$\boxtimes$ 

Local Jail - IGSA

## Condition of Confinement Review Worksheet

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

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



# **ICE Detention Standards Review Worksheet**

State Facility – IGSA
ICE Contract Detention Facility
Name
Freeborn County Adult Detention Center
Address (Street and Name)
411 South Broadway
City, State and Zip Code
Albert Lea, Minnesota, 56007
County
Freeborn
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
b6,b7c Jail Administrator
Name and Title of Reviewer-In-Charge
b6,b7c , Reviewer-In-Charge
Date[s] of Review
April 14-16, 2009
Type of Review
Headquarters    Operational    Special Assessment    Other

# **Table of Contents**

Detainee Services Standards (Section I)
Access to Legal Materials
Admission and Release
Classification System.
Correspondence and Other Mail
Detainee Handbook
Food Service
Funds and Personal Property
Detainee Grievance Procedures
Group Presentations on Legal Rights
Issuance and Exchange of Clothing, Bedding, and Towels
Marriage Requests
Non-Medical Escorted Trips
Recreation
Religious Practices
Access to Telephones
Visitation
Voluntary Work Program
Totalung Work Hogania
Health Services Standards (Section II)32
Hunger Strikes
Access to Medical Care
Suicide Prevention and Intervention.
Terminal Illness, Advanced Directives and Death.
Totalinax Intess, 1x4vaneed Directives and Death
Security and Control (Section III)
Contraband
Detention Files
Disciplinary Policy
Emergency Plans
Environmental Health and Safety
Hold Rooms in Detention Facilities.
Key and Lock Control
Population Counts
Post Orders
Security Inspections
Special Management Unit (Administrative Segregation)
Special Management Unit (Disciplinary Segregation)
Transportation (Land)
Transportation (Land)
Use of Force
Staff/Detainee Communications
Derainee Transier Mandard

NOTE: For each standard rated below 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

ACCESS TO LEGAL MATERIALS							
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS,							
FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPO							
COMPONENTS	Y	N	NA	REMARKS			
The facility provides a designated law library for detainee use.							
The law library contains all materials listed in the "Access to Legal							
Materials" Standard, Attachment A. The listing of materials is posted	$\boxtimes$			·			
in the law library.	<u> </u>						
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	$\boxtimes$						
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	$\boxtimes$						
In addition to the physical law library, detainees have access to the Lexis Nexis electronic law library.	$\boxtimes$			During the review, the facility received and installed the Lexis Nexis electronic law library.			
Where provided, the Lexis Nexis library is updated and is current.	X						
Outside persons and organizations are permitted to submit published							
legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.	$\boxtimes$						
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	$\boxtimes$			(b)(6) Program  Coordinator, is the designated staff member who is responsible for the law library.			
Detainees are offered a minimum 5 hours per week in the law library.  Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	×						
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within $3-5$ business days.	×						
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	$\boxtimes$						
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.							
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	×						
Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.							
All denials of access to the law library fully documented.	$\boxtimes$						
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.			×	The facility is aware of this standard and will comply with the standard once ICE detainees arrive.			
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	$\boxtimes$						

ACCESS TO LEGAL MATERIALS						
<b>POLICY:</b> FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.						
COMPONENTS Y N NA REMARKS						
ACCEPTABLE DEFICIENT	AT-R	ISK		REPEAT FINDING		

The facility maintains a Lexis Nexis electronic law library, which will be updated quarterly.

he,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE b6,b7c for

## 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.

COMPONENTS	Y	N	NA	REMARKS
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.				Detainees receive a facility handbook upon arrival. In addition, the unit officers provide an orientation when the detainees arrive in the housing unit.
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.				Initial medical screenings are performed by the deputies assigned to the booking area. Medical screening forms are reviewed by medical staff each morning Monday through Friday. Staff indicate they receive health screening training annually.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.				
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.				·
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.				
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 facility is aware of this standard and will comply with the standard once ICE detainees arrive.
Staff completes paperwork/forms for release as required.				

ADMISSION AND RELEASE						
<b>POLICY:</b> 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.						
COMPONENTS	Y	N	NA	REMARKS		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

Policy and Procedure # 6.01, entitled "Intake and Release Process", provides guidance for admission and release processes. Detainees receive appropriate orientation and classification upon admission to the facility.

b6,b7c <u>April 16, 2009</u> AUDITOR'S SIGNATURE / DATE b6,b7c

#### **CLASSIFICATION SYSTEM** POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES Y N NA **COMPONENTS** REMARKS The facility has a system for classifying detainees. In CDFs and The facility classifies the IGSAs, an Objective Classification System or similar is used. general population based on the $\boxtimes$ П detainee's current offense and criminal history. The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals $\boxtimes$ who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. The intake/processing officer reviews work-folders, A-files, etc., to $\boxtimes$ identify and classify each new arrival. Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ $\boxtimes$ unconfirmed reports may be filed but are not used to score detainees classifications. Housing assignments are based on classification-level. Ø A detainee's classification-level does not affect his/her recreation Detainees recreate with persons of similar $\boxtimes$ opportunities. classification designations. Detainee based upon work assignments are classification $\boxtimes$ П П designations. The classification process includes reassessment/reclassification. At M IGSA's, detainees may request reassessment 60 days after arrival. Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist $\boxtimes$ has the authority to reduce a classification-level on appeal. Classification appeals are resolved within five business days and П 冈 П detainees are notified of the outcome within 10 business days. Classification designations may be appealed to a higher authority, $\boxtimes$ such as the Warden or equivalent. The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to $\boxtimes$ each. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING **REMARKS:** Policy and Procedures # 4.01, entitled "Classification and Separation", dated October 3, 2007, provides guidance regarding

classification, safe housing and separation of detainees.

b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	for
Additor S Signature/ Date			0

### CORRESPONDENCE AND OTHER MAIL

**POLICY:** ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.

COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	×			The rules for correspondence and mail are contained in the detainee handbook.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	$\boxtimes$			
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	$\boxtimes$			
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).				
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.	⊠			Incoming correspondence is opened by staff and examined for cash, checks, money orders, and contraband per facility policy.
Staff does not read incoming general correspondence without the Warden's prior written approval.	$\boxtimes$			
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.				
Staff is prohibited from reading or copying incoming special correspondence.				
Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	⊠			Outgoing correspondence is inspected by staff and examined for contraband, per facility policy.
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	×			·
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	⊠			The facility does not reject incoming mail. Incoming mail that is deemed inappropriate for detainees is placed in the property with a notification to the detainee.
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	$\boxtimes$			See above comments.
Staff maintains a written record of every item removed from detainee mail.	$\boxtimes$			See above comments.
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	$\boxtimes$			
The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	$\boxtimes$			

CORRESPONDENCE AND OTHER MAIL							
<b>POLICY:</b> ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.							
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.				The facility is not currently under ICE contract. The facility is aware of this standard and will comply with the standard once ICE detainees arrive.			
Staff provides the detainee a copy of his/her identity document(s) upon request.	$\boxtimes$						
Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs.	$\boxtimes$						
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.				Per policy, indigent detainees receive 2 stamps, and 2 envelopes per week.			
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.							
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.				Paper, envelopes, and pencils are provided to indigent detainees upon request.			
ACCEPTABLE DEFICIENT	AT-RISH	ζ		REPEAT FINDING			
REMARKS:				,			

Policy and Procedure # 4.06 entitled "Correspondence", dated October 3, 2004, provides procedures for mail delivery, postage, legal correspondence, and non-privileged correspondence at the facility.

b6,b7c / April 16, 2009
AUDITOR'S SIGNATURE / DATE

## **DETAINEE HANDBOOK**

**POLICY:** EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.

COMPONENTS	Y	N	NA	REMARKS
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).				
The handbook is supplemented by the facility orientation video, where one is provided.				An orientation video is provided in each housing unit.
All staff members receive a handbook and training regarding the handbook contents.	$\boxtimes$			
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.				The detainee handbook is revised as necessary.
There an annual review of the handbook by a designated committee or staff member.	$\boxtimes$			
The detainee handbook addresses the following issues:  • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items.				
The detainee handbook states in clear language the basic detainee responsibilities.	$\boxtimes$			
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.				
The handbook states when a medical examination will be conducted.				Medical examinations are addressed in section " Medical Care" of the detainee handbook.
The handbook describes the facility, housing units, dayrooms, indorm activities, and special housing units.	$\boxtimes$			
The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.				
The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.				Procedures for obtaining disposable razors are outlined in paragraph "C/Personal Hygiene" of the detainee handbook.
The handbook describes barber hours and hair cutting restrictions.				
The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.				Section III - "Detainee Privileges" outlines telephone and debit card procedures.
The handbook addresses religious programming.				
The handbook states times and procedures for commissary or vending machine usage, where available.	×			
The handbook describes the detainee voluntary work program.				
The handbook describes the library location and hours of operation, and law library procedures and schedules.	$\boxtimes$			·
The handbook describes attorney and regular visitation hours, policies, and procedures.	×			Visiting hours are listed under section "B/ Visitation" portion of the detainee handbook.

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HAN DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FA	CILITY.	THE HAND	BOOK W	TILL ALSO DESCRIBE THE SERVICES,			
PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.							
COMPONENTS	Y	N	NA	REMARKS			
The handbook describes the facility contraband policy.	⊠ ·			The contraband policy is addressed in section B of the handbook under "Detainee Conduct."			
The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.							
The handbook describes the correspondence policy and procedures.	$\boxtimes$						
The handbook describes the detainee disciplinary policy and procedures, including:  • Prohibited acts and severity scale sanctions;  • Time limits in the Disciplinary Process; and  • Summary of the Disciplinary Process.							
<ul> <li>The grievance section of the handbook explains all steps in the grievance process – Including:</li> <li>Informal (if used) and formal grievance procedures;</li> <li>The appeals process;</li> <li>In CDF facilities: procedures for filing an appeal of a grievance with ICE.</li> <li>Staff/detainee availability to help during the grievance process.</li> <li>Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>				All component elements pertaining to the grievance section are covered in the detainee handbook.			
The detainee handbook describes the medical sick call procedures for general population and segregation.	$\boxtimes$						
The handbook describes the facility recreation policy including:  Outdoor recreation hours.  Indoor recreation hours.	. 🖂						
The handbook describes the detainee dress code for daily living; and work assignments.	$\boxtimes$			The dress code for daily living is addressed in the handbook under "Detainee Conduct."			
The handbook specifies the rights and responsibilities of all detainees.							
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING			
REMARKS:  All components pertaining to the detainee handbook were thoroughly reguidelines. There were no areas of concern noted.    Deliver   April 16, 2009   Deliver   Deliver	eviewed f	or compli	ance with	h published ICE standards and			

**DETAINEE HANDBOOK** 

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)
G-324A Detention Inspection Form Worksheet for IGSAs - Rev: 07/09/07

FOOD SERVICE						
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN						
ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.	47 1	<del></del>	371			
The food service program is under the direct supervision of a professionally trained and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	<b>Y</b>	N □	NA □	REMARKS		
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	$\boxtimes$					
The FSA provides food service employees with training that specifically addresses detainee-related issues.  • In ICE Facilities this includes a review of the ICE "Food Service" standard						
Knife cabinets close with an approved locking device, and the on- duty cook foreman maintains control of the key that locks the device.	$\boxtimes$					
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 monitors the condition of knives and dining utensils.				Knives are not secured to workstations at this facility because detainees are not permitted to work in food service.		
When necessary, special procedures govern the handling of food items that pose a security threat.	$\boxtimes$					
Operating procedures include daily searches (shakedowns) of detainee work areas.			$\boxtimes$	Detainees are not permitted to work in food service.		
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.			$\boxtimes$	Detainees are not permitted to work in food service.		
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.			$\boxtimes$	Detainees are not permitted to work in food service.		
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.			$\boxtimes$	Detainees are not permitted to work in food service.		
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.			$\boxtimes$	Detainees are not permitted to work in food service.		
During orientation and training session(s), the CS explains and demonstrates:  • Safe work practices and methods;  • Safety features of individual products/pieces of equipment; and  • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.				Detainees are not permitted to work in food service.		
The Cook Supervisor documents all training in individual detainee detention files.			$\boxtimes$	Detainees are not permitted to work in food service.		
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay.				Detainees are not permitted to work in food service.		
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.						
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.			$\boxtimes$	All feeding is done via a satellite-feeding program.		

FOOD SER	VICE			
<b>POLICY:</b> EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CAR ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.	E WITH 1	NUTRITIOU	JS AND A	PPETIZING MEALS, PREPARED IN
COMPONENTS	Y	N	NA	REMARKS
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	$\boxtimes$			The facility has a 28-day menu cycle.
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	×			Swedish Meatballs, Turkey Pasta Casserole, Tacos, Jambalaya, Kielbasa and Baked Beans, and Turkey Chow Mein are examples of ethnic diversity consideration when developing menus.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.				
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.				
<ul> <li>The Cook Foreman has the authority to change menu items if necessary.</li> <li>If yes, documenting each substitution, along with its justification</li> <li>With copy to FSA</li> </ul>	$\boxtimes$			
All staff and volunteers know and adhere to written "food preparation" procedures.	$\boxtimes$			
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	$\boxtimes$			
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line.  Changes to the planned common-fare menu can be made at the facility level;  Hot entrees are offered three times a week;  The common-fare menus satisfy nutritional recommended daily allowances (RDAs);  Staff routinely provide hot water for instant beverages and foods;  Common-fare meals are served with:  Disposable plates and utensils.  Reusable plates and utensils.  Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.				The Food Service vendor has common-fare menus in place that meet the RDAs. The facility currently has no detainees partaking in the common-fare program. Therefore, the procedures for administering the program could not be observed. The program has special instructions that meet ICE standards for preparation of menu items.
A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.				
The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.		$\boxtimes$		There is no schedule of ceremonial meals for the following calendar year.

#### FOOD SERVICE POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. Y REMARKS **COMPONENTS** N NA The common-fare program accommodates detainees abstaining from The facility has Ramadan Diet particular foods or fasting for religious purposes at prescribed times policy with a sample meal of the year. pattern. The facility Food Service Policy, #9.05, states Muslims fasting during Ramadan receive their meals after detainees who follow a faithsundown. $\boxtimes$ П based diet will be Jews who observe Passover but do not participate in the accommodated. Main-line Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate. offerings do not include one meatless meal for lunch or Main-line offerings include one meatless meal (lunch or dinner on Ash Wednesday and dinner) on Ash Wednesday and Fridays during Lent. Fridays during Lent. The food service program addresses medical diets. The "Nutrition Compliance Statement" from the dietitian $\boxtimes$ dated April 1, 2009, states the four-week menu cycle provides standard therapeutic diets. Satellite-feeding programs follow guidelines for proper sanitation. $\boxtimes$ Hot and cold foods are maintained at the prescribed, "safe" Temperatures are taken and temperature(s) while being served. $\boxtimes$ П recorded while being served and maintained at safe levels. All meals are provided in nutritionally adequate portions. $\boxtimes$ Food is not used to punish or reward detainees based upon behavior. 冈 The food service staff instructs detainee volunteers on: Personal cleanliness and hygiene; Detainees are not permitted to Sanitary techniques for preparing, storing, and serving food; M work in food service. The sanitary operation, care, and maintenance of equipment. Everyone working in the food service department complies with food П $\boxtimes$ safety and sanitation requirements. Standard operating procedures include weekly inspections of all food The weekly inspection of all service areas, including dining and food-preparation areas and food service areas was $\boxtimes$ П implemented during the review. equipment. An inspection form was also Who conducts the inspections? developed for this facility. Equipment is inspected for compliance with health and safety codes The Minnesota Department of and regulations. Health conducted the most $\boxtimes$ $\Box$ When was the most recent inspection? recent inspection on April 22. Which agency conducted the inspection? 2008. Reports of discrepancies are forwarded to the Warden or designated $\boxtimes$ department head, and corrective action is scheduled and completed. Standard procedure includes checking and documenting temperatures The temperature log was $\boxtimes$

 $\boxtimes$ 

 $\boxtimes$ 

of all dishwashing machines after each meal.

check.

posted.

Staff documents the results of every refrigerator/freezer temperature

The cleaning schedule for each food service area is conspicuously

reviewed and in compliance.

were reviewed and in

The posting of cleaning

schedules was implemented

during the review for each area.

compliance.

Temperature logs for each unit

FOOD SER	VICE			
<b>POLICY:</b> EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CAR ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.	E WITH	NUTRITIOUS	AND	APPETIZING MEALS, PREPARED IN
COMPONENTS	Y	N	NA	REMARKS
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				
Storage areas are locked when not in use.				
ACCEPTABLE DEFICIENT	AT-R	ISK		REPEAT FINDING

The facility Food Service program is contracted and all staff are contract workers. No detainees are utilized in the food service operation. The food service department is maintained at a high level of sanitation in all areas. The meals observed were nutritious and appetizing.

Knives are not secured to workstations at this facility because no detainees are permitted to work in food service.

There is no schedule of the ceremonial meals for the following calendar year.

AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	m
			V

FUNDS AND PERSONAL PROPERTY						
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.						
STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.						
COMPONENTS	YES	No	NA	REMARKS		
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).				US currency is deposited via a debit machine. All other funds and valuables are placed in an envelope and stored with the detainees' property.		
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	$\boxtimes$					
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). <u>For IGSAs and CDFs</u> , using a personal property inventory form that meets the ICE standard?						
Staff forwards an arriving detainee's medication to the medical staff.						
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.						
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.						
Staff searches arriving detainees and their personal property for contraband.						
Staff procedures follow written policy for returning forgotten property to detainees.				During the review, the facility implemented written policy for returning forgotten property to detainees.		
Property discrepancies are immediately reported to the CDEO or Chief of Security.	$\boxtimes$			·		
Staff follows written procedures when returning property to detainees.						
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.		$\boxtimes$		The facility has procedures for handling detainee property claims. The facility will develop written policy that is similar to the ICE standard.		
The facility attempts to notify an out-processed detainee that he/she left property in the facility:  • By sending written notice to the detainee's last known address;  • Via certified mail; and  • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.	$\boxtimes$					
The facility disposes of abandoned property in accordance with written procedures.  • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.				A policy for the prompt forwarding of abandoned property to ICE was developed during the review.		
ACCEPTABLE DEFICIENT	AT-RISI	ζ		REPEAT FINDING		

The facility has good procedures for handling detainee funds and property in a clean and secure area. Additional written procedures for handling detainee property should be included in policy to ensure ICE standards are met.

AUDITOR'S SIGNATURE / DATE

b6,b7c

b6,b7c

b6,b7c

#### **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
Written procedures provide for the informal resolution of oral grievances (Not mandatory).  • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.				Local grievance procedures are outlined in local policy 4.04 "Detainee Grievance Procedures".
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.  • Detainees may seek help from other detainees or facility staff when preparing a grievance.  • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	$\boxtimes$			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	$\boxtimes$			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:  • If yes, explain.	1	$\boxtimes$		
Procedures include maintaining a Detainee Grievance Log.  If not, an alternative acceptable record keeping system is maintained.  "Nuisance complaints" are identified in the records.  For quality control purposes, staff document nuisance complaints received but not filed.				Grievance logs are maintained by the Administrative Sergeant.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	$\boxtimes$			
ACCEPTABLE □ DEFICIENT □	AT-RIS	SK		REPEAT FINDING

## REMARKS:

All components related to detainee grievance procedures were thoroughly assessed for compliance with published ICE standards. There were no areas of concern noted.

b6,b7c	April 16, 2009
AUDITOR'S SI	GNATURE / DATE





	·			· .			
GROUP LEGAL RIGHTS PRESENTATIONS  POLICY: FACILITIES HOUSING ICE DETAINES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT.							
CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS. MARK STANDARD AS ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET.							
COMPONENTS	YES	No	NA		REMARKS		
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.							
Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to attorneys or accredited representatives.				·			
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.							
Posters announcing presentations appear in common areas at least 48 nours in advance and sign-up sheets are available and accessible.							
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.							
When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend.							
Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.							
interpreters are admitted when necessary to assist attorneys and other legal representatives.							
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.							
Staff permits presenters to distribute ICE-approved materials.			_Ц_				
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.							
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.							
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.							
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request							
	AT-RISH	ζ		REPEAT ]	FINDING		

**REMARKS:** The facility is not currently under ICE contract, There have been no group legal rights presentations conducted for ICE detainees at this facility

AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	for
		_	v

## ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

**POLICY:** ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.

COMPONENTS	YES	No	NA	REMARKS
The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.  • The supply of these items exceeds the minimum required for the number of detainees.				Local policy 4.05, "Clothing, Linens, Bedding and Laundry", outlines the procedure for issuance and exchange of clothing, bedding, and linens.
<ul> <li>All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</li> <li>One uniform shirt and one pair of uniform pants, or one jumpsuit;</li> <li>One pair of socks;</li> <li>One pair of underwear (Daily change); and</li> <li>One pair of facility-issued footwear.</li> </ul>				
Additional clothing is available for changing weather conditions, or as seasonally appropriate.				
New detainees are issued clean bedding, linens, and towels. They receive at a minimum:  One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.				
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	$\boxtimes$			
Detainees are provided clean clothing, linen and towels.  Socks and undergarments - exchanged daily.  Outer garments - twice weekly.  Sheets - weekly.  Towels - weekly.  Pillowcases - weekly.	⊠			
Food service detainee volunteer workers are permitted to exchange outer garments daily.		$\boxtimes$		Detainees do not work in the Food Service Department.
Volunteer detainee workers are permitted to exchange outer garments more frequently.	×			
ACCEPTABLE DEFICIENT	AT-RISI	ζ	[ ]	REPEAT FINDING

#### **REMARKS:**

All areas pertaining to the issuance and exchange of clothing, bedding, and towels were reviewed for compliance with published ICE standards. There were no areas of concern noted.

April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7с b	6,b70	P2
			•

MARRIAGE REQUESTS					
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CA	ASE CONSI	DERATION	FROM I	CE MANAGEMENT.	
COMPONENTS	Y	N	NA	REMARKS	
The Field Office considers detainee marriage requests on a case-by-case basis.					
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.				The facility will forward all marriage requests to the Field Office for approval.	
It is standard practice to require a written request for permission to marry.	$\boxtimes$				
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	$\boxtimes$				
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.				The facility will provide a copy of the decision from the Field Office to the detainee and his legal representative.	
When permission is denied, the Warden/OIC states the basis for his/her decision.	$\boxtimes$			The Field Office will make all decisions on marriage requests.	
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	$\boxtimes$				
☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

The facility's plan for handling detainee marriage requests is to forward all written information to the Field Office for approval or rejection. Written policy will be developed to implement the procedures for handling detainee marriage requests.

b6,b7c / April 16, 2009	b6,b7c b6,b7	Zon
AUDITOR'S SIGNATURE / DATE		<b>\</b>

#### NON-MEDICAL EMERGENCY ESCORTED TRIPS POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS. ☑ STANDARD N/A: CHECK THIS BOX IF ALL ICE NON-MEDICAL EMERGENCY ESCORTED TRIPS ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES No NA REMARKS The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: П Funeral; or Deathbed The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family." The IGSA facility notifies ICE of all detainee requests for non-medical . escorts. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. $\Box$ П Each recommendation addresses the individual's suitability for travel; e.g., the kind of supervision required. Each escort includes at least two officers. Escorting officers report unexpected situations to the originating facility as a matter of procedure, and the ranking supervisor on duty has the authority to issue instructions for completion of the trip. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee. Escort officers are precluded from accepting gifts/gratuities from a П detainee, or detainee's relative or friend for any reason. Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, П other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. Standard procedure requires the immediate return to the facility of any П detainee who violates trip rules. ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING

#### REMARKS:

This facility is not currently under contract and does not have ICE detainees. There is a possibility of transporting ICE detainees in the future. Institution staff indicate they will develop procedures for handling the transportation of detainees for non-medical emergencies.

AUDITOR'S	SIG	SNATURE / DATE
b6,b7c	/	April 16, 2009



RECREATION						
POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT						
POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTEC	CT THEIR	SAFETY	AND WEL	FARE.		
COMPONENTS	Y	N	NA	REMARKS		
The facility has a recreation program and facility.			$\Box$			
A recreational specialist (for facilities with more than 350 detainees)	<u> </u>			The facility has a program		
tailors the program activities and offerings to the detainee population.				director who provides oversight to the recreation program.		
Regular maintenance keeps recreational facilities and equipment in good condition.						
The recreational specialist or trained equivalent supervises detainee recreation workers.				Facililty staff supervise detainee workers.		
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.						
Dayrooms offer sedentary activities, e.g., board games, cards, television.				During the facility tour, game tables, board games, and television were observed in use on the units.		
Outside activities are restricted to limited-contact sports.	$\boxtimes$					
Each detainee has the opportunity to participate in daily recreation.						
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	$\boxtimes$					
Staff checks all items for damage and condition when equipment is				· · · · · · · · · · · · · · · · · · ·		
returned.						
Staff conducts searches of recreation areas before and after use.	$\boxtimes$					
All recreation areas under constant staff supervision.	X					
Supervising staff is equipped with radios.	X					
The facility provides detainees in the SHU at least one hour of outdoor						
recreation time daily, five times per week.						
Detainees in disciplinary/administrative segregation receive a written	$\boxtimes$					
explanation when a panel revokes his/her recreation privileges.						
Special programs or religious activities are available to detainees.				There are about 20 special programs or religious activities for detainees to participate.		
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.	$\boxtimes$					
Visitors, relatives or friends are not allowed to serve as volunteers.	$\boxtimes$					
If outdoor recreation is offered, check this box. No further information	ation is	required	when or	utdoor recreation is offered.		
If the facility has no outside recreation, are detainees considered for						
transfer after six months?  • If yes, written procedures ensure timely review of all eligible detainees.				•		
Case officers make written transfer recommendations about every sixmonth detainee to the OIC.						
The OIC documents all detainee-transfer decisions, whether yes or no.						
The detainee's written decision for or against an offered transfer						
documented in his/her A-file.						
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.						
If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.						

RECREATION  POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.							
The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.							
The detainee's legal representative is notified of the detainee's/OIC's decision.							
ACCEPTABLE □ DEFICIENT □ A	T-RISI	ζ		REPEAT FINDING			

The facility has a staff member who provides oversight to the recreation program to ensure supplies and schedules are in place to afford detainees with recreational opportunities.

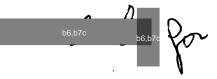
b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE



POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAIN FACILITY AND BUDGETARY CONSIDERATIONS.	REASONAL			
COMPONENTS	Y	N	NA	REMARKS
Detainees are allowed to engage in religious services.				
Space is available for detainees to conduct religious services.				The facility has ample space for detainees' religious services.
The facility allows detainees to observe the major "holy days" of their religious faith.  • List any exceptions.				
The facility accommodates recognized holy-day observances by:  • Providing special meals, consistent with dietary restrictions;  • Honoring fasting requirements;  • Facilitating religious services; and  • Allowing activity restrictions.				
Each detainee is allowed religious items in his/her immediate possession.	$\boxtimes$			Detainees are allowed to have religious books.
Volunteer's credentials are checked and verified before allowing participation in detainee programs.				
Members of faiths not represented by clergy may conduct their own services within security allowances.				
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.				"One on one" pastoral visits are conducted by volunteer chaplains to detainees who cannot participate in group services.
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING

The religious services program is provided by approximately 50 volunteer Chaplains and lay persons on a scheduled basis.

h6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE



#### **DETAINEE TELEPHONE ACCESS** POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. **COMPONENTS** Y N NA REMARKS Detainees have access to the Detainees are allowed access to telephones during established facility $\boxtimes$ П telephones from 6: 00AM until waking hours. 10:00 PM. Upon admittance, detainees are made aware of the facility's $\boxtimes$ telephone access policy. The rules for detainee telephone Access rules are posted in housing units. $\boxtimes$ access are posted in the handbook. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the $\boxtimes$ $\Box$ facility's population. Telephones are provided at a minimum ratio of one telephone per 25 $\boxtimes$ detainees in the facility population. The unit officer is responsible Telephones are inspected regularly by facility staff to ensure that $\boxtimes$ $\Box$ for the routine inspections of the they are in good working order. telephones. Sercurus Technologies manages The facility administration promptly reports out-of-order telephones the phone systems. All $\boxtimes$ to the facility's telephone service provider. maintenance problems are reported to Securus for repairs. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and $\boxtimes$ $\Box$ $\Box$ completed timely. Detainees are afforded a reasonable degree of privacy for legal $\boxtimes$ $\Box$ П phone calls. A procedure exists to assist a detainee who is having trouble placing $\boxtimes$ a confidential call. The facility provides the detainees with the ability to make non- $\boxtimes$ $\Box$ collect (special access) calls. Special Access calls are at no charge to the detainees. Ø The facility is not currently under ICE contract. The facility The OIG phone number for reporting abuse is programmed into the is aware of this standard. ICE detainee phone system and the phone number was checked by the П 冈 П officials have been working inspector during the review. with the facility to install an automated phone system through PCS. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate X See above comments. arrangements to provide required access within 24 hours of a request by a detainee. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free $\boxtimes$ П Legal Services List." Special arrangements are made to allow detainees to speak by Upon request from ICE, the telephone with an immediate family member detained in another X П facility will comply with this П Facility. standard. Telephones are restricted only because of discipline

Ø

Any telephone restrictions are documented.

proceedings which are

documented.

DETAINEE TELEPHONE ACCESS								
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.								
COMPONENTS	Y	N	NA	REMARKS				
The facility has a system for taking and delivering emergency detainee telephone messages.	$\boxtimes$							
Emergency phone call messages are immediately given to detainees.	$\boxtimes$							
Detainees are allowed to return emergency phone calls as soon as possible.	$\boxtimes$							
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.								
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.								
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	$\boxtimes$							
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those 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.	$\boxtimes$			Notifications that telephones are monitored are located by the phones in the housing units. In addition, the phones have a recording, which notifies the detainee that the phones are monitored.				
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING				

Policy # 4.07, "Telephone Access", dated October 3, 2004, provides procedures to ensure detainees have reasonable and equitable access to telephones.

b6,b7c	/ April 16, 2009
<b>AUDITOR'S</b>	SIGNATURE / DATE

b6,b7c b6,b7c

## **VISITATION**

POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.

CO:	₹7	<b>N</b> T	DT A	<del></del>
COMPONENTS	Y	N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.				Non-contact video visiting is allowed Tuesday and Thursday from 10:00 AM to 11:30 AM and 6:30 PM to 8:00 PM; Saturday from 10:00 AM to 11:00 AM; and Sunday for minors from 10:00 AM to 11:00 AM. Visits are 20 minutes in duration.
The visitation hours tailored to the detainee population and the demand for visitation.				
The visitation schedule and rules are available to the public.	$\boxtimes$			
The hours for all categories of visitation are posted in the visitation waiting area.	$\boxtimes$			
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	$\boxtimes$			
A general visitation log is maintained.				
The detainees are permitted to retain personal property items specified in the standard.	$\boxtimes$			
A visitor dress code is available to the public.		$\boxtimes$		The facility conducts only non- contact video visiting. There is no visiting dress code.
Visitors are searched and identified according to standard requirements.	$\boxtimes$			
The requirement on visitation by minors is complied with.	$\boxtimes$			
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.			$\boxtimes$	Visitation by minors is allowed with prior approval and adult supervision.
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.				Visitation by minors is allowed with prior approval and adult supervision.
Detainees in special housing are afforded visitation.	$\boxtimes$			
Legal visitation is available seven (7) days a week, including holidays.	$\boxtimes$			
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.				
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.				
There are written procedures governing detainee searches.	$\boxtimes$			
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.				

VISITATION							
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.							
Prior to each visit, legal service providers and assistants are identified per the standard.	$\boxtimes$						
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	$\boxtimes$						
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	$\boxtimes$						
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.							
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.							
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	$\boxtimes$						
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	$\boxtimes$						

Policy # 4.08, "Detainee Visitation", dated October 3, 2008, provides guidance regarding detainee visitation. The facility is well aware of all the above component requirements and will have systems in place to comply by the time detainees arrive.

Auditor's Signature / Date	b6,b7c	b6,b7c	for
MODITOR S SIGNATURE/ DATE		Ų.	- 0

### **VOLUNTARY WORK PROGRAM**

**POLICY:** IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS.

□ CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO WORK AT THE IGSA FACILITY. MARK NA ON FORM G-324A, PAGE
 3 AND MOVE TO NEXT SECTION.

COMPONENTS	Y	N	NA	REMARKS
Does the facility have a voluntary work program?  • Do ICE detainees participate?				
Detainee housekeeping meets neatness and cleanliness standards.				<del></del>
Detainees have the opportunity to participate in special details,				
however, are never allowed to work outside the secure perimeter.				
Written procedures govern selection of detainees for the Voluntary				
Work Program.				
Where possible, physically and mentally challenged detainees				
participate in the program.				
The facility complies with work-hour requirements for detainees, not				
exceeding:				
Eight hours a day and Forty hours a week.				
Detainee volunteers generally work according to fixed schedule.				
If a detainee is removed from a work detail, staff places the written		П		
justification for the action in the detainee's detention file.			L-J	
Staff, in accordance with written procedure, ensures that detainee				
volunteers understand their responsibilities as workers before they join		. 🗆 :		
the work program.				
The voluntary work program meets:	П			
OSHA, NFPA, ACA standards				
Medical staff screen and formally certify detainee food service				
volunteers.			П	
<ul> <li>Before the assignment begins; and</li> </ul>				·
As a matter of written procedure				
Detainees receive safety equipment/ training sufficient for the				
assignment.				
Proper procedure is followed when an ICE detainee is injured on the			П	
job.				
ACCEPTABLE DEFICIENT	AT-RISI	ζ		REPEAT FINDING

#### REMARKS

ICE detainees are not authorized to participate in the facility's voluntary work program.

AUDITOR'S SIGNATURE / DATE

b6,b7c

b6,b7c

b6,b7c

b6,b7c

# Section II Health Services Standards

COMPONENTS	Y	N	NA	REMARKS
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	$\boxtimes$			Policy, #D-07, "The Refusal to Eat", was revised during the review to meet all ICE requirements.
CDFs and IGSAs immediately report a hunger strike to the ICE.	$\boxtimes$			
The facility has established procedures to ensure staff respond immediately to a hunger strike.				
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.  • If yes, in an observation room?				
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	$\boxtimes$			
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	$\boxtimes$			
The OIC of the facility obtains a hunger striker's consent before medical treatment.				
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.				
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	$\boxtimes$			
Staff maintains the hunger striker's supply of drinking water/other beverages.	$\boxtimes$			
During a hunger strike, staff removes all food items from the hunger striker's living area.	$\boxtimes$			
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.				Form D-07 is used to record the hunger striker's intake.
The medical staff has written procedures for treating hunger strikers.	$\boxtimes$			
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	$\boxtimes$			
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.				Staff have not received training to identify hunger strikers.
ACCEPTABLE □ DEFICIENT □	AT-RISI	K		REPEAT FINDING
REMARKS:  Policy #D-07, "The Refusal to Eat", was revised during the review to ad hunger strike training scheduled for detention staff and medical staff by				

HUNGER STRIKES

identify hunger strikers.

		_	^
b6,b7c / April 16, 2009	b6,b7c	b6,b7c	$()_{\sim}$
AUDITOR'S SIGNATURE / DATE			XV
			O

## **ACCESS TO MEDICAL CARE**

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINES.

Children when being or top believed.	<u> </u>	<u> </u>		<u>ania merekai anii anii anekai anii an</u> arek <u>a</u> il
COMPONENTS	Y	N	NA	REMARKS
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.				The contract health provider, Correctional Healthcare, has policies and procedures that comply with the National Commission on Correctional Health Care and ACA.
The facility's in-processing procedures for arriving detainees include medical screening.	$\boxtimes$			
All detainees have access to and receive medical care.				
The facility has access to a PHS/DIHS Managed Health Care Coordinator.				The facility did not have the name and number of a PHS/DIHS Managed Health Care Coordinator. ICE has been contacted for this information.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	×			The contractor provides medical staff to meet the medical needs of the facility.  Contract Manager, stated the contract will be amended to increase staffing with the increased detainee population.
The facility has sufficient space and equipment to afford detained privacy when receiving health care.	$\boxtimes$			
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	$\boxtimes$			
The medical facility entrance includes a holding/waiting room.				
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	×			
Detainees in the holding/waiting room have access to a drinking fountain.				The medical waiting/holding area does not have a water fountain. However, access to fluids is made available.
<ul> <li>Medical records are kept apart from other files. They are:</li> <li>Secured in a locked area within the medical unit;</li> <li>With physical access restricted to authorized medical staff; and</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>				
Pharmaceuticals are stored in a secure area.				Pharmaceuticals are stored in a cabinet in a secure area in the medical unit. During the review, the needle/syringe cabinet was secured with a lock.
<ul> <li>Medical screening includes a Tuberculosis (TB) test.</li> <li>Every arriving detainee receives a TB test during the admission process;</li> <li>Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and</li> <li>Detainees not screened are housed separate from the general population.</li> </ul>				Policy J-E-02, "Receiving Screening", dated 4/13/09, addresses TB screening. Screening is completed before the detainee is placed in the general population. Detainees who show positive signs of potential TB are held in the

ACCESS TO MEDICAL CARE							
<b>POLICY:</b> EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.							
				medical holding cell until screening test results are completed. The policy was revised during the review process to meet the ICE standard.			
All detainees receive a mental-health screening upon arrival. It is conducted:  • By a health care provider or specially trained officer; and							
Before a detainee's assignment to a housing unit.							
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.							
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				The contractor revised the health assessment to include a systematic review of symptoms and a physical examination to include a "hands on" examination. Physical examinations will be completed within ten days of arrival. Form 0022, "Health Assessment" will be used.			
Detainees in the Special Management Unit have access to health care services.				During the review, the contractor revised policy to include this service and to document it.			
<ul> <li>Staff provides detainees with health services (sick call) request slips daily, upon request.</li> <li>Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	$\boxtimes$						
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.				Facility Policies "Availability of Medical and Dental Resources", #5.01, "Reporting of Unusal Occurrences" #7.08, and "Emergency Response Plan", #J-A-07, address this element.			
The plan includes an on-call provider.							
The plan includes a list of telephone numbers for local ambulance and hospital services.				Policy #5.02, "Posting of Available Resources", also requires that telephone numbers for emergency medical, dental, emergency response ambulance, and mental health are posted in Master Control, Booking, Work Release and General Housing.			
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.							
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	×						

ACCESS TO MEDICAL CARE								
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.								
Where staff is used to distribute medication, a health care provider properly trains these officers.	×			Facility Policy "Delivery, Supervision and Control of Medications", #5:07, Section 3 E, outlines detention officer training and medication distribution.				
The medical unit keeps written records of medication that is distributed.	⊠			All medication administration records include start and stop dates, the individual who distributed the medication, and the initials of the inmate/detainee receiving the medication.				
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.								
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	$\boxtimes$			The Health Intake Screening form, #0062, was revised to include consent for medical treatment and examination.				
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	×			The "Release of Medical Information Form", # 0026, authorizes the release of confidential medical records.				
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	$\boxtimes$							
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	×							
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	$\boxtimes$							
■ ACCEPTABLE	AT-RISH	ζ.		REPEAT FINDING				
REMARKS:								

Correctional Health Care was awarded the medical provider contract in October 2008. They currently provide eight hours of on-site medical coverage, five days a week. The current medical staff includes a contract manager, one full time RN, one part-time RN, and one physician who provides on-site services every other week. An x-ray technician, laboratory technician, mental health provider, and psychiatrist provide on-site services as needed. Contract Manager, stated the contract will be amended to increase staffing with the increased detainee population. The detention officers are trained to identify medical emergencies, distribute medications, and report medical emergencies to the on-call health care provider. A 24-hour emergency call-back system for the nurse manager and physician is available for all medical emergencies and concerns.

The facility does not have the name and number of a PHS/DIHS Managed Health Care Coordinator. ICE has been contacted to provide this information.

b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE

b6,b7c

for

SUICIDE PREVENTION AND INTERVENTION  POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF						
WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITY DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.	VITY, SUPE					
COMPONENTS	Y	ΙŃ	NA	REMARKS		
Every new staff member receives suicide-prevention training. Suicid prevention training occurs during the employee orientation program.				All detention staff receive suicide prevention and intervention training. A mental health provider conducts the training during orientation. Annual suicide prevention training is also provided.		
<ul> <li>Training prepares staff to:         <ul> <li>Recognize potentially suicidal behavior;</li> <li>Refer potentially suicidal detainees, following facili procedures; and</li> <li>Understand and apply suicide-prevention techniques.</li> </ul> </li> </ul>						
A health-care provider or specially trained officer screens all detaine for suicide potential as part of the admission process.  • Screening does not occur later than one working day after the detainee's arrival.						
Written procedures cover when and how to refer at-risk detainees medical staff and procedures are followed.	to			Policy J-G-05, "Suicide Prevention", identifies procedures on how to refer an at-risk detainee to medical staff.		
The facility has a designated isolation room for evaluation at treatment.	nd 🖂			A special watch room has been identified in the intake screening area.		
The designated isolation room does not contain any structures smaller items that could be used in a suicide attempt.	or 🖂					
Medical staff has approved the room for this purpose.						
Staff observes and documents the status of a suicide-watch detainee least once every 15 minutes.	at 🛛			A review of a special watch log indicated 15 minutes or less.		
□ ACCEPTABLE □ DEFICIENT	AT-R	ISK		REPEAT FINDING		

### **REMARKS:**

All detention staff receive training from a certified mental health professional on recognizing suicide risk indicators and referring potential suicide risks to medical. A special watch room has been identified in the intake screening area that is under camera and does not have any structures that could be used in a suicide attempt. The special watch log documented physical watch intervals of 15 minutes or less.

AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	for
			U

### TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

**POLICY** ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.

COMPONENTS	Y	N	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.				Policy J-G-11, "Terminal Illness", was revised to include ICE notification of transfers to an appropriate off-site medical facility.
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include:  • The detainee's location; and • The limitations placed on visiting.				Policy J-E-08, "Reporting of Unusual Occurrences", was revised during the review to meet this element.
<ul> <li>There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives.</li> <li>The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.</li> </ul>				
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.				
There is a policy addressing "Do Not Resuscitate Orders"				
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	$\boxtimes$			
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.				
The facility has written procedures to address the issues of organ donation by detainees.				Policy J-I-04, "End of Life Decision Making", was revised to include organ donation by detainees.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.				Policy # 7.05, "Emergency & Unusual Occurrences, Security & Control" was revised during the review to include ICE notification when a detainee dies.
The facility has a policy and procedure to address the death of a detainee while in transport.				The above policy was revised to include the death of a detainee while in transport.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	$\boxtimes$			Addressed in the above policy.
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures.	$\boxtimes$			

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH							
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.							
CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAININ THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. A AND RELATED NOTIFICATIONS.	LWAYS						
COMPONENTS	Y	N	NA	REMARKS			
• If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?							
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	$\boxtimes$						
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as:  • Performance of an autopsy;  • Who will perform the autopsy;  • Obtaining state approved death certificates; and							
• Local transportation of the body.							
ICE staff follows established procedures to properly close the case of a deceased detainee.				This is an initial review and no detainees have been housed at this facility. Procedures are in place to close the case of a deceased detainee.			
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING			

### REMARKS:

Policies and procedures were revised to address the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials.

b6,b7c / April 16, 2009	b6,b7c	b6,b7c	Do
AUDITOR'S SIGNATURE / DATE	_		0

REPEAT FINDING

### Section III Security and Control Standards

CONTRABAND								
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.								
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.				Policies and Procedures Section 6.06, Recovery of Contraband.				
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.								
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.								
Altered property is destroyed following documentation and using established procedures.				Confiscated altered property is noted in the daily log and the detainee behavior log.				
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.								
Staff follows written procedures when destroying hard contraband that is illegal.	$\boxtimes$							
Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes.  If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.	×							
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

### **REMARKS:**

Since the construction of the new facility, no illegal hard contraband has been confiscated.

AUDITOR'S SIGNATURE / DATE

b6,b7c b6,b7

POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY I				
DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION F				
OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE F PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.	ACILITY:	CLASSIF	ICATION	SHEET, MEDICAL QUESTIONNAIRE,
COMPONENTS	Y	N	NA	REMARKS
A detention file is created for every new arrival whose stay will				NEWARKS
exceed 24 hours.	$\boxtimes$			
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	$\boxtimes$			
The detainee's detention file also contains documents generated during				
the detainee's custody.		ļ 		
Special requests		'		·
• Any G-589s and/or I-77s closed-out during the detainee's	$\boxtimes$			
stay      Disciplinary forms/Segregation forms		ļ	i I	
<ul> <li>Grievances, complaints, and the disposition(s) of same</li> </ul>			ļ	
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	$\boxtimes$			
supervisors.				
The detention file remains active during the detainee's stay. When the				
detainee is released from the facility, staff adds copies of completed	$\boxtimes$			
release documents, the original closed-out receipts for property and		-		
valuables, the original I-385 or equivalent, and other documentation.  The officer closing the detention file makes a notation that the file is			<del> </del>	<u> </u>
complete and ready to be archived.	$\boxtimes$			
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	$\boxtimes$			1
file. Each file is properly logged out and in by a representative of the responsible department.	_ <del></del>	-	[ _	
		<u></u>	<u></u>	
ACCEPTABLE DEFICIENT	AT-RISI	<u> </u>	ا ا	REPEAT FINDING
REMARKS:  Detention files will be created for all ICE detainees. Detention files are in accountable.	n a secure	ed area. I	File acco	untability procedures are

**DETENTION FILES** 

acceptable.

66,67c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c b	6,b7 R
AUDITOR SSIGNATURE/DATE		

DISCIPLINARY POLICY						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO	IMPOSE DI	SCIPLINE	ON DETA	INEES WHOSE BEHAVIOR IS NOT IN		
COMPLIANCE WITH FACILITY RULES AND REGULATIONS.						
COMPONENTS	Y	N	NA	REMARKS		
The facility has a written disciplinary system using progressive levels of reviews and appeals.	$\boxtimes$			Detainee Handbook part II., Discipline.		
The facility rules state that disciplinary action shall not be capricious or retaliatory.	$\boxtimes$			The rules were updated during the review to indicate that disciplinary action shall not be capricious or retaliatory.		
Written rules prohibit staff from imposing or permitting the following sanctions:						
<ul> <li>corporal punishment</li> <li>deviations from normal food service</li> <li>clothing deprivation</li> <li>bedding deprivation</li> <li>denial of personal hygiene items</li> <li>loss of correspondence privileges</li> <li>deprivation of physical exercise</li> </ul>		. 🗆		The rules were updated during the review to bring this component in compliance with the standard.		
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	$\boxtimes$					
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						
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	$\boxtimes$					
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	$\boxtimes$			Reports are forwarded to the shift sergeant.		
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.				Incident reports are usually investigated within 24 hours; however, there was no such guidance in policy. This language was added to the disciplinary policy during the review.		
An intermediate disciplinary process is used to adjudicate minor infractions.				Informal reprimand, verbal reprimand, and 24-hour disciplinary lockdown are used.		
<ul> <li>A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel:</li> <li>Conducts hearings on all charges and allegations referred by the UDC;</li> <li>Considers written reports, statements, physical evidence, and oral testimony;</li> <li>Hears pleadings by detainees and staff representatives;</li> <li>Bases its findings on the preponderance of evidence; and</li> <li>Imposes only authorized sanctions</li> </ul>						
A staff representative is available if requested for a detainee facing a disciplinary hearing.				During the review, language was added to policy that indicates a staff representative is		

#### **DISCIPLINARY POLICY** POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS. **COMPONENTS** NA REMARKS available, if requested, for a detainee facing a disciplinary hearing. Language was added to policy The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented. during the review which $\boxtimes$ allowed for the postponement or continuance of a disciplinary hearing. The duration of punishment set by the OIC, as recommended by the Maximum time spent in disciplinary panel, does not exceed established sanctions. The $\boxtimes$ П disciplinary segregation is 30 maximum time in disciplinary segregation is limited to 60 days for a days. single offense. Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial $\boxtimes$ П evidence" All forms relevant to the incident, investigation, committee/panel All records are kept by the Jail $\boxtimes$ . reports, etc., are completed and distributed as required. Administrator. **ACCEPTABLE** DEFICIENT REPEAT FINDING

### REMARKS:

Significant amounts of language needed to be added to the disciplinary policy to bring it into compliance with ICE standards. Staff were attentive in addressing these issues.

b6,b7c	1/	April 16, 2009
	_	GNATURE / DATE



### **EMERGENCY (CONTINGENCY) PLANS**

POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY, IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.

	<del></del>			
COMPONENTS	Y	N	NA	REMARKS
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.				Policy and Procedures section 7.05, Emergency Plan.
Detainees are protected from:				
<ul> <li>Personal abuse</li> <li>Corporal punishment</li> <li>Personal injury</li> <li>Disease</li> <li>Property damage</li> <li>Harassment from other detainees</li> </ul>				Policy was updated to include language to indicate detainees were protected from the aforementioned punishments.
				Dollar, and Dropodyras section
Staff is trained to identify signs of detainee unrest.  • What type of training and how often?				Policy and Procedures section 2.05, "Training Plan," indicates new hires receive 40 hours of orientation and all staff receives 16 hours of subsequent training annually.
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)				
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	×			The Training and Compliance Sergeant reviews and updates emergency plans every three months.
The plans address the following issues:  Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions				
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	×			
The facility has cooperative contingency plans with applicable:  • Local law enforcement agencies  • State agencies  • Federal agencies				This facility has cooperative contingency plans with the local Sheriff's Office, Police Department and Fire and Ambulance.
All staff receives copies of Hostage Situation Management policy and procedures.				
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.	⊠			There was no language to indicate staff is trained to disregard instructions from hostages, regardless of rank, and within 24 hours after release, hostages are screened for medical and psychological effects. This language was added to the emergency plans during the review.
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	$\boxtimes$			

EMERGENCY (CONTING	ENCY) F	LANS					
<b>POLICY</b> ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.							
COMPONENTS	Y	N	NA	REMARKS			
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	$\boxtimes$						
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).				Written plans identifying locations of shut-off valves and switches for all utilities, were developed during the review.			
Written procedures cover:  Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances				Written procedures were updated during the review to cover all elements in this component.			
ACCEPTABLE DEFICIENT .	AT-Risk		F	REPEAT FINDING			
_							

### **REMARKS:**

This facility has comprehensive Emergency Plans. The written changes in the policy helped to bring the plans into compliance.

b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	for
			. /

#### 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 Local policy 7.03 "Dangerous inventories of hazardous materials. Materials" outlines the storage, $\boxtimes$ issuance, and inventories of hazardous materials. Constant inventories are maintained for all flammable, toxic, and $\boxtimes$ П caustic substances used/stored in each section of the facility. The manufacturer's Material Safety Data Sheet (MSDS) file is up-todate for every hazardous substance used. The files list all storage areas, and include a plant diagram $\boxtimes$ and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: Personal protective equipment is $\boxtimes$ Wear personal protective equipment; and readily available. Report hazards and spills to the designated official. The MSDSs are readily accessible to staff and detainees in work areas. $\boxtimes$ Hazardous materials are always issued under proper supervision. $\boxtimes$ Quantities are limited; and Staff always supervises detainees using these substances. All "flammable" and "combustible" materials (liquid and aerosol) are $\boxtimes$ stored and used according to label recommendations. Lighting fixtures and electrical equipment installed in storage rooms Tours and observations indicate. and other hazardous areas meet National Electrical Code requirements. $\bowtie$ П that the facility meets National Electric Code requirements. The facility has sufficient ventilation, and provides and ensures clean $\boxtimes$ air exchanges throughout all buildings. Vents return vents, and air conditioning ducts are not blocked or $\boxtimes$ П obstructed in cells or anywhere in the facility. Living units are maintained at appropriate temperatures in accordance Living unit temperatures are with industry standards. (68 to 74 degrees in the winter and 72 to 78 monitored via an electronic degrees in the summer.) $\boxtimes$ П digital control KMC system. All temperatures are within prescribed standards. Shower and sink water temperatures do not exceed the industry $\boxtimes$ П standard of 120 degrees. All toxic and caustic materials are stored in their original containers in $\boxtimes$ a secure area. Excess flammables, combustibles, and toxic liquids are disposed of $\boxtimes$ properly and in accordance with MSDSs. 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" $\boxtimes$ П П includes issuing such products to detainees in the smallest workable

### FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

П

 $\boxtimes$ 

quantities.

Every employee and detainee using flammable, toxic, or caustic

materials receives advance training in their use, storage, and disposal.

There is no documented training

on the use of flammable, toxic,

or caustic materials.

#### **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 NA REMARKS The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection $\boxtimes$ П П Association and the Occupational Safety and Health Administration (OSHA). A technically qualified officer conducts the fire and safety inspections. The Safety Office (or officer) maintains files of inspection reports. $\boxtimes$ The facility has an approved fire prevention, control, and evacuation $\boxtimes$ plan. The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the $\boxtimes$ 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. Fire drills are conducted and documented monthly. The facility does not conduct or П X П document monthly fire drills. A sanitation program covers barbering operations. $\boxtimes$ The barber shop has the facilities and equipment necessary to meet Barbering services are via $\boxtimes$ contract with a local licensed sanitation requirements. barber. The sanitation standards are conspicuously posted in the barbershop. Ø Written procedures regulate the handling and disposal of used needles Witten procedure for the handling and disposal of used and other sharp objects. needles and sharps is located in $\boxtimes$ the CHC/Risk Management Manual. All items representing potential safety or security risks are inventoried $\boxtimes$ П $\Box$ and a designated individual checks this inventory weekly. Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and Standard cleaning practices and procedures are outlined in local detergents. $\boxtimes$ An established schedule of cleaning and follow-up policy 8.02 "Sanitation and Waste Disposal." inspections. The facility follows standard cleaning procedures. $\boxtimes$ Spill kits are readily available. Blood and body fluid spill kits $\boxtimes$ are available throughout the facility. The facility contracts with A licensed medical waste contractor disposes of infectious/bio- $\bowtie$ Stericycle as a licensed medical hazardous waste. waste contractor. Staff is trained to prevent contact with blood and other body fluids and

### FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

 $\boxtimes$ 

written procedures are followed.

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	
Do the methods for handling/disposing of refuse meet all regulatory requirements?				The facility currently contracts with Waste Management for the handling/disposal of refuse.	
<ul> <li>A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin.</li> <li>At least monthly.</li> <li>The pest-control program includes preventative spraying for indigenous insects.</li> </ul>				Professional pest control services are provided by American Pest Control.	
Drinking water and wastewater is routinely tested according to a fixed schedule.	×			Drinking water is provided and tested by the local municipality.	
<ul> <li>Emergency power generators are tested at least every two weeks.</li> <li>Other emergency systems and equipment receive testing at least quarterly.</li> <li>Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>		⊠		The emergency generator is not being tested at two-week intervals. Also, quarterly maintenance from an external generator service company is not being completed.	
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING	

**ENVIRONMENTAL HEALTH AND SAFETY** 

### REMARKS:

All components associated with Environmental Health and Safety were reviewed for compliance with ICE standards and guidelines. Except for those components noted above, there was compliance with ICE expectations. Administrative staff were very proactive in modifying local policy and procedures in order to meet the intent of ICE components and standards.

b6,b7c / April 16, 2009	b6.b7c	
AUDITOR'S SIGNATURE / DATE		b6,b7

HOLD ROOMS IN DETENTION FACILITIES					
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETE HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHE					
COMPONENTS	Y	N	NA	REMARKS	
The hold rooms are situated within the secure perimeter.	$\overline{\boxtimes}$				
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	$\boxtimes$				
The hold rooms contain sufficient seating for the number of detainees held.					
Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	$\boxtimes$				
The walls and ceilings of the hold rooms are tamper and escape proof.					
Individuals are not held in hold rooms for more than 12 hours.				Inmates are never left in hold cells over two hours.	
Male and females are segregated from each other.	$\boxtimes$				
Detainees under the age of 18 are not held with adult detainees.	$\boxtimes$			This facility does not house juveniles.	
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.				All detainees are provided with hygiene packets during the booking process.	
In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	$\boxtimes$				
All detainees are given a pat down search for weapons or contraband before being placed in the room.					
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.).  • Hold rooms are irregularly monitored every 15 minutes.  • Unusual behavior or complaints are noted.	×			All hold rooms receive direct supervision by booking staff.	
When the last detainee has been removed from the hold room, it is given a thorough inspection.	$\boxtimes$			·	
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	$\boxtimes$				
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	$\boxtimes$				
<b>△</b> ACCEPTABLE  □ DEFICIENT  □	AT-RISK I			REPEAT FINDING	
REMARKS:					
The hold rooms in the booking area are set up for maximum supervision	n of detair	nees and o	ther speci	al management detainees.	
b6,b7c / April 16, 2009 b6,b7c					

		_
b6,b7c / April 16, 2009	b6,b7c	D.A
AUDITOR'S SIGNATURE / DATE		Ψ
		0

## KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.

OF ALL RE IS AND LOCKS.	· · · · · · · · · · · · · · · · · · ·			
COMPONENTS	Y	N	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				No staff member has attended an approved locksmith training program.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.				The Training and Compliance Sergeant is responsible for the administrative duties and responsibilities relating to keys and locks.
The security officer, or equivalent in IGSAs, provides training to employees in key control.	$\boxtimes$			
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.				
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	$\boxtimes$			All locks are inspected monthly by the night shift sergeant.
Facility policies and procedures address the issue of compromised keys and locks.	$\boxtimes$			
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				There are no safes at this facility.
Only dead bolt or dead lock functions are used in detainee accessible areas.	$\boxtimes$			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.				
Grand master keying systems are prohibited.				
All worn or discarded keys and locks are cut up and properly disposed of.	$\boxtimes$			
Padlocks and/or chains are prohibited from use on 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.				
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	X			
Procedures are in place to ensure that key rings are:  Identifiable; The numbers of keys are cited; and Keys cannot be removed.				Initially, there was nothing in place to ensure keys were identifiable, the number of keys were cited; or that keys cannot be removed. During the review, keys were marked using a metal chit identifying the key ring and number of keys. A key board that corresponded to the key rings was created. Additionally, key rings were soldered closed.
Emergency keys are available for all areas of the facility.				
The facilities use a key accountability system.	$\boxtimes$			
Authorization is necessary to issue any restricted key.				There are no restricted keys at

# KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

**POLICY** IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS.

COMPONENTS	Y	N	NA	REMARKS
				this facility.
<ul> <li>Individual gun lockers are provided.</li> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>				
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.				Initially, keys were not accounted for daily. The facility set up procedures for the accountability of keys on every shift. The language was included in the key and lock policy.
<ul> <li>All staff members are trained and held responsible for adhering to proper procedures for the handling of keys.</li> <li>Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>Detainees are not permitted to handle keys assigned to staff.</li> </ul>				Policy and Procedures section 6.10, Control and Inspection of keys, locks and tools.
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING

### REMARKS:

To enhance security, keys are now counted on every shift. No staff member has attended an approved locksmith training program.

b6,b7c	/ April 16, 2009
AUDITOR'S	SIGNATURE / DATE



POPULATION COUNTS						
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLO						
THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPU	JLATION P	ER SHIFT,	WITH AD	DITIONAL FORMAL AND INFORMAL		
COUNTS CONDUCTED AS NECESSARY.						
COMPONENTS	Y	N	NA	REMARKS		
Staff conduct a formal count at least once each shift.				Counts start at 6:00 am and are conducted every six hours.		
Activities cease or are strictly controlled while a formal count is being conducted.	$\boxtimes$					
Certain operations cease during formal counts.	$\boxtimes$					
All movement ceases for the duration of a formal count.	$\boxtimes$					
Formal counts in all units take place simultaneously.						
Detainee participation in counts is prohibited.	$\square$					
A face-to-photo count follows each unsuccessful recount.				All detainee files with photos		
			<b>│</b>	are contained in Central Control.		
Officers positively identify each detainee before counting him/her as				Control.		
present.						
Written procedures cover informal and emergency counts.		l 🗆		·		
• They are followed during informal counts and emergencies.				Out south and bout on the		
The control officer (or other designated position) maintains an out -		1		Out-counts are kept on the formal count sheet and the		
count record of all detainees temporarily leaving the facility.				control center data base.		
This training is documented in each officer's training folder.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

### **REMARKS:**

The review team observed the 12:00 pm formal count. The count cleared at 12:15 pm. There were no issues concerning the count. A shift change and subsequent count were observed for the 6:00 pm count. There were no problems noted.

b6.b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE



POST ORDI	ERS			
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARE ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST TO THAT POST.	Γ ANNUALI	LY, AND (	JIVEN TO	EACH OFFICER UPON ASSIGNMENT
COMPONENTS	Y	<u>N</u>	NA	REMARKS
Every fixed post has a set of post orders.				There are six sets of post orders.
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.				Notice of post order changes are written in memo format and distributed to each officer.
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.				The Jail Administrator is responsible for post order revisions.
The IGSA maintains a complete set (central file) of post orders.				A complete set of post orders is maintained in the Training and Compliance Sergeant's office.
The central file is accessible to all staff.				
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	$\boxtimes$			
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.				The Jail Administrator had not signed and dated the last page of every post order. This was accomplished during the review.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	$\boxtimes$			Policy and Procedures section 2.08, Duty Post and Logs.
Procedures keep post orders and logbooks secure from detainees at all times.	$\boxtimes$			·
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.			$\boxtimes$	b2High
Armed-post post orders provide instructions for escape attempts.			$\boxtimes$	b2High
The post orders for housing units track the event schedule.				
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	$\boxtimes$			The daily activity is recorded in the Jail Mangement System database, accessible to all staff.
■ ACCEPTABLE    □ DEFICIENT    □	AT-RISI	K		REPEAT FINDING
REMARKS:				

There were no issues regarding post orders during this review.

AUDITOR'S SIGNATURE / DATE

b6,b7c

b6,b7c

b6,b7c

### SECURITY INSPECTIONS

**POLICY:** POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROLIGH GROUNDING IN FACILITY OPERATIONS.

BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUND				
COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The				
policy specifies:				
<ul> <li>Posts to be inspected;</li> </ul>				Policy and Procedures section
Required inspection forms;				6.05, Detainee Counts, Checks
<ul> <li>Frequency of inspections;</li> </ul>				and Facility Inspections.
<ul> <li>Guidelines for checking security features; and</li> </ul>		l		and racinty inspections.
<ul> <li>Procedures for reporting weak spots, inconsistencies, and</li> </ul>		1		
other areas needing improvement				
Every officer is required to conduct a security check of his/her				
assigned area. The results are documented.	$\boxtimes$			
Documentation of security inspections is kept on file.		<b>-</b>		Documentation is kept on the
boothienation of society hispothons is kept on the.	$\boxtimes$			Jail Management System data
				base.
Procedures ensure that recurring problems and a failure to take				<i>b</i> use.
corrective action are reported to the appropriate manager.				
		<u> </u>		
The front-entrance officer checks the ID of everyone entering or	$\boxtimes$		$  \sqcap  $	
exiting the facility.				
All visits are officially recorded in a visitor logbook or electronically				Master Control logs all visits in
recorded.				the Jail Management System.
The facility has a secure visitor pass system.				This facility did not have a
				visitor pass system; however,
		<u> </u>	니 .	this was corrected during the
	ļ			review.
Every Control Center officer receives specialized training.				Each Control Center Officer
		$  \Box $		receives several shifts of on-the-
	1		_	job training.
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.				
Communications are centralized in the Control Center.		一一	<del>      -</del>	
Officers monitor all vehicular traffic entering and leaving the facility.			<del>                                     </del>	
	$\boxtimes$	<u> </u>	<del>                                     </del>	
The facility maintains a log of all incoming and departing vehicles to				
sensitive areas of the facility. Each entry contains:				
• The driver's name;			1	The only people allowed into
<ul> <li>Company represented;</li> </ul>	ł		ļ	the sally port are law
Vehicle contents;		ĺП	I 🗇	enforcement. Deliveries to the
Delivery date and time;	<u> </u>			loading dock occur outside of
Date and time out;		ĺ		the secure perimeter.
Vehicle license number; and		ļ		<u> </u>
Name of employee responsible for the vehicle during the visit	·			
Officers thoroughly search each vehicle entering and leaving the				Delivery vehicles de not enten
				Delivery vehicles do not enter
facility.		<u> </u>	<del></del>	the secure perimeter.
The facility has a written policy and procedures to prevent the	K7			Policy and Procedures sections
introduction of contraband into the facility or any of its components.			] []	6.06 and 6.07, Detainee
m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ļ	ļ		Searches, Facility Searches.
Tools being taken into the secure area of the facility are inventoried				
before entering and prior to departure.		<u> </u>	<u> </u>	
The SMU entrance has a sally port.		1 17		

SECURITY INSPECTIONS						
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS.						
COMPONENTS	COMPONENTS YES NO NA REMARKS					
Written procedures govern searches of detainee housing units and personal areas.	$\boxtimes$					
Housing area searches occur at irregular times.						
Every search of the SMU and other housing units is documented.				Documented as a watch tour in the electronic Jail Management System.		
Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.						
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.						
Daily procedures include:      Perimeter alarm system tests;     Physical checks of the perimeter fence; and     Documenting the results.				Motion alarm sensors in the chase hallways are tested every shift and documented in the electronic Jail Management System.		
Visitation areas receive frequent, irregular inspections.				Visits occur via video monitors. The visitors utilize a video monitor room located in the front lobby. A video monitor area is located in each housing unit for the detainees.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

### REMARKS:

Security inspections occur each shift daily, weekly, monthly and quarterly as required.

			_
b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	
RODITOR S SIGNATURE / DATE	.*		- <i> Y</i>
			1/

## 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	Υ	N	NA	REMARKS
The Administrative Segregation unit provides non-punitive				
protection from the general population and individuals undergoing	177			Policy and Procedures section
disciplinary segregation.	$\boxtimes$			4.03, Disciplinary Plan.
<ul> <li>Detainees are placed in the SMU (administrative) in accordance with written criteria.</li> </ul>				
In exigent circumstances, staff may place a detainee in the SMU				A copy of the detention order is
(administrative) before a written order has been approved.	$\boxtimes$		' П	given to the inmate upon
• A copy of the order given to the detainee within 24 hours.				request.
The OIC (or equivalent) regularly reviews the status of detainees in				
administrative detention.	<u>Γ</u> ΖΙ		<u> </u>	4.
• A supervisory officer conducts a review within 72 hours of				
the detainee's placement in the SMU (administrative).				
A supervisory officer conducts another review after the detainee has				
spent seven days in administrative segregation, and:				
<ul> <li>Every week thereafter for the first month; and</li> </ul>				
• Every 30 days after the first month.	$\boxtimes$			
<ul> <li>Does each review include an interview with the detainee?</li> </ul>				
• Is a written record made of the decision and the				
justification?	<u> </u>		!	
The detainee is given a copy of the decision and justification for each				A copy of the decision and
review.	$\boxtimes$			justification is given to the
The detainee is given an opportunity to appeal the reviewer's  decision to someone also in the facility.	_			inmate upon request.
decision to someone else in the facility.  The OIC (or equivalent) routinely notifies the Field Office Director				
(or staff officer in charge of IGSAs) any time a detainee's stay in				The FOD has requested
administrative detention exceeds 30 days.	[			notification any time a detainee
Upon notification that the detainee's administrative	$\square$			is placed into administrative
segregation has exceeded 60 days, the FD forwards written				detention.
notice to HQ Field Operations Branch Chief for DRO.				
The OIC or equivalent) reviews the case of every detainee who				
objects to administrative segregation after 30 days in the SMU.				The Jail Administrator reviews
• A written record is made of the decision and the	$\square$			the administrative status of the
justification.				detainees in detention.
The detainee receives a copy of this record.				<u> </u>
The detainee is given the right to appeal to the OIC (or equivalent)		-		
the conclusions and recommendations of any review conducted after	$\boxtimes$			The detainee utilizes the facility
the detainee have remained in administrative segregation for seven				grievance system.
consecutive days.				
Administratively segregated detainees enjoy the same general	$\boxtimes$			
privileges as detainees in the general population.				
The SMU is:				
Well ventilated;	121		_	
Adequately lighted;	$\boxtimes$		⊔	
Appropriately heated; and				
Maintained in a sanitary condition.				<del></del>
All cells are equipped with beds.	$\boxtimes$			

## 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	Y	N	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy limit.  • When occupancy exceeds recommended capacity, do basic living standards decline?  • Do criteria for objectively assessing living standards exist?  • If yes, are the criteria included in the written procedures?				Only two detainees per cell in Administrative Detention.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	$\boxtimes$			
Detainees receive three nutritious meals per day, from the general population's menu of the day.  • Do detainees eat only with disposable utensils?  • Is food ever used as punishment?				
<ul> <li>Each detainee maintains a normal level of personal hygiene in the SMU.</li> <li>The detainees have the opportunity to shower and shave at least three times a week.</li> <li>If not, explain.</li> </ul>				All of these activities are recorded in the Detainee Behavior Log.
<ul> <li>The detainees are provided:</li> <li>Barbering services;</li> <li>Recreation privileges in accordance with the "Detainee Recreation" standard;</li> <li>Non-legal reading material;</li> <li>Religious material;</li> <li>The same correspondence privileges as detainees in the general population;</li> <li>Telephone access similar to that of the general population; and</li> <li>Personal legal material.</li> </ul>				
A health care professional visits every detainee at least three times a week.  The shift supervisor visits each detainee daily.  Weekends and holidays.				Procedures were developed and implemented requiring a health care professional to visit every detainee three times a week in Administrative Detention. This procedure was developed the week prior to the review.
Procedures comply with the "Visitation" standard.  • The detainee retains visiting privileges; and  • The visiting room is available during normal visiting hours.				Administrative Detention detainees have visits when the other detainees are locked down.
Visits from clergy are allowed.				
<ul> <li>Detainees have the same law-library access as the general population.</li> <li>Are they required to use the law library ∑Separately, or ∑As a group?</li> <li>Are legal materials brought to them?</li> </ul>				Detainees request legal materials through the Programs Manager.
The SMU maintains a permanent log of detainee-related activity,				

### SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

**POLICY:** THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).

COMPONENTS	Y	N	NA	REMARKS
<ul> <li>SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU.</li> <li>Staff completes the form at the end of each shift.</li> <li>CDFs and IGSA facilities use Form I-888 (or local equivalent).</li> </ul>				All activities are recorded on the electronic Jail Management System.
<ul> <li>Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift.</li> <li>Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc;</li> <li>The medical officer/health care professional signs each individual's record during each visit; and</li> <li>The housing officer initials the record when all detainee services are completed or at the end of the shift.</li> </ul>				All activities are recorded on the Inmate Behavior Log.
A new record is created for each week the detainee is in Administrative Segregation.  • The weekly records are retained in the SMU until the detainee's return to the general population.				
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

#### **REMARKS:**

Administrative Detention is designed for maximum supervision of these detainees.

		_ ^
AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c
AUDITOR S SIGNATURE / DATE	•	$\square$ $\mathscr{O}$

## SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

**POLICY:** EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

COMPONENTS	Y	N	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	$\boxtimes$			Policy and Procedures section 4.03, Disciplinary Plan.
The sanctions for violations committed during one incident are limited to 60 days.				The maximum sanction is 30 days.
A completed Disciplinary Segregation Order accompanies the detainee into the SMU.  • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	$\boxtimes$			The Disciplinary Segregation Order is provided to the detainee upon request.
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals.  • After each formal review, the detainee receives a written copy of the decision and supporting reasons.				These decisions are placed in the detainee file.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	$\boxtimes$			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	$\boxtimes$			
Living conditions in disciplinary SMUs remain the same regardless of behavior.  If no, does staff prepare written documentation for this action?  Does the OIC sign to indicate approval.	$\boxtimes$			
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.				
The quarters used for segregation are:      Well-ventilated.     Adequately lighted.     Appropriately heated.     Maintained in a sanitary condition.	$\boxtimes$			
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	$\boxtimes$			
The number of detainees confined to each cell or room is limited to the number for which the space was designate.  • Does the OIC approve excess occupancy on a temporary basis?	$\boxtimes$			One detainee per cell.
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.				This facility has the capability to shut off the water to each cell in a dry cell setting.
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	$\boxtimes$			
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day.  • Food is not used as punishment.				
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.				
Detainees receive, unless documented as a threat to security:  • Barbering services;	$\boxtimes$			

### SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

**POLICY:** EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

COMPONENTS	Y	N	NA	REMARKS
Recreation privileges;				
Other-than-legal reading material;				
Religious material;  The same correspondence privileges as other detaineds and				
<ul> <li>The same correspondence privileges as other detainees; and</li> <li>Personal legal material.</li> </ul>				
When phone access is limited by number or type of calls, the				
following areas are exempt:				- · · · · · · · · · · · · · · · · · · ·
Calls about the detainee's immigration case or other legal				Each sally port has a phone. If this phone malfunctions, there is
matters;	$\boxtimes$			also a portable phone that can be
Calls to consular/embassy officials; and				placed into the cell.
Calls during family emergencies (as determined by the				•
OIC/Warden).  A health care professional visits every detainee in disciplinary				Procedures were developed and
segregation every week day.				implemented requiring health
The shift supervisor visits each segregated detainee daily	$\boxtimes$			care professionals to visit
Weekends and holidays.				detainees in Disciplinary
				Segregation daily.
SMU detainees are allowed visitors, in accordance with the "Visitation" standard.				Detainees in Disciplinary Segregation are allowed visits
VISITATION Standard.	$\boxtimes$			when the other detainees are
				locked down.
SMU detainees receive legal visits, as provided in the "Visitation"				·
standard.	$\boxtimes$	П	П	
Legal service providers are notified of security concerns	L N			
arising before a visit.  Visits from clergy are allowed.				
The clergy member is given the option of visiting/not seed to be a seed to be				
visiting the segregated detainee.	F-7	F-1	_	
<ul> <li>Violent/uncooperative detainees are denied access to</li> </ul>				
religious services when safety and security would otherwise				_
be affected.				
SMU detainees have law library access.  • Violent/uncooperative detainees retain access to the law				
library unless adjudicated a security threat in writing.				
Legal material brought to individuals in the SMU on a case-	$\boxtimes$	П		Legal materials are requested
by-case basis.		_		through the Programs Manager.
Staff documents every incident of denied access to the law				
library.				
All detainee-related activities are documented, e.g. meals served,	$\boxtimes$			
recreation activities, visitors, etc.  The SPC's, the Special Management Housing Unit Record (I-888or				
equivalent), is prepared as soon as the detainee is placed in the SMU.				All activities are recorded on the
• All I-888s are filled out by the end of each shift.	$\boxtimes$			electronic Jail Management
The <u>CDF/IGSA</u> facility use Form.	_	_		System.
• I-888 (or equivalent local form).				

#### SPECIAL MANAGEMENT UNIT **DISCIPLINARY SEGREGATION** POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS. NA COMPONENTS REMARKS 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 health care official sign individual records after each These activities are recorded in $\boxtimes$ the Inmate Behavior Log. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the

REMARKS:	

Procedures were developed and implemented requiring health care professionals to visit detainees in Disciplinary Segregation daily. It is important for qualified health professionals to visit inmates in Disciplinary Segregation daily and document visits.

AT-RISK

REPEAT FINDING

DEFICIENT

·			_
b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c	Jo-
,			•

**ACCEPTABLE** 

### TOOL CONTROL

POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.

COMPONENTS	Y	N	NA	REMARKS
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.				The Training and Compliance Sergeant is responsible for developing tool control procedures.
Department heads are responsible for implementing this standard in their departments.				The Food Administrator and Medical Administrator have implemented standards for their staff to follow.
Tool inventories are required for the:  • Maintenance Department;  • Medial Department;  • Food Service Department;  • Electronics Shop;  • Recreation Department; and  • Armory.				Food Service has an inventory of all knives and scissors. All syringes are inventoried and accounted for in the hospital. Originally, the storage cabinet for syringes was not locked but a lock was placed on the cabinet during the review.
<ul> <li>The facility has a policy for the regular inventory of all tools.</li> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	×			Tools and equipment are only kept in Food Service and the Medical Department. There are no other tools inside the institution. Routine maintenance is provided by county maintenance workers.
The facility has a tool classification system. Tools are classified according to:  • Restricted (dangerous/hazardous); and  • Non-Restricted (non-hazardous).				The facility is working on a classification system.
Department heads are responsible for implementing tool-control procedures.	×			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.		$\boxtimes$		Tools are not marked.
<ul> <li>The facility has an approved tool storage system.</li> <li>The system ensures that all stored tools are accountable.</li> <li>Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.</li> </ul>				Food Service knives and scissors are placed on a secured shadow board.
Each facility has procedures for the issuance of tools to staff and detainees.				
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include:  • Verbal and written notification;  • Procedures for detainee access; and  • Necessary documentation/review for all incidents of lost tools.	⊠			Procedures were added to the tool control policy during the review.
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.		$\boxtimes$		Policy does not indicate procedures for survey of worn out tools. The facility is developing a policy to address

### TOOL CONTROL

POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.

COMPONENTS	Y	N	NA	REMARKS
				this issue.
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.				Procedures for the accountability of tools were developed during this review.
□ ACCEPTABLE □ DEFICIENT □	AT-RISI	<u> </u>		REPEAT FINDING

### REMARKS:

While the facility failed to meet specific component areas noted above, policy and procedures are under development and full compliance with ICE standards is anticipated by the time detainees arrive.

b6,b7c	/ April 16, 2009
AUDITOR'S S	SIGNATURE / DATE



### TRANSPORTATION LAND TRANSPORTATION

**POLICY:** THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

☑ STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
Transporting officers comply with applicable local, state, and federal	<u></u>		$\boxtimes$	
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			$\boxtimes$	•
employment.			IZSI.	
Supervisors maintain records for each vehicle operator.	П			
Officers use a checklist during every vehicle inspection.		<del></del>		
Officers report deficiencies affecting operability; and			_	
Deficiencies are corrected before the vehicle goes back into			$\boxtimes$	
service.	İ			·
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;		l		
Drive a 50-hour maximum in a given work week; a 70-hour				
maximum during eight consecutive days;				
<ul> <li>During emergency conditions (including bad weather),</li> </ul>				
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.	<u> </u>	l	_	
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.	<u> </u>	<u> </u>		
Positive identification of all detainees being transported is confirmed.				
All detainees are searched immediately prior to boarding the vehicle		l 🗆		!
by staff controlling the bus or vehicle.			<u> </u>	
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.			$\boxtimes$	
Protective vests are provided to all transporting officers.	<del></del>			
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				
are present.	_		_	
			<del>'</del>	<del> </del>

### TRANSPORTATION LAND TRANSPORTATION

**POLICY:** THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

☑ STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED 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.				
<ul> <li>The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.).</li> <li>Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative;</li> <li>Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.</li> </ul>			×	
Vehicles have:				
The vehicles are clean and sanitary at all times.				
Personal property of a detainee transferring to another facility is: <ul> <li>Inventoried;</li> <li>Inspected; and</li> <li>Accompanies the detainee.</li> </ul>				
The following contingencies are included in the written procedures for vehicle crews:  • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors				
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING

**REMARKS:** This facility does not have ICE detainees. A comprehensive transportation policy and procedure will need to be developed once the facility starts receiving detainees.

AUDITOR'S SIGNATURE / DATE

b6,b7c b6,b7c b6,b7c b6,b7c

USE OF FOR	RCE			
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. (OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN TH	ONLY THA STAFF ANI D. PHYSIC	T AMOUN D OTHERS AL RESTR	T OF FOR	RCE NECESSARY TO GAIN CONTROL VENT SERIOUS PROPERTY DAMAGE
COMPONENTS	YES	No	NA	REMARKS
Written policy authorizes staff to respond in an immediate-use-of- force situation without a supervisor's presence or direction.	$\boxtimes$			Policy and Procedures section 6.11, Use of Force.
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.				
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.				
The facility subscribes to the prescribed Confrontation Avoidance Procedures.  • Ranking detention official, health professional, and others confer before every calculated use of force.	×			
When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique.  • Under staff supervision.	×			The local Sheriff's Department SWAT team is responsible for all calculated uses of force. They are trained in the Use-of-Force Team technique.
Staff members are trained in the performance of the Use-of-Force Team Technique.	$\boxtimes$			This training was implemented into the facility's 16 hours of annual training.
All use-of-force incidents are documented and reviewed.				
<ul> <li>Staff:</li> <li>Do not use force as punishment;</li> <li>Attempt to gain the detainee's voluntary cooperation before resorting to force;</li> <li>Use only as much force as necessary to control the detainee; and</li> <li>Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>				
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.				During the review, language was incorporated into the Use of Force policy to bring this component in compliance.
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	×			·
Standard procedures associated with using four-point restraints include:  Soft restraints (e.g., vinyl);  Descript the detained appropriately for the temperature:				A restraint chair is utilized in the in-take area and mainly used

### FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

 $\boxtimes$ 

Dressing the detainee appropriately for the temperature;

Turning the bed-restrained detainee often enough to

Medical evaluation of the restrained detainee twice per

Checking the detainee at least every 15 minutes;

A bed, mattress, and blanket/sheet;

Logging each check;

eight-hour shift; and

prevent soreness or stiffness;

for detainees coming off of the

street who are under the

narcotics. They are checked

are logged in the post log.

every 15 minutes and the checks

influence of alcohol or

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE	ONLY THA STAFF AND D. PHYSIC	T AMOUN D OTHERS AL RESTE	T OF FOR	RCE NECESSARY TO GAIN CONTROL VENT SERIOUS PROPERTY DAMAGE
COMPONENTS	YES	No	NA	REMARKS
<ul> <li>When qualified medical staff is not immediately available, staff position the detainee "face-up".</li> </ul>				
The shift supervisor monitors the detainee's position/condition every two hours.  • He/she allows the detainee to use the rest room at these times under safeguards.	$\boxtimes$			Language was added to policy to indicate a shift supervisor will check the detainee's condition every two hours.
All detainee checks are logged.	$\boxtimes$			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.				
<ul> <li>When the OIC authorizes use of non-lethal weapons:</li> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	⊠			There was no language in the policy for the OIC to authorize the use of non-lethal weapons. This language was included during the review.
Special precautions are taken when restraining pregnant detainees.  • Medical personnel are consulted				Language was added to policy to indicate special precautions need to be taken when restraining female inmates.
Protective gear is worn when restraining detainees with open cuts or wounds.	$\boxtimes$			Protective gear includes rubber gloves and facemasks.
Staff documents every use of force and/or non-routine application of restraints.	$\boxtimes$			
It is standard practice to review any use of force and the non-routine application of restraints.				The use of force policy indicates the Sheriff, Jail Administrators, and the OIC review any use of force.
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees.  • Specialized training is given and Officers are certified in all devices they use.				
In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?				Use of force situations are documented on an incident report.
ACCEPTABLE DEFICIENT	AT-RISE	K		REPEAT FINDING
REMARKS:  The staff at this facility do not recall a specific incident of a calculated use of force; however, procedures are in place should the situation arise. Tasers are utilized at the facility. Taser use is limited to detention staff trained in their operation by certified instructor. Taser use is authorized to control detainees exhibiting violent or threatening behavior. The facility has a policy regarding				

**USE OF FORCE** 

the use of tasers.

b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE

### STAFF DETAINEE COMMUNICATIONS

**POLICY:** PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.

ACCEPTABLE TIME FRAME.		<u></u>		
COMPONENTS	Y	N	NA	REMARKS
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.				The facility is not currently under ICE contract. The facility is aware of this standard. ICE officials indicate ICE staff will conduct announced and unannounced visits once the contract is approved and ICE detainees are in place.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.				The facility is not currently under ICE contract.
Scheduled visits are posted in ICE detainee areas.			$\boxtimes$	The facility is not currently under ICE contract.
Visiting staff observe and note current climate and conditions of confinement at each IGSA.				The facility is not currently under ICE contract. Observations and visits will be conducted once detainees are housed at the facility
ICE information request Forms are available at the IGSA for use by ICE detainees.				There are no detainees currently at the facility. Only local information request forms are available.
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	. 🗆			The facility is aware of this standard and will comply with the standard once ICE detainees arrive.
ICE staff responds to a detainee request from an IGSA within 72 hours.				The facility is aware of this standard and will comply with the standard once ICE detainees arrive.
ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.			×	The facility is aware of this standard and will comply with the standard once ICE detainees arrive.
□ ACCEPTABLE □ DEFICIENT □ AT-RISK □ REPEAT FINDING				

### REMARKS:

ICE staff will respond to detainee needs and requests per the standard once an ICE contract has been established.

h6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE b6,b7c b6,b7c

#### DETAINEE TRANSFER STANDARD

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

COMPONENTS	Y	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				
Notification includes the reason for the transfer and the location of the new facility.	$\boxtimes$			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	$\boxtimes$			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	$\boxtimes$			
<ul> <li>Facility policy mandates that:</li> <li>Times and transfer plans are never discussed with the detainee prior to transfer;</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility; and</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	$\boxtimes$			
The detainee is provided with a completed Detainee Transfer Notification Form.				
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	$\boxtimes$			
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.	$\boxtimes$			
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	×			
Transfer and documentary procedures outlined in Section C and D are followed.	×			
Meals are provided when transfers occur during normally schedule meal times.	$\boxtimes$			
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	$\boxtimes$			
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.				

### 

#### **REMARKS:**

The facility is not currently under ICE contract. ICE detainee releases will be coordinated through ICE staff.

b6,b7c / April 16, 2009 AUDITOR'S SIGNATURE / DATE	b6,b7c	b6,b7c /2
AUDITOR S SIGNATURE / DATE		//
		$\sim$

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

JUN 1 0 2009



MEMORANDUM FOR:

Scott Baniecke

Field Office Director

FROM:

Robert P. Helwig Assistant D: **Assistant Director for Management** 

SUBJECT:

Freeborn County Adult Detention Center Initial Review

The initial review of the Freeborn County Adult Detention Center, conducted on April 14-16, 2009, in Albert Lea, Minnesota, has been received. The Review Authority has assigned an interim rating of **Deficient** due to the use of Electro Muscular Disruption Devices (EMDDs) in this facility; otherwise a rating of "Acceptable" would have been assigned. The policy regarding the use of EMDDs is being revised and no Plan of Action is required at this time.

The G-324A worksheets provided by the Reviewer-in-Charge (RIC) indicated the facility did not have any deficient standards. However, the Review Authority is requiring a Plan of Action for the deficient items identified in the review worksheets under the Correspondence and Other Mail, Food Service, Funds and Personal Property, Detainee Telephone Access, Hunger Strikes, Environmental Health and Safety, Key and Lock Control, and Tool Control standards. These issues must be corrected prior to placement of Immigration and Customs Enforcement (ICE) detainees. Drafts of the review documents were provided to April 21, 2009, for dissemination to the Field Office.

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-324A Detention Facility Review Form, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.

Subject: Freeborn County Adult Detention Center Initial Review Page 2

- 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.
- 3) The Field Office Director is responsible for initiating the Office of Detention and Removal Detention Services Contract/Agreement Request.
- 4) Once an Intergovernmental Service Agreement is in place, the Field Office Director shall request HQ/DSCU to schedule a subsequent review within 90 days after placement of ICE detainees.

The Field Office is responsible for assisting the facility to respond to the ICE findings when assistance is requested. Notification to the facility shall include information that this assistance is available.

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

(b)(6), (b)(7)c Acting Deputy Assistant Director, Detention Management Division at (202) 732-

cc: Official File

ICE:HQDRO:VFranco:2-3457:4/27/09

### **HEADQUARTERS EXECUTIVE REVIEW 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 Robert P. Helwig **Assistant Director for Management** Superior **Final Rating:** Good Acceptable Deficient At-Risk No Rating The Review Authority has downgraded the recommended rating of "Acceptable" to "Deficient" Comments: due to the use of Electro Muscular Disruption Devices (EMDDs). No Plan of Action is required in regard to the use of EMDDs. A Plan of Action is required to address the deficiencies in the Correspondence and Other Mail, Food Service, Funds and Personal Property, Detainee Telephone Access, Hunger Strikes, Environmental Health and Safety, Key and Lock Control, and Tool Control standards.