ICE Detention Standards Compliance Review

Otero County Processing Center

March 3-5, 2009

REPORT DATE – March 12, 2009



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

Creative Corrections 6415 Calder, Suite B Beaumont, TX 77706

U.S. Immigration and Customs Enforcement Detention Standards Compliance Unit 500 12th St, SW Washington, DC 20024

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March 13, 2009

MEMORANDUM FOR:

James T. Hayes, Jr., Director Office of Detention and Removal Operations

FROM:

Reviewer-In-Charge

SUBJECT:

Otero County Processing Center Follow-Up Review

Creative Corrections conducted a follow-up review of the Otero County Processing Center (OCPC) located in Chaparral, New Mexico, on March 3-5, 2009. The facility received a "Deficient" rating during the September 2008 review. The county has subcontracted with Management and Training Corporation (MTC), a private prison company, to operate the prison facility. As noted on the attached documents, the team of Subject Matter Experts included bebre for Security; **March 6607**, for Health Services; **Matter Experts**, for Environmental Health and Safety; and **March 5607**, for Food Services.

A closeout meeting was held on March 5, 2009, with the bob/reader, Warden; bob/reader, Deputy Warden; bob/reader, Senior Director MTC; bob/reader, Risk Management; bob/reader, Nakamoto; and a number of facility staff. ICE representatives bob/reader bob/

Type of Review

This review is a scheduled follow-up review to measure compliance with ICE National Detention Standards (for facilities used over 72 hours) to measure corrective action progress since the review conducted six months ago.

Review Summary

The OCPC is not accredited by the National Commission on Correctional Health Care, American Correctional Association, or the Joint Commission on Accreditation of Healthcare Organizations.

Standards Compliance

The following statistical information outlined provides a direct comparison of the 2008 Review and the follow-up review for 2009.

September 2008	Review	March 2009	Review
Compliant	35	Compliant	37
Deficient	3	Deficient	0
At-Risk	0	At-Risk	0
Non-Applicable	0	Non-Applicable	1

The three deficient areas during the September review were Food Service, Environmental Health and Safety, and Land Transportation, which gave way to the overall rating of "Deficient."

Recommended Rating and Justification

It is the Reviewer-in-Charge (RIC) recommendation that the facility receive a rating of "Good." Based on the review findings, a plan of action should not be necessary.

<u>RIC</u> Assurance Statement

All findings of this review have been documented on the Detention Review Worksheet attached and are supported by the written documentation contained in the review file.

A. Type of Facility Reviewed

_	
	ICE Service Processing Center
	ICE Contract Detention Facility
X	ICE Intergovernmental Service Agreement

B. Current Inspection

Type of Inspection	
Field Office HQ Inspection	
Date[s] of Facility Review	
March 3-5, 2009	

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review September 16-18, 2008	
Previous Rating	ble 🛛 Deficient 🗌 At-Risk

D. Name and Location of Facility

Name
Otero County Processing Center
Address (Street and Name)
26 McGregor Range Road
City, State and Zip Code
Chaparral, New Mexico 88081
County
Otero
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)
b6.b7c
Telephone # (Include Area Code)
575-824 b6:b7c
Field Office / Sub-Office (List Office with oversight responsibilities)
Chaparral, New Mexico
Distance from Field Office
0

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
RIC / Creative Corrections
Name of Team Member / Title / Duty Location
Corrections
Name of Team Member / Title / Duty Location
SME – Health Services / Creative Corrections
Name of Team Member / Title / Duty Location
SME - Security / Creative Corrections
Name of Team Member / Title / Duty Location
SME – Environmental Health & Safety / Creative Corrections

F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA
DROIGSA-08-0019	June 12, 2008
Basic Rates per Man-Day	· · · · · · · · · · · · · · · · · · ·
\$96.99	

Other Charges: (If None, Indicate N/A) N/A Estimated Man-days Per Year: 336,932

G. Accreditation Certificates

List all State or National Accreditation[s] received: None Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Co	ourt Order or Class Action Finding	
Court Order	Class Action Order	
The Facility has Signific	cant Litigation Pending	
Major Litigation	Life/Safety Issues	
Check if None.		- 1 ₁

I. Facility History

Date Built	· · ·		
June 2008			
Date Last Remodeled or Upgraded			
N/A			
Date New Construction / Bed space Added			
N/A			
Future Construction Planned			
Yes X No Date:			
Current Bed space	Future Bed space (# New Beds only)		
1,086	Number: 0 Date:		

J. Total Facility Population

Total Facility Intake for previous 12 months 5,600
Total ICE Man-days for Previous 12 months 5,600

K. Classification Level (ICE SPCs and CDFs Only)

· · · · ·	L-1	L-2	L-3
Adult Male	505	193	155
Adult Female	0	0	0

L. Facility Capacity

·	Rated	Operational	Emergency
Adult Male	1000	1086	0.
Adult Female	0	0	0
Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other	
Adult Male	839	0.51415		
Adult Female	0	0	0	
N. Facility Staffing	Level		<u> </u>	
Security: D2High		pport: b2High		

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Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information <u>must be completed</u> prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE' detainees at your facility.

Incidents	Description	Jan – Mar	Apr — Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	0 ·	0	Physical	Physical
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	0	0	16	18
Assault:	Types (Sexual Physical, etc.)	0	0	Physical	Physical
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	0	3	1
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	3	3
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
 	Actual	0	0	0	0
Grievances:	# Received	0	0	45	6
	# Resolved in favor of Offender/Detainee	0	0	18	5
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	I
	Number	0	0	0	1
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	0	0	28	30
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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Form G-324A SIS (Rev. 7/9/07)

Department Of Homeland Security Immigration and Customs Enforcement

	CE Detention Standards Review Summary Report	
the second se	eptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable	
	Access Standards	<u>1.</u> <u>2.</u> <u>3.</u> <u>4.</u> <u>5.</u>
1.	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
	ee Services	
5.	Admission and Release	
6.	Classification System	
7.	Correspondence and Other Mail	
8.	Detainee Handbook	
9.	Food Service	
10.	Funds and Personal Property	
11.	Detainee Grievance Procedures	
12.	Issuance and Exchange of Clothing, Bedding, and Towels	
13.	Marriage Requests	
14.	Non-Medical Emergency Escorted Trip	
15.	Recreation	
16.	Religious Practices	
17.	Voluntary Work Program	
Health	Services	
18.	Hunger Strikes	
19.	Medical Care	
20.	Suicide Prevention and Intervention	
21.	Terminal Illness, Advanced Directives and Death	
Securit	y and Control	
22.	Contraband	
23.	Detention Files	
24.	Disciplinary Policy	
25.	Emergency Plans	
26.	Environmental Health and Safety	
27.	Hold Rooms in Detention Facilities	
28.	Key and Lock Control	
29.	Population Counts	
30.	Post Orders	
31.	Security Inspections	
32.	Special Management Units (Administrative Segregation)	
33.	Special Management Units (Disciplinary Segregation)	
· 34.	Tool Control	
35.	Transportation (Land management)	
36.	Use of Force	
37.	Staff / Detainee Communication (Added August 2003)	
38.	Detainee Transfer (Added September 2004)	

All findings (Deficient and At-Risk) require written comment describing the finding and what is necessary to meet compliance.

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Form G-324A SIS (Rev. 7/9/07)

RIC Review Assurance Statement

By signing below, the Reviewer-In-Charge (RIC) certifies that all findings of noncompliance with policy or inadequate controls contained in the Inspection Report are supported by evidence that is sufficient and reliable. Furthermore, findings of noteworthy accomplishments are supported by sufficient and reliable evidence. Within the scope of the review, the facility is operating in accordance with applicable law and policy, and property and resources are efficiently used and adequately safeguarded, except for the deficiencies noted in the report.

Reviewer-In-Charge: (Print Name)	Signature
66,b7c	lo
Title & Duty Location	Date b6.67c
Reviewer-in-Charge/Creative Corrections	March 8, 2009

Team Members	
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Food Service SME, Creative Corrections	Health Services SME, Creative Corrections
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
beb7c Security SME, Creative Corrections	Corrections

Recommended Rating:

Superior
Good
Acceptable
Deficient
At-Risk

Comments:

The Otero County Processing Center had no deficient areas noted during this review and does not use Tasers. The facility had one detainee death during the past year, which occurred at an offsite medical center. The detainee was 58 years old and his death on 11-26-08 was related to a gastro-intestinal bleed secondary to cirrhosis of the liver.

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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

Local Jail – IGSA		
🔀 State Facility – IGSA		
ICE Contract Detention Facility		
Name		
Otero County Processing Center		
Address (Street and Name)		
26 McGregor Range Road		s.
City, State and Zip Code		
Chaparral, New Mexico 88081		
County		
Otero		
Name and Title of Chief Executive Officer (War	den/OIC/Superintendent)	
b6,07c		
Name and Title of Reviewer-In-Charge		
b6,b7c		
Date[s] of Review		
March 3-5, 2009		
Type of Review		
Headquarters 🗌 Operational 🗌 Specia	al Assessment Other	
		· · · · · · · · · · · · · · · · · · ·

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NOTE: FOR EACH STANDARD RATED <u>BELOW</u> ACCEPTABLE, FACILITIES MUST ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, <u>INCLUDING</u> 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 OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.					
COMPONENTS	Y .	N	NA	REMARKS	
The facility provides a designated law library for detainee use.				The law library is located in the multi-purpose building.	
The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.					
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.					
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.				The law library has four computers and no typewriters.	
In addition to the physical law library, detainees have access to the Lexis Nexis.electronic law library.	\boxtimes				
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.	X				
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.				b6.b7c SIEA, El Paso, updates LexisNexis & MTC provides the library equipment.	
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.				Requests are submitted to Lt.	
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.					
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.				Corrections Officer 166.57 acts as a translator. ICE is contacted if additional translators are needed.	
Detainces 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.	X				
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.					
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.					
ACCEPTABLE DEFICIENT	AT-RIS	K	[]]	REPEAT FINDING	

Local policy 7.1.1, Legal Issues, effective 6-1-08, ensures that detainees housed at the facility are afforded access to the law library and are provided legal materials, facilities, equipment, and the opportunity to prepare legal documents.

MTC provides the library equipment and ICE staff ensures that the LexisNexis is current at OCPC.

n / 3-5-09 b6.b7c AUDITOR'S SIGNATURE / DATE b6,b7c

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	Ν	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.				All detainees view an orientation video, receive a Detainee Handbook, and attend a Know your Rights presentation.	
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for conducting an initial health screening.				Medical staff conducts the medical screenings following booking.	
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.				ICE staff conducts the initial intake processing and provides the I- 213 form to the Otero classification unit.	
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.					
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.	\square				
Staff completes paperwork/forms for release as required.					
Acceptable Deficient At-Risk Repeat Finding					

REMARKS:

Local policies are sufficient to guide staff through the release/removal process. Detainee health, safety, and welfare are preserved.

ICE conducts the initial booking and the facility's booking unit continues the booking process. All releases are properly coordinated with ICE using the I-203 form.

b6,b7c **AUDITOR'S SIGNATURE / DATE**

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		· · ·			
COMPONENTS	Y	N	NA	REMARKS	
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	\boxtimes			The I-213 form is forwarded to the classification unit as the basis for detainee classification.	
 The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. 				Classification levels are I, II & III (low, medium and high). There are 20 housing areas at the facility.	
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.					
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/unconfirmed reports may be filed but are not used to score detainees classifications.					
Housing assignments are based on classification-level.	\boxtimes				
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.					
Detainee work assignments are based upon classification designations.	\boxtimes				
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	\boxtimes			Detainees can request reassessment at any time.	
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	\boxtimes			The written appeal is sent to the Deputy Warden for review.	
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	\boxtimes				
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	\boxtimes				
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.				Page 7 of the handbook details the classification process.	
Acceptable Deficient At-Risk Repeat Finding					

REMARKS:

Classified detainees are placed in proper categories at this facility. Staff relies on criminal history, and other associated behaviors to arrive at the proper classification. Detainees are separated when information warrants such measures. Detainees may appeal their classification levels at any time by completing a request form to the Deputy Warden. All detainees are classified upon arrival, before being admitted into the general population. Local policy 2.1.13 Detainee Classification and Separation effective, 2-11-09, guides the classification process.



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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.				Rules for correspondence are outlined on page 18 of 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.				The Detainee Handbook is in English and Spanish. If additional translators are needed ICE is contacted.
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.				Mail is normally distributed between 3:30 & 4:00 PM.
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).				The post office picks up mail between 11:00 AM & 1:00 PM.
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.				
Staff does not read incoming general correspondence without the Warden's prior written approval.				
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.				
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 official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.				
Staff maintains a written record of every item removed from detainee mail.	\boxtimes			A contraband log is maintained.
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.				A receipt is issued by Finance.
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A- files.				A logbook is maintained. ICE staff signs the log. A-files are maintained in El Paso.
Staff provides the detainee a copy of his/her identity document(s) upon request.				Detainees send a written request to ICE.

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 GUI	DELINES CO	DNCERNIN	IG CORRE	SPONDENCE AND OTHER MAIL.		
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.				Mailroom staff forwards prohibited items to the Captain.		
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.				Three general and five legal letters are permitted.		
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.				Stamps can be purchased through the Commissary.		
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	\boxtimes			Items are issued by security staff.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

The facility ensures that detainees have the ability to send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail and correspondence is permitted subject to guidelines and limitations. Policy 5.2.2, Correspondence and other Mail, effective 1-21-09, outlines the facility mail guidelines



DETAINEE HANDBOOK

51 **e** 4

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 FACI COMPONENTS	LITY. Y	l N	NA	REMARKS		
The detainee handbook is written in English and translated into Spanish,		1	·			
or into the next most-prevalent Language(s).	\square					
The handbook is supplemented by the facility orientation video, where	\square					
one is provided.						
All staff members receive a handbook and training regarding the handbook contents.						
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.						
There an annual review of the handbook by a designated committee or staff member.						
The detainee handbook addresses the following issues:			· .			
• Personal Items permitted to be retained by the detainee; and	\boxtimes					
• Initial issue of clothes, bedding and personal hygiene items.						
The detainee handbook states in clear language the basic detainee responsibilities.	Ø					
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.				The period for when a medical exam will be conducted was not found in the handbook.		
The handbook describes the facility, housing units, dayrooms, in-dorm 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;	·]			The handbook does not mention		
smoking policy; clothing exchange schedules; and, if authorized, clothes				the different times throughout the		
washing and drying procedures, and expected personal hygiene				day that counts are conducted.		
practices.						
The handbook describe times and procedures for obtaining disposable				The language found in the		
razors, and allows that detainees attending court will be afforded the				handbook does not comply with		
opportunity to shave first.				the language found in the ICE Standard. Razors are to be issued		
		\boxtimes		daily and returned once the		
				detainee is finished shaving. The		
				handbook states razors are issued		
				once a week. There is no written		
				policy regarding razor issue.		
The handbook describes barber hours and hair cutting restrictions.	\boxtimes					
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.	57		· · · · · · · · · · · · · · · · · · ·			
The handbook addresses religious programming.	\boxtimes					
The handbook states times and procedures for commissary or vending	\boxtimes					
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					

DE TAINEE HAT POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOO			VEDVIEV	VOR AND CLUDE TO THE DETENTION				
POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE H								
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 FACIL		, ,						
Components	Y	N	NA	REMARKS				
The handbook describes attorney and regular visitation hours, policies,	\boxtimes							
and procedures.								
The handbook describes the facility contraband policy.	X							
The handbook describes the facility visiting hours and schedule, and								
visiting rules and regulations.								
The handbook describes the correspondence policy and procedures.	\square							
The handbook describes the detainee disciplinary policy and procedures,								
including:								
 Prohibited acts and severity scale sanctions; 	\boxtimes							
• Time limits in the Disciplinary Process; and								
Summary of the Disciplinary Process.								
The grievance section of the handbook explains all steps in the			1. 1.					
grievance process – Including:	÷							
 Informal (if used) and formal grievance procedures; 								
• The appeals process;								
• <u>In_CDF</u> facilities: procedures for filing an appeal of a			-					
grievance with ICE.	\boxtimes							
• Staff/detainee availability to help during the grievance process.								
• Guarantee against staff retaliation for filing/pursuing a								
grievance.								
• How to file a complaint about officer misconduct with the	1. A.							
Department of Homeland Security.		L						
The detainee handbook describes the medical sick call procedures for	\bowtie							
general population and segregation.				· · · · · · · · · · · · · · · · · · ·				
 The handbook describes the facility recreation policy including: Outdoor recreation hours. 	\boxtimes							
		┝╌┨┈						
Indoor recreation hours. The local descent of the detained descent of the desile line and			· · · · · · · · · · · · · · · · · · ·					
The handbook describes the detainee dress code for daily living; and work assignments.	\boxtimes							
The handbook specifies the rights and responsibilities of all detainees.								
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

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The language found in the handbook regarding razor issue conflicts with the direction given in the ICE standard.

Initial medical examination is not identified in the Detainee Handbook.

Count times are not mentioned in the handbook.

RECOMMENDATION: A table of contents should be added to the front of the handbook.

b6,b7 AUDITOR'S SIGNATURE / DATE

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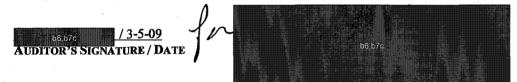
FOOD SER	VICE	· · ·						
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH								
THE HIGHEST SANITARY STANDARDS.	Y	NT NT	NT.A	Davidancia				
COMPONENTS The food service program is under the direct supervision of a <u>professionally trained</u> 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.	×			REMARKS The FSA is trained by the State of New Mexico Environment Department for Food Service Safety. The FSA also had training in a Supervisory Development Program.				
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.				The FSA has three assistants and there is always one of the managers on duty.				
 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 				The FSA conducts meetings with all staff, which include review of the ICE Food Service Standards.				
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.				When knives are issued, the detainees are moved to the dining room and the kitchen is locked down while the knives are secured to the workstations.				
When necessary, special procedures govern the handling of food items that pose a security threat.				Yeast is controlled and only staff handles the yeast.				
Operating procedures include daily searches (shakedowns) of detainee work areas.				Detainee workers are searched prior to returning to their housing units. Officers assigned to the food service area search all working areas.				
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.		\boxtimes		All counts are conducted by detention officers assigned to the food service area.				
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.								
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			The facility has been operational for seven months.				
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	\boxtimes							
 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. 				The orientation is conducted by the Risk Management Manager, b6,b7c All training is documented and kept on file.				
The Cook Supervisor documents all training in individual detainee detention files.								
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.								

FOOD SERVICE								
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.								
THE HIGHEST SANITARY STANDARDS. COMPONENTS	Y	N	NA	REMARKS				
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.				Detainces are served three meals a day. Breakfast 0500 Lunch 1200 Dinner 1600				
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	\boxtimes							
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.								
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).				Oven Fried Chicken, Lasagna, Hot Dogs, Burritos, Yakisoba, Hamburgers, Fish, and Pork Adobe.				
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.				Armed Forces Recipes are used.				
 The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA 				The Cook Foreman is not allowed to change any menu items. The FSA or Assistant are always on-duty and retain menu- change authority. They do document each substitution and forward to the FSA as well as the Warden.				
All staff and volunteers know and adhere to written "food preparation" procedures.								
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.				Detainees who adhere to particular religious dietary laws are referred to the Chaplain.				
 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: 	\boxtimes							
 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. 								
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.								

FOOD SERV	VICE		· · · ·	
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUT THE HIGHEST SANITARY STANDARDS.	FRITIOUS A	ND APPET	IZING MEA	LS, PREPARED IN ACCORDANCE WITH
COMPONENTS	Y	Ν	NA	REMARKS
 The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. 				
 Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 				
The food service program addresses medical diets.	\boxtimes			Medical diets are provided as required.
Satellite-feeding programs follow guidelines for proper sanitation.				Staff follows satellite feeding guidelines for proper sanitation and food temperatures.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.				Temperatures for all foods are maintained at the prescribed safe range.
All meals are provided in nutritionally adequate portions.	\boxtimes			
Food is not used to punish or reward detainees based upon behavior.				Food is not used as a reward or as punishment.
 The food service staff instructs detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food; and The sanitary operation, care, and maintenance of equipment. 				
Everyone working in the food service department complies with food safety and sanitation requirements.				All staff complies with safety and sanitation requirement, wearing hairnets and gloves.
 Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. Who conducts the inspections? 				Inspections are conducted by the Risk Manager weekly. The medical staff also conducted bi- monthly inspections.
Equipment is inspected for compliance with health and safety codes and regulations. When was the most recent inspection? Which agency conducted the inspection?				The State of New Mexico Environment Department conducts annual inspections; most recently on 11-4-08.
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	\boxtimes			
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.				The temperatures for the dish machine are taken three times a day and documented on the daily log. The FSA also runs a temperature strip for the final rinse; it is kept with the daily log for all three meals.

FOOD SERVICE								
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.								
Components	Y	N	NA	REMARKS				
Staff documents the results of every refrigerator/freezer temperature check.				Temperatures are documented on all refrigerators/freezer as well as all hot boxes and temperature holding equipment.				
The cleaning schedule for each food service area is conspicuously posted.								
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.								
Storage areas are locked when not in use.				A staff member is always present when the storage areas are open. Detainees are not allowed in the storage areas.				
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

The Food Service Department was found deficient during the previous ADR, 9-18-08. All unacceptable areas have been corrected. The staff of this department did an excellent job moving forward toward compliance with ICE standards.



FUNDS AND PERSONAL PROPERTY

POLICY: ALL FACILITI	ES WILL IMPL	EMENT PROCE	DURES TO CO	NTROL AND SA	FEGUARD DETAINEE	S' PERSONAL PRO	PERTY. PROCEDU	RES WILL
PROVIDE FOR THE SE	CURE STORA	GE OF FUNDS	, VALUABLES	, BAGGAGE A	ND OTHER PERSON/	L PROPERTY; TI	IE DOCUMENTAT	ION AND
RECEIPTING OF SURRE	NDERED PRO	PERTY; AND T	HE INITIAL AN	ID REGULARLY	SCHEDULED INVEN	TORYING OF ALL	FUNDS, VALUAB	LES, 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).				Local policy is in place to address this component (#2.1.11, Protection from Harm, Detainee Funds and Personal Property, 9-26-08).			
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.							
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, 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.				Audits of baggage and non- valuable property are conducted twice a year.			
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.	\boxtimes						
Staff procedures follow written policy for returning forgotten property to detainees.							
Property discrepancies are immediately reported to the CDEO or Chief of Security.				If there were a property discrepancy, it would be noted and reported to the CDEO or Chief of Security.			
Staff follows written procedures when returning property to detainees.	\square						
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.				All procedures are followed by staff when handling detainees' property.			
 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. 							
 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. 							
ACCEPTABLE DEFICIENT	ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS

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Local policy calls for audits of baggage and non-valuable property at least twice a year, contrary to ICE standard, which requires quarterly audits.

The facility maintains accurate records for personal property and personal funds. Detainee property is accurately inventoried and stored according to policy. The work area, in which these functions are performed, is neat, well organized, and clean.

b6,b7c b6,b7c **AUDITOR'S SIGNATURE / DATE**

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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. 				
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. 				
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.				
There are documented or substantiated cases of staff harassing,				
disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint:				
If yes, explain.				
 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. 				Logs are computer generated along with graphs.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				
Acceptable Deficient] AT-RIS	к		REPEAT FINDING

REMARKS:

A written program is in place to direct and assist detainees in the grievance process. All ICE Standard components are found in the written plan. The grievance log is well organized and easy to follow.

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GROUP LEGAL RIGHTS PRESENTATIONS

POLICY: FACILITIES HOUSING ICE DETAINEES 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 hours in advance and sign-up sheets are available and accessible.				No posters or sign-up sheets are posted. The Know Your Rights video and presentation are mandatory for detainees.			
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.				No detainee has been denied permission to attend a presentation.			
When the number of detainces allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainces signed up may attend.				Three sessions are held each week.			
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.	\boxtimes						
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.				The Diocesan Migrant & Refugee Services, Inc. conducts three weekly presentations from 9A-11A.			
Staff permits presenters to distribute ICE-approved materials.							
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.				A minimum of two security staff are present.			
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							
ACCEPTABLE DEFICIENT	AT-RISH	REPEAT FINDING					

REMARKS:

The Diocesan Migrant & Refugee Services, Inc. conducts three weekly Know Your Rights presentations from 9A-11A at the facility. A 'Guide for Detained Immigrants' handout is also distributed. Presentations are routine and mandatory for detainees, thus there is no need for posters announcing these presentations.

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

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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.								
				F				
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 detainces. 								
			· · · · · · · · · · · · · · · · · · ·					
All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:								
• One uniform shirt and one pair of uniform pants, or one								
• One uniform sint and one pair of uniform pairs, of one jumpsuit;								
 One pair of socks; 								
 One pair of socks, One pair of underwear (Daily change); and 								
 One pair of underwear (Daily change), and One pair of facility-issued footwear. 								
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	57							
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	\boxtimes							
garments daily.			L,]					
Volunteer detainee workers are permitted to exchange outer garments	\boxtimes							
more frequently.			ا لله					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

REMARKS:

Clothing, linens, and towels are in sufficient quantity for detainees at this facility.

b6.b7c 5 .09 3. b6,b7c AUDITOR'S SIGNATURE /

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MARRIAGE REC	QUESTS	· · ·				
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.						
COMPONENTS	Y	N	NA	REMARKS		
The Field Office considers detainee marriage requests on a case-by-case basis.				As outlined in Policy #5.2.5, Family and Community Ties, Marriage Request, effective 8-1- 08.		
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.						
It is standard practice to require a written request for permission to marry.	\square					
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.						
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	\boxtimes					
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes					
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

The proper documentation is on file and completed according to Otero County Processing Center policy and the ICE standards.

n _____ b6,b7c b6.b7c AUDITOR'S SIGNATURE / DA

NON-MEDICAL EMERGENCY ESCORTED TRIPS

POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES 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: 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. 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 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, 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 detainee who violates trip rules.					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

DELETE THE Assistant Field Office Director, and the bebre the period of the Non-Medical Emergency Escorted Trips.

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

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RECREATION

POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.							
COMPONENTS	Y	N	NA	REMARKS			
The facility has a recreation program and facility.				Policy #5.3.1, Programs, Exercise and Recreation, effective 1-15-09.			
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.				The facility has a Recreational Specialist and an Assistant Recreational Specialist.			
Regular maintenance keeps recreational facilities and equipment in good condition.							
The recreational specialist or trained equivalent supervises detained recreation workers.				There are no detainces assigned to work in recreation.			
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.				There are board games, card games, and TV.			
Outside activities are restricted to limited-contact sports.				Handball, Basketball, or Soccer are the only outside activities.			
Each detainee has the opportunity to participate in daily recreation.							
Detainces have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.							
Staff checks all items for damage and condition when equipment is returned.							
Staff conducts searches of recreation areas before and after use.				Searches are conducted before and after recreation times on detainees and areas.			
All recreation areas under constant staff supervision.							
Supervising staff is equipped with radios.							
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 explanation when a panel revokes his/her recreation privileges.							
Special programs or religious activities are available to detainees.							
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.				No volunteers are used for recreation at this facility.			
Visitors, relatives, or friends are not allowed to serve as volunteers.				There are no volunteers used for the recreation program at this facility.			
If outdoor recreation is offered, check this box. No further information is required when outdoor 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 six- month 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.							

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.

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RECREATION					
POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROG	RAMS ANI	ACTIVIT	IES TO AI	L ICE DETAINEES, TO THE EXTENT	
POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTI	ECT THEIR	SAFETY A	ND WELF	ARE.	
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.					
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 AT-RISK REPEAT FINDING					

The facility provides 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. Indoor and outdoor recreation schedules allow detainee access to recreation a minimum of one hour, daily, five days a week.

b6,b7c AUDITOR'S SIGNATURE / DATE

RELIGIOUS PRACTICES

POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.

COMPONENTS	Y	N	NA	REMARKS	
Detainees are allowed to engage in religious services.				Policy #5.3.4, Programs, Religious Programs, effective 1- 12-09, provides for religious programming.	
Space is available for detainees to conduct religious services.	X			·	
 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. 				If a detainee requests observance for a religious holy day, they are to submit a request to the Chaplain Charles Berry.	
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes				
Volunteer's credentials are checked and verified before allowing participation in detainee programs.				There are volunteer Clergymen for the different faith groups at this facility; credentials are verified and an NCIC check is performed.	
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.				Chaplains conduct rounds so that all detainees are provided ministry services.	
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

The facility provides detainees of all faiths with reasonable and equitable opportunities to participate in the practice of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary constraints.

b6,b7c **AUDITOR'S SIGNATURE / DATE**

DETAINEE TELEPHONE ACCESS

POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAIN	EES' REAS	ONABLE AI	POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.						
COMPONENTS	Y	Ν	NA	REMARKS					
Detainees are allowed access to telephones during established facility waking hours.				Access to phones is from 8:00 AM-10:00 PM.					
Upon admittance, detainees are made aware of the facility's telephone access policy.				The phone policy is addressed in the Detainee Handbook, the orientation video, and information signs posted in the housing units.					
Access rules are posted in housing units.	\boxtimes								
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.				The Detainee Handbook and orientation video are in Spanish. If other translators are needed, ICE is contacted and other resources are made available.					
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	\boxtimes			The phone to detainee ratio is 4:50.					
Telephones are inspected regularly by facility staff to ensure that they are in good working order.		. 🔲		Phones are inspected regularly by ICE staff and checks are documented.					
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.				The service provider is Public Communications Service (PCS).					
The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.									
Detainees are afforded a <i>reasonable degree of privacy</i> for legal phone calls.									
A procedure exists to assist a detainee who is having trouble placing a confidential call.									
The facility provides the detainees with the ability to make non-collect (special access) calls.	\boxtimes								
Special Access calls are at no charge to the detainees.	\boxtimes								
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.									
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate 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 Legal Services List".	\boxtimes								
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.				Detainees are given a 3-minute call upon arrival.					
Any telephone restrictions are documented.	\boxtimes								
The facility has a system for taking and delivering emergency detainee telephone messages.				Staff verifies the emergency and relays the message to the detainee.					
Emergency phone call messages are immediately given to detainees.									
Detainees are allowed to return emergency phone calls as soon as possible.									

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.							
COMPONENTS	Y	N	NA	REMARKS			
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.	\boxtimes						
Detainces 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.	\boxtimes						
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.							
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

Otero policy 5.2.3 Telephone Access, effective 2-11-09, ensures that ICE detainees have reasonable and equitable access to telephones.



VISITATION						
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LI MEDIA.	EGAL REPR	ESENTATI	VES, SPECL	AL INTEREST GROUPS, AND THE NEWS		
Components	Y	Ν	NA	REMARKS		
There is a written visitation schedule and hours for general visitation.	\boxtimes			Schedule is outlined on page 16 of the Detainee Handbook.		
The visitation hours tailored to the detainee population and the demand for visitation.	\boxtimes			Schedule is done by alphabet and limited to 30 minutes.		
The visitation schedule and rules are available to the public.	X		· 🔲			
The hours for all categories of visitation are posted in the visitation waiting area.						
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	\boxtimes					
A general visitation log is maintained.	\boxtimes					
The detainees are permitted to retain personal property items specified in the standard.				Glasses, Bible, ring, watch, paper, and pencil can be retained.		
A visitor dress code is available to the public.	\boxtimes					
Visitors are searched and identified according to standard requirements.	\boxtimes			A positive photo identification is required.		
The requirement on visitation by minors is complied with.	\boxtimes			A minor may be admitted if accompanied by an adult visitor.		
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.						
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.						
Detainees in special housing are afforded visitation.				Visits are allowed unless a detainee is on a disciplinary restriction.		
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			Otero Policy 5.2.1 effective 2- 11-09.		
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.						
Prior to each visit, legal service providers and assistants are identified per the standard.				Legal service providers and assistants must show a Texas bar card or a business card.		
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.						

VISITATI	ON			
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LI MEDIA.	EGAL REPR	ESENTATI	VES, SPECL	AL INTEREST GROUPS, AND THE NEWS
The decision to permit or deny a tour is not delegated below the level of Field Office Director.				
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.				
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			Any examination by an outside medical provider must be approved by the Assistant Field Office Director of ICE.
ACCEPTABLE DEFICIENT] AT-RI	SK		REPEAT FINDING

Policy 5.2.1, Visitation, effective 2-11-09, permits authorized persons to visit detainees, within security and operational constraints. To maintain detainee morale and family relationships, this facility allows visits from family and friends. The OCPC allows detainees to meet privately with their current or prospective legal representatives and legal assistants, and with their consular officials.



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 A AND MOVE TO NEXT SECTION.	T THE IGS	SA FACIL	іту. Ма	RK NA ON FORM G-324A, PAGE 3		
COMPONENTS	Y	N	NA	REMARKS		
Does the facility have a voluntary work program?Do ICE detainees participate?				As per Policy #5.3.3, Programs, Voluntary Work Program, effective 9-26-08.		
Detainee housekeeping meets neatness and cleanliness standards.				Housing units were neat and clean.		
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 justification for the action in the detainee's detention file.				As per policy, a written justification is placed in a detainee's detention file when removed from a work detail.		
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.				Job orientations are completed upon entering the voluntary work program.		
The voluntary work program meets:OSHA, NFPA, ACA standards	\boxtimes					
 Medical staff screen and formally certify detainee food service volunteers. Before the assignment begins; and As a matter of written procedure 				Detainees must be medically cleared for work to be considered for the voluntary work program.		
Detainees receive safety equipment/ training sufficient for the assignment.	\square					
Proper procedure is followed when an ICE detainee is injured on the job.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS

The facility offers a voluntary work program that allows the detainees the opportunity to work and earn money. Detainees are medically cleared and properly placed into employment opportunities. Documentation of job training and medical screening are appropriately filed.



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SECTION II HEALTH SERVICES STANDARDS

HUNGERSIRIKES						
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.						
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.				Local policy #A-40.2, Hunger Strikes, effective 10-24-06, provides direction for the referral of a detainee to medical after refusing food for 72 hours.		
CDFs and IGSAs immediately report a hunger strike to the ICE.						
The facility has established procedures to ensure staff respond immediately to a hunger strike.	\boxtimes					
 Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. If yes, in an observation room? 				Policy directs that hunger- striking detainees be placed into medical segregation or isolation.		
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	X					
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.	×			Informed Consent, Policy Number B-15 (October 2006), provides guidelines for attaining a detainee's consent before treatment. All detainees sign a		
				Consent of Treatment form during the intake process.		
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.						
During a hunger strike, staff removes all food items from the hunger striker's living area.				All food items are removed from the hunger striker's living quarters. Commissary privileges are suspended during this time.		
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.				Staff utilizes an intake/output unique to the medical department.		
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.				Policy directs that staff make all efforts to persuade the hunger striker of medical risks and document efforts.		

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HUNGER STR	IKES		
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE M ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WEL SUSTAIN THEIR LIVES.			
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.			As part of the orientation process, medical staff is required to be knowledgeable of the Physician Network Association (the facility's contract medical company) policies as well as the ICE standards. In addition, periodic training is conducted with the medical staff.
Acceptable Deficient	AT-RISI	K	REPEAT FINDING

The Otero County Processing Center's established policies and procedures meet the requirements of the Hunger Strikes standard.

The facility has had one hunger strike during the past year. The detainee was monitored in-house until his condition required medical intervention unavailable at the facility. The detainee was transferred to a local hospital for hydration therapy.



ACCESS TO MEDICAL CARE					
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED WELL-BEING OF ICE DETAINEES.	ACCREDIT	ATION-W	ORTHY H	EALTH PROGRAM FOR THE GENERAL	
COMPONENTS	Y	Ν	NA	REMARKS	
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.				Detainee health care is provided through a contract with the Physician's Network Association (PNA). The department's staff is licensed under the state of New Mexico and operates within state and local laws and guidelines.	
The facility's in-processing procedures for arriving detainees include medical screening.				Local policy addresses this component (#A-22, Health Screening, effective 10-24-06). 25 medical files were audited with 100% compliance in this area.	
All detainees have access to and receive medical care.				Policy #A-03, Access to Clinical Services, 6-1-08, addresses this component.	
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	\boxtimes				
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				The contractor provides a full range of medical, psychiatric and dental services. Medical coverage is provided 24/7.	
The facility has sufficient space and equipment to afford detainee 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.	\square				
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	\boxtimes				
Detainees in the holding/waiting room have access to a drinking fountain.	\square				
 Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit; With physical access restricted to authorized medical staff; and Procedurally, no copies made and placed in detainee files. 					
Pharmaceuticals are stored in a secure area.	\boxtimes				
 Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test during the admission process; Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and Detainees not screened are housed separate from the general population. 				All detainees entering the facility are given a chest x-ray to screen for TB. Per contract, the x-ray results are returned to the facility within four hours and detainees are not placed into general population housing until cleared. The facility has six	
				negative pressure rooms to house detainees with infectious diseases.	

ACCESS TO MEDI	CAL CAR	LE	- 	
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITEI)/ACCREDI	TATION-W	ORTHY H	EALTH PROGRAM FOR THE GENERAL
WELL-BEING OF ICE DETAINEES.				
 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. 				Policy #A-29, Mental Health Screening, effective 10-24-06, addresses this component. 100% of 25 charts audited revealed compliance with this practice.
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.				Policy #A-24, Health Appraisal, effective 10-24-06, addresses this area. Chart audits of 25 detainee medical files revealed 100 percent compliance with this practice.
Detainees in the Special Management Unit have access to health care services.				
 Staff provides detainees with health services (sick call) request slips daily, upon request. Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 				
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.				
The plan includes an on-call provider.				
The plan includes a list of telephone numbers for local ambulance and hospital services.				
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.				Staff is trained in CPR, first aid, AED use, and emergency medical situations to enhance a four-minute response time.
Where staff is used to distribute medication, a health care provider properly trains these officers.				All medications are administered by licensed nursing staff.
The medical unit keeps written records of medication that is distributed.	\square			
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			
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.				Policy #B-13, Confidentiality of Health Records, effective 10-24- 06, directs that any release of information require a written consent from the detainee.
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	\boxtimes			

ACCESS TO MEDICAL CARE						
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ WELL-BEING OF ICE DETAINEES.	ACCREDIT	ATION-W	ORTHY H	EALTH PROGRAM FOR THE GENERAL		
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	\boxtimes					
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

The Otero County Processing Center's established policies and procedures meet the needs of the Access to Medical Care standard.

3-5-09 b6,b7c AUDITOR'S SIGNATURE / DATE

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 SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL						
RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.	· · · · · · · · · · · · · · · · · · ·		· · · ·			
COMPONENTS	Y	N	NA	REMARKS		
Every new staff member receives suicide-prevention training. Suicide-	\boxtimes					
prevention training occurs during the employee orientation program.						
 Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques. 	⊠			Training includes recognizing suicidal behaviors, making referrals and managing suicidal detainees.		
 A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. Screening does not occur later than one working day after the detainee's arrival. 				Twenty-five detainee medical files were audited revealing 100% compliance with this practice.		
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.				Policy #A-32, Suicide Prevention and Intervention, 10- 24-06, provides guidelines for managing suicidal detainees.		
The facility has a designated isolation room for evaluation and treatment.	\boxtimes					
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.				The designated isolation cell contains handicapped bars, which could allow a detainee to utilize it in a hanging/suicide attempt. Detainees are generally placed on continuous observation, which would hinder the possibility of a successful suicide. This issue was discussed with the administrative staff of the facility with a recommendation to utilize a different cell for the purpose of suicide observation.		
Medical staff has approved the room for this purpose.	\boxtimes					
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

The designated isolation cell was discussed with management officials. Due to the handicapped bars, a different cell was suggested for use when suicidal detainees are under observation.

AUDITOR'S SIGNATURE АЛТЕ b6,b7c

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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.				Detainees who are chronically or terminally ill are transferred to an appropriate offsite 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. 				
 There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. 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. 	\boxtimes			Policy #6.5.1, Terminal Illness, Advanced Directives and Death, effective 8-27-08, addresses advanced directives and procedures for attaining such.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	Ø			
There is a policy addressing "Do Not Resuscitate Orders"			~	Policy #6.5.1, Terminal Illness, Advanced Directives and Death, effective 8-27-08, addresses Do Not Resuscitate Orders (DNR).
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?				
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 #6.5.1, Terminal Illness, Advanced Directives and Death, effective 8-27-08, addresses procedures for organ donation of a detainee.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.				The facility's policy addresses procedures to follow in the event of a detainee death.
The facility has a policy and procedure to address the death of a detainee while in transport.	\boxtimes			
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.				
 In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 				

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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	Ν	NA	REMARKS		
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			<u> </u>			
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.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

The facility has policy and procedures in place that meet the requirements of this standard. Generally, a terminally ill detainee is removed to an off-site medical center.

The facility had one detainee death during the past year, which occurred at an off-site medical center. The detainee was 58 years old and the death that occurred on 11-26-08, and was related to a gastro-intestinal bleed secondary to cirrhosis of the liver.



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.	Y	Ν	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.				Local policy 2.3.1, Control of Contraband, effective 01-1-09, addresses this component.		
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.						
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.						
Staff follows written procedures when destroying hard contraband that is illegal.						
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						

Policy 2.3.1, Control of Contraband sufficiently addresses all the components of this standard.

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DETENTION FILES

POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.

COMPONENTS	Y	Ν	NA	REMARKS		
A detention file is created for every new arrival whose stay will exceed 24 hours.	\boxtimes			Policy 7.4.10 Detainee Records effective 6-1-08.		
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. Special requests Any G-589s and/or I-77s closed-out during the detainee's stay Disciplinary forms/Segregation forms 						
• Grievances, complaints, and the disposition(s) of same The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.				Detention files are located in the count room in locked cabinets.		
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.						
The officer closing the detention file makes a notation that the file is complete and ready to be archived.						
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	\boxtimes					
Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.				A sign out log is maintained.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

Policy 7.4.10 Detainee Records, effective 6-1-08, ensures that each detainee who enters the facility has a file that will be maintained throughout his stay and archived upon release/removal.

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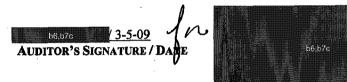
DISCIPLINARY POLICY					
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN					
COMPLIANCE WITH FACILITY RULES AND REGULATIONS. COMPONENTS	Y	N	NA	REMARKS	
The facility has a written disciplinary system using progressive levels of				NEMIARNS	
reviews and appeals.	\boxtimes				
The facility rules state that disciplinary action shall not be capricious or				Otero County Processing Center	
retaliatory.	\boxtimes			Policy and Procedures 6.31.2, Disciplinary Procedures,	
			·	effective 10-09-08, addresses this component.	
Written rules prohibit staff from imposing or permitting the following					
sanctions:					
• corporal punishment				OCPC Policy and Procedures	
deviations from normal food service				6.1.2, Detainee Rights, effective	
• clothing deprivation	\boxtimes			06-01-08, addresses this	
• bedding deprivation				component.	
 denial of personal hygiene items 				-	
 loss of correspondence privileges 					
deprivation of physical exercise					
The rules of conduct, sanctions, and procedures for violations are defined				Detainees are verbally informed	
in writing and communicated to all detainees verbally and in writing.		7 -1		of the rules of conduct during	
				the initial intake process. The information is also available in	
				the Detainee Handbook	
The following items are conspicuously posted in Spanish and English,				the Detainee Handbook	
and other dominate languages used in the facility:	1999 - A.				
Rights and Responsibilities				The requirements of this	
 Prohibited Acts 	\boxtimes			component are posted in each	
 Disciplinary Severity Scale 	-			housing unit.	
 Disciplinary severity scale Sanctions 		1			
When minor rule violations or prohibited acts occur, informal resolutions				Minor infractions are	
are encouraged.				adjudicated by a Shift	
are encouraged.	\boxtimes			Lieutenant not involved in the	
				incident.	
Incident reports and Notice of Charges are promptly forwarded to the					
designated supervisor.	\boxtimes				
Incident reports are investigated within 24 hours of the incident. The			•	OCPC Policy 3.1.1, Detainee	
Unit Disciplinary Committee (UDC) or equivalent does not convene	\boxtimes			Rights, effective 06-01-08, page	
before an investigation ends.				11of 12, paragraph C-1a 1,	
				addresses this component.	
An intermediate disciplinary process is used to adjudicate minor	\boxtimes				
infractions.					
A disciplinary panel (or equivalent in IGSAs) adjudicates infractions.					
The panel:			l i		
• Conducts hearings on all charges and allegations referred by the					
UDC;				1	
• Considers written reports, statements, physical evidence, and	\boxtimes				
oral testimony;					
• Hears pleadings by detainees and staff representatives;					
• Bases its findings on the preponderance of evidence; and		· ۱			
Imposes only authorized sanctions		I	·		

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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	<u> </u>	<u>N</u>	NA	REMARKS		
A staff representative is available if requested for a detainee facing a						
disciplinary hearing.						
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.						
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.						
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"						
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

Policy 6.3.1, Disciplinary Procedures, effective 10-09-08, addresses all the components of this standard.



EMERGENCY	CONTINGENCY)	PLANS

DOT 1031 AT L D L OF THE R LOAD DD 10 1017 DDTA DUDD WIT L DDODOL TO TO D CDOT				
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS REC				
MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND S				
COMPONENTS	Y	NCILS IO	NA	REMARKS
Policy precludes detainees or detainee groups from exercising control or				Otero County Processing
authority over other detainees.				Center Policy 2.1.8, Detainee Control and Movement, effective 06-01-08, page 2 of 2, paragraph E-1, addresses this component.
Detainees are protected from:				
 Personal abuse Corporal punishment Personal injury 				
• Disease				
Property damage		l		
Harassment from other detainees				
Staff is trained to identify signs of detainee unrest.				Staff receive training on how
• What type of training and how often?				to identify signs of detainee unrest, through training in detainee supervision and
				manipulation, and communication skills during in- service and pre-service training.
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)				3
There is a designated person or persons responsible for emergency plans				The Warden is responsible for
and their implementation. Sufficient time is allotted to the person or group	\boxtimes			the emergency plans and their
for development and implementation of the plans.		·		implementation.
The plans address the following issues:				
Confidentiality			. •	
 Accountability (copies and storage locations) 	\boxtimes			
Annual review procedures and schedule				
Revisions				
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	\boxtimes			
The facility has cooperative contingency plans with applicable:				The facility has a cooperative
• Local law enforcement agencies	\boxtimes			contingency plan with the
• State agencies				County of Otero, dated 09-22-
Federal agencies			· .	08.
All staff receives copies of Hostage Situation Management policy and				The Hostage Situation
procedures.				Management policy and procedures are available on the computer, Central Control, Housing Control, and in the Armory.
Staff is trained to disregard instructions from hostages, regardless of rank.				
Within 24 hours after release, hostages are screened for medical and	\boxtimes			
psychological effects.		ļ		
Emergency plans include emergency medical treatment for staff and	\boxtimes			
detainees during and after an incident.		<u> </u>		

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.					
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).				The plans identifying the locations of the shut-off valves and switches are in the Utility Shutoff Manuals that are maintained in the Central Control, Housing Control, and the Armory.	
 Written procedures cover: Work/Food Strike 					
 Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages 					
Civil Disturbances					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

The facility has written procedures addressing all of the ICE required emergency contingency plans.



ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTI							
PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH							
APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION	N [NFPA])	; IDENTIF	ICATION	OF INCOMPATIBLE MATERIALS, AND			
SAFE-HANDLING PROCEDURES				······			
COMPONENTS	Ŷ	N	NA	REMARKS			
The facility has a system for storing, issuing, and maintaining inventories							
of hazardous materials.							
Constant inventories are maintained for all flammable, toxic, and caustic							
substances used/stored in each section of the facility.				· · · · · · · · · · · · · · · · · · ·			
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date							
for every hazardous substance used.							
• The files list all storage areas, and include a plant diagram 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		· ·		Personal Protective Equipment			
the prescribed procedures. They:				such as chemical goggles,			
• Wear personal protective equipment; and				chemical aprons and rubber			
• Report hazards and spills to the designated official.				gloves are not available in Food			
	•			Service and in the Laundry for			
				use when handling corrosives. There is no eyewash station in			
				Food Service, Medical, or			
			•	Laundry. On the last day of the			
				review, PPE was put in place in			
				Food Service and the Laundry.			
				Purchase orders were generated			
	•	· ·		for the needed eyewash stations.			
The MSDSs are readily accessible to staff and detainees in work areas.							
Hazardous materials are always issued under proper supervision.							
• Quantities are limited; and	\boxtimes			· · · · · · · · · · · · · · · · · · ·			
 Staff always supervises detainees using these substances. 				· · ·			
All "flammable" and "combustible" materials (liquid and aerosol) are	\boxtimes						
stored and used according to label recommendations.	K -3						
Lighting fixtures and electrical equipment installed in storage rooms and	\boxtimes						
other hazardous areas meet National Electrical Code requirements.	<u> </u>						
The facility has sufficient ventilation, and provides and ensures clean air	\boxtimes						
exchanges throughout all buildings.							
Vents, return vents, and air conditioning ducts are not blocked or	\boxtimes						
obstructed in cells or anywhere in the facility.							
Living units are maintained at appropriate temperatures in accordance	57		m				
with industry standards. (68 to 74 degrees in the winter and 72 to 78							
degrees in the summer.)							
Shower and sink water temperatures do not exceed the industry standard	\boxtimes						
of 120 degrees.				· · · · · · · · · · · · · · · · · · ·			
All toxic and caustic materials are stored in their original containers in a	\boxtimes						
secure area.							
secure area. Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	\boxtimes						

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	
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.				Methyl alcohol is not utilized at this facility.	
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.					
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).				Exit doors leading out of the two 150-person dining halls are not separated by proper distance in accordance with the National Fire Codes. In an undated memo from 156.576 Director, Fire Marshall, Otero County Office of Emergency Services, the exiting situation in the dining halls meets the requirements of the International Fire Code, 2003 edition. This item was identified as a deficiency during the review conducted in September 2008, and it has not been corrected.	
A technically qualified officer conducts the fire and safety inspections.					
The Safety Office (or officer) maintains files of inspection reports.	XX				
The facility has an approved fire prevention, control, and evacuation plan.	\boxtimes				
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 					
Fire drills are conducted and documented monthly.	\boxtimes				
A sanitation program covers barbering operations.		\boxtimes		Policy number 4.2.3, does not contain all the components found in the ICE Standard.	
The barber shop has the facilities and equipment necessary to meet sanitation requirements.	\boxtimes				
The sanitation standards are conspicuously posted in the barbershop.	\square				
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes				
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	\boxtimes				

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ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTI PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AN	ID LABELIN	IG OF HAZ	ZARDOUS	MATERIALS IN ACCORDANCE WITH
APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION	1 [NFPA])	; IDENTIF	ICATION (OF INCOMPATIBLE MATERIALS, AND
SAFE-HANDLING PROCEDURES COMPONENTS	Y	N	NA	REMARKS
 Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 				
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.	\boxtimes			
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	\boxtimes			
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.				
Do the methods for handling/disposing of refuse meet all regulatory requirements?				
 A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventative spraying for indigenous insects. 				
Drinking water and wastewater is routinely tested according to a fixed schedule.	\boxtimes			
 Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 				
ACCEPTABLE DEFICIENT	AT-RISE	K		REPEAT FINDING

REMARKS:

Chemical goggles, aprons and rubber gloves are not available in Food Service and the Laundry.

There are no eyewash stations in Food Service, Medical, or Laundry.

Local policy regarding the sanitation program for barbershop operations does not contain the requirements found in the ICE Standard.

The exit doors in the Food Service Dining Halls are not remotely located from each other, per NFPA criteria. The facility seems reliant on a local fire authority's citation of compliance with the International Fire Code; ICE standards do not recognize this resource.

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HOLD ROOMS IN DETENTION FACILITIES						
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS,						
MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSI COMPONENTS	NG INTO O	ROUT OF	HE FACIL NA	ITY. REMARKS		
The hold rooms are situated within the secure perimeter.				Otero County Processing Center Policy 2.1.17, Hold Rooms, effective 02-11-09, addresses the entire component of this standard.		
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.						
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.	Ø					
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. Male and females are segregated from each other.			┍╌└┙	OCPC does not house female		
Male and remains are segregated from each other.			\boxtimes	detainees.		
Detainees under the age of 18 are not held with adult detainees.				Detainees under the age of 18 are not housed at OCPC.		
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.						
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.	\boxtimes					
 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. 				The checks are documented on the individual Holding Cell Logs.		
When the last detainee has been removed from the hold room, it is given a thorough inspection.						
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			The booking staff is responsible for removing detainees from the holding cells in case of fire or building evacuation.		
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	\boxtimes			American Medical Response Ambulance Services is notified.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

The facility has a direct line to American Medical Response Ambulance Services, which they use whenever it is determined that a medical emergency exists.

/ 3-5-09 **AUDITOR'S SIGNATURE / DATE** b6,b7c

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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	
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				The security officer has not 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.	\boxtimes	·□	· 🔲		
The security officer, or equivalent in IGSAs, provides training to employees in key control.					
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.					
Facility policies and procedures address the issue of compromised keys and locks.					
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				b2High	
Only dead bolt or dead lock functions are used in detainee accessible areas.					
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.					
Grand master keying systems are prohibited.	X				
All worn or discarded keys and locks are cut up and properly disposed of.				All worn or discarded keys and locks that are disposed of are documented on a Key/Lock Destruction Log.	
Padlocks and/or chains are prohibited from use on cell doors.				The review team did not observe any padlocks or chains being utilized on any cell doors.	
 The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101. 					
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.					
 Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed. 					
Emergency keys are available for all areas of the facility.	\boxtimes			b2High	
The facilities use a key accountability system.					
Authorization is necessary to issue any restricted key.	\boxtimes				

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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	v	N	NA	REMARKS		
Individual gun lockers are provided.	<u> </u>		IVA	NEWIARNS		
• They are located in an area that permits constant officer observation.				b2High		
• In an area that does not allow detainee or public access.						
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.						
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 				Policy 2.4.1, Key and Lock Control, effective 06-01-08, page 6 of 7, paragraph Q 8-10, addresses this component.		
Acceptable Deficient	AT-RISH	K		REPEAT FINDING		

The security officer is scheduled to attend an approved locksmith training program April 2009.

3-5-09 b6,b7¢ b6.b7c **AUDITOR'S SIGNATURE / DATE**

POPULATION COUNTS					
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS					
CONDUCTED AS NECESSARY.				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
COMPONENTS	· · · ·	Y	N	NA	REMARKS
Staff conduct a formal count at least once each shift.					The facility conducts 7 formal counts within a 24-hour period.
Activities cease or are strictly controlled while a formal conducted.	count is being	\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.		\mathbf{X}			
Detainee participation in counts is prohibited.	· .	\boxtimes			
A face-to-photo count follows each unsuccessful recour	nt.	\boxtimes			
Officers positively identify each detainee before count present.	ing him/her as	\boxtimes			
 Written procedures cover informal and emergency court They are followed during informal counts and 	emergencies.				Policy 2.1.9, Detainee -Counts, effective 06-01-08, page 2, paragraph A-4, addresses this component.
The control officer (or other designated position) main count record of all detainees temporarily leaving the fac					The Count Room staff are responsible for maintaining an out-count record of all detainees temporarily leaving the facility.
This training is documented in each officer's training fo	lder.	\boxtimes			
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

The facility conducts formal counts at the second s

b6.b7c AUDITOR'S SIGNATURE / DATI

POST ORD	ERS					
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.						
COMPONENTS	Y	N	NA	REMARKS		
Every fixed post has a set of post orders.				Otero County Processing Center Policy and Procedure 2.1.3, Post Orders, effective 08-08, addresses this component.		
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.						
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.				The Chief of Security is responsible for keeping the post orders current and for reviewing them quarterly.		
The IGSA maintains a complete set (central file) of post orders.	\square					
The central file is accessible to all staff.						
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.						
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.		. 🛛		The warden signs and dates the first page of the post orders.		
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.						
Procedures keep post orders and logbooks secure from detainees at all times.						
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.						
Armed-post post orders provide instructions for escape attempts.				The three armed post (Transportation, Perimeter, and Hospital) all provided guidelines for escape attempts.		
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.						
Acceptable Deficient	AT-RISI	K	[]	REPEAT FINDING		

The post orders are reviewed by the Chief of Security quarterly and the Senior Warden reviews them annually.

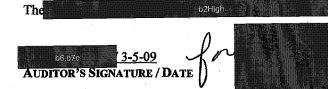
.09 AUDITOR'S SIGNATURE / DAT

SECURITY INSPE	CTIONS	3		
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERI	E SPECIAL	SECURITY	PROCED	URES MUST BE FOLLOWED, WILL BE
RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING		· · · ·		
COMPONENTS	YES	No	NA	REMARKS
 The facility has a comprehensive security inspection policy. The policy specifies: Posts to be inspected; Required inspection forms; Frequency of inspections; Guidelines for checking security features; and Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 				Otero County Processing Center Policy and procedures 2.1.5, Patrols and Inspections, effective 02-11-09, address the areas to be inspected and the frequency of the inspections.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.				The daily checks are documented in the daily housing log.
Documentation of security inspections is kept on file.				
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.				
The front-entrance officer checks the ID of everyone entering or exiting the facility.				
All visits are officially recorded in a visitor logbook or electronically recorded.				The Review Team was required to sign in and out each day.
The facility has a secure visitor pass system.				The review team was issued a numbered pass each day.
Every Control Center officer receives specialized training.	\square			
The Control Center is staffed around the clock.	\square			
Policy restricts staff access to the Control Center.	\square			
Detainees are restricted from access to the Control Center.	\square			
Communications are centralized in the Control Center.	\square			
Officers monitor all vehicular traffic entering and leaving the facility.				Vehicular traffic entering and exiting the facility is monitored by the Housing Control.
 The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: The driver's name; Company represented; Vehicle contents; Delivery date and time; Date and time out; Vehicle license number; and Name of employee responsible for the vehicle during the visit 				The Rear Gate Officer maintains and completes a Back Gate Entry Log. This contains all of the required information for this component.
Officers thoroughly search each vehicle entering and leaving the facility.	\square			
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.				Policy 2.3.1, Control of Contraband, effective 01-12-09, addresses this component.
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.				
The SMU entrance has a sally port.				b2High
Written procedures govern searches of detainee housing units and personal areas.				
Housing area searches occur at irregular times.	\boxtimes			

SECURITY INSPI	CTIONS						
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	YES	No	NA	REMARKS			
Every search of the SMU and other housing units is documented.	\boxtimes						
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.	\boxtimes						
 Daily procedures include: Perimeter alarm system tests; Physical checks of the perimeter fence; and Documenting the results. 				The checks are documented on the Daily Shift Activity Log.			
Visitation areas receive frequent, irregular inspections.	\boxtimes						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

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REMARKS:



as required by the ICE standard.

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLIN [DISCIPLINARY SEGREGATION]" STANDARD).	ADMINIST	RATIVE SE	GREGATIO	N, HOUSES DETAINEES ISOLATED FOR
COMPONENTS	Y	N	NA	REMARKS
 The Administrative Segregation unit provides no punitive protection from the general population and individuals undergoing disciplinary segregation. Detainees are placed in the SMU (administrative) in accordance with written criteria. 				
 In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. A copy of the order given to the detainee within 24 hours. 				
 The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative). 				The Chief of Security is responsible for conducting a review to determine whether continued placement in administrative segregation is still warranted.
 A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: Every week thereafter for the first month; and Every 30 days after the first month. Does each review include an interview with the detainee? Is a written record made of the decision and the justification? 				
 The detainee is given a copy of the decision and justification for each review. The detainee is given an opportunity to appeal the reviewer's 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 administrative detention exceeds 30 days. Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO. 				The COTR is notified when a detainee has been in administrative detention for 30 days, or if a detainee is held in administrative segregation for 60 days.
 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 				
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.				Otero County Processing Center Policy and Procedure 2.1.15, Special Housing Unit, effective 02-11-09, page 4 of 12, paragraph h, addresses this component.
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.				

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	SPE	CIAL	NIA	NAGEI	VILLIN I.	UNIT	(SMU)	
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		ADM	INIST	RATIVE	c Segri	есатіс	N	
•					, vroin			

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 SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition. 						
 All cells are equipped with beds. Every bed is securely fastened to the floor or wall. 	\boxtimes					
 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? 						
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	Ø					
 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? 						
 Each detainee maintains a normal level of personal hygiene in the SMU. The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 						
 The detainees are provided: Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 				Barbering services are available to detainees housed in administrative segregation, upon request.		
 A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays. 				A health care professional visits detainees housed in administrative segregation three times per day.		
 Procedures comply with the "Visitation" standard. The detainee retains visiting privileges; and The visiting room is available during normal visiting hours. 						
Visits from clergy are allowed.	\boxtimes					

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

POLICY: THE SPECIAL MANAGEMENT UNIT THE SPECIAL MANAGEMENT UNIT WILL CON					
THEIR OWN PROTECTION; THE OTHER FOR	DETAINEES BEING DISCIPLIN				
[DISCIPLINARY SEGREGATION]" STANDARD)			· · · · · · · · · · · · · · · · · · ·	· · ·	
COMPONENTS		Y	<u>N</u> .	NA	REMARKS
 Detainees have the same law-library access Are they required to use the law lib As a group? Are legal materials brought to ther 	brary Separately, or				Upon request, a detainee may have library materials brought to him or he may be escorted separately to the library.
The SMU maintains a permanent log of det meals served, recreation, visitors etc.	ainee-related activity, e.g.,				All detainee activities are documented on individual daily activity logs.
 <u>SPC procedures</u> include completing the SM immediately upon a detainee's placement in Staff completes the form at the end <u>CDFs and IGSA</u> facilities use Form 	the SMU. I of each shift.				
 Staff record whether the detainee ate, shower applicable medication during every shift. Staff logs record all pertinent int condition, suicidal/assaultive behat The medical officer/health care individual's record during each vist The housing officer initials the services are completed or at the end 	formation, e.g., a medical vior, etc; professional signs each it; and record when all detainee				All detainee activities are documented on the detainees' individual daily activity logs.
 A new record is created for each week the de Segregation. The weekly records are retained detainee's return to the general pop 	tainee is in Administrative				A new individual detainee daily activity log is created daily.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

Detainees housed in administrative segregation receive the same general privileges as detainees in general population, unless prohibited by sanctions.

-09 AUDITOR'S SIGNATURE / DA b6.b7c

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.				Local policy 2.1.15, Special Housing Unit, effective 02-11- 09, page 7 of 12, paragraph B 1, addressed this component.			
The sanctions for violations committed during one incident are limited to 60 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. 							
 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. 				Detainees housed in disciplinary segregation are reviewed every 7 days for the first 60 days and then every 30 days thereafter.			
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.							
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. 							
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. 							
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	Ø						
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?							
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.							
Detainces in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainces.	\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.	\boxtimes						

SPECIAL MANAGEMENT UNIT **DISCIPLINARY SEGREGATION**

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNI POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIO				
OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.	Y	N	NA	REMARKS
COMPONENTS Detainees receive, unless documented as a threat to security:	I		IVA	NEMARKS
 Barbering services; 				
 Recreation privileges; 				
 Other-than legal reading material; 	\boxtimes			
 Religious material; 				
• The same correspondence privileges as other detainees; and				
 Personal legal material. 			•	
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				
matters;	\boxtimes			
• Calls to consular/embassy officials; and				
• Calls during family emergencies (as determined by the				
OIC/Warden).				
A health care professional visits every detainee in disciplinary				
segregation every week day.		П		A health care professional visits detainees housed in disciplinary
• The shift supervisor visits each segregated detainee daily				segregation three times per day.
Weekends and holidays.				segregation three times per day.
SMU detainees are allowed visitors, in accordance with the "Visitation"	\boxtimes			
standard.				
SMU detainees receive legal visits, as provided in the "Visitation"				
standard.	\boxtimes			
• Legal service providers are notified of security concerns				
arising before a visit.			· · · · · · · · · · · · · · · · · · ·	
Visits from clergy are allowed.				
• The clergy member is given the option of visiting/not visiting	5-7	-		
the segregated detainee.	\boxtimes			· · ·
• Violent/uncooperative detainees are denied access to 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.	\boxtimes			
• Legal material brought to individuals in the SMU on a case-by-				
case basis.		-		
• Staff documents every incident of denied access to the law				
library. All detainee-related activities are documented, e.g. meals served,			·	All detainees' related activities
recreation activities, visitors, etc.			_	are documented on the
	\square			detainee's individual daily
				activity log.
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 I-888s are filled out by the end of each shift.	\square			
• The <u>CDF/IGSA</u> facility use Form.				
• 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.						
COMPONENTS	Y	N	NA	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 visit. 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 SMU. 				All detainee activities are documented on the detainees' individual daily activity logs.		
Acceptable Deficient] AT-RIS	SK		REPEAT FINDING		

REMARKS;

A new record is created daily for each detainee housed in the Special Management Unit.

5-09 66,67c AUDITOR'S SIGNATURE / DATE 66,**67**c

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 Chief of Security is the individual responsible for the development of a tool control procedure and inspection system.		
Department heads are responsible for implementing this standard in their				Local policy 2.4.2, Tool		
departments.				Control, effective 06-01-08, page 2 of 12, paragraph C-1, addresses this component.		
Tool inventories are required for the:						
 Maintenance Department; Medial Department; Food Service Department; Electronics Shop; Recreation Department; and Armory. 						
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 				Local policy (above) addresses this component.		
 The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous); and Non-Restricted (non-hazardous). 						
Department heads are responsible for implementing tool-control procedures.	\boxtimes					
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	\boxtimes					
 The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 						
Each facility has procedures for the issuance of tools to staff and detainees.				Staff signs out/in tools on a sign out sheet. Detainees are not authorized to handle tools.		
 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. 						
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes					
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.		Ď				

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

 ACCEPTABLE
 DEFICIENT
 AT-RISK
 REPEAT FINDING

REMARKS:

The tool room is outside of the secure confines of the facility; however, the Tool Control Policy 2.4.2 addresses all of the components of this required ICE standard.



FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

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 motor vehicle laws and regulations. Records support this finding of compliance.				
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.				The Transportation Department has a total of 56 staff assigned; 51 have a current CDL, and the remaining 5 are in training pending the issuance of their CDL.
Supervisors maintain records for each vehicle operator.	X			
 Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and Deficiencies are corrected before the vehicle goes back into service. 				
 Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area-exceeding the 10-hour limit. 				
 Two officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are two qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 				
Before the start of each detail, the vehicle is thoroughly searched.	\boxtimes			
Positive identification of all detainees being transported is confirmed.				Detainces being transported are positively identified by OCPC staff and then by ICE prior to departing the facility.
All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.				The review team observed staff performing pat searches on detainees prior to the detainees boarding the bus.
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.	\boxtimes			

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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
 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.	\boxtimes			
 Officers ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees are present. 				
 Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE. 	\boxtimes			
 The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 				
 Vehicles have: Two-way radios; Cellular telephones; and Equipment boxes stocked in accordance with the Use of Force Standard. 				
The vehicles are clean and sanitary at all times.	\boxtimes			
 Personal property of a detainee transferring to another facility is: Inventoried; Inspected; and Accompanies the detainee. 				

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

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 DETAINBES. 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
The following contingencies are included in the written procedures for				
vehicle crews:				
Attack				
• Escape	· · · ·			
Hostage-taking				Dellar 100 Detains
Detainee sickness				Policy 1.2.2, Detainee
• Detainee death		F -1		Transportation, effective 09-08-
• Vehicle fire				08, pages 6 & 7of 8, paragraphs I-T, addresses all of the
• Riot				elements of this component.
• Traffic accident	· ·			cientents of this component.
Mechanical problems				
Natural disasters				
• Severe weather		•		
Passenger list includes women or minors				
Acceptable Deficient	AT-RISH	K	[]	Repeat Finding

REMARKS:

Inspection of vehicles B 3, 6, 7, 17 and T 1 & 2 revealed the sanitation was good, each vehicle has post orders, and all of the buses were equipped with water cool holders.

b6 b7c AUDITOR'S SIGNAT

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:						
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.				Policy 2.2.1, Use of Force, effective 06-01-08, page 1, paragraph A1, addresses this component.		
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.	\boxtimes					
 The facility subscribes to the prescribed Confrontation Avoidance Procedures. Ranking detention official, health professional, and others confer before every calculated use of force. 				Policy 2.2.1, Use of Force, effective 06-01-08, page 2 of 23, paragraph 3a, Confrontation Avoidance, addresses this component.		
 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. 						
Staff members are trained in the performance of the Use-of-Force Team Technique.				Staff receives training in the Use of Force Team Technique during pre-service and in- service training.		
All use-of-force incidents are documented and reviewed.	\boxtimes					
 Staff: Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 						
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.						
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).				Policy 2.2.1, Use of Force, effective 06-01-08, page 6 of 23, paragraph 8a, addresses this component.		

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF A ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:	HAT AMOU ND OTHER	INT OF FO	RCE NEC EVENT SE	ESSARY TO GAIN CONTROL OF THE RIOUS PROPERTY DAMAGE AND TO
COMPONENTS	YES	No	NA	REMARKS
 Standard procedures associated with using four-point restraints include: Soft restraints (e.g., vinyl); Dressing the detainee appropriately for the temperature; A bed, mattress, and blanket/sheet; Checking the detainee at least every 15 minutes; Logging each check; Turning the bed-restrained detainee often enough to prevent soreness or stiffness; 				Policy 2.2.1, Use of Force, effective 06-01-08, page 7 of 23, paragraph10a 1-10, addresses this component.
 Medical evaluation of the restrained detainee twice per eight hour shift; and When qualified medical staff is not immediately available, staff position the detainee "face-up". 				
 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			
All detainee checks are logged.	\boxtimes			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.				
 When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	\boxtimes			
 Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted 			\boxtimes	The facility does not house female detainees.
Protective gear is worn when restraining detainees with open cuts or wounds.	\boxtimes			
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.				
 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?				
ACCEPTABLE DEFICIENT	AT-RISH	K.	· []]	REPEAT FINDING

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

The facility does not utilize Tasers. All use of force incidents are reviewed by the Chief of Security, Deputy Warden, and Warden.

b6.b7c

b6,b7c 5-09 AUDITOR'S SIGNATURE / DAT

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.

COMPONENTS	Y	N	NA	REMARKS	
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.					
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.					
Scheduled visits are posted in ICE detainee areas.	\boxtimes				
Visiting staff observe and note current climate and conditions of confinement at each IGSA.					
ICE information request Forms are available at the IGSA for use by ICE detainees.					
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.					
ICE staff responds to a detainee request from an IGSA within 72 hours.					
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.					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

The IEA handles operational/detention issues i.e. funds, property, minor complaints, law library while the Deportation Officer handles immigration, stay or removal issues.

and inspects Medical, Food b2High Service, dorms etc. Standard was reviewed with b6.b7c AFOD, 915-726-b6.b7c and Operations Supervisor 915-892 b6.b7c. b6.b7c **AUDITOR'S SIGNATURE / DATE** b6.b7c

DETAINEE TRANSFER STANDARD

12

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 				The EARM (Enforced Alien Removal Module) web system is currently used. The Otero County Processing Center is a receiving and removal facility.		
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			A 3-minute phone call is given.		
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 				The Otero County Processing Center is a receiving and removal facility.		
The detainee is provided with a completed Detainee Transfer Notification Form.	\boxtimes					
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes	· 🗌		Forms 216 and 203 are required prior to any transport.		
 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. 	Ø					
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.				Otero is a dedicated contract facility.		
For medical transfers, transporting officers receive instructions regarding medical issues.						
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.				For a transfer, a check is issued. For a removal, cash is given.		
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.						

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COMPONENTS	Y	Ν	NA	REMARKS	
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					
		-			

REMARKS:

Standard was reviewed with b6.b7c AFOD, 915-726 b6.b7c and b6.b7c

Operations Supervisor 915-892 b6.b7c

The process for removal of 25 detainees from the Otero County Processing Center was observed on 3-4-09. Acting Supervisor 166.07c



DETENTION FACILITIES INSPECTION GROUP OTERO COUNTY PROCESSING CENTER JUNE 16-18, 2009 CLOSEOUT BRIEFING

The following issues were discussed with management staff at the Otero County Processing Center (OCPC) during a closeout briefing on Thursday, June 18, 2009.

Detainee Classification

- Staff completing classification has not received formal classification training.
- Staff making classification determinations using only I-213s

Detainee Handbook

Disciplinary appeals procedure not contained in the detainee handbook.

Food Service

- Presence of house-flies in the kitchen area.
- Rear delivery door of kitchen is in need of a barrier or controlled air curtain to prevent entry of insects, pests, vermin etc.
- Distitian's license expired on March 31, 2009; however, certification of master menu is valid until August 2009.

Key and Lock Control

• b2Hiph

Use of Force

- b2High
- Several Use of Force incident reports were incomplete I.E. lacking signatures.

Visitation

- Detainees from the Special Housing Unit (SHU) are in restraints during visitation.
- Visitation area does not have Form G-28, Notice of Appearance as Attorney or Representative form on hand for attorneys.

Otero County Processing Center: Closeout

Area of Concern

• For approximately the past twelve months, ICE staff have been operating at OCPC without a secure T1 line enabling staff to access ICE networks.

	were present during the exi	t briefit	
b6,b7c	DFIG Staff	Signature () b6.b7c	
Pmm —	DFIG Staff	Signature	
Robert Joli coens	FOD		
Print		Şignature	ر ا
b6/b7c	OCPC WALDEN		<u></u>
66.b7c	Deputy Warden		

Please note, this summary represents some of the findings requiring immediate attention. A final report is forthcoming, which will provide details on all DFIG findings.