLIANCE WITH PACILITY RULES AND REGULATIONS.	IMPOSE D	ISCIPLÍNE	ON DETA	INEES WHOSE BEHAVIOR IS NOT IN
COMPONENTS	Y	N.	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.	\boxtimes			Facility Policy 9.02.03, Detainee Discipline, addresses this component.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	×			
Written rules prohibit staff from imposing or permitting the following sanctions:	⊠			
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	×			The detainee handbook addresses this component.
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions		. 🛛		The requirement is not posted, but they are contained in the detainee handbook which each detainee receives and signs for during their initial booking process.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	\boxtimes			
□ ACCEPTABLE □ DEFICIENT □	AT-RIS	K		REPEAT FINDING

Minor sanction violations range from verbal reprimand to criminal prosecution.

MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND S COMPONENTS	Y	N N	NA.	
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.				REMARKS
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees	⊠			The facility's National Detainee Handbook addresses this component.
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Facility Evacuation Internal Hostages		×		The facility has all of the ICE required Emergency (Contingency) Plans except for Work/Food Strike, and Adverse Weather.
ACCEPTABLE DEFICIENT	AT-RISK		I	REPEAT FINDING

Detainees are not required to work outside of their living area and a food strike plan may not be applicable at this facility since detainees are only housed at the facility for a maximum of 72 hours.

The facility should develop a written stand alone plan addressing the issue of Adverse Weather.

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ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS; THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES.

COMPONENTS	Y	N	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	9.47.48 # 3 <u>.7.1</u> 2	**************************************	- INA	CCADC Policy, 2-04-07.00, Control of Tools and Hazardous
of hazardous materials.	K78	_		Material, was reviewed.
		L	Ш	Procedures for maintaining inventories of hazardous
				materials are addressed in this
				policy.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.		•		At the time of this review, inventories of chemicals used in
				the Maintenance Shop areas were not being maintained. Per
				Sgt. b6,b7c detainees are not
	-			authorized to be in any of the shop areas. He advised this
				issue will be addressed to ensure
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date				inventories are maintained. Per Sgt b6,b7c the MSDS files
for every hazardous substance used.				are going to be reviewed and
- -				updated after renovation
	\boxtimes			projects are completed. A master MSDS file is maintained
			}	in Health Services. MSDS log
				is also maintained in each Unit Officer Station.
All personnel using flammable, toxic, and/or caustic substances follow				
the prescribed procedures. They:	\boxtimes			
 Wear personal protective equipment; and Report hazards and spills to the designated official. 				
The MSDSs are readily accessible to staff and detainees in work areas.	· · · · · ·		1	Detainees are not assigned to
				work details at this facility. Detainees are only required to
	\boxtimes			maintain the living area. MSDS
				Log Book is maintained in the
		ļ		Officer Station for use by detainees.
Hazardous materials are always issued under proper supervision.				Procedures for using hazardous
 Quantities are limited; and Staff always supervises detainees using these substances. 			🗆	materials are addressed in CCADC Policy 2-04-07.04.
The facility has sufficient ventilation, and provides and ensures clean air	\boxtimes			CONDO 1 ONO J 2-04-07.04.
exchanges throughout all buildings.				
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.				
				<u> </u>

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

ENVIRONMENTAL HEALTH AND SAFETY						
POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES						
COMPONENTS	Y	N	NA	REMARKS		
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	⊠					
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	\boxtimes					
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	×			Products with methyl alcohol are not used in the facility.		
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			Cobb County has a Safety and Security Officer assigned to conduct inspections.		
The facility has an approved fire prevention, control, and evacuation plan.	×			ECADC Policy 2-11-02.00, Fire Emergencies, was reviewed. Per Sgt b6.67c a copy of this plan has been provided to the Cobb County Fire Department.		
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 				Policy 2-11-02-00, Fire Emergencies, addresses this component.		
Written procedures regulate the handling and disposal of used needles and other sharp objects.	⊠ .			Policy 2-04-07.00, Control of Tools and Hazardous Material, addresses procedures for handling and disposing of used needles and other sharp objects.		
Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections.	×	. 🗆	_ 🗆	Policy 7.01, Inmate Housing Housekeeping, dated January 2000, was reviewed. This policy addresses this component.		
 A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventative spraying for indigenous insects. 				Pest control services are provided under contract by Echo Lab Pest Control Company		
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	 K		REPEAT FINDING		

REMARKS:

It is recommended that facility personnel follow local policy requirements involving accountability of hazardous chemicals.

Additionally, they should maintain proper labeling of secondary use containers to ensure contents of the containers are identified at all times.

b6,b7c / 9/30/08
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HOLD ROO	MS IN DETEN	TION FA	CILITIE	s			
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPOR MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR C							
COMPONENTS			N	NA	REMARKS		
The hold rooms are situated within the secure perimeter		\boxtimes			The holding rooms are located in the Booking area.		
The hold rooms are well ventilated well lighted, and switches are located outside the room.		Ø			·		
The hold rooms contain sufficient seating for the numb held.	·	\boxtimes	· 🗆		,		
The walls and ceilings of the hold rooms are tamper and	d escape proof.						
Individuals are not held in hold rooms for more than 12	hours.	\boxtimes					
Male and females are segregated from each other.					Female detainees are held and processed in an area that is sight and sound separated from male detainees.		
Detainees under the age of 18 are not held with adult de	etainees.	\boxtimes			The facility does not house detainees under the age of 18.		
In older facilities, officers are within visual or audible detainees access to toilet facilities on a regular basis.	range to allow	×			Toilet facilities are located inside the holding cells.		
All detainees are given a pat down search for weapons before being placed in the room.	or contraband	\boxtimes					
Officers closely supervise the detention hold room supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 1: • Unusual behavior or complaints are noted.	Ĭ						
⊠ ACCEPTABLE ☐ DEFICI	ENT _] AT-RIS	SK	נ	REPEAT FINDING		
REMARKS:							
Detainees are normally held no more than 12 hours in t	he holding room	s before tl	ney are m	oved to a	regular housing pod.		
b6,b7c 9/30/08 AUDITOR'S SIGNATURE / DATE	b6,b7c						

KEY AND LOCK C (SECURITY, ACCOUNTABILITY	けいきき とうだい はんぱんまごう		ANCE)	
POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT S KEYS AND LOCKS.	YSTEM FOR	THE USE,	ACCOUN	TABILITY AND MAINTENANCE OF ALL
COMPONENTS	Y	N	NA	REMARKS
Facility policies and procedures address the issue of compromised keys and locks.	×			Facility Policy 4.06.08, Key Control, addresses this component.
Padlocks and/or chains are prohibited from use on cell doors.				No padlocks or chains were observed being used on any cell doors.
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101.				
Emergency keys are available for all areas of the facility.	×			Emergency keys are maintained in the Central Control and in a secure mobile cabinet maintained in the Administrative File Room.
The facilities use a key accountability system.				Facility Policy 4.06.02, Key Control, addresses this component.
Authorization is necessary to issue any restricted key.				
Individual gun lockers are provided. • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access.				Gun lockers are located in the administrative area hallway.
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 				
ACCEPTABLE DEFICIENT	AT-RISI	к.		REPEAT FINDING
REMARKS: The Central Control Center officers are responsible for counting the key the results on the key control log.	s at the bea	ginning a	nd the er	nd of each shift, and documenting
b6,b7c / 9/30/08 AUDITOR'S SIGNATURE / DATE				

POPULATION	COUNTS			
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND THE CLOCK CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION CONDUCTED AS NECESSARY.	and the second second	t, with a		感觉的现在分词 化二烯二苯基甲基二苯基甲基二苯基甲基二苯二苯基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基
COMPONENTS	Y	N	NA	REMARKS
Staff conduct a formal count at least once each shift.	X			Facility Policy 4.05, Detainee Counts, addresses this component.
Activities cease or are strictly controlled while a formal count is being conducted.	\boxtimes			
Formal counts in all units take place simultaneously.	Ø			
Detainee participation in counts is prohibited.				·
Officers positively identify each detainee before counting him/her as present.				Detainees are required to be standing and must display their wrist band identification for all counts.
Officers positively identify each detainee before counting him/her as present.	×	. 🗆		Facility Policy 4.05.01, Detainee Counts, addresses this component.
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.				Facility Policy 4.05.05, Detainee Count, addresses this component.
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.				The Pod Leaders are responsible for maintaining the out counts in their assigned areas.
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING
				The state of the s

The facility conducts Five (5) counts (0500, 0630, 1630, 1830, and 2400) during a 24 hour period. All counts are called into the Assistant Watch Commander's office where the count is verified by using a Daily Stat Report which lists the total facility count by detainee names, location and booking numbers. Detainees are required to be standing and display their wrist band identification during all counts. The 1630 count in M Pod was observed with no discrepancies noted.

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SECURITY INSPE	ECTIONS			
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHER RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING				URES MUST BE FOLLOWED, WILL BE
COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy.	⊠			Facility Policy 11.04.02, Safety and Security, addresses this component.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.	×			Officers are required to conduct security checks monthly and document the searches on the Pod Log of each Pod.
The front-entrance officer checks the ID of everyone entering or exiting the facility.				
Every Control Center officer receives specialized training.	\boxtimes			
The Control Center is staffed around the clock.				
Policy restricts staff access to the Control Center.				
Detainees are restricted from access to the Control Center.	\boxtimes			
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility.	×			
Officers thoroughly search each vehicle entering and leaving the facility.	×			All vehicles are thoroughly searched and are escorted entering and departing the facility.
Every search of the SMU and other housing units is documented.				Each shift is required to conduct cell searches monthly and the searches are documented on a Cell Search log sheet.
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING
REMARKS:				
The Construction Detail Officer is responsible for maintaining a log of a	ıll vehicula	ar traffic	entering a	and exiting the facility.
b6,b7c 9/30/08 AUDITOR'S SIGNATURE / DATE				

SPECIAL MANAGEMENT UNIT (SMU) **ADMINISTRATIVE SEGREGATION** POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD). COMPONENTS REMARKS The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. Ø \Box Detainees are placed in the SMU (administrative) in accordance with written criteria. In exigent circumstances, staff may place a detainee in the SMU All detainees placed in (administrative) before a written order has been approved. Administrative Segregation • A copy of the order given to the detainee within 24 hours. (A/S) receive a copy of Cobb \boxtimes П County Adult Detention Center (CCADC) Form 400-0189, detailing the reason for placement in the A/S Unit. Administratively segregated detainees enjoy the same general privileges X П П as detainees in the general population. The SMU is: Well ventilated; X Adequately lighted; П \Box Appropriately heated; and Maintained in a sanitary condition. All cells are equipped with beds. 冈 • Every bed is securely fastened to the floor or wall. The number of detainees in any cell does not exceed the occupancy The Review Team did not \boxtimes П limit. П observe any cells exceeding the occupancy limit. Detainees receive three nutritious meals per day, from the general \boxtimes \Box population's menu of the day. Each detainee maintains a normal level of personal hygiene in the SMU. Detainees housed in A/S have \boxtimes the opportunity to shower daily. A health care professional visits every detainee at least three times a A health care professional visits X П the A/S Unit twice daily. The SMU maintains a permanent log of detainee-related activity, e.g., All detainee activities are \boxtimes П meals served, recreation, visitors etc. documented on the Pod Log. Staff record whether the detainee ate, showered, exercised, and took any \boxtimes П П Same as above. applicable medication during every shift. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

Detainees housed in Administrative Segregation will have their case reviewed at least every 7 days for the first month and then every 30 days thereafter, to determine if return to general population is possible.

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SPECIAL MANAGE Disciplinary Sec	the same and the			
POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UN POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTION. OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.				
COMPONENTS	Y	N.	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	Ø			·
A completed Disciplinary Segregation Order accompanies the detainee into the SMU.	⊠			Detainees receive a copy of the Disciplinary Notification Finding, detailing the amount of disciplinary segregation (D/S) time that has been imposed by the Disciplinary Committee.
Standard procedures include reviewing the cases of individual detainees housed in disciplinary segregation at set intervals.	Ø			Facility Policy 3.03.11, Special Management Levels, addresses this component.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	×			·
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Ø			
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.				
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day.	×			
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	Ø			Detainees are afforded the opportunity to shower daily.
A health care professional visits every detainee in disciplinary segregation every week day.	Ø			A health care professional visits detainees housed in D/S twice daily.
All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	\boxtimes			All detainee activities are documented on the Pod Log.
SMU staff record whether the detainee ate, showered, exercised, took medication, etc. • Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc.				The requirements of this component are documented on the Pod Log.
ACCEPTABLE DEFICIENT] AT-RI	SK	I	REPEAT FINDING
REMARKS:	-		_,,	
Any detainee that has been confined in disciplinary segregation for mother Classification Committee.	re than 30	continuou	s days wi	ll be reviewed every 30 days by
AUDITOR'S SIGNATURE / DATE b6,b7c b6,b7c b6,b7c				

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G-324B Detention Inspection Form Worksheet for IGSAs - Rev: 07/09/07

TOOL CONT				
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL B				
THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERAL EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVE		entities at the second	4	,我们就是一个一种的特殊的,就是一个一个一个人,我们就是这种的最高的。 "我们我们的这个人,我们就是一个人,我们是一个人,我们就是一个人,我们就是一个人,我们
TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.				
COMPONENTS	Y	$\langle N \rangle$	NA	REMARKS
The facility has a tool classification system. Tools are classified				
according to:		\boxtimes		The facility does not have a tool
 Restricted (dangerous/hazardous); and 				classification system.
 Non-Restricted (non-hazardous). 	ļ			
Each facility has procedures for the issuance of tools to staff and	Ø	П	\Box	Each Maintenance Foreman is
detainees.	KA			assigned his own tool box.
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISI	ζ		REPEAT FINDING

The facility does not have a tool classification system. The current facility policy 04.07, Control of Tools and Hazardous Materials, needs to be a stand alone policy specifically addressing the issue of tool control.

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TRANSPORTA				
LAND TRANSPOR				
POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUST HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL. STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS ICONTROL OF THE DETAINEE CASE.	ODY DÜRII THE SUPEI	O THE TR RVISION (LANSPORT OF EXPER	ATION OF DETAINEES, STANDARDS IENCED AND TRAINED DETENTION
COMPONENTS	YES	No	NA	REMARKS
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	· 🗆	·		
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.			□.	
Supervisors maintain records for each vehicle operator.				
Officers use a checklist during every vehicle inspection. • Officers report deficiencies affecting operability; and • Deficiencies are corrected before the vehicle goes back into service.				
 Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 				
 Two officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are two qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 				
Before the start of each detail, the vehicle is thoroughly searched.	l n	 	 	· · · · · · · · · · · · · · · · · · ·
Positive identification of all detainees being transported is confirmed.	 			
All detainees are searched immediately prior to boarding the vehicle by				
staff controlling the bus or vehicle.			🗀	·
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.				
Protective vests are provided to all transporting officers.				
The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.				
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.				
Officers ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees				

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TRANSPORTA				
LAND TRANSPOR POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE AL		DVDDEC	ATITIONS 1	CORPOTECT THE LINES SARETY AND
WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUST				
HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER				
ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.				
STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS I	IANDLED (ONLY BY	THE ICE	FIELD OFFICE OR SUB-OFFICE IN
CONTROL OF THE DETAINEE CASE.				
COMPONENTS	YES	No	NA	REMARKS
Meals are provided during long distance transfers.				
 The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 				
The vehicle crew inspects all Food Service pickups before accepting				
delivery (food wrapping, portions, quality, quantity, thermos-transport				
containers, etc.).				
Before accepting the meals, the vehicle crew raises and resolves	_]	
questions, concerns, or discrepancies with the Food Service		لبا	LJ	
representative;				
Basins, latrines, and drinking-water containers/dispensers are				
cleaned and sanitized on a fixed schedule.		<u> </u>		
Vehicles have:)	
 Two-way radios; 				·
Cellular telephones; and			LJ	
• Equipment boxes stocked in accordance with the Use of Force				
Standard.	 		 	
The vehicles are clean and sanitary at all times.	<u> Li</u>		┝┸┵╌	
Personal property of a detainee transferring to another facility is: • Inventoried;				
Inventoried;Inspected; and				·
 Accompanies the detainee. 				
The following contingencies are included in the written procedures for	 	 	 	
vehicle crews:				
Attack				·
• Escape		ŀ		1
Hostage-taking				
Detainee sickness			ĺ	
Detainee death				,
Vehicle fire			凵	
• Riot				
Traffic accident				. 1
Mechanical problems	ľ			1
Natural disasters				
Severe weather				
Passenger list includes women or minors		<u> </u>	<u> </u>	
ACCEPTABLE DEFICIENT	AT-RISI	<u>K</u> .		REPEAT FINDING
REMARKS:				
ICE provides all of the transportation for ICE detainees.				
102 provides an or me tamperation for ice actainees.				•
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USE OF FOR	CF	1973		
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY TO DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF A ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:	IE USE OF I HAT AMOU IND OTHER	nt of fo is, to pri its neces	RCE NEC	ESSARY TO GAIN CONTROL OF THE RIOUS PROPERTY DAMAGE AND TO
COMPONENTS	YES	No	NA	REMARKS
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.	×			Facility Policy 4.08, Use of Force, addresses this component.
Staff members are trained in the performance of the Use-of-Force Team Technique.	⊠			
All use-of-force incidents are documented and reviewed.	\boxtimes			
Staff: Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and				
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	×			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes			
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	×			Facility Policy 2.02-05.03, Management of Female Detainees, addresses this component.
The officers are thoroughly trained in the use of soft and hard restraints.	\boxtimes			
For incidents involving calculated use of force, a videotape is made and retained for review.	×			
ACCEPTABLE DEFICIENT	AT-RIS	К		REPEAT FINDING
REMARKS: The facility has not had any Use of Force Incidents involving ICE detains the ICE requirements of the standard.	nees. The	facility's	Use of F	orce Policy sufficiently addresses

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STAFF DETAINEE COM POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUEST FRAME.	ORMAL CO	NTACT BI		
COMPONENTS	· Y	N	NA :	REMARKS
ICE information request Forms are available at the IGSA for use by ICE detainees.		\boxtimes		There were no ICE requests forms available. However, detainees may use writing paper to write to staff member.
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	⊠		Ċ	According to staff, the correspondence would be treated as Special Correspondence.
ACCEPTABLE DEFICIENT	AT-RISI	Κ	[]	REPEAT FINDING

The CCADC uses forms dedicated to various departments in the facility. A general form without a specific heading does not exist and notebook paper is used for correspondence from staff and departments that do not have a dedicated heading form.

The ICE Information Request Form, which was provided to staff during the review, should be made available to the male and female ICE detainees to enhance their ability to communicate in writing to CCADC and ICE staff.

b6,b7c / 9/30/08
AUDITOR'S SIGNATURE / DATE

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DETAINEE TRANSFER STANDARD

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINED IS TRANSFERRED. IF A DETAINED IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINED, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINED IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINED'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINED'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.

TARLING FLACES STORE AND THE STORE S	sandisid bila Militar		(100 000	
COMPONENTS	<u>Y</u>	N	NA	REMARKS
 When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. The notification is recorded in the detainee's file; and When the A File is not available, notification is noted within DACS 	⊠			According to DRO who was interviewed on 9/29/08, ICE staff provides notification if a G-28 is on file.
Notification includes the reason for the transfer and the location of the new facility.	⊠.			b6,b7c advised that the notification includes this information.
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	×			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	\boxtimes		Π.	
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	⊠			Detainees are not notified in advance of their pending transfer. Detainees are not permitted to make phone calls or have contact with any other detainees or inmates during this process.
The detainee is provided with a completed Detainee Transfer Notification Form.	Ø			
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes	D D		A G-391 and Form 203 were used to remove 12 detainees from the facility on 9/29/08.
For medical transfers: • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee.	⊠			
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.				
For medical transfers, transporting officers receive instructions regarding medical issues.	⋈			

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DETAINEE TRANSFER	STAND	ARD		
POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACTAKING PLACE.	L ADHERE DETAINEE STAGE WIT ZILITY, ANI	TO JPAT IS REPRE HIN THE R O WHERE	S PROTO SENTED B EMOVAL I	COLS. IN DECIDING WHETHER TO EFORE THE IMMIGRATION COURT. IN PROCESS, WHETHER THE DETAINEE'S GRATION COURT PROCEEDINGS ARE
	Y	N	NA	REMARKS
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	☒			The transfer processing of 12 detainees was observed on 9/29/08. Property was properly handled by staff and was done in the presence of the detainees.
Transfer and documentary procedures outlined in Section C and D are followed.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.			×	ICE transportation staff, IEA b6,b7c , advised that ICE normally feeds detainees after their removal from the facility.
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	×			
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	\boxtimes			`
ACCEPTABLE □ DEFICIENT □	AT-RISI	K	[]	REPEAT FINDING
				

ICE staff makes all of the necessary notifications when a detainee is transferred. Facility and ICE staff was observed in the process of removing detainees from the facility on 9/29/08. Removal procedures were in accordance with ICE and facility standards.

AUDITOR'S SIGNATURE / DATE

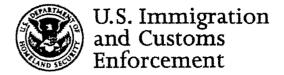
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Detention and Removal Operations

U.S. Department of Homeland Security 180 Spring Street, SW Atlanta, GA 30303



Interoffice Memorandum

To:

James T. Hayes

Director

Detention and Removal Operations

From: Felicia S. Skinner

Acting Field Office Directo

Atlanta

Date: January 15, 2009

Re:

Plan of Action/Response to Address the Deficiencies Identified During the Review of the Cobb County Adult Detention Center September 29, 2008 through September 30, 2008.

Creative Corrections, Inc. conducted an Annual Detention Review of the Cobb County Adult Detention Center on September 29, 2008, through September 30, 2008. The facility was reviewed using ICE National Detention Standards (NDS) compliance measures for Under 72 Hour facilities.

On December 22, 2008, the facility was rated as "Acceptable" however three areas were identified as needing a Plan of Action (POA). The deficiencies are outlined below along with the facility's response and a POA to address each area.

1. TOOL CONTROL

Policy: Every facility shall develop and implement a tool-control system. Tools are to be classified according to Restrictive and Non Restrictive status.

Cobb County Adult Detention Center does not have an established tool classification system.

Action Taken:

At the time of the review the tool control policies and procedures were in the process of being updated. Effective December 31, 2008, a tool classification and inventory system was implemented at the Cobb County Adult Detention Center. All tools and equipment have been classified and marked with identifying numbers. A master inventory list is maintained by the Maintenance Supervisor.

II. DETAINEE TELEPHONE ACCESS

Policy: All facilities housing ICE detainees will permit detainees reasonable and equitable access to telephones.

- At the present time, per Lt. 66,670 , detainees who are in Disciplinary Segregation are not authorized to use the telephone
- The OIG number was not programmed into the telephone system as of 9/29/08

Action Taken

Effective December 31, 2008, an order was issued and posted in the segregation unit that mandates detainees are allowed access to the telephones to contact their consular and/or embassy officials. Additionally the OIG poster and phone number have been posted in the unit. Detainees can make calls to their consulate and/or embassy officials and the OIG free of charge.

III. FOOD SERVICE

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

- There is no secure cutting room for using knives. The knives have cables attached but the
 metal shank does not go all the way through the plastic handle. According to the Food
 Service Manager, detainees are not permitted to work in the food prep areas and are not
 allowed to use knives.
- The staff follows satellite feeding guidelines for proper sanitation as well as the temperatures for food items. All foods are kept at the proper temperature prior to being fed, except the noon sack lunch. The two hot meals are prepared and plated and fed within the two hour time period. The sack lunch is being delivered at the breakfast meal time. There is no refrigeration in the units for the detainees/inmates to keep the sack lunch within a safe temperature range.
- All foods are maintained at the proper temperatures, except the noon sack lunch. Cold foods are at 40 or below and hot foods are 140 or above. The sack lunches that are sent down to the units at breakfast time for lunch are not being maintained at the proper temperature.

Action Taken

The Cobb County Adult Detention Center has ordered replacement knives that have metal shanks going all the way through the plastic handles. The knives are expected to be delivered, cabled and in use by February 15, 2009. It should be noted that detainees/inmates do have access to the kitchen area. Only contract workers and Cobb County staff members are permitted in this area.

Effective January 15, 2009, the Cobb County Adult Detention Center will no longer deliver sack lunches with the breakfast meal. Sack lunches will be maintained at the proper temperature, retrieved from a refrigeration unit and delivered to the units for consumption at lunch time. This change will ensure that required food temperatures are maintained.

The Cobb County Sheriff's Office and Adult Detention Center expressed their appreciation to serve the community by participating in ICE's 287(g) program and welcomed the professional critique provided by Creative Corrections, Inc. The facility also expressed their sincere desire to continue their cooperation with ICE DRO in ensuring they provide a well managed detention center that meets or exceeds all of the National Detention Standards (NDS).

The actions and procedures cited in this memorandum have been reviewed by the Atlanta Field Office and they comply with the NDS. In keeping with DMCP procedures, if this POA is accepted, the local DMCP POC will ensure that certified jail reviewers conduct a follow-up review to ensure the POA has been implemented, deficiencies are resolved and the facility is complying with the NDS.

U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20536



MEMORANDUM FOR:

Felicia S. Skinner

Acting Field Office Director

Atlanta Field Office

FROM:

b6,b7c b6,b7c b6,b7c

Detention Standards Compliance Unit

SUBJECT:

Cobb County Adult Detention Center Plan of Action

The Cobb County Adult Detention Center Plan of Action dated January 15, 2009, has been received. The plan was developed in response to a review conducted by Creative Corrections on September 29-30, 2008.

The Review Authority concurs with the Plan of Action and this review is closed. The Field Office must now initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility <u>within</u> five business days of receipt of this memorandum. Notification shall include a copy of this memorandum.
- 2) The Field Office Director shall ensure that the facility complies with its proposed Plan of Action. A certified Detention Reviewer shall be assigned to follow up on the deficiencies identified in the Initial Review within 90 days.
- 3) The next annual review will be scheduled on or before September 29, 2009.

Should you or your staff have any questions regarding this matter, please contact

Detention and Deportation Officer, Detention Standards Compliance Unit at (202) 732

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cc:	Official File

ICE:HQDRO: b6,b7c 2-3456:01/15/2009

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U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20536



DEC 2 2 2008

MEMORANDUM FOR: Raymond Simonse

Field Office Director Atlanta Field Office

FROM:

Acting Chief

Detention Standards Computation Office

SUBJECT:

Cobb County Adult Detention Center Annual Review

The annual review of the Cobb County Adult Detention Center conducted on September 29-30, 2008, in Marietta, Georgia, has been received. A final rating of <u>Acceptable</u> has been assigned.

The G-324B worksheets provided by the Reviewer-in-Charge (RIC) indicate the facility was deficient with the Tool Control standard which requires a Plan of Action. Additionally, the non-compliant components in the Detainee Telephone Access and Food Service standards require a Plan of Action.

On October 8, 2008, b6,b7c, AFOD, advised b6,b7c, Detention and Deportation Officer, that the facility was currently in the process of correcting the identified deficiency.

The rating was based on the RIC Summary Memorandum and supporting documentation. The Field Office Director must remedy the deficient standards, and initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form G-324B Detention Facility Review Form, the G-324B Worksheet, RIC Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.

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- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule a follow-up on the above noted deficiencies within 90 days.

The Field Office is responsible for assisting the Intergovernmental Service Agreement (IGSA) facility to respond to the Immigration and Customs Enforcement findings when assistance is requested. Notification to the facility shall include information that this assistance is available.

Should you or your staff have any questions regarding this matter, please contact

Detention and Deportation Officer, Detention Standards Compliance Unit at (202) 732 b6.b7c

cc: Official File

ICE:HQDRO b6,b7c 2-4505:10/08/08