

MEMORANDUM FOR:

Ronald J. Smith

Field Office Director San Diego Field Office

FROM:

Acting Director

SUBJECT:

San Diego Correctional Facility Plan of Action

The San Diego Correctional Facility Plan of Action (POA) dated February 4, 2005, has been received but not accepted. The Plan of Action was developed in response to the Annual Review conducted by the Headquarters Detention Standards Compliance Unit (DSCU) August 31 through September 2, 2004.

The Plan of Action from the Corrections Corporation of America did not address all the deficiencies, citing contract requirements or lack thereof. The proposed Plan of Action for detainee telephone issues is not acceptable to ICE. The Plan of Action from the United States Public Health Service is accepted as written.

The Field Office must initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility <u>within</u> five business days of receipt of this memorandum. Notification shall include a copy of this memorandum.
- The Field Office is responsible for continuing to monitor contract performance and compliance with ICE National Detention Standards until a new contract is awarded.

Should you or your staff have any questions regarding this matter, please contact Deputy Assistant Director, Detention Management Division at (202) 305

b6, b7c

Office of Detention and Removal Operations
U.S. Department of Homeland Security
425 I Street, NW
Washington, DC 20536



12/22/04

MEMORANDUM FOR:

Ronald Smith

Field/Office Director

San Djego Field Office

FROM:

Vietor X. Cerds Acting Director

SUBJECT:

San Diego Correctional Facility Annual Detention Review

Headquarters Detention and Removal Operations conducted a Detention Review of the San Diego Correctional Facility from August 31 through September 2, 2004, in San Diego, California. A final rating of <u>Acceptable</u> has been assigned.

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

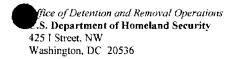
- The Field Office Director, Detention and Removal Operations, shall notify the facility within
 five business days of receipt of this memorandum. Notification shall include copies of the
 Form G-324A, Detention Facility Review Form, the G-324A worksheet, RIC Summary
 Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action, (POA) is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a plan of action is approved, the Field Office Director shall schedule and follow-up on the above noted deficiencies within 90 days.

Subject: San Diego Correctional Facility Annual Detention Review Page 2

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

Acting Deputy Assistant Director, Detention Management Division at (202) 305

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MEMORANDUM FOR:

Victor X. Cerda

Acting Director

FROM:

Reviewer-In-Charge

HQDRO/DMD/DSCB

SUBJECT:

San Diego Correctional Facility Detention Review Summary Report.

Type of Review

This review is a scheduled Headquarters Review, which is performed to determine overall compliance with the Immigration Customs Enforcement (ICE) Detention Standards. The facility received a previous rating of "Good" during the August 2003 review.

Review Summary

The American Correctional Association (ACA) accredited the San Diego Correctional Facility in January 2002. The facility is currently scheduled for ACA re-accreditation. The facility also received accreditation by the National Commission on Correctional Health Care (NCCHC) in July 2002 and the Joint Commission on Accreditation of Health Organizations (JCAHO) in August 2004.

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2003 and 2004 detention reviews:

<u>2003 Review</u>		<u> 2004 Review</u>				
Compliant	32	Compliant	32			
Deficient	4	Deficient	5			
Repeat Deficiency	4	Repeat Deficiency	3			

Memorandum for Victor X. Cerda San Diego Correctional Facility Review Summary Report Page 2

Detainee Classification System - Repeat Deficiency

- The facility was found to be deficient for not using color-coded wristbands or uniforms to categorize the detainees' custody levels.
- The facility conducts classification at intake. Reclassification between 45 and 60 days after arrival is not conducted. Subsequent reassessments are not conducted every 60 and 90 days.

Detainee Telephone Access - Repeat Deficiency

- Detainee telephones are located in an area immediately below the housing unit television set. This location is deficient because it does not allow detainees a *reasonable degree* of privacy during telephone conversations. The facility could remedy this deficiency by moving the unit television and by providing privacy panels.
 - Telephone stations do not provide the standard requirement of unimpeded privacy during use.

Access to Medical Care - Deficient

- Detainee interviews conducted by the PHS reviewer yielded several complaints from detainees who claimed they had to submit multiple sick call requests before being seen in the clinic.
- The San Diego facility experienced a sudden rise in population in early July (from an average
 of approximately 1250 daily to approximately 1600 daily). All resources of the detention
 facility, including DIHS, have been challenged to deal with this increased demand for
 services.
- Patient care areas of the clinic are adequate in terms of space. However, the population
 growth and expanded volume of services have rendered obsolete the original space provision
 of certain non-patient care areas such as the pharmacy (which doubled in staff).
 - □ The opening a of a new detention facility adjacent to the ICE detention facility that offers higher hourly wages contributed to a net loss of seven nurses in a short time period.

Memorandum for Victor X. Cerda San Diego Correctional Facility Review Summary Report Page 3

Detention Files - Repeat Deficiency

• Detention files are prepared at intake. Copies of grievances, complaints, disciplinary and segregation forms are not maintained within these files for record keeping.

Staff-Detainee Communications Standard-Deficient

The Staff-Detainee Communications components are in place in order to allow for formal and informal contact between ICE staff and detainees. Neither the facility nor the ICE office maintain an effective monitoring tool to demonstrate that this standard is effectively being implemented. The facility does not maintain copies of detainee request form responses. Response copies should be maintained for a period of at least three years.

Significant Observations and Best Practices

Access to Legal Material - Best Practice

The law library is maintained and well equipped with computers and typewriters to enable detainees to prepare their cases. The law librarian, Officer beautiful is very knowledgeable in the library operation and in the requirement of access to legal material by special management detainees. The librarian maintained security consciousness and he advised that periodic searches of the library are performed to prevent items from being transferred between units via the library.

Food Service - Significant Observation

The kitchen was reviewed immediately after breakfast was served. During clean up, kitchen workers assured reviewers that safety was observed. Floors were kept mopped and free of food waste to prevent injury. Surface areas on walls and floors were well kept and clean. Food tray carts did not show signs of grit building up near the wheel area of the cart. The kitchen is supervised by a Food Service Administrator who has a broad and well-experienced background. Satellite feeding was observed and food temperatures were maintained effectively. Workers practiced cleanliness by wearing plastic gloves and hairnets.

Staff Appearance - Significant Observation

ICE and contract security staff dressed appropriately and presented a neat appearance. They seemed very knowledgeable about their individual post assignments. Staff was also very thorough in conducting searches of incoming personnel to prevent contraband from entering the facility via the main entrance.

Memorandum for Victor X. Cerda San Diego Correctional Facility Review Summary Report Page 4

RIC Observations

During the last two reviews, the same deficiencies have been identified. CCA and the ICE Field Office have failed to rectify the deficiencies, as there may be contractual issues that are involved. A new contract is scheduled to be awarded January 1, 2005. The Warden of the facility, the ICE Officer-In-Charge and their entire staff were very supportive of the review team and assured the team unimpeded access to the facility throughout the review. This facility is well managed.

RIC Issues and Concerns:

The facility recently commenced supporting the Arizona Border Initiative by providing bed space for approximately 250 detainees. This added support has made it a challenge for ICE staff and the medical unit, to manage these cases and to provide daily medical service. Staffing the medical unit to meet the volume of health care at this facility should be a priority.

Recommended Rating and Justification:

The Reviewer-In-Charge recommended that the facility receive a rating of "Acceptable." The facility complies with 32-of-37 applicable ICE Detention Standards. The facility should respond to all findings and initiate a Plan of Action in response to the deficiencies.

RIC Assurance Statement:

The findings of compliance and noncompliance are documented on the G-324a Inspection form and are supported by documentation in the review file.

Review Authority The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations. HQDRO EXECUTIVE REVIEW: (Please Print Name) Victor X. Cerda Title Acting Director Final Rating: Superior Good Acceptable Deficient

HEADQUARTERS EXECUTIVE REVIEW

At-Risk

Comments: The Review Authority concurs with the Reviewer-In-Charge (RIC) recommended rating of "Acceptable" based on the RIC Memorandum and G324A worksheets. The facility must submit a plan of action within 30 days describing remedies for the deficiencies that are noted in the RIC Memorandum. Oversight is required to ensure Immigration and Customs Enforcement detainees are managed according to the National Detention Standards.

U.S.	Department	Of H	lomeland	Security
U.S.	Immigration	and	Customs	Enforcement

U.S. Immigration and Customs	s Emorcement
ICE Service Processin	g Center
ICE Contract Detention	
ICE Intergovernment	
ICE intergovernment	at Service Agreement
A. Current Inspection	
Type of Review	
Field Office HQ Review	
Date[s] of Review	
August 30 through September 2,	2004
ragust 50 unough September 2,	, 2007
D	
Previous/Most Recent Revi	ew
Date[s] of Last Review	
August 11 through 14, 2003	
Previous Rating	
	ptable Deficient At-Risk
B. Name and Location of Fac	ailit.
B. Name and Location of Fac	curty
Otay Mesa Detention Facility (ODF)	
Correctional Corporation of America (C	C(A)
Address (Street and Name)	
446 Alta Road, Suite 5400	
City, State and Zip Code	
San Diego, California 92158	
County	
San Diego	e av i orași I. I.a
Name and Title of Chief Executive Of b6, b7c Warden	meer (warden/O1C/Superintendent)
Telephone # (Include Area Code)	
519) 661-9119	
District	
SND	
Distance from District Office	
25 Miles	
C. ICE Information	
Name of Reviewer (Last Name	a Title and Duty Station)
D&D Office	
Last Name / Title of Team Me	
I b6, b7c Immigration En	
b6, b7c Deportation C	Officer
Controlling Field Office	
San Diego	
Nearest Field or Sub-Office	
Western	
44 esterii	
D ODDROGA * *	2.1
D. CDF/IGSA Information (
Contract Number	Date of Contract or IGSA
ACT 0 C 0001	Tuly 22 1009

Basic Rates per Man-Day 91.40/ICE 900=60.00

Estimated Man-days Per Year ICE 334, 058 (1-900) 6, 793 (901-1150)

Other Charges: (If None, Indicate N/A)

Detention Facility Review Form Facilities Used Over 72 hours

			1 ucii	11103 0304 1	over 72 nears	
E. Accredit	ation	Certifi	icates			
Accredited By:				_		
Date: 01/02	Date:	07/02	I	Date: 08/04		
F. Problem	ıs / Co	omplaiı	nts (C	opies mus	t be attached)	
The Facility is un	nder (
Court Order				Action Ord		
The Facility has						
☐ Major Litigati Checked Box abo	on		Life/S	afety Issues		
Checked Box abo	ve rec	quires a	detail	ed written	nemorarkium.	
G. Facility Histo	ory					
Date Built						
March 1999						
Date Last Remo	deled	or Upg	gradeo	1		
March 2002		1000				
Date New Const N/A	ructio	on / Bed	dspace	Added		
Future Construc	ction	Planne	d			
Yes No	Date:			100		
Current Bedspa	ce		Futur	re Bedspac	e	
1453			N/A			
H. Total Facilit	hy Pai	nulation	•			
Total Intake for				hs		
11, 781	F					
Total Mandays	for Pr	revious	12 mc	onths		
446, 443						
Classification	n Le					
		L-		L-2	L-3	
Adult Male		34		57	355	
Adult Female		19	2	10	31	
I Fasility Cor						
I. Facility Car	-	ated	One	rational	Emanasas	
Adult Male			Opt	erational 1250	Emergency 1700	
Adult Female		1000 1250 1700 200 200 300				
Addit Pellare				200	300	
Average Da	ily Pa	pulatio	n			
		IC		USMS	Other	
Adult Male		88		294	64	
Adult Female		24		25	0	
Staffing Lev	vel					
Security:		•	Sup	port:		
				_		

Significant Incident Summary Worksheet

ror ICE to complete its Review of your facility, the following information must be completed 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.

Incidents	Description	Jan - Mar	Apr – Jun	Jul - Sept	Oct - Dec
Assault:	Types (Sexual ² , Physical, etc.)	PHYSICAL	PHYSICAL	PHYSICAL	PHYSICAL
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	26	21	17	7
Assault:	Types (Sexual Physical, etc.)	PHYSICAL	PHYSICAL	PHYSICAL	PHYSICAL
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	8	6	2	1
Number of Forced Moves, incl. Forced Cell moves ³		4	2	3	7
Disturbances ⁴		0	0	0	2
Number of Times Chemical Agents Used		2	0	4	7
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
estraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)				
Offender / Detainee Medical Referrals as a result of injuries sustained.		UNK	UNK	UNK	UNK
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	11	25	4	8
	# Resolved in favor of Offender/Detainee	1	1	1	1
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)				
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	122	109	68	121
	# Psychiatric Cases referred for Outside Care	19	13	7	20

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 detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

	/ICE Detention Standards Review Summary Report	
	Access Standards	1. 2. 3. 4.
	Access to Legal Materials	
2.	Group Presentations on Legal Rights	
3.	Visitation	
4.	Telephone Access	
	inee 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	X IT I
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	
	Ith Services	0 0
18.	Hunger Strikes	
19.	Medical Care	
٦.	Suicide Prevention and Intervention	
1.	Terminal Illness, Advanced Directives and Death	
Secu	urity 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	\boxtimes
37.	Staff / Detainee Communication	\boxtimes
38.	Detainee Transfer	
39.	Detainee Search	

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

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By signing below, the Reviewer-In-Charge (RIC) certifies that all findings of noncompliance with policy or inadequate controls contained in the Review 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	b6, b7c
Title & Duty Location	Date
Detention and Deportation Officer, HQ-DRO	September 13, 2004
Team Members	
Print Name & Duty Location	Print Name & Duty Location
El Paso, Texas	
Print Name & Duty Location	Print Name & Duty Location
b6, b7c Dallas, Texas	
RIC Rating Recommendation: ☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk	

RIC Comments:

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 and document copying privileges, and the opportunity to prepare legal documents.							
Components	Α	U	NA	Remarks			
The facility provides a designated law library for detainee use.	×						
The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	Ø						
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.	M			Viewed six computers and three typewriters. Tested machines.			
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 the ICE prior to inclusion.			⊠				
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 facility supplements Attachment A materials with Lexis Nexis Law Library.	Ø			Viewed same.			
There is a designated employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	×			Officer b6, b7c is assigned to this post and is responsible for these duties.			
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.				Viewed schedule.			
Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodate within 3 – 5 business days.	×						
The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	⊠			As long as they are within the same unit.			
ICE staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	Ø						
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	×						
Detainees housed in Administrative Segregation 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.				No denials			

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ACCESS TO LEGAL MATERIALS								
Policy Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.								
Components	A	ט	NA	Remarks				
ICE Management is aware of each instance where detainees are denied access to the law library or law materials.			×	No denials				
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	×							
ACCESS TO LEGAL MATERIALS – Rating When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.								
Standard Rating:								
Acceptable Deficient At-Risk Repeat Finding Remarks: (Record significant facts, observations, alternate source used for verification, etc.)								
Augmors Signature / Date								

ADMISSIONS AND RELEASE - Rating						
	und out of compliance, t	of Action for bringing operations into ne plan of action will specify remedial action and				
Standard Rating:						
Acceptable Deficient	At-Risk	Repeat Finding				
Remarks: (Record significant fac	ts, observations, other so	ources used, etc.)				

Policy: All facilities will develop and implement a system a classification system will ensure that each detainee is plac from detainees in other categories				
Components	Yes	No	NA	Remarks
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	Ø			
The facility classification system includes: Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviewing every classification decision.	×			
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	×			
Staff use 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.	Ø			
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	Ø			

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Per Officer b6, b7c no re-

Detainee receives copy

Page 13 doesn't explain

applicable to each.

conditions and restrictions

within 72 hours.

classification is done.

classification designations.

90 days.

10 business days.

The classification process includes

reduce a classification-level on appeal.

restrictions applicable to each.

reassessment/reclassification. Reassessments are

conducted between 45 and 60 days after arrival and

subsequent reassessments are completed every 60 to

The classification system includes standard procedures for processing new arrivals' appeals. Only a designated

supervisor or classification specialist has the authority to

Classification appeals are resolved within five business

Classification designations may be appealed to a higher

explains the classification levels, with the conditions and

days and detainees are notified of the outcome within

authority such as the Officer in Charge or equivalent.
The Detainee Handbook or equivalent for IGSAs

CLASSIFICATION SYSTEM

Page 8 G-324A Detention Inspection Form Worksheet for IGSAs Rev: 09/25/03

	CLASSIFICATION SYSTEM - Rating				
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.					
Standard Rating:					
☐ Acceptable ☐ Deficient	At-Risk	□ Repeat Finding			
*Remarks: (Record significant facts	s, observations, other so	ources used, etc.)			
The facility is still not using color-coded uniforms or wristbands. ICE detainees are issued a green or pink clip-on ID card depending on gender, which can be easily removed.					
Classification Officer also stated that no re-classification is being done between 45 and 60 days after arrival. He stated that once detainees are classified, "it's pretty much a done deal unless new information regarding the detainee is received."					
b6, b7c	2/04				

CORRESPONDENCE AND OTHER MAIL				
Policy: All facilities will ensure that detainees send and recilimitations required for the safety, security, and orderly operablect to the same limitations. Each facility will widely distriputer mail.	eive com	espond of the fa ouideline	ence in cility. O	ther mail will be permitted,
Components	Yes	No	NA	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each	×			
detainee via a detainee handbook. The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	⊠			
Incoming mail distributed to detainees on the day it is received by the facility and in no case more than 24 hours after it is received.	⊠			
Outgoing mail routinely delivered to the postal service within one day of its entering the internal mail system (excluding weekends and holidays).	×			
Staff records all priority, overnight, and certified mail delivered by the U.S.P.S. and all deliveries from commercial alternatives to the U.S.P.S.	×			Viewed (3) logs (ICE, Legal, and Certified Mail)
Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized by the Officer-In-Charge or equivalent for prevailing security reasons.		⊠		All mail except legal mail is opened w/o detainees present.
Staff does not ever read incoming general correspondence without the OIC's prior approval.	Ø			
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	⋈			Unit Mgr. handles with the detainee present.
Staff are prohibited from reading or copying incoming special correspondence.	⊠			
Staff are 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. Inspection of outgoing special correspondence is done in the presence of the detainee and for contraband only.	⊠			
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			

 \boxtimes

Viewed documentation

folder for rejected items.

The OIC monitors staff handling of discovered

up to date.

contraband and its disposition. Records are accurate and

CORRESPONDENCE AN	ID OTH	ER MAI	L	
Policy: All facilities will ensure that detainees send and reclimitations required for the safety, security, and orderly opsubject to the same limitations. Each facility will widely distriputed mail.	eration o	of the fa	cility. C	Other mail will be permitted,
The procedure for safeguarding cash removed from a detainee is effective. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	⊠			
Original Detainee identity documents (e.g., passports, birth certificates) are maintained A-files.	\boxtimes			Documents are turned over to ICE.
Staff provides the detainee an ICE-certified copy of his/her identity document(s) upon request.	×			
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.		×		Prohibited items are returned to sender unless they are illegal contraband (i.e. drugs).
Every indigent detainee has the opportunity to mail, at government expense: Correspondence about a legal matter: At least three other letters per week: Packages deemed necessary by ICE.	×			Need to fill our Indigent Form with Unit Mgr.
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	⊠			
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	×			If indigent.
CORRESPONDENCE AND C	THER	MAIL - I	Rating	
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.				
Standard Rating: ☑ Acceptable ☐ Deficient ☐ At-Risk		Repe	at Find	ling
*Remarks: (Record significant facts, observations, other so	urces u	sed, etc	:.)	
b6, b7c - 9/3/04 Padanor s≪signature / Date				
Community of Date				

Page 11
G-324A Detention Inspection Form Worksheet for IGSAs
Rev: 09/25/03

DETAINEE HANDBOOK							
Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.							
Components	Yes	No	NA	Remarks			
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).	Ø			Viewed both handbooks.			
The handbook supplements the facility orientation video where one is provided.	☒						
All staff members receive a handbook and training regarding the handbook contents.	×			Per Assistant Warden			
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.	⋈			Revised May 2004			
The detainee handbook address the following issues: Personal items permitted to be retained by the detainee. Initial issue of clothes.	×			Page 2 of handbook			
The detainee handbook states in clear language basic detainee responsibilities.	Ø			Pages 1-2 of handbook			
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	Ø			Page 13 of handbook			
The handbook identifies: Initial issue of clothing and bedding and personal hygiene items.	⋈			Page 2 of handbook			
The handbook states when a medical examination will be conducted.	\boxtimes			Consistent w/need as stated on page 5.			
The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	×						
The handbook describes; Official count times and count procedures Meal times, feeding procedures, procedures for medical or religious diets, additional information, Smoking policy, Clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	⊠			Throughout handbook on various pages.			
The handbook describe times and procedures for obtaining disposable razors and allows that detainees attending court will be afforded the opportunity to shave first.	Ø			See unit schedule on page 2 of handbook.			
The handbook describes barber hours and hair cutting restrictions.	⊠			Page 5 of handbook			
The handbook describes; the telephone policy, debit card procedures, direct and frees calls; Locations of telephones; Policy when telephone demand is high; Policy and procedures for emergency phone calls, and the Detainee Message System.	⊠			Page 4 of handbook			
The handbook addresses religious programming	M			Page 3 of handbook			

Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.					
Components	Yes	No	NA	Remarks	
The handbook states times and procedures for commissary or vending machine usage. (where available)	×			Page 6 of handbook	
The handbook describes the detainee voluntary work program procedures and pay procedures.	×			Page 3 of handbook	
The handbook describes the library location and hours of operation and law library procedures and schedules.	×				
The handbook describes; attorney visitation hours; Location of the list of pro bono legal organizations; Group legal rights presentations schedule and sign up procedures.	×			Page 8 of handbook	
The handbook describes the facility search procedures and contraband policy.		×		Only describes search, but nothing about contraband.	
The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	Ø			Page 7 of handbook	
The handbook describes the correspondence policy and procedures.	⊠			Page 9 of handbook	
The handbook describes the detainee disciplinary policy and procedures: Including: Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process.		×		Doesn't specify time limits in the disciplinary process.	
The grievance section of the handbook explains all steps in the grievance process – Including: Informal and formal grievance procedures; The appeals process and step-by-step procedures; In CDFs/IGSA facilities: procedures for filing an appeal with ICE. Staff/detainee availability to help during the grievance process Guarantee against staff retaliation for filling/pursuing a grievance. How to file a complaint about officer misconduct with the Department of Justice.		⊠		Doesn't state how to appeal. Only states the time frames. Doesn't make mention about filing an appeal with ICE, availability of help during grievance, guarantee against retaliation, or how to file complaint with DOJ.	
The handbook describes the detainee grievance procedures including appeals.	⊠				
The detainee handbook describes the sick call procedures for general population and segregation.	×				
The handbook describes the facility recreation policy including: Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing.	×				
The handbook describes the detainee dress code for daily living; Work assignments.	×			Pages 8-9 of handbook.	

DETAINEE HANDBOOK

DETAINEE HAI	NDB00	K	· · · · · · · · · · · · · · · · · · ·	
Policy: Every OIC will develop a site-specific detainee hat detention policies, rules, and procedures in effect at the faprograms, and opportunities available through various sou etc. Every detainee will receive a copy of this handbook up	icility. T	he hand luding t	book w he facili	rill also describe the services, ity, ICE, private organizations
Components	Yes	No	NA	Remarks
The handbook specifies the rights and responsibilities of all detainees.	×			
DETAINEE HANDB	00K - R	ating		
When rated below Acceptable, facilities must attach a Plan compliance. For each element found out of compliance, the estimated timetable for compliance.				
Standard Rating:				
□ Acceptable □ Deficient □ At-Risk		Rep	eat Fin	ding
*Remarks: (Record significant facts, observations, other s	ources	used, et	c.)	
Advisory				
The handbook was updated to reflect previously missing in law library and pro bono organizations. The handbook still the DMCP Standard. However, the G-324A Worksheet was changes and thus had no way of knowing what new inform handbook, specifically question # 9 on page 13 of the worksheet was changed as th	l does ne is updat lation wa	ot conta ed and	in all th the faci	e information required by lity was unaware of the
The grievance section doesn't explain the appeals process	. It only	addres	ses the	time frame.
The handbook doesn't address the procedure for filing an	appeal v	with ICE	or a gr	ievance with DOJ.
The handbook doesn't address staff/detainee availability to	help du	uring the	appea	il process.
The handbook doesn't address the issue of guarantees ag	jainst re	taliation	from st	taff for filing a grievance.
It also fails to address the following:				
There was nothing found within the handbook regarding caddressed.	ontrabar	nd policy	. Only	the search policy was
The disciplinary policy and procedures don't specify time li only referred to in the Offense Categories Appendix in the will make reference to time limits in the Discipline Information	back of	the han		
b6, b7c - 9/2/04				

Auditor's Signature / Date

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	Yes	No	NA	Remarks	
The food service program is under the direct supervision of a <u>professionally trained</u> and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	×			FSA has 23 years with U.S. Navy. CS has 11 years of experience.	
The CS is on duty on days when the FSA is off duty and vice versa.	⋈				
The FSA provides food service employees with training that specifically addresses detainee-related issues. • In ICE Facilities this includes a review of the ICE	×			Also via video	
"Food Service" standard					
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.			×	Dough cutters attached to table. No knives in facility.	
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils				Meats are pre-cut.	
Special procedures govern the handling of food items that pose a security threat.			×	None of these products used.	
Standard operating procedures include daily searches (shakedowns) of detainee work areas.	×				
The FSA monitor staffs implementation of the facility's counting procedures. These procedures in written form and staff are trained in counting procedures.	⋈			2 x per week	
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	×			Viewed kitchen/food service area.	
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	×				
The CS instructs newly assigned detainee workers in the rules and procedures of the food service department.	×				
During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.	×				
The CS documents all training in individual detainee detention files?		⊠		No centralized files in place.	
Detainees are paid in accordance with the "Voluntary Work Program" standard or prevailing IGSA standards.	×			\$1.00/day	

FOOD SER	AICE					
Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.						
Components	Yes	No	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.	×					
A transparent "sneeze guard" protects both the serving line and salad bar line.			⊠	Food is brought to pods.		
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.		×		28-day menu is used.		
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles. (Provide examples)	Ø			FSA considers Hispanic and Asian population.		
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	☒			be is Registered Dietitian.		
The CS has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	×					
The CS has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA	⊠					
All staff and volunteers know and adhere to written food preparation procedures.	Ø					
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	⋈		. 🗆	Currently 20 detainees receiving religious meals.		
A common-fare menu available to detainees whose dietary requirements cannot be met on the main. 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 provides hot water for instant beverages and foods. Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.						
A Supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	×			·		
The OIC, in conjunction with the Chaplain and/or local religious leaders, provide the FSA a schedule of the ceremonial meals for the following calendar year.	. 🛛					

FOOD SERVICE							
Policy: Every facility will provide detainees in its care accordance with the highest sanitary standards.	Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.						
Components	Yes	No	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						
Satellite-feeding programs follow guidelines for proper sanitation.	☒						
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours.	\boxtimes						
All meals provided in nutritionally adequate portions.	\boxtimes						
Food is not used to punish or reward detainees based upon behavior.	⋈			=			
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.	⊠			On-going			
Everyone working in the food service department complies with food safety and sanitation requirements. a. If not, explain non-compliance.	☒						
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?	⋈			Morning and afternoon inspections are conducted as well as weekly inspections.			
Equipment is inspected for compliance with health and safety codes and regulations. When was the most recent inspection? Which agency conducted the inspection?	⊠			June 2004 was last inspection by San Diego County Health Dept.			
Reports of discrepancies are forwarded to the OIC or AOIC and corrective action is scheduled and completed.	⊠			Via maintenance log			
Standard procedure includes checking and documenting temperatures of all dishwashing machines during each meal.	×						
Staff documents the results of every refrigerator/ freezer temperature check.	×						

 \boxtimes

The cleaning schedule for each food service area is

conspicuously posted.

Schedule is posted in FSA's office only.

FOODS	SERVICE			:
Policy: Every facility will provide detainees in its of accordance with the highest sanitary standards.	are with n	utritious	and app	petizing meals, prepared in
Components	Yes	No	NA	Remarks
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	×			
Storage areas are locked when not in use.	Ø			
When rated below Acceptable, facilities must attach a loompliance. For each element found out of compliance the estimated timetable for compliance.				
Standard Rating:				
□ Acceptable □ Deficient □ At-Risk		☐ Rep	eat Defi	ciency
*Remarks: (Record significant facts, observations, oth	er sources	used, e	tc.)	
Cleaning schedule is not conspicuously posted in the k office.	itchen area	. The o	only copy	is posted in the FSA's
Standard calls for 35-day menu cycle. Facility is utilizing is only required to utilize a 21-day menu cycle.	ng a 28-day	menu (cycle. Co	ontract shows that facility
66, b7c - 9/2/04				
Auditor's Signature / Date				

FUNDS AND PERSONA	L PROF	ERTY		
Policy: All facilities will implement procedures to contended Procedures will provide for the secure storage of funds, valuables, and other property. Standard NA: Check this box if all ICE detainee Fundation in the ICE Field Office or Sub-Office in contended.	luables, the initia ds, Valu	baggag I and re ables a	e and ogularly:	other personal property; the scheduled inventorying of all perty are handled only by
Components	Yes	No	NA	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only.	☒			
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 medicine to the medical staff.	×			Per staff
Staff searches arriving detainees and their personal property for contraband.	×			
There is a written policy for returning forgotten property to detainees and staff follows procedures?	Ø			Viewed lost property forms.
Property discrepancies are immediately reported to the CDEO or Chief of Security.	×			Warden and OIC are notified.
Staff follows written procedures when returning property to detainees.	×			Viewed post orders.
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	×			
 The facility attempts to notify an out-processed detainee that he/she left property in the facility. By sending written notice to the detainee's last known address; Via certified mail; 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.	⊠			

FU	IDS AND PERSONAL F	PROPERTY - Rating
	ind out of compliance, th	of Action for bringing operations into ne plan of action will specify remedial action and
Standard Rating:		
	At-Risk	Repeat Finding
*Remarks: (Record significant fact		ources used, etc.)
Auditor's Signature / Date	9/2/04	

GROUP LEGAL RIGHTS P	RESEN	HOITATI	VS	
Policy: Facilities housing ICE detainees shall permit authordetainees for the purpose of informing them of U.S. immigration orderly operation of each facility. ICE encourages such immigration system and their rights and options within it. Check here if No Group Presentations were conducted Acceptable overall and continue on with next portion of	tion law presented within	and pro itations, in the pa	cedures which is	s, consistent with the security astruct detainees about the
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 proper notification to attorneys or accredited representatives in a timely manner.				
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.	- 🗆			
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.				
When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.				
Detainees in segregation and unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.				
Interpreters are admitted when necessary to assist attorneys and other legal representatives.				
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.				
Staff permits presenters to distribute ICE-approved materials.				
The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff are present but do not monitor conversations with legal providers.				
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or disignee; and the reasons for suspension are documented. The Headquarters Office for Detetnion 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 I including attachments, is available request			
GRO	OUP LEGAL RIGHTS P	PRESENTATIONS	
•	ınd out of compliance, th	n of Action for bringing operations into the plan of action will specify remedial action ar	ıd
Standard Rating:			
☑ Acceptable ☐ Deficient	☐ At-Risk	Repeat Finding	
*Remarks: (Record significant fact	s, observations, other so	sources used, etc.)	
*Remarks: (Record significant fact	s, observations, other so	sources used, etc.)	

DETAINEE	GRIEVANCE PROC	FDURFS

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	Yes	No	NA	Remarks
Written procedures provide for the informal resolution of oral grievances. 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 no documented substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. • If yes, explain.	×			
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complains" are identified in the records. For quality control purposes, staff documents nuisance complaints received but not filed.	×			Viewed log
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	Ø			

DET	AINEE GRIEVANCE PR	OCEDURES - Rating	
	ind out of compliance, th	of Action for bringing operations into ne plan of action will specify remedial action	and
Standard Rating:			
□ Acceptable □ Deficient	At-Risk	☐ Repeat Finding	
*Remarks: (Record significant fact	s, observations, other so	ources used, etc.)	
Auditor's Signature / Date	10/104		

 EXCHANGE OF	 	

Policy: ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Yes	No	NA	Remarks
The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels. • The supply of these items exceeds the minimum required for the number of detainees.	⊠			Inventory = 4 x population
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 jumpsuit. One pair of socks. One pair of underwear (Daily change). One pair of facility-issued footwear.	⊠			
Additional clothing is available for changing weather conditions or is seasonally appropriate.	Ø			
New detainees are issued clean bedding, linens and towel. They receive One mattress One blanket One pillow Two sheets One pillowcase One towel Additional blankets are issued based on local weather conditions.	⊠			
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	×			
Detainees are provided clean clothing, linen and towels. Socks and undergarments exchanged daily. Outer garments at least twice weekly. Sheets at least weekly. Towels at least weekly. Pillowcases at least weekly.	×			
Food service detainee volunteer workers permitted to exchange outer garments daily.	×			
Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	Ø			



When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance. Standard Rating: Acceptable Deficient At-Risk Repeat Finding *Remarks: (Record significant facts, observations, other sources used, etc.)	HANGE OF CLOTHING	, BEDDING, AND TOWELS - Rating	
□ At-Risk □ Repeat Finding	nd out of compliance, th		n and
*Remarks: (Record significant facts, observations, other sources used, etc.)	☐ At-Risk	☐ Repeat Finding	
b6, b7c Additor's Signature / Date		ties must attach a Plan on the first out of compliance, the first out of t	nd out of compliance, the plan of action will specify remedial action nce. At-Risk Repeat Finding

MARRIAGE REC	UESTS					
Policy: All detainee marriage requests will receive case-by	y-case c	onsider	ation fr	om ICE management.		
Components	Yes	No	NA	Remarks		
The Field Office considers detainee marriage requests on a case-by-case basis.	×			Sent to ICE AOIC.		
The Field Officie Director reviews every marriage request rejected by an OIC or IGSA. Rejections are documented.	×			Viewed requests, folders, documents.		
It is standard practice to require a written request for permission to marry.	×					
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	×			Viewed same		
The OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	Ø			Viewed same		
When permission is denied, the OIC states the basis for his/her decision.	×					
The OIC provides the detainee with a place and time to make wedding arrangements.	×			Legal Visitation Room		
MARRIAGE REQUESTS						
When rated below Acceptable, facilities must attach a Plan compliance. For each element found out of compliance, the estimated timetable for compliance. Standard Rating:						
☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding						
*Remarks: (Record significant facts, observations, other so				maintained organized		

NON-MEDICAL EMERGENCY ESCORTED TRIPS					
Policy: The Immigration and Customs Enforcment (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 NA: 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 OIC considers and approves, on a case-by-case basis, trips to immediate family member's: • Funeral • 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 Field Office Director is the approving official for non-medical escorted trips.					
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.					
Detainees who require overnight housing placed in approved IGSA facilities.					
Each escort includes at least two officers. The detainee under constant, direct visual supervision of escorting staff.					
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: a. Increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.					
Escort officers do not accept gifts/gratuities from a detainee, 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. Do not arrange to visit family or friends unless approved before the trip. Make no unauthorized phone calls. Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 					
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.					



NON MEDICAL EMERGENCY ESCORT - Rating						
• ′	ınd out of compliance, th	of Action for bringing operations into se plan of action will specify remedial action a	ınd			
Standard Rating:						
	☐ At-Risk	☐ Repeat Finding				
∠ Acceptable	∐ At-Risk	☐ Repeat Finding				
*Remarks: (Record significant fact	s, observations, other so	ources used, etc.)				
b6, b7c	12/04					



RE	CR	EA	TIO	N

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.

Components	Yes	No	NA	Remarks
Does the facility provide: An indoor recreation program? An outdoor recreation program?	☒			Viewed outdoor recreation and indoor games.
The recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the particular detainee population.	☒			
Regular maintenance keeps recreational facilities and equipment in good condition.	⊠			
The recreational specialist or trained equivalent supervises detainee recreation workers.	×			Currently about 12-15 detainee volunteers.
The recreational specialist or trainined equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	Ø			
Dayrooms offer sedentary activities, e.g., board games, cards, television.	X			Viewed same
Outside activities are restricted to limited-contact sports.	Ø			Basketball
Each detainee has the opportunity to participate in daily recreation.	Ø			Minimum of 1 hour daily
Detainees 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.	Ø			
Staff conducts searches of recreation areas before and after use.	Ø			
All recreation areas under constant staff supervision.	Ø			
Supervising staff is equipped with radios.	\boxtimes			
The facility provides detainees in the SMU at least one hour of outdoor recreation time daily.	Ø			
Detainees in disciplinary segregation receive a written explanation when a panel revokes his/her recreation privileges.	×			If it were to occur, but there were no known instances.
Does the OIC review the panel's decision before it becomes effective.	Ø			
Detainees in administrative segregation receive a written explanation for denied recreational privileges.	⊠			·
Volunteer groups present special programs or religious activities.			Ø	
Volunteers are required to sign a waiver of liability before entering a secure portion of the facility where detainees are present.			Ø	
Visitors, relatives or friends are not allowed to serve as volunteers.	×			
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.			Ø	



RECREATE	na.	*			
Policy: It is ICE policy to provide access to recreational pextent possible, under conditions of security and supervision	orogram				
The OIC documents all detainee-transfer decisions, whether yes or no.			Ø		
The detainee's written decision for or against an offered transfer documented in his/her A-file.			×		
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.			\boxtimes		
If no recreation is available, the ICE District routinely review transfer eligibility for all detainees after 60 days.			\boxtimes		
Does the A-file of every detainee 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.			×		
RECREATION -	- Rating				
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.					
Standard Rating:		7_			
Recreation Supervisor said that movies are shown on week Style" chess sets for the Asian population. There are also viping pong, etc. where prizes are awarded.	ends. H	e also r	naintair		
66, b7c - 9/2/p4					

Auditor's-Signature / Date

RELIGIOUS PRA	CTICES	;		
Policy: Facilities will provide ICE detainees of all faiths with in the practices of their faith, limited only by the constraints of and budgetary considerations.				
Components	Yes	No	NA	Remarks
Detainees are allowed to engage in religious services.	Ø			
Space is available for detainees to conduct religious services.	Ø			
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. Allowing activity restrictions.	×			
Each detainee is allowed religious items in his/her immediate possession.	×			
Volunteer's credentials are checked and verified before letting him/her participate in detainee programs.	×			
Members of faiths not represented by clergy conduct may request to present their own services within security allowances.	×			
Detainees in the Special Management Unit to participate in religious practices unless otherwise documented for the safety and security of the facility.	×			
RELIGIOUS PRA	ACTICES	S		
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.				
Standard Rating: Acceptable Deficient At-Risk Repeat Finding				
*Remarks: (Record significant facts, observations, other se	ources u	ised, etc	c.)	

DETAINEE TELEPH	ONE AC	CESS		
Policy: All facilities housing ICE detainees will permit deta	inees' re	asonabl	e and eq	uitable access to telephones.
Components	Yes	No	NA	Remarks
Detainees allowed access to telephones during established facility waking hours.	×			
Upon admittance, detainees are made aware of the facility's telephone access policy.	×			Page 4 of handbook
The telephone access rules are posted in each housing area.	\boxtimes			Viewed bulletin board
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	×			Viewed notices on bulletin board in housing units.
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	Ø			8 phones per pod 68-102 detainees per pod
Telephones are inspected regularly by facility staff to ensure that they are in good working order.	⊠			
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	⊠			
The facility administration monitors repair progress and take appropriate measures to ensure that the required repairs are begun and completed timely.	×			
Detainees are afforded a reasonable degree of privacy for legal phone calls.		Ø		See comments
A procedure exists to assist a detainee who is having trouble placing a confidential call.	Ø			
The facility provides the detainees with the ability to make non-collect (special access) calls.	×			
Special Access calls are at no charge to the detainees.				
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, the 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".	×			
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	×			
Use of general access phones is ordinarily not restricted.	×			·
Any restrictions are documented.	Ø		ᆫᆜ	
The facility has a system for taking and delivering emergency detainee telephone messages.	×			
Emergency phone call messages are immediately given to detainees.	×			
Detainees are allowed to return emergency phone calls as soon as possible.	⊠			
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.	×			



ONE AC	CESS				
Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones					
Yes	No	NA	Remarks		
×					
×					
⊠					
ACCE	99 - Rad	lina			
	⊠ Repo	eat Findir	ng		
*Remarks: (Record significant facts, observations, other sources used, etc.) The telephone system remains unchanged from the previous inspection. Telephones do not have privacy panels. Telephones are still located under TVs in the housing units, making it difficult to have a conversation or a reasonable degree of privacy. 10					
	ACCE of Actions of Act	Yes No Yes No Repertures used, efforts inspection.	inees' reasonable and equivers in No NA		



VISITATION					
Policy: ICE shall permit detainees to visit with family, friend the news media.	ts, legal	represe	ntatives	, special interest groups and	
Components	Yes	No	NA	Remarks	
There is a written visitation schedule and hours for general visitation.	X			Housing unit and handbook	
The visitation hours tailored to the detainee population and the demand for visitation.	\boxtimes				
The visitation schedule and rules are available to the public.	×				
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.	×			Rules are on visitation request form.	
A general visitation log is maintained.					
The detainees are permitted to retain personal property item specified in the standard.			Ø		
A visitor dress code is available to the public.	Ø			Posted in lobby	
Visitors are searched and identified according to standard requirements.	⊠			Metal detector	
The requirement on visitation by minors is complied with.	×				
At facilities where there is no provision for visits by minors, the 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 afforded visitation.	\boxtimes				
Legal visitation is available seven (7) days a week, including holidays.	Ø			Unlimited	
On regular business days legal visitation hours 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.	×				
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.	\boxtimes				



VISITATI	ON			
Policy: ICE shall permit detainees to visit with family, friend the news media.	ds, legal	гергеѕе	ntatives	, special interest groups and
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	×			Viewed list on bulletin boards in housing units.
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	Ø			
Provisions for NGO visitation as stated in the Detention Standards are complied with.	Ø			
Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Field Office for approval.		Ø		Referred to CCA Chief of Security.
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.		Ø		Can visit if on approved list.
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	Ø			Instances are rare, but allowable.
VISITATION -	Rating			
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.				
Standard Rating: Acceptable Deficient At-Risk		☐ Rep	eat Find	ling
*Remarks: (Record significant facts, observations, other sources used, etc.) b6, b7c - 9/b/o4f				
Abditor's Signature / Date				

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 the facility has a detainee work program and ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.					
Components	Yes	No	NA	Remarks	
Does the facility have a voluntary work program? If yes, do detainees participate?	\boxtimes				
Detainee housekeeping meets neatness and cleanliness standards.	\boxtimes				
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.		×		Level 1s can work outside the secure perimeter. This is allowable per DMCP Standard.	
Written procedures govern selection of detainees for the Voluntary Work Program. The same procedures apply for replacement workers as for "new" workers. Staff follows written procedures.	×				
Where possible, physically and mentally challenged detainees participate in the program.			×	None	
The facility complies with work-hour requirements for detainees, not exceeding: Eight hours a day. Forty hours a week.	×			Maximum allowed is: 7 hours/day 35 hours/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.		⊠		Could be, but not always forwarded to file per staff.	
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	⊠				
The voluntary work program meets: OSHA standards NFPA standards ACA standards	⊠				
Medical staff screens and formally certifies detainee food service volunteers. Before the assignment begins As a matter of written procedure	Ø				
Detainees receive safety equipment/ training sufficient for the assignment	Ø				
Proper procedure is followed when an ICE detainee is injured on the job.	Ø				

VOLUNTARY WORK PROGRAM - Rating					
When rated below Acceptable, facilit compliance. For each element foun the estimated timetable for complian	d out of compliance, th	of Action for bringing operations into ne plan of action will specify remedial action and			
Standard Rating:					
🛮 Acceptable 🗌 Deficient	☐ At-RisK	Repeat Finding			
*Remarks: (Record significant facts, *Advisory*	. observations, other so	ources used, etc.)			
when removed from a work detail. T	his is usually the stand ust be written justification	n is not always placed in the detainee's file lard practice when a detainee quits a work detail. on from the OIC placed in the detainee's file			
Aŭditor's Signature / Date	<u>/a/</u> v4				

Section II

Health Services Standards

HUNGER STRIKES					
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	Yes	No	NA	Remarks	
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	\boxtimes				
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.	⊠				
Policy and procedure require that staff isolate a hunger- striking detainee from other detainees. • If yes, in an observation room?	⊠				
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.					
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	×				
The OIC of the facility obtains a hunger striker's consent before medical treatment.	\boxtimes				
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	\boxtimes				
During a hunger strike, staff documents and provides the hunger-striking detainee three meals a day.	×				
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.	Ø				
Staff is directed to record the hunger striker's fluid intake and food consumption, does staff always use Hunger Strike Monitoring Form I-839. IGSA's use a similar form.	×				
The medical staff has written procedures for treating hunger strikers.	Ø				
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	⊠				
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remain current in evaluation and treatment techniques.	×			Staff has received training however documentation of this needs to be more clearly delineated.	

	HU	INGER STRIKES - Rati	ng 🛴	
compliance. For ea		of compliance, the plan of	n for bringing operations into of action will specify remedial action	m
Standard Rating:				
	☐ Deficient	☐ At-Risk	Repeat Finding	
category and the tra	aining outline be readily	accessable. You might	tation as well as annually have its want to consider joint training ses the size of this facility this may no	sions
reasible.				
b6. b7c		14/4		
Auditor y Signature		13/04		

ACCESS TO MEDICAL CARE						
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.						
Components	Yes	No	NA	Remarks		
IGSA facilities operate a health care facility in compliance with State and Local laws and guidelines.			\boxtimes			
The facility's in-processing procedures of arriving detainees include medical screening.	⊠			The screenig area is cramped and a long way away from the x-ray machine. There is privacy but it does not allow for timely processing of new screenings		
All detainees have access to and receive medical care.				There is not enough staff to handle the volume at this facility & therefore they are are not seen in sick call soon enough. Many detainees told me that they have submitted 3 and 4 sick call slips and have not been seen yet. One detainee told me he had stomach pain for two weeks & had not put in a sick call slip because he did not know the procedure.		
For IGSAs, the district has access to a Managed Health Care Coordinator.			\boxtimes			
The medical staff large enough to provide examine and treat the facility's detainee population.		×		Recently there has been an increase in the detainee population by 250. There is also a high detainee turn over rate. This coupled with the fact that recently 7 nurses have resigned makes staffing dangerously low		
The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.				Again the design of the clinic is not conducive to handleing the large numbers of detainees now at this facility. They need a new fetal heart monitor.		
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	⊠					

ACCESS TO MEDICAL GARE						
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.						
The medical facility entrance includes a holding/waiting room.		⊠		There is a holding/waiting area but it's not in the entrance. The configration of the clinic is a square within a squareand it is small		
The medical facility's holding/waiting room under the direct supervision of custodial staff.	×					
Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	\boxtimes					
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. Procedurally, no copies made and placed in detainee files.	⊠			They have an excellent medical records department.		
Pharmaceuticals are stored in a secure area.	\boxtimes					
Medical screening includes a Tuberculosis (TB) test.	×					
All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit.	×			The mental health screenig is done-however I did find one chart that should have been referred to a mental health provider and was not & later that same day the detainee made a suicide gesture.		
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.		⊠		They have fallen behind on the P.E.s because of the large work volume & low staffing		
Detainees in the Special Management Unit have access to health care services.	×					
Staff provides detainees with health- services request slips daily, upon request. • Request slips are available in the 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 slick call slips are in Spanish & English. No other large language groups		

ACCESS TO MEDICAL CARE					
Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.					
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.	\boxtimes				
The plan includes a list of telephone numbers for local ambulances and hospital services.	\boxtimes				
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	\boxtimes				
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	\boxtimes				
In IGSAs, if staff is used to distribute medication, a health care provider properly trains these officers.			\boxtimes		
The medical unit keeps written records of medication that is distributed.	\boxtimes				
The I-819 (or IGSA equivalent) is used to notify the OIC/Facility of a detainee that has special medical needs.	\boxtimes				
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	×				
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	⊠				
The facility health care/IGSA provider is given advance notice prior to the release, transfer, or removal of a detainee.	\boxtimes				
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	⊠				
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and Anumber and marked "MEDICAL CONFIDENTIAL".	×				

ACCESSIOM-DICAL CARE					
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.					
Standard Rating:					
☐ Acceptable					
*Remarks: (Record significant facts, observations, other sources used, etc.) The medical care given here is very good, however, the stucture of the building & clinic space is not conducive to the number of detainees that they service. I concure with the advisory of the previous survey that the size of the Pharmacy is substandard. Due to the nature of the mixed male & female population as well as other security factors, it is necessary to conduct 7 counts a day & this slows down clinic flow. They start their sick call at 0500 in order to attempt to accomidate the numbers that they need to see.					
This facility is almost at risk due to low number of medical staff.					

9/3/04

Auditor spoignature / Date

SUICIDE PRÉVENTION 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	Yes	No	NA	Remarks		
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.		⊠		The staff is knowledgeable however documentation was absent for the nursing staff's orientation & only partially completed for the annual training. New forms to correct this problem have been implemented.		
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; Understand and apply suicide-prevention techniques.	⊠					
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.	⊠			One chart that was reviewed the nurse had detected that the detainee had a long history of suicidal ideation & had missed two doses of their psychiatric medication - but did not refer this detainee to a provider - the HSA was notified & further education for the staff is planned		
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	Ø					
The facility has a designated isolation room for evaluation and treatment.	×					
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	\boxtimes					
Medical staff has approved the room for this purpose.						
Staff observes a suicide-watch detainee at least once every 15 minute.	\boxtimes					
SUICIDE PREVENTION AND INTERVENTION - Rating When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.						
Standard Rating: Acceptable Deficient At-Ri	Standard Rating: Acceptable Deficient At-Risk Repeat Finding					
				vamaniy		

Page 46 G-324A Detention Inspection Form Worksheet for IGSAs Rev: 09/25/03 *Remarks: (Record significant facts, observations, other sources used, etc.)

Strong advisory to increase the number of medical staff & to have review training re: when to refer a detainee to a provider as well as improving charting methods. Advised to have repeat suicide training close to the Holidays since the incidence of suicide increases at this time of year.

b6, b7c

Auditor s argnature / Date

9-3-04

TERMINAL ILLNESS, ADVANCED	DIREC	TIVES,	AND DE	ATH	
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.					
Components	Yes	No	NA	Remarks	
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. The detainee's location. The limitations placed on visiting.	×				
For IGSAs There are guidelines addressing 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 wish to appoint another to make advance decisions for him or her.	⊠			Even though this facility is not an IGSA it still meets this component.	
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	\boxtimes				
There is a policy addressing "Do Not Resuscitate Orders"?	\boxtimes				
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?				This is such a new facility that there have not been DNR pts. ICE National policies are in place and are being followed	
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.			×	Same as above	
The facility has written procedures to address the issues of organ donation by detainees.	×				
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	×				
The facility has a policy and procedure to address the death of a detainee while in transport.	×				
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	×				
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.			⊠	No incidences of this nature have taken place at this facility.	
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	×				

TERM	INAL ILLNESS, ADVANCED	DIREC	TIVES,	AND DE	ATH
illness or injury, medical adv notification is provided to IC becoming terminally ill or inju- be taken if the death of a de	CE detainees shall have polic anced directives, and detaine E officials, family members ar ured or death of a detainee oc stainee occurs while in transit	e death nd other curs. In	to incluinterest additio	ide the p ed partie n, the po	rocedures to ensure proper is in the event of a detainee licy will cover procedures to
Comp	onents	Yes	No	NA	Remarks
The facility follows establish describing when to contact such issues as Performance of an aim who will perform the Obtaining State approach Local transportation	the local coroner regarding autopsy. e autopsy. roved death certificates.	×			
ICE staff follow established the case of a deceased det	procedures to properly close	\boxtimes	Tπ		
			in the		
When rated below Acceptable compliance. For each elem and the estimated timetable Standard Rating:	ent found out of compliance,				
	Deficient	isk		Rep	eat Finding
*Remarks: (Record significant facts, observations, other sources used, etc.) It was noted that their had been a death in July of 2003. This incident has been throughly investigated and action has been taken to provide on site Psychology and Psychiatric medical support.					
Auditor soignature / Date	/ / 3				

Section III

Security and Control

CONTRABA	ND				
Policy: All detention facilities will ensure the proper handlin contraband destruction is required.	g and dis	sposal c	f all co	ntraband. Documentation of	
Components	Yes	No	NA	Remarks	
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	×				
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	Ø				
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.		×		Contraband is destroyed, but no written procedures could be located.	
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.	Ø				
CONTRAB	AND				
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.					
Standard Rating:	<u> 20.</u>		75 1 - 1020 1		
☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding					
*Remarks: (Record significant facts, observations, other sources used, etc.) Policy and procedures for CCA address the handling of contrabrand, however, no written policy was					
located for the destruction. 66, 67c 9/2/04					
Auditor's Signature / Date					

DETENTION FILES						
Policy: Every facility will create a detention file for every ICE detained booked into the facility, excluding only detained scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detained's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.						
Components Yes No NA Remarks						
A detention file is created for every new arrival whose stay will exceed 24 hours.	×					
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	×					
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same		×		Files continue to not meet the standard. No grievance, complaint, disciplinary or seg forms are placed into the files.		
The detention files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	×					
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.	Ø					
Staff makes copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	×					
Appropriate staff has access to the detention files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	×					
Field offices controlling detention in IGSA facilities create and maintain detention files on all detainees admitted to IGSA facilities. These files contain the forms and documents set forth for SPC/CDF detention files to the extent that the field office creates them or the IGSA forwards them.						

	DETENTION FILE	ES Rating					
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.							
Standard Rating:							
🗌 Acceptable 🔲 Deficient	☐ At-Risk	⊠ Repeat Finding					
*Remarks: (Record significant facts,	*Remarks: (Record significant facts, observations, other sources used, etc.)						
Per the response to the last review, the requirement of adding copies of the disciplinary, grievance, complaint forms, etc., to the detention file is not contained in the current contract. All forms are maintained at the facility and are available to ICE personnel upon request.							
Auditor's Signature Date							

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	Yes	No	NA	Remarks				
The facility has a written disciplinary system using	Ø	П						
progressive levels of reviews and appeals.								
The facility rules state that disciplinary action shall not be	\boxtimes							
capricious or retaliatory.								
Written rules prohibit staff from imposing or permitting the following sanctions:								
corporal punishment				*				
deviations from normal food service								
clothing deprivation	×	П						
bedding deprivation			<u> </u>					
denial of personal hygiene items								
loss of correspondence privileges								
deprivation of physical exercise								
The rules of conduct, sanctions, and procedures for				Handbook and video				
violations are defined in writing and communicated to all	\boxtimes							
detainees verbally and in writing.			_					
The following conspicuously posted in Spanish and								
English or other dominate languages used in the facility:								
 Rights and Responsibilities 								
Prohibited Acts								
Disciplinary Severity Scale								
Sanctions								
If so, where posted								
When minor rule violations or prohibited acts occur,	×							
informal resolutions are encouraged.								
If informal resolutions are not appropriate, incident	521							
reports and Notice of Charges are promptly forwarded to the designated supervisor.	×							
Incident reports are investigated within 24 hours of the			-					
incident reports are investigated within 24 hours of the incident report. The Unit Disciplinary Committee (UDC)								
or equivalent does not convene before investigations	⊠							
have ended.								
An intermediate disciplinary process is used to adjudicate								
minor infractions.								
A disciplinary panel (or equivalent in IGSAs) adjudicates								
infractions. The panel:								
Conducts hearings on all charges and								
allegations referred by the UDC								
Considers written reports, statements, physical	57	_						
evidence, and oral testimony								
Hears pleadings by detainee and staff representative								
l we -								
Bases its findings on the preponderance of evidence								
Imposes only authorized sanctions								
A staff representative is swellable if requested for a								
detainee facing a disciplinary hearing								
The facility permits hearing postponements or	†	 		 				
continuances when conditions warrant such a	\boxtimes	$ \Box $						
continuance. Reasons for are documented			_	1				

•			_				
DISCIPLINARY	POLICY						
Policy: All facilities housing ICE detainees are authorized not in compliance with facility rules and regulation		e discip	line on d	letainees whose behavior is			
Components	Yes	No	NA	Remarks			
The duration of punishment set by the OIC/recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 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.	×						
DISCIPLINARY	POLICY	· · · · · · · · · · · · · · · · · · ·					
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.							
Standard Rating:							
☑ Acceptable ☐ Deficient ☐ At-Risk		Repo	at Find	ing			
*Remarks: (Record significant facts, observations, other sources used, etc.)							

Auditor's Signature / Date

EMERGENCY (CONTINGENCY) PLANS								
Policy All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.								
Components	Yes	No	NA	. Remarks				
No Detainee or detainee groups exercise control or authority over other detainees.	☒							
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees	×							
Staff are trained to identify signs of detainee unrest. What type of training and how often?	×			Initial orientation training and annual updates				
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	Ø			amment appended				
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	×							
The plans address the following issues: Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions	×							
Contingency plans include a comprehensive general section	×							
with procedures applicable to most emergency situations. The facility has cooperative contingency plans with applicable: Local law enforcement agencies State agencies Federal agencies	×							
All staff receive copies of Hostage Situation Management policy and procedures.	×							
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release hostages are screened for medical and psychological effects.	×							
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	\boxtimes							
The food service maintain at least 3-days' worth of emergency meals for staff and detainees.	Ø							
Written plans locate shut-off valves and switches for all utilities (water, gas, electric).	Ø							
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches	×							

•									
EMERGENCY (CONTINGENCY) PLANS									
Policy All facilities holding ICE detains minimize the harming of human life an into agreement, via Memorandum of U of emergency.	d the destruction of pro-	operty. It i	is recon	nmended th	at SPCs and CDFs enter				
Components		Yes	No	NA	Remarks				
Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances									
EMERGENCY (CONTINGENCY) PLANS When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.									
Standard Rating:									
☑ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding									
*Remarks: (Record significant facts, observations, other sources used, etc.)									
E Plans require updates at the corp. b6, b7c 9/2/0 Auditor's Signature / Date	level for updating.								
Additor a Digitature / Date									

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	Yes	No	NA	Remarks				
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	Ø							
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	Ø							
The manufacturer's Material Safety Data Sheet (MSDS)								
file is up-to-date for every hazardous substance used.			1					
The files list all storage areas, and include a	573							
plant diagram and legend.	Ø							
The MSDSs and other information in the files are								
available to personnel managing the facility's safety program.								
All personnel using flammable, toxic, and/or caustic		 						
substances follow the prescribed procedures. They:			1 1					
Wear personal protective	57							
Equipment.	Ø							
Report hazards and spills to the		1						
designated official.	<u> </u>							
The MSDSs are readily accessible to staff and detainees	Ø							
in the work areas.	123							
Hazardous materials are always issued under proper								
supervision.								
quantities are limited.								
 Staff always supervises detainees using these substances. 								
"flammable" and "combustible" materials (liquid and	 	 	 					
aerosol) are stored and used according to label	Ø							
recommendations.			-					
Lighting fixtures and electrical equipment are installed in								
storage rooms and other hazardous areas meet National								
Electrical Code requirements.		 	ļ					
All toxic and caustic materials stored in their original containers in a secure area.	⊠							
Excess flammables, combustibles, and toxic liquids are	<u> </u>	 	+=-					
disposed of properly and in accordance with MSDSs.								
Staff directly supervises and accounts for products with		1						
methyl alcohol. Staff receive a list of products containing	1			Į.				
diluted methyl alcohol, e.g., shoe dye. All such products	⊠							
clearly labeled as such. "Accountability" includes issuing								
such products to detainees in the smallest workable			1					
quantities. Every employee and detainee using flammable, toxic, or	 	-	 					
caustic materials receives advance training in their use,								
storage, and disposal.	KZ							
The facility complies with the most current edition of	 		1					
applicable codes, standards, and regulations of the								
National Fire Protection Association and the	_	-						

EN	MRON	MENT	AL I	HEAL	.TH	AND S	AFI	ETY				_
rol flam	mable	, toxic, a				naterials		_	hazardous	materials	s pro	g

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

incompande materials, and sale-handling procedures				
Components	Yes	No	NA	Remarks
Occupational Safety and Health Administration (OSHA).				
A technically qualified officer conducts the fire and safety inspections.	×			
The Safety Office (or officer) maintains files of inspection reports? Including corrective actions taken.	\boxtimes			
The facility has an approved fire prevention, control, and	×			
evacuation plan.				
The plan requires:				
Monthly fire inspections.		İ	} }	
Fire protection equipment strategically located				
throughout the facility.	F 24		[
Public posting of emergency plan with accessible building/page floor plans				
accessible building/room floor plans. Exit signs and directional arrows.				
text signs and directional arrows. An area-specific exit diagram conspicuously		1		
posted in the diagrammed area.				
Fire drills are conducted and documented monthly.	П	Ø		Fire drills are quarterly
A sanitation program covers barbering operations.	Ø	情		, o dinio di o daditori
The barbershop has the facilities and equipment	1			
necessary to meet sanitation requirements.	×			
The sanitation standards are conspicuously posted in the	×		П	
barbershop.			่	
Written procedures regulate the handling and disposal of				
used needles and other sharp objects.		↓ <u> </u>	 	
All items representing potential safety or security risks				
are inventoried and a designated individual checks this				
inventory weekly.	 	 	+	
Standard cleaning practices include: • Using specified equipment; cleansers;				
disinfectants and detergents.				
An established schedule of cleaning and follow-	23	-		
up inspections.				
The facility follows standard cleaning procedures.	Ø			
Spill kits are readily available.	Ø			
A licensed medical waste contractor disposes of	×		ПП	
infectious/bio-hazardous waste.			 ''	
Staff are trained to prevent contact with blood and other				
body fluids and written procedures are followed.		1-	 	
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.		1		
At least monthly.				1
The pest-control program includes preventive	10	"		
spraying for indigenous insects.			1	
Drinking water and wastewater is routinely tested		1,	1 -	
according to a fixed schedule.				, ·
Emergency power generators is tested at least every two	Ø			Generators are shared

ENVIRONMENTAL HEALTH AND SAFETY								
The program will accordance with a	include, among other th	ings, the identifica , National Fire Pro ocedures	ion and tection A	labeling \ssociati	nazardous materials program. of hazardous materials in on [NFPA]); identification of			
	Components	Ye	No	NA	Remarks			
receive tes Testing is t	rgency systems and equi ting at least quarterly. followed-up with timely co pairs and replacements).				with the county facility directly behind this facility and are maintained by the county.			
	ENVIRONM	ENTAL HEALTH	ND SAF	ETY				
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.								
Standard Rating:								
⊠ Acceptable	☐ Deficient	☐ At-Risk		☐ Re	peat Finding			
Inventory record kee	significant facts, observation by significant facts facts for significant facts facts facts for significant facts facts for significant facts facts facts for significant facts facts facts facts for significant facts fa	vidual bottles are n	ow invent	toried. O	ne diluted 5 gal. container w what the product was			
Auditor's Signature	/ Date							

HOLD ROOMS IN DETENTION FACILITIES									
Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.									
Components	Yes	No	NA	Remarks					
The hold room is situated in a location within the secure perimeter.	×								
The hold rooms well ventilated, well lighted and all activating switches located outside the room.	Ø								
The hold rooms contain sufficient seating for the number of detainees held.	☒								
No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside holdrooms.	☒								
The walls of the hold rooms escape proof. The hold room ceilings are escape and tamper resistant.	Ø								
Individuals are not held in hold rooms for more than 12 hours.	Ø			Still awaiting contract modification					
Male and females are segregated from each other at all times.	×			·					
Every effort is made to ensure that detained detainees under the age of 18 are not held with adult detainees.	Ø								
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	Ø								
In older facilities officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.			⊠						
All detainees are given a patdown search for weapons or contraband before being placed in the room.	×								
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.	⊠								
When the last detainee has been removed from the hold room, it is given a thorough inspection. Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.	×								
There is a written evacuation plan. There is a designated officer to remove detainees from the holdrooms in case of fire and/or building evacuation.	Ø								
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	Ø								

	HOLD ROOMS IN DETENTION FACILITIES - Rating						
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.							
Standard Rating:	· .						
⊠ Acceptable	☐ Deficient	☐ At-Risk	Repeat Findings				
*Remarks: (Record significant facts, observations, other sources used, etc.) No substantial change from last review. However, staff is well aware of requirement to limit hold room time to 12 hours or less. Every effort is made to do so. Contract modification still pending.							

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	Yes	No	NA	Remarks				
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.		×		Approved training is currently pending				
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	Ø							
The security officer, or equivalent in IGSAs, provides training to employees in key control.	Ø							
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.	×			Active quarterly PMP in place.				
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.	Ø							
Only dead bolt or dead lock functions are used in detainee accessible areas.	Ø							
Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	×							
The facility does not use grand master keying systems.	X							
All worn or discarded keys and locks cut up and properly disposed of .	×			Suggested logbook be created for all destroyed keys.				
Padlocks and/or chains are not used on cell doors.	X			Padlocks used on seg rec. cages				
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, Chapter 3	⊠							
National Fire Protection Association Life Safety Code 101.								
The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	×							
Procedures in place to ensure that key rings are: Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings	×							
Emergency keys are available for all areas of the facility.	M	1 -	1					
The facilities use a key accountability system.	⊠	+	+#					
Authorization is necessary to issue any restricted key.	X	十	十十					
Individual gun lockers are provided.	<u>" " " </u>	 	+					
They are located in an area that permits constant officer observation.								



In an area that does not allow detainee or public

No	MA NA	ne use, accountability and Remarks
		Remarks
Rating		
		perations into action and
Repe	at Findi	ing
he officining fo	cer. Star or any ott	ndard requires locksmith her agencies or CDFs. nd repair.
	Repe	Repeat Findi sed, etc.)

POPULATION COUNTS - Rating						
Components	Yes	No	NA	Remarks		
Staff conducts a formal count at least once each shift.	\boxtimes					
Activities cease or are strictly controlled while a formal count is being conducted.	×					
Do certain operations continue during formal counts.		X				
is a certain amount of movement tolerated during a formal count.		×				
Formal counts in all units take place simultaneously.	\boxtimes					
Officers do not allow detainee participation in the count.	\boxtimes					
A face-to-photo count follows each unsuccessful recount.	×					
Officers positively identify each detainee before counting him/her as present.	Ø					
Written procedures cover informal and emergency counts. They followed during informal counts. During emergencies.	×					
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.	⊠			7.		
This training is documented in each officer's training folder.	×					
Population Counts When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.						
Standard Rating:	······································					
☐ Acceptable ☐ Deficient ☐ At-Risk		□ Кер	eat Find	ling		
*Remarks: (Record significant facts, observations, other sources used, etc.)						
b6, b7c & 9/2/04						

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G-324A Detention Inspection Form Worksheet for IGSAs
Rev: 09/25/03

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Policy: ICE provides officers all necessary guidance for carry orders established for every post, which are reviewed at				
assignment to that post.				
Components Every Fixed post has a set of post orders.	Yes	No	NA	Remarks
Each set contains the latest inserts (emergency				
memoranda, etc.) and revisions.	Ø			
One individual or department is responsible for keeping all post-orders current with revisions that take place	×			
between reviews.				
The IGSA maintains a complete set (central file) of post orders.			Ø	·
The central file accessible to all staff.	X			
The OIC or Contract / IGSA equivalent initiate/authorizes all post-order changes.	X			
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	Ø			
A review/updating/reissuing of post orders occurs regularly. At a minimum, Annually.	Ø			
Procedures keep post orders and logbooks secure from detainees at all times.	Ø			
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	Ø			
Armed-post post orders provide instructions for escape attempts.	Ø			
The post orders for housing units track the event schedule.	Ø			
Housing-unit post officers record all detainee activity in a log. The post order include instructions on maintaining the logbook.	×			
POST ORDERS	Rating			· · · · · · · · · · · · · · · · · · ·
When rated below Acceptable, facilities must attach a Plan compliance. For each element found out of compliance, the estimated timetable for compliance.				
Standard Rating:				
🛮 Acceptable 🔲 Deficient 🔲 At-Rig	sk		Rep	eat Finding
Remarks: (Record significant facts, observations, other so	ources u	sed, etc	c.)	
b6, b7c (a) G(2/04				

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Auditor's Signature / Date

SECURITY INSPECTIONS							
Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.							
Components	Yes	No	NA 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 Procedures for reporting weak spots, inconsistencies, and other areas needing	×						
improvement Every officer is required to conduct a security check of his/her assigned area. The results are documented.	Ø			Logbook			
Documentation of security inspections is kept on file.	Ø	l n					
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.	Ø			Super job here			
All visits officially recorded in a visitor logbook or electronically recorded.	×			Super			
The facility has a secure visitor pass system.	□			Excellent			
Every Control Center officer receives specialized training.	Ø						
The Control Center is staffed around the clock.	Ø						
Policy restricts staff access to the Control Center.	Ø	$oxedsymbol{\square}$					
Detainees do not have access to the Control Center.	X	<u> </u>	<u> </u>				
Communications are centralized in the Control Center.							
Officers monitor all vehicular traffic entering and leaving the facility.	×						
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 Name of employee responsible for the vehicle during the facility visit	×			Good procedures here			
Officers thoroughly search each vehicle entering and leaving the facility.	Ø						
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	Ø						
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	Ø						
The SMU entrance has a sallyport.			X				
Written procedures govern searches of detainee housing units and personal areas.	Ø						
Housing area searches occur at irregular times.	X						

Policy: Post assignments in the facility's high-risk areas, w will be restricted to experienced personnel with a thorough				
Components	Yes	No	NA	Remarks
Every search of the SMU and other housing units documented.	Ø			
Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	×			Documentation not supplied
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	Ø			Pod officers
Perimeter alarm system tests. Physical checks of the perimeter fence. Documenting the results.	×			
Visitation areas receive frequent, irregular inspections.				
SECURITY INSPECT When rated below Acceptable, facilities must attach a Plan compliance. For each element found out of compliance, to the estimated timetable for compliance.	of Actio	n for br		
Standard Rating:			eat Fine	

Auditor's Signature / Date

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

C	V T	N. T	ALA I	Remarks.
Components	Yes	No	NA	Remarks
The Administrative Segregation unit provides non-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).	×			
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation. Every week thereafter for the first month. 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 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 has remained	×			

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation

Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components		<u> </u>	T ALE	D
Components	Yes	No	NA	Remarks
in administrative segregation for seven consecutive days.			1	
Administratively segregated detainees enjoy the same	`	·]		
general privileges as detainees in the general	☒			
population.			'	
The SMU well ventilated.	' '	1	'	•
Adequately lighted. Appropriately heated.	Ø			1
Appropriately heated. Maintained in a continue condition.	1 _ 1	1 - 1	' -	1
Maintained in a sanitary condition. All cells are agained with bods.	<u> </u>		L	1
All cells are equipped with beds.	×			!
Every bed securely fastened to the floor or wall. The number of detriness in any call does not exceed.			<u> </u>	
The number of detainees in any cell does not exceed	1 1	1	1	•
the occupancy limit.	F (1	1 1	1
When occupancy exceeds recommended capacity do basic living standards decline?	ţ ,	1	1	1
capacity, do basic living standards decline?	×			
Do criteria for objectively assessing living standards exist?	·	1	()	Į.
standards exist? If yes, are the criteria included in the written	(1	1	\
procedures?				
The segregated detainees do not have fewer	F-3	,-, ;	_	Į.
opportunities to exchange/launder clothing, bedding,				
and linen than detainees in the general population.	 			
Detainees receive three nutritious meals per day.		1	1	
From the general population's menu of the day.	\boxtimes			Į.
Do detainees eat only with disposable utensils.	لايت		1	
Is food ever used as punishment. Solution Sol				
Each detainee maintains a normal level of personal	}			
hygiene in the SMU.	K7		;	
The detainees have the opportunity to shower and show at least three times a week				
and shave at least three times a week.	1		-	
If not, explain. The detriness are provided:		 	 	
The detainees are provided:	1		}	
Barbering services. Because of the providence with the	1	1		(
Recreation privileges in accordance with the "Detained Recreation" standard		1		1
"Detainee Recreation" standard.	1		1	•
Non-legal reading material. Political reading material.	K			
Religious material. The second		1 4	ΙЦ,	
The same correspondence privileges as			1	
detainees in the general population.		1		
Telephone access similar to that of the general		1		
population.	1	1		
Personal legal material.				
A health care professional visits every detainee at least				
three times a week.				
The shift supervisor visits each detainee daily.	"2"	1 ,		
Weekends and holidays.				
Procedures comply with the "Visitation" standard.	×			
The detainee retains visiting privileges.		ا ا	1 -	

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation							
Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).							
Components	Yes	No	NA	Remarks			
 The visiting room available during normal visiting hours. 							
Visits from clergy are allowed.	X						
Detainees do not have have less law-library access than the general population. • Are they required to use the law library separately, as a group? If so: • Legal materials brought to them.	Ø						
The SMU maintains a permanent log.							
 Detainee-related activity, e.g., meals served, recreation, visitors etc. 	×						
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent).	×						
Staff record whether the detainee ate, showered,		 	†				
exercised and took any medication during every shift. Logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc The medical officer/health care professional signs each individual's record during each visit The housing officer initials the record when all	×						

detainee services are completed or at the end

These weekly records are retained in the SMU

A new record is created for each week the detainee is in

until the detainee's return to the general

of the shift.

Administrative Segregation.

population.

 \boxtimes

SPECIAL MANAGEMENT UNIT (SMU) - Rating Administrative Segregation								
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.								
Standard Rating:								
□ Acceptable □ Deficient	At-Risk	☐ Repeat Finding						
*Remarks: (Record significant fact	s, observations, other so	ources used, etc.)						
Auditor's Signature / Date	04							

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	Yes	No	NA	Remarks			
Officers placing detainees in disciplinary segregation follow written procedures.	Ø						
The sanctions for violations committed during one incident do not exceed 60 days.	Ø						
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 reason(s) for it.	×			·			
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.	×						
Living conditions in disciplinary SMUs modified to reinforce acceptable behavior. If yes, does staff prepare written documentation for this action. Does the OIC sign to indicate approval.	⊠						
Every detainee in disciplinary segregation receive 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. The beds securely fastened to the floor or wall of the cell.	Ø						
The number of detainees confined to each cell or room do not exceed the number for which the space was designate. • Does the OIC approve excess occupancy on a temporary basis.	Ø						
When a detainee is segregated without clothing, mattress, blanket, or pillow, (in a dry cell setting) a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	×						
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	×						
Detainees in the SMU receive three nutritious	\boxtimes						

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)

Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.

Segregation; the other for detainees being segregated for disciplinary reasons.					
Components	Yes	No	NA	Remarks	
meals/days. • 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.	Ø				
The detainees receive, unless documented as a threat	-				
to security:					
Barbering services. Becreation privileges.		l			
Recreation privileges. Other than legal reading material.	124	<u></u>			
Other-than-legal reading material. Religious material.	Ø				
The same correspondence privileges as other					
detainees.					
Personal legal material. When phone access is limited by number or two of calls.		<u> </u>			
When phone access is limited by number or type of calls, limits do not apply apply to the following:					
Calls about the detainee's immigration case or]		
other legal matters.	Ø	П			
Calls to consular/embassy officials.	الت				
Calls during family emergencies (as determined)					
by the OIC/Warden).					
A health care professional visits every detainee in					
disciplinary segregation every day, Monday through					
Friday.	Ø	Ιп			
The shift supervisor visit each segregated	N				
detainee daily	ļ				
Weekends and holidays. SMU detainees are allowed visitors, in accordance with	 				
the "Visitation" standard.					
SMU detainees receive legal visits, as provided in the					
"Visitation" standard.	K2		_	,	
Legal service providers notified of security					
concerns arising before a visit.					
Visits from clergy are allowed.					
The clergy member given the option of					
visiting/not visiting the segregated detainee.	\boxtimes				
Violent/uncooperative detainees denied access to religious services when safety and enquity					
to religious services when safety and security would otherwise be affected.		1			
SMU detainees have law library access.	†				
Violent/uncooperative detainees retain access				ļ	
to the law library unless adjudicated a security					
threat in writing.	KZI	F-1			
Legal material brought to individuals in the SMU					
on a case-by-case basi.					
Staff document every incident of denied access					
to the law library.	1				

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 Yes No NA Remarks						
All detainee-related activities are documented, e.g., meals served, recreation activities, visitors, etc.	×					
Is the <u>SPC's</u> , the Special Management Housing Unit Record (I-888) is prepared as soon as the detainee is placed in the SMU. • All I-888s filled out by the end of each shift • The <u>CDF/IGSA</u> facility use Form • I-888 (or equivalent local form).	×					
 SMU staff records 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. 	⊠					

SPECIAL MANAGEMENT UNIT - Rating (Disciplinary Segregation)							
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action a the estimated timetable for compliance.							
Standard Rating:							
🛮 Acceptable 🗌 Deficient	At-Risk	☐ Repeat Finding					
*Remarks: (Record significant facts b6, b7c Auditor's Signature / Date	s, observations, other so	ources used, etc.)					

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	Yes	No	NA	Remarks		
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	Ø					
Department heads are responsible for implementing this standard in their departments.	Ø					
Tool inventories are required for: Maintenance Department Medial Department Food Service Department Electronics Shop Recreation Department Armory	×					
The facility has a facility 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.	×					
The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous) Non Restricted (non-hazardous).	×					
Department heads are responsible for implementing tool-control procedures.	Ø					
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	×					
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 are readily notice.	⊠					
Each facility has procedures for the issuance of tools to staff and detainees.	×					
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools.	Ø					
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	⋈					
All private or contract repairs and maintenance workers under contract to the ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	×					

TOOL CONTROL - Rating						
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.						
Standard Rating:						
	☐ At-Risk	Repeat Finding				
*Remarks: (Record significant fact. All procedures for the inventory and b6, b7c Auditor's Signature / Date	,	nurces used, etc.) ems in the maintenance section were excellent.				

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 are 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.	Ø						
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.	Ø						
Supervisors maintain records for each vehicle operator.	X						
Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability. 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 two qualified officers per vehicle. • An unaccompanied driver transport an empty vehicle.	×						
Before the start of each detail, the vehicle is thoroughly searched.	Ø						
Positive identification of all detainees being transported is confirmed.	Ø						
All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	Ø						
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturers occupancy level.	×						
Protective vests are provided to all transporting officers.	X						
The vehicle crew conducts a visual count once all passengers are on board and seated.	×						

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 Office in control of the detainee case.	are han	dled or	nity by ti	he ICE Field Office or Sub-			
Components Yes No NA Remarks							
 Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 							
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	×						
 Officers ensure that no one contacts the detainees. One officer remains in the vehicle at all times when detainees are present. 	⊠						
Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by the Service.	Ø						
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. Equipment boxes stocked in accordance with the Use of Force Standard.	×			Radio and cell phones are issued to officer.			
The vehicles are clean and sanitary at all times.	Ø						
Personal property of a detainee transferring to another facility:	Ø						
The following contingencies are included in the written procedures for vehicle crews: Attack Escape Hostage-taking Detainee sickness Detainee death Vehicle fire Riot Traffic accident Mechanical problems Natural disasters Severe weather							

				•				
	TRANSPORTATION (Land Transportation)							
and welfare of our of Standards have be	tion and Naturalization Ser fficers, the general public,	vice will take all and those in IC sional transpor	neces E cus tation	tody du under t	ring the	ns to protect the lives, safety, transportation of detainees. ervision of experienced and		
,	Standard NA: Check this box if all ICE Transportation are handled only by the ICE Field Office or Sub-Office in control of the detainee case.							
	Components	,	Yes	No	NA	Remarks		
Passenger minors	list is not exclusively men o	r women or						
	(Li cceptable, facilities must a ch element found out of c		Action)	n for bri				
⊠ Acceptable	☐ Deficient	☐ At-Risk		j	☐ Rep	eat Finding		
*Remarks: (Record significant facts, observations, other sources used, etc.) Van inspected was good. Bus #44 inspected and is deficient. Not clean (old food and napkins on floor). Seat back are deteriorating with inner straps exposed and falling off. Definite safety hazard (could be used as a weapon). CCA has plans to replace the bus or at a minimum replace the seats. b6, b7c pg 9/2/04 Auditor's Signature / Date								

USE OF FOR	(CE					
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.	×					
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	×					
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	×					
The facility subscribes to the prescribed Confrontation Avoidance Procedures. Ranking detention official, health professional, and others confer before every calculated use of force.	×					
When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision.	Ø					
Staff members are trained in the performance of the Use-of-Force Team Technique.	Ø					
All use-of-force incidents are documented and reviewed.						
Staff: Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.	×					
Mecication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	Ø					
Use-of-Force Team follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	×					
Standard procedures associated with using four-point restraints include: Soft restraints (e.g., vinyl) 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.						

USE OF FORCE							
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Components Yes No NA Remarks							
 Medical evaluation of the restrained detainee twice per eight-hour shift. 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 allow the detainee to use the rest room at these times under safeguards.	X						
All detainee checks are logged.	X						
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	X						
When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized.	⊠						
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	⋈						
Protective gear is worn when restraining detainees with open cuts or wounds.	Ø						
Staff documents every use of force and/or non-routine application of restraints.	Ø						
It 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 Officers are certified in all devices they use.	×						
The officers are thoroughly trained in the use of soft and hard restraints.	Ø						
In SPCs is the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is	×						

used.

USE OF FORCE - Rating							
When rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. For each element found out of compliance, the plan of action will specify remedial action and the estimated timetable for compliance.							
Standard Rating:							
🛮 Acceptable 🗌 Deficient	☐ At-Risk	☐ Repeat Finding					
*Remarks: (Record significant facts	observations, other so	ources used, etc.)					

STAFF DETAINEE COM	MUNIC	ATIONS	3	
Policy: Procedures must be in place to allow for formal and ICE staff and ICE detainee and to permit detainees t an answer in an acceptable time frame.				
Components	Yes	No	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.	X			
Scheduled visits are posted in ICE detainee areas.		×		ICE staff visit each pod at least every other day. Visits are logged.
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.	Ø			
The IGSA treats detained correspondence to ICE staff as Special Correspondence.	Ø			
ICE staff respond to a detainee request from an IGSA within 72 hours.	Ø			All reponses are logged
ICE detainees are notified ion writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.				
Staff Detainee Communi	cations	- Ratin	g	
When rated below Acceptable, facilities must attach a Plan compliance. For each element found out of compliance, the estimated timetable for compliance.				
Standard Rating:				
	sk		☐ Rep	eat Finding
*Remarks: (Record significant facts, observations, other so	ources u	sed, eta	c.)	
b6, b7c 4 9/2/04				
Auditor's Signature / Date				