	A.	Туре	of Facility	Reviewed
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ICE Contract Detention Facility
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**ICE Intergovernmental Service Agreement** 

# **B.** Current Inspection

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Type of Inspection		
Field Office HQ Inspection		
Date[s] of Facility Review		
August 5-7, 2008		

# C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review		
July 30-August 1, 2007		
Previous Rating		
Superior Good Acceptable Deficient At-Risk		

# **D.** Name and Location of Facility

Name		
Pinal Adult Detention Facility		
Address (Street and Name)		
971 N. Jason Lopez Circle		
City, State and Zip Code		
Florence, Arizona 85232		
County		
Pinal		
Name and Titcutive Officer (Warden/OIC/Superintendent)		
Chief Deputy b6,b7c		
Telephone # ( ode)		
520 b6,b7c		
Field Office / Sub-Office (List Office with oversight responsibilities)		
Phoenix/Florence Detention Center		
Distance from Field Office		
60 Miles		

# E. Creative Corrections Review Team



# F. CDF/IGSA Information Only

Contract Number	Date of Contract or IGSA	
N/A	N/A	
Basic Rates per Man-Day		
\$59.64		
Other Charges: (If None, Indicate N/A)		
N/A		
Estimated Man-days Per Year		
N/A		

### E. Accreditation Certificates

List all State or National Accreditation[s] received:
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Check box if facility has no accreditation[s]

# F. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding			
Court Order Class Action Order			
The Facility has Significant Litigation Pending			
Major Litigation Life/Safety Issues			
Check if None.			

# I. Facility History

It i uchity inistory		
Date Built		
1995		
Date Last Remodeled or Upgraded		
2006		
Date New Construction / Bedspace Added		
1034		
Future Construction Planned		
$\Box$ Yes $\boxtimes$ No Date:		
Current Bedspace	Future Bedspace (# New Beds only)	
1504	Number: 1504 Date: N/A	

#### J. Total Facility Population

Total Facility Intake for previous 12 months
18,032
Total ICE Mandays for Previous 12 months
169,327

#### K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	225	92	78
Adult Female	120	29	0

#### L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1221	1080	1275
Adult Female	1275	255	300
<b>Facility holds Juveniles Offenders 16 and older as Adults</b>			

#### M. Average Daily Population

	ICE	USMS	Other
Adult Male	300	N/A	N/A
Adult Female	158	N/A	N/A

# N. Facility Staffing Level

Securit	y:	Support:
	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 <sup>2</sup> , Physical, etc.)	9	0	1	N/A
Offenders on Offenders <sup>1</sup>	With Weapon	0	0	0	N/A
	Without Weapon	9	0	1	N/A
Assault:	Types (Sexual Physical, etc.)	1	0	0	N/A
Detainee on Staff	With Weapon	0	0	0	N/A
	Without Weapon	1	0	0	N/A
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>	·	0	0	0	N/A
Disturbances <sup>4</sup>		0	0	0	N/A
Number of Times Chemical Agents Used		0	0	0	N/A
Number of Times Special Reaction Team Deployed/Used		0	0	0	N/A
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	N/A
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	N/A
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	N/A
Escapes	Attempted	0	0	0	N/A
	Actual	0	0	0	N/A
Grievances:	# Received	11	0	0	N/A
	# Resolved in favor of Offender/Detainee	0	0	0	N/A
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	S	N/A
	Number	0	0	*1	N/A
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	67	82	32	N/A
	# Psychiatric Cases referred for Outside Care	0	0	0	N/A

<sup>&</sup>lt;sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

<sup>&</sup>lt;sup>2</sup> Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

<sup>&</sup>lt;sup>3</sup> Routine transportation of detainees/offenders is not considered "forced"

<sup>&</sup>lt;sup>4</sup> Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

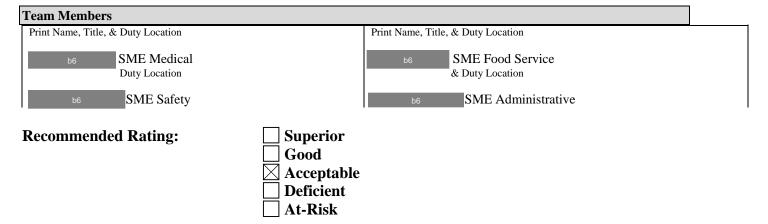
DHS/I	CE Detention Standards Review Summary Report	
	ceptable 2. Deficient 3. At Risk 4. Repeat Finding 5. Not Applicable	
Legal	Access Standards	1. 2. 3. 4. 5.
1.	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
Detain	ee Services	
5.	Admission and 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	
Securi	ty 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)	
56.	Betainee Transfer (Traded September 2007)	

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

#### **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
b6,b7c	
Title & Duty Location	Date
Reviewer – In - Charge	August 5-7, 2008



# **Comments:**

Pinal County utilizes Tasers and it is addressed in the Use of Force Policy.

The facility had two suicide's during the review period one being a ICE Detainee.

Death Summary#1

Rogelio Canales-Baca
03/28/1972
A b2High, b6,b7c
6/23/2008
7/08/2008

ICE detainee Rogelio Canales-Baca was transferred to the Pinal County Jail on June 23, 2008 from the Florence SPC. At the time of his screening, he stated that he was nervous. He stated that he was "OK right now", but wanted his medicine. Staff from the Florence SPC notified Pinal County Jail of Canales' previous mental health history and placement on suicide precautions. He was scheduled for a psychiatric evaluation on June 26 and medical evaluation on June 24.

He was placed on suicide watch on June 24, 2008, as he told staff that he was feeling bad and wanted to hurt himself, although he had no current plan. On June 26, 2008, he was evaluated by the contract psychiatrist who discontinued the watch and placed him on 30 minute checks. The doctor also prescribed Prozac.



On June 30, 2008, he was once again evaluated by the psychiatrist who discontinued the observation and permitted the detainee to be returned to general population. Canales did well until July 2, 2008, when he placed an urgent medical request, claiming that if he was deported, he would be killed. He was visibly upset and was once again placed on suicide watch. His deportation was placed on hold due to his current mental health status.

The psychiatrist evaluated him on July 3, 2008. At that time, he denied any suicidal ideation as long as he remained in segregation. Suicide watch was once again discontinued, and he was placed on 30 minute checks. Four days later, he told the psychiatrist that he felt safe in the segregation unit and did not want to return to General Population.

On July 8, 2008, at 1358 hours, Canales was found hanging in his cell. He was cut down and the medical department responded. CPR was started until EMS arrived at 1408. He was pronounced dead at 1415 hours via paramedics and E.R. MD.

Death Summary #2 Pinal County Az Jail

Arrival Date:	6/29/2008
Date of Death:	7/16/2008

Name, Date of Birth, and other identifying information was not provided by Pinal County Jail, as the inmate was not an ICE detainee.

He was booked at the facility on June 29, 2008 on a murder charge by the Pinal County Sheriff's Office. He was placed on suicide watch on July 4, 2008 by medical staff. On July 7, 2008, he was removed from suicide watch per medical staff. He was placed on a 30 minute security watch.

On July 16, 2008, he was found hanging by a towel in his cell. No further information was provided.

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