Department of Homeland Security
Immigration and Customs Enforcement
Office of Detention and Removal

Local Tail

Condition of Confinement Review Worksheet

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

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



ICE Detention Standards Review Worksheet

State Facility – IGSA
ICE Contract Detention Facility
Name
Sherburne County Jail
Address (Street and Name)
13880 Hwy 10 West, Business Center Drive
City, State and Zip Code
Elk River, Minnesota 55330
County
Sherburne
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
Jail Commander
Name and Title of Lead Compliance Inspector
b6,b7c
Date[s] of Review
December 8-10, 2009
Type of Review
Headquarters Deperational Special Assessment Other

TABLE OF CONTENTS

DETAINEE SERVICES STANDARDS (SECTION I)
ACCESS TO LEGAL MATERIALS
ADMISSION AND RELEASE
CLASSIFICATION SYSTEM
CORRESPONDENCE AND OTHER MAIL
DETAINEE HANDBOOK
FOOD SERVICE
FUNDS AND PERSONAL PROPERTY
DETAINEE GRIEVANCE PROCEDURES
GROUP PRESENTATIONS ON LEGAL RIGHTS
ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS
MARRIAGE REQUESTS
NON-MEDICAL ESCORTED TRIPS
RECREATION
RELIGIOUS PRACTICES
ACCESS TO TELEPHONES
VISITATION
VOLUNTARY WORK PROGRAM
The company Control on
HEALTH SERVICES STANDARDS (SECTION II)
HUNGER STRIKES
SUICIDE PREVENTION AND INTERVENTION.
TERMINAL ILLNESS, ADVANCED DIRECTIVES AND DEATH
TERMINAL ILLNESS, ADVANCED DIRECTIVES AND DEATH
SECURITY AND CONTROL STANDARDS (SECTION III)41
CONTRABAND
DETENTION FILES
DISCIPLINARY POLICY
EMERGENCY PLANS
ENVIRONMENTAL HEALTH AND SAFETY
HOLD ROOMS IN DETENTION FACILITIES
KEY AND LOCK CONTROL
POPULATION COUNTS
POST ORDERS
SECURITY INSPECTIONS
SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION)
SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)
TOOL CONTROL
Transportation (Land)
USE OF FORCE
STAFF/DETAINEE COMMUNICATIONS
DETAINEE TRANSFER STANDARD

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

SECTION I DETAINEE SERVICES STANDARDS

ACCESS TO LEGAL MATERIALS

POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.

COMPONENTS	YES	No	NA	REMARKS
The facility provides a designated law library for detainee use.				The facility has a designated law library which contains a good inventory of law and legal resources. Law library resources are taken to the units for detainee use rather than bringing detainees to the library.
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.				A listing of materials is posted in the library and in the housing units.
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.				Since inmates/detainees do not go to the library, they complete an Inmate Request Form (IRF), and staff delivers the law books and other legal materials to them.
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.				Typewriters and other supplies are delivered to the units when requested.
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.				A LexisNexis station is available in a room in the booking department.
Where provided, the Lexus Nexus library is updated and is current.				
Dutside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.				There have been no requests or submittals; however, such inclusion is permitted by the facility.
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.				The facility Program Manager is responsible for oversight of the law library operation.
Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.				Detainees may request and use law books and materials in the units in excess of 5 hours per week if needed. There is a two book limitation per request.
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within $3-5$ business days.				If the facility does not have the resources available, requests are forwarded to ICE.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				

ACCESS TO LEGAL MATERIALS

POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.

COMPONENTS	YES	No	NA	REMARKS
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.				The detainee would speak directly with unit staff regarding this issue, or submit an IRF to seek assistance.
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.				
Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.				
All denials of access to the law library fully documented.				Denials would be documented through the facility disciplinary process.
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.				
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	\boxtimes			
■ ACCEPTABLE □ DEFICIENT □	AT-RIS	K		REPEAT FINDING

REMARKS:

The facility has a large law book inventory and a LexisNexis station available to the detainee population. Detainees request law books or access to the LexisNexis by submitting an IRF. Books are taken to the detainee in the housing unit, or the detainee is escorted to the LexisNexis station located in the booking department.

<u>b6.67c</u> / 12-10-09 AUDITOR'S SIGNATURE / DATE

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ADMISSION AND RELEASE

POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.

COMPONENTS	YES	No	NA	REMARKS
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.				After new intakes are in-processed in the booking department, they are moved to the Intake Unit where they: are issued the handbook; shown a video; classified; and given additional verbal and written information. ICE detainees are also provided the National Detainee Handbook by ICE staff when they are processed at the Field Office.
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	\boxtimes			Trained correctional officers (COs) conduct the initial screenings. The information is gathered on a 13-page program (PC ENFORCE) and then forwarded to medical for review.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.				
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.				
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.	\boxtimes			
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.	\boxtimes			
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.				
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	\boxtimes			
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.				
All releases are properly coordinated with ICE using a Form I-203.	X X			
Staff completes paperwork/forms for release as required. ACCEPTABLE DEFICIENT		DIEK		REPEAT FINDING

REMARKS:

The facility has an Intake/Orientation Unit which: provides information regarding facility operations, rules and regulations; issues the Inmate Handbook; shows orientation videos: and furthers the initial classification process.

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CLASSIFICATION SYSTEM

POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES

COMPONENTS	YES	No	NA	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.				The facility uses a Primary Security Level Assignment Form. This document uses objective risk factors (i.e., current offense, assaultive behavior, prior record, felony convictions, escape history, and detainers/warrants) to assess security levels and to make housing assignments.
The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision.				Detainees are moved from booking to the intake unit for secondary review and classification. Intake criteria may necessitate holding a maximum security or other high risk detainee in an SHU.
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	\boxtimes			Although A-files are not kept at the facility, intake officers use a wide range of information to make classification assignments.
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.				
Housing assignments are based on classification-level.				
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.				
Detainee work assignments are based upon classification designations.	\boxtimes			Detainees at this facility are not given formal work assignments.
The classification process includes reassessment/ reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				Classifications are reviewed every 30 days at this facility.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				As described in policy, detainees may appeal by filing a grievance.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	\boxtimes			
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.				Appeals may go the Jail Commander.
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.		\boxtimes		Although the classification process is described, an explanation of the different security levels is not provided.
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REMARKS:

The facility uses an objective classification system in compliance with the NDS. An explanation of different security levels is not provided in the Handbook.

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CORRESPONDENCE AND OTHER MAIL

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

OTHER MICHE.				<u>, a la companya di managan di ma</u>
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				Information regarding mail procedures is
via a detainee handbook.				included in the Inmate Handbook.
The facility provides key information in languages other than				There is a Spanish version of the Inmate
English; In the language(s) spoken by significant numbers of				Handbook and many of the postings in the
detainees. List any exceptions.				housing units are provided in Spanish.
Incoming mail is distributed to detainees within 24 hours or 1				
business day after it is received and inspected.				
Outgoing mail is delivered to the postal service within one		l		
business day of its entering the internal mail system				
(excluding weekends and holidays).				
Staff does not open and inspect incoming general		Ì '	Ì	
correspondence and other mail (including packages and		l	l	This component specifically applies to an
publications) without the detainee present unless documented				SPC/CDF. Incoming mail is opened and
and authorized in writing by the Warden or equivalent for				inspected as authorized by facility policy.
prevailing security reasons.				
Staff does not read incoming general correspondence without	\boxtimes			
the Warden's prior written approval.				
Staff does not inspect incoming special Correspondence for		l ˈ		Special correspondence and legal mail is
physical contraband or to verify the "special" status of				opened only in the presence of the
enclosures without the detainee present.				inmate/detainee.
Staff is prohibited from reading or copying incoming special				
correspondence.				
Staff is only authorized to inspect outgoing correspondence or		l		
other mail without the detainee present when there is reason to				
believe the item might present a threat to the facility's secure				
or orderly operation, endanger the recipient or the public, or				
might facilitate criminal activity.				
Correspondence to a politician or to the media is processed as				
special correspondence and is not read or copied.				The facility year a "control and alim" to
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				The facility uses a "contraband slip" to document rejections or the removal of
written notice to the sender and the addressee.		╎╚┚╎		contraband items from mail.
The official authorizing censorship or rejection of outgoing				Contraband items from man.
mail provides the detainee with signed written notice.	\boxtimes			
Staff maintains a written record of every item removed from				The removal of items is documented. Some
detainee mail.				items are may be stored in the detainees'
detailed man.				personal property until release; however, if
		🗀		serious contraband is discovered, it is logged
				and eventually disposed of in accordance with
				policy.
The Warden or equivalent monitors staff handling of				<u> </u>
discovered contraband and its disposition. Records are	\boxtimes			
accurate and up to date.				
The procedure for safeguarding cash removed from a detainee				
protects the detainee from loss of funds and theft. The				C-4 : 1 : :- : 1 1 d
amount of cash credited to detainee accounts is accurate.	\boxtimes			Cash is removed, a receipt is prepared, and the
Discrepancies are documented and investigated. Standard				money is promptly recorded into the detainee's trust fund account.
procedure includes issuing a receipt to the detainee.				u usi luliu accoulli.
Original identity documents (e.g., passports, birth certificates)				
are immediately removed and forwarded to ICE staff for	\boxtimes			
placement in A-files.				

CORRESPONDENCE AND OTHER MAIL								
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO								
LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED,								
SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND								
OTHER MAIL.								
Staff provides the detainee a copy of his/her identity	\boxtimes							
document(s) upon request.								
Staff disposes of prohibited items found in detainee mail in	_	l ·	_ '	Policy addresses the control and disposition of				
accordance with the "Control and Disposition of Contraband"	\boxtimes	📙	📙	contraband.				
Standard or the similar prevailing policy in IGSAs.								
Every indigent detainee has the opportunity to mail, at		1		Detainees are automatically given two				
government expense, reasonable correspondence about a legal	\boxtimes		П	stamped envelopes per week; however, if				
matter, in three one ounce letters per week and packages		ι – .		more stamped envelopes are needed, the				
deemed necessary by ICE.		ļ	_	detainee may request.				
The facility has a system for detainees to purchase stamps and	_	l	_	There are no limitations on the number of mail				
for mailing all special correspondence and a minimum of 5	\boxtimes	ſ⊔ ·		items a detainee may send.				
pieces of general correspondence per week.				nomb a dotamoo may sona.				
The facility provides writing paper, envelopes, and pencils at	\boxtimes	lп.						
no cost to ICE detainees.								
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REMARKS:



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).	\boxtimes			Detainees receive the ICE National Detainee Handbook, as well as the local facility inmate handbook. Both handbooks are available in Spanish and English.
The handbook is supplemented by the facility orientation video, where one is provided.	\boxtimes			
All staff members receive a handbook and training regarding the handbook contents.				
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.				Updates to the detainee handbook are posted on bulletin boards in the housing units.
There an annual review of the handbook by a designated committee or staff member.				
The detainee handbook addresses the following issues: • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items.				
The detainee handbook states in clear language the basic detainee responsibilities.				
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.				The local handbook does not explain each classification level as required by the NDS.
The handbook states when a medical examination will be conducted.	\boxtimes			
The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	\boxtimes			
The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.				The local handbook does not describe official count times and procedures.
The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.				
The handbook describes barber hours and hair cutting restrictions.	\boxtimes			
The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.				
The handbook addresses religious programming.	\boxtimes			
The handbook states times and procedures for commissary or vending machine usage, where available.				
The handbook describes the detainee voluntary work program.	\boxtimes			
The handbook describes the library location and hours of operation, and law library procedures and schedules.				
The handbook describes attorney and regular visitation hours, policies, and procedures.	\boxtimes			
The handbook describes the facility contraband policy.	X			

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 handbook describes the facility visiting hours and	\boxtimes			
schedule, and visiting rules and regulations. The handbook describes the correspondence policy and				
procedures.	\boxtimes			
The handbook describes the detainee disciplinary policy and				
procedures, including:				
•				
Prohibited acts and severity scale sanctions; Time limits in the Disciplinary Processor and				
Time limits in the Disciplinary Process; and				
Summary of the Disciplinary Process. The state of the description of the descriptio				
The grievance section of the handbook explains all steps in the				
grievance process – Including:				
• Informal (if used) and formal grievance procedures;				
• The appeals process;				
• <u>In CDF</u> facilities: procedures for filing an appeal of a				
grievance with ICE.				
• Staff/detainee availability to help during the grievance	_	_	_	
process.				
• Guarantee against staff retaliation for filing/pursuing a				
grievance.				
 How to file a complaint about officer misconduct with 				
the Department of Homeland Security.				
The detainee handbook describes the medical sick call	\boxtimes			
rocedures for general population and segregation.				
The handbook describes the facility recreation policy including:	_			
 Outdoor recreation hours. 	\boxtimes			
Indoor recreation hours.				
The handbook describes the detainee dress code for daily	\boxtimes			
living; and work assignments.				
The handbook specifies the rights and responsibilities of all	\boxtimes	П		
detainees.				
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REMARKS:



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 professionally trained and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.				
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	\boxtimes			
The FSA provides food service employees with training that specifically addresses detainee-related issues. • In ICE Facilities this includes a review of the ICE "Food Service" standard				ICE detainees are not assigned to the food service department. All food service functions are performed by contract food service staff.
Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.	\boxtimes			
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.				
When necessary, special procedures govern the handling of food items that pose a security threat.	\boxtimes			,
Operating procedures include daily searches (shakedowns) of detainee work areas.			\boxtimes	No detainees are assigned to food service. Only contract staff works in this area.
The FSA monitors staff implementation of the facility's opulation counts procedures. Staff is trained in count procedures.				No detainees are assigned to food service. Only contract staff works in this area.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.				No detainees are assigned to food service. Only contract staff works in this area.
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.				No detainees are assigned to food service. Only contract staff works in this area.
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.				No detainees are assigned to food service. Only contract staff works in this area.
 During orientation and training session(s), the CS explains and demonstrates: Safe work practices and methods; Safety features of individual products/pieces of equipment; and Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 				No detainees are assigned to food service. Only contract staff works in this area.
The Cook Supervisor documents all training in individual detainee detention files.				No detainees are assigned to food service. Only contract staff works in this area.
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay.				No detainees are assigned to food service. Only contract staff works in this area.
Detainees are served at least two hot meals every day. No nore than 14 hours elapse between the last meal served and he first meal of the following day.				
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.				All meals are served via a satellite feeding system, rather than cafeteria style.

FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN

ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. **COMPONENTS** YES No NA REMARKS The facility has a standard 35-day menu cycle. IGSAs use a \boxtimes 35 day or similar system for rotating meals. The FSA or facility considers the ethnic diversity of the Examples of meals served are: chili-con facility's detainee population when developing menu cycles X \Box carne: burritos: spaghetti, rice; beans; and (Provide examples). chow mien. A registered dietitian conducts a complete nutritional \boxtimes П analysis of every master-cycle menu planned. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according \boxtimes П to approved recipes. The Cook Foreman has the authority to change menu items if necessary. X If yes, documenting each substitution, along with its П iustification With copy to FSA All staff and volunteers know and adhere to written "food \boxtimes \Box preparation" procedures. Detainees whose religious beliefs require the adherence to Detainee requests for religious diets are not particular religious dietary laws are referred to the Chaplain referred to the Chaplain or Food Service \boxtimes Director (FSD), but rather to the medical or FSA. department for approval. A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week: The common-fare menus satisfy nutritional A common-fare menu is not available to recommended daily allowances (RDAs); \boxtimes П accommodate detainees whose religious Staff routinely provide hot water for instant dietary needs cannot be met on the mainline. 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 \boxtimes П There is no common-fare program. detainee's removal from the Common-Fare Program. The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the X П П ceremonial meals for the following calendar year. 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 M П There is no common-fare program. 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

FOOD SERVICE POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. COMPONENTS YES No NA REMARKS Satellite-feeding programs follow guidelines for proper sanitation. Hot and cold foods are maintained at the prescribed, "safe" X П temperature(s) while being served. All meals are provided in nutritionally adequate portions. X Food is not used to punish or reward detainees based upon X behavior. The food service staff instructs detained volunteers on: Personal cleanliness and hygiene: Contract staff performs all food service duties. Sanitary techniques for preparing, storing, and П \bowtie There are no detainees assigned to the food serving food; and service department. The sanitary operation, care, and maintenance of equipment. Everyone working in the food service department complies M \Box with food safety and sanitation requirements. Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation X areas and equipment. Who conducts the inspections? Equipment is inspected for compliance with health and The Minnesota Department of Health, safety codes and regulations. Division of Environmental Health conducted \boxtimes an annual inspection on 11-26-08. As of the When was the most recent inspection? date of our review, an inspection for calendar Which agency conducted the inspection? year 2009 had not yet been conducted. Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is \boxtimes П scheduled and completed. Standard procedure includes checking and documenting X temperatures of all dishwashing machines after each meal. Staff documents the results of every refrigerator/freezer M \Box П temperature check. The cleaning schedule for each food service area is \boxtimes

REMARKS:

conspicuously posted.

Procedures include inspecting all incoming food shipments

for damage, contamination, and pest infestation. Storage areas are locked when not in use.

ACCEPTABLE

The facility provides detainees with nutritious meals, prepared in a sanitary manner while identifying, developing and managing resources to meet the operational needs of the food service program. There is no common-fare program to accommodate detainees whose religious dietary needs cannot be met from the master cycle menu. The Jail Commander advises an annual inspection is scheduled to be conducted before the end of 2009.

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X

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REPEAT FINDING

AT-RISK

b6,b7c / 12-10-09 AUDITOR'S SIGNATURE / DATE ☐ DEFICIENT

FUNDS AND PERSONAL PROPERTY POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. ROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES No NA REMARKS Detainee funds and valuables are properly separated, stored, and are \boxtimes П accessible only by designated supervisor(s). Detainees' large valuables are secured in a location accessible to \boxtimes П 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 \boxtimes personal property inventory form that meets the ICE standard? Staff forwards an arriving detainee's medication to the medical staff. M Audits of baggage and non-valuable property occur each quarter and Security patrol staff conducts \boxtimes \Box \Box audits are logged and verified. quarterly property audits. Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify \boxtimes funds and valuables. Staff searches arriving detainees and their personal property for X contraband. Staff procedures follow written policy for returning forgotten property X to detainees. Property discrepancies are immediately reported to the CDEO or Chief \boxtimes of Security. Staff follows written procedures when returning property to detainees. M CDF/IGSA facility procedures for handling detainee property claims M П \Box are similar with the ICE standard. The facility attempts to notify an out-processed detainee that he/she left property in the facility: This component specifically applies By sending written notice to the detainee's last known to an SPC. Property left behind by address: M an ICE detainee is considered Via certified mail; and abandoned and immediately The notice state that the detainee has 30 days in which to

forwarded to the ICE Field Office.

REPEAT FINDING

REMARKS:

abandoned.

written procedures.

The facility provides for the control and safeguarding of detainees' personal property in compliance with ICE NDS.

DEFICIENT

claim the property, after which it will be considered

If a CDF/IGSA facility, written procedure requires the

The facility disposes of abandoned property in accordance with

prompt forwarding of abandoned property to ICE.

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ACCEPTABLE

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AT-RISK

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DETAINEE GRIEVANCE PROCEDURES

POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPS) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPS; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPS. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED.

COMPONENTS	YES	No	NA	REMARKS
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.				Facility policy regarding inmate grievances does not provide written procedures for the informal resolution of oral grievances.
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.	\boxtimes			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.		\boxtimes		There are no documented cases of substantiated retaliatory discipline or staff harassment on file.
 Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed. 	\boxtimes			
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	\boxtimes			
□ ACCEPTABLE □ DEFICIENT □	AT-RIS	SK		REPEAT FINDING

REMARKS:

The facility has policy in place to address detainee grievances in a timely manner; however, it does not include procedures for the informal resolution of oral grievances.

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GROUP LEGAL RIGHTS PRESENTATIONS

POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT.

CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS. MARK STANDARD AS

ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET.						
COMPONENTS	YES	No	NA	REMARKS		
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.						
Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to attorneys or accredited representatives.						
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.						
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.						
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.						
When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend.						
Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.						
Interpreters are admitted when necessary to assist attorneys and other legal representatives.						
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.						
Staff permits presenters to distribute ICE-approved materials.						
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.						
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.						
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.						
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request						
ACCEPTABLE DEFICIENT	AT-RISE			REPEAT FINDING		

REMARKS:

Interviews with the ICE DO (Facility Liaison) and Sherburne County Jail (SCJ) staff indicate there were no requests for Group Legal Rights Presentations during the last 12 months.

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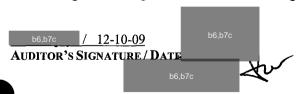
ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

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

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.				Facility policy outlines procedures for the regular issuance of these items.
 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); and One pair of facility-issued footwear. 				
Additional clothing is available for changing weather conditions, or as seasonally appropriate.				
New detainees are issued clean bedding, linens, and towels. They receive at a minimum: One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.	\boxtimes			
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.				Detainees are not authorized to work at the facility.
Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly.				
Food service detainee volunteer workers are permitted to exchange outer garments daily.				Detainees are not assigned to the Food Service Department.
Volunteer detainee workers are permitted to exchange outer garments more frequently.				The facility does not have a voluntary work program and detainees are not allowed to work on facility work crews.
	AT-RI	SK		REPEAT FINDING

REMARKS:

The facility has procedures in place to provide detainees clean clothing, bedding, linens and towels upon arrival. Procedures also facilitate regular exchanges of these items for as long as the detainee remains in custody.



MARRIAGE REQUESTS						
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-C. COMPONENTS	ASE CONSI YES	DERATIO	N FROM I	CE MANAGEMENT. REMARKS		
The Field Office considers detainee marriage requests on a case-by-case basis.	×			All marriage requests are forwarded to the ICE Field Office. That office initiates and documents all notifications and coordinates the wedding ceremony, which takes place at the Field Office.		
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	\boxtimes					
It is standard practice to require a written request for permission to marry.	\boxtimes					
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	\boxtimes					
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	\boxtimes					
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes					
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes					
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING		

REMARKS:			
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NON-MEDICAL EMERGENCY ESCORTED TRIPS

POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.

☑ STANDARD N/A: CHECK THIS BOX IF ALL ICE NON-MEDICAL EMERGENCY ESCORTED TRIPS ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: • Funeral; or • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, step-parent, and foster parent as "immediate family".				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel; e.g., the kind of supervision required.				
Each escort includes at least two officers.				
Escorting officers report unexpected situations to the originating facility as a matter of procedure, and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.				
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.				
 Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. 				
Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.				
ACCEPTABLE DEFICIENT] AT-RISH	ζ		REPEAT FINDING

REMARKS:

All funeral trips and trips to see a critically-ill relative are handled by ICE personnel.



RECREATION

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.

Components	YES	No	NA	REMARKS	
The facility has a recreation program and facility.					
A recreational specialist (for facilities with more than 350 detainees)				There are five Recreation	
tailors the program activities and offerings to the detainee population.				Programmers.	
Regular maintenance keeps recreational facilities and equipment in good					
condition.				TI	
The recreational specialist or trained equivalent supervises detained recreation workers.				The recreation program does not utilize detainee workers.	
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.					
Dayrooms offer sedentary activities, e.g., board games, cards, television.		П			
Outside activities are restricted to limited-contact sports.					
Each detainee has the opportunity to participate in daily recreation.					
Detainees have access to recreation activities outside the housing units	+				
for at least one hour daily, 5 days a week.					
Staff checks all items for damage and condition when equipment is returned.					
Staff conducts searches of recreation areas before and after use.					
All recreation areas under constant staff supervision.					
Supervising staff is equipped with radios.					
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.				Outdoor recreation is not available at this facility.	
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.				a torner at this harmy.	
Special programs or religious activities are available to detainees.		-			
Volunteers are required to sign a waiver of liability before entering a	1	<u> </u>			
secure portion of the facility where detainees are present.					
Visitors, relatives or friends are not allowed to serve as volunteers.					
If outdoor recreation is offered, check this box. No further inform	nation is	required	when o	utdoor recreation is offered.	
If the facility has no outside recreation, are detainees considered for					
transfer after six months?	K 2	_			
• If yes, written procedures ensure timely review of all eligible detainees.	\boxtimes				
Case officers make written transfer recommendations about every six-					
month detainee to the OIC.					
The OIC documents all detainee-transfer decisions, whether yes or no.					
The detainee's written decision for or against an offered transfer documented in his/her A-file.	\boxtimes				
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.	\boxtimes				
If no recreation is available, the ICE Districts routinely review transfer	\boxtimes				
eligibility for all detainees after 60 days.					
The A-file of every detainee who is held more than 60 days without					
access to recreation contains either a transfer-waiver signed by the					
detainee, or the OIC's written determination of the detainee's					
ineligibility for transfer.					
The detainee's legal representative is notified of the detainee's/OIC's decision.	\boxtimes				
					
□ ACCEPTABLE □ DEFICIENT □ AT-RISK □ REPEAT FINDING					

REMARKS:

The facility does not have an outdoor recreation area. Detainees held in excess of six months are considered for transfer in a timely manner.



RELIGIOUS PRACTICES

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

Components	YES	No	NA	REMARKS
Detainees are allowed to engage in religious services.				
Space is available for detainees to conduct religious services.				
The facility allows detainees to observe the major "holy days" of their				
religious faith.				
List any exceptions.				
The facility accommodates recognized holy-day observances by:				
 Providing special meals, consistent with dietary restrictions; 				
Honoring fasting requirements;				
Facilitating religious services; and				
Allowing activity restrictions.				
Each detainee is allowed religious items in his/her immediate				Detainees are authorized to
possession.				possess religious texts.
Volunteer's credentials are checked and verified before allowing				
participation in detainee programs.				
Members of faiths not represented by clergy may conduct their own			lп	
services within security allowances.				
Detainees in the Special Management Unit are allowed to participate	_			
in religious practices unless otherwise documented for the safety and			凵	
security of the facility.		<u> </u>		
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISH	ζ		REPEAT FINDING

REMARKS:

Detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths.



DETAINEE TELEPHONE ACCESS

POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT D	POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.									
COMPONENTS	YES	No	NA	REMARKS						
Detainees are allowed access to telephones during established facility waking hours.	\boxtimes			Phones are available throughout the day.						
Upon admittance, detainees are made aware of the facility's telephone access policy.	\boxtimes									
Access rules are posted in housing units.	\boxtimes			Phone access rules are posted in all units.						
The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.										
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	\boxtimes			There are two units that primarily house ICE detainees. One unit has 8 phones per the 98-bed unit, and the other has 12 phones per the 116-bed unit.						
Telephones are inspected regularly by facility staff to ensure that they are in good working order.				All phones were in working order with one exception. An out of order notice was posted and a work order had been submitted for repair.						
The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	\boxtimes									
The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely.										
Detainees are afforded a reasonable degree of privacy for legal phone calls.	\boxtimes			Phones are spaced apart and located in semi-private areas of the units.						
A procedure exists to assist a detainee who is having trouble placing a confidential call.				A detainee may submit an IRGF or speak directly with staff for assistance with a confidential call.						
The facility provides the detainees with the ability to make non-collect (special access) calls.	\boxtimes									
Special Access calls are at no charge to the detainees.	\boxtimes			Policy authorizes these types of calls.						
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	\boxtimes			The OIG hotline number is posted in the units and is available at the Officers' station. The inspector checked the hotline number and was connected to a live person at OIG.						
In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.										
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".										
Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.				This arrangement would be approved and coordinated by ICE.						
Any telephone restrictions are documented.				Restrictions would be documented through the disciplinary process.						
The facility has a system for taking and delivering emergency detainee telephone messages.				In most cases, the caller would be allowed to speak directly with the affected inmate/detainee.						
Emergency phone call messages are immediately given to detainees.	\boxtimes									

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT D	ETAINEE	s' reas	ONABLE	E AND EQUITABLE ACCESS TO TELEPHONES.			
COMPONENTS	YES	No	NA	REMARKS			
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.	\boxtimes			Policy indicates inmates/detainees held in disciplinary segregation will receive access to phones three days per week for one hour each day.			
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	\boxtimes						
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.							
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.				Phone monitoring notifications are posted in each unit.			
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING							

REMARKS:

The facility has an ample number of phones available throughout the day. Detainees were interviewed regarding use of the phones and there were no concerns identified.

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VISITATION

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

COMPONENTS	YES	No	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	\boxtimes			
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 visitation schedule and rules are posted in the front lobby. A handout, with visitation hours and other pertinent information, is also provided.
The hours for all categories of visitation are posted in the visitation waiting area.	\boxtimes			
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	\boxtimes			
A general visitation log is maintained.				The facility uses an automated visitation program to document approved visitors and times of visits. There is also a written log which is submitted by each inmate/detainee with approved visitor information.
The detainees are permitted to retain personal property items specified in the standard.	\boxtimes			
A visitor dress code is available to the public.	\boxtimes			
Visitors are searched and identified according to standard requirements.	\boxtimes			The facility has a clean, modern Visitation Center adjacent to the jail. Visitors are identified and allowed to access the video visitation stations.
The requirement on visitation by minors is complied with.				Minors may visit with an approved adult.
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.				Minors may visit with an approved adult.
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.				Minors may visit with an approved adult.
Detainees in special housing are afforded visitation.				Detainees in disciplinary segregation may have restrictions on general visitation.
Legal visitation is available seven (7) days a week, including holidays.				
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.				Legal visitors must call ahead if wanting to make arrangements during late evening hours or holiday periods.
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	\boxtimes			
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	\boxtimes			Private consultation rooms are provided in the booking department.
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.				Private non-contact rooms are available in the visitation center.
Prior to each visit, legal service providers and assistants are identified per the standard.				The facility requires both an American Bar Association (ABA) identification and driver's license.

VISI	TATIO	N		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, THE NEWS MEDIA.	FRIEND	S, LEGA	L REPRI	ESENTATIVES, 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.				
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	\boxtimes			
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	\boxtimes			
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.				
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	\boxtimes			
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			
		AT-RI	SK	REPEAT FINDING
REMARKS:				

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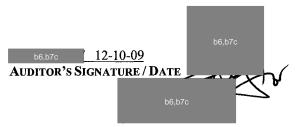
VOLUNTARY WORK PROGRAM

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

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

COMPONENTS	YES	No	NA	REMARKS
Does the facility have a voluntary work program? • Do ICE detainees participate?				
Detainee housekeeping meets neatness and cleanliness standards.				
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.				
Written procedures govern selection of detainees for the Voluntary Work Program.				
Where possible, physically and mentally challenged detainees participate in the program.				
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.				
Detainee volunteers generally work according to fixed schedule.				
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.				
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, NFPA, ACA standards				
 Medical staff screen and formally certify detainee food service volunteers. Before the assignment begins; and As a matter of written procedure 				
Detainees receive safety equipment/ training sufficient for the assignment.				
Proper procedure is followed when an ICE detainee is injured on the job.				
ACCEPTABLE DEFICIENT	AT-Risi	ζ.		REPEAT FINDING

REMARKS:



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.				COs are trained to notify medical after four missed meals. Medical states COs notify medical sooner and places the striker on a food watch.
CDFs and IGSAs immediately report a hunger strike to the ICE.				This is addressed in policy. Additionally, medical would notify ICE.
The facility has established procedures to ensure staff respond immediately to a hunger strike.				Policy meets the requirements.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?				The striker would be moved to booking or SMU for observation. Booking is the preferred housing location.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	\boxtimes			Medical staff is authorized to move the detainee into booking or SMU. There is no infirmary in the facility. If the strike continues and the patient decompensates, the patient would be transferred to a community medical facility.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.				Medical uses a Form I-839 for inmates/detainees in the facility. They also document progress notes.
The OIC of the facility obtains a hunger striker's consent before medical treatment.				The facility is compliant with consent and refusal forms and policy addresses this.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.				A form is provided to all inmates demonstrating the progressive decompensation for a hunger striker. The facility obtains a refusal if the inmate intent to strike continues.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	\boxtimes			Three meals and snacks are offered daily and documented as consumed or not.
Staff maintains the hunger striker's supply of drinking water/other beverages.	\boxtimes			Although water is shut off in the cell, the striker is offered fluids throughout their stay. Offers of fluid and consequent consumption/rejection are documented.
During a hunger strike, staff removes all food items from the hunger striker's living area.				All food is removed from the cell and meals are brought into the cell and left. If after a reasonable time they are not consumed, the meal is removed and the refusal to eat documented.
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	\boxtimes			Form I-839 is used in this facility.
The medical staff has written procedures for treating hunger strikers.				Policy for Hunger Strike by Inmates is available to staff.

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.					
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.				Appropriate documentation occurs. Staff sits with the striker and addresses the progressive decompensation of a hunger striker and provides a handout.	
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.				COs receive training during their initial orientation and the site medical director provides clinical guidance to staff.	
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

REMARKS:

There has been no hunger strike by an ICE detainee in the past 12-months. The medical staff has encountered hunger strikes with county and U.S. Marshal inmates in the past and has had good experience in handling these medical issues. They will not allow an inmate to seriously decompensate as a result of a hunger strike. The inmate would be moved to a community hospital for appropriate care prior to decompensation.

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AUDITOR'S SIGNATURE / DATE 66,57c

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
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.				Minnesota DOC reviews the facility annually. The facility is not NCCHC, ACA or JCAHO accredited.
The facility's in-processing procedures for arriving detainees include medical screening.	\boxtimes			A detailed medical screening is completed by custody staff in accordance with policy.
All detainees have access to and receive medical care.				Newly-received inmates/detainees learn how to access medical care through: verbal communication during the initial screening; orientation when first assigned to housing; and the inmate handbook. The sick call process ensures all detainees have access to medical care, and they are exempt from the facility's \$5 co-pay for sick call visits. When asked, housing COs validated a comfort level communicating with medical staff on specific medical concerns.
The facility has access to a PHS/DIHS Managed Health Care Coordinator.				Staff confirms access to PHS/DIHS. Business cards and phone numbers were observed. Treatment Administration Records (TARs) were observed in detainee medical records.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.				Only daytime and evening nursing coverage is provided; there is no overnight nursing coverage. Two registered nurses (RNs) are provided on days, and two during the evenings, Monday through Friday. A combination of two licensed practical nurses (LPNs) and one certified medical assistant (CMA) support the RN staff on each day/evening shift. This same combination of three staff (occasionally one LPN and two CMAs) also provide weekend coverage on the day and evening shifts. The medical doctor (MD) is independently contracted and provides: on-side coverage of approximately 5-7 hours every Monday, Wednesday and Friday; and on-call coverage 24/7. The dentist provides one on-site shift about every 3 weeks. A psychologist is contracted from Central Minnesota Mental Health to provide psychological health consultation on an as-needed basis.
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.				Medical has two exam rooms and one procedure room. Dental has one operatory and one x-ray room. There is sufficient office space for staff and secured areas for medical records and medications.

ACCESS TO MEDICAL CARE						
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN THE GENERAL WELL-BEING OF ICE DETAINEES.	ACCRE	DITED/A	ACCRED	ITATION-WORTHY HEALTH PROGRAM FOR		
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	\boxtimes			Medical is located within the secure perimeter adjacent to central control.		
The medical facility entrance includes a holding/waiting room.				There is a holding area.		
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	×			Waiting detainees are always within direct observation of central control. Because medical schedules specific appointment times, smaller numbers of inmates are present in medical at one time. As a result, there is not a security escort or officer posted at medical unless a higher risk patient is to be seen. Panic buttons are readily available in each exam area.		
Detainees in the holding/waiting room have access to a drinking fountain.				There is a bathroom with a wash basin adjacent to the holding area. Medical will provide paper drinking cups to any inmate requesting one.		
 Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit; With physical access restricted to authorized medical staff; and Procedurally, no copies made and placed in detainee files. 				Medical records are secured in a medical area separate from other records. Only authorized medical staff has access to the records.		
Pharmaceuticals are stored in a secure area.	\boxtimes			The pharmacy room is secured.		
 Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test during the admission process; Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and Detainees not screened are housed separate from the general population. 				At a minimum of 8+ times per day, the nursing staff goes to intake booking to plant PPD's on newly-received inmates/ detainees. This happens prior to their being moved from booking to general population (GP) housing. Actual practice demonstrates inmates receive their TB test within hours of admission.		
 All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; and Before a detainee's assignment to a housing unit. 				A thorough mental health examination is completed immediately upon arrival to the facility. Trained booking officers conduct the screening prior to detainee movement into GP.		
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.				This occurs throughout the day. A review of 45 ICE booking summaries confirmed 100% compliance with medical review of the initial medical/mental health screening. This occurs within hours of admission.		

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
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				This inspector recognizes the corrective action taken as a result of the last audit to ensure ICE detainees are monitored and tracked for physicals within 14-days of arrival. However, although the tracking system is compliant, the SCJ Health Inventory (used for the 14-day health appraisal and physical) does not encompass necessary components of a recognized physical examination per NCCHC or JCAHO, as required by the NDS. Therefore, additional corrective action is necessary.
Detainees in the Special Management Unit have access to health care services.				During the medication pass, nurses go cell-to-cell in SMU inquiring about medical needs and collecting sick call requests.
Staff provides detainees with health services (sick call) request slips daily, upon request. • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. • Service-request slips are delivered in a timely fashion to the health care provider.				Sick call requests are available in the housing units or from the med cart nurse. Sick call slips, available in English and Spanish, are picked up by the nurses Monday through Friday only during the 8 AM medication pass (NOTE: As a slight discrepancy, the inmate handbook indicates the medical request slips are picked up on the 2:30 PM pass). Officer interviews confirmed accessibility to medical staff in the event detainees develop problems requiring evaluation outside the Mon-Fri sick call request pick-up schedule. Once brought to medical, detainees with sick call slips are triaged within 1-2 hours by an RN; follow-up sick call appointments are scheduled with the MD and the detainee is seen appropriately.
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.	\boxtimes			Policies, entitled Emergency Medical Treatment and Safety and Emergency Procedures, address emergency care when medical staff is not on duty, particularly the night shift
The plan includes an on-call provider.				The medical director is on-call 24/7 and his number is posted.
The plan includes a list of telephone numbers for local ambulance and hospital services.				Central control, as well as intake and floor sergeants, have access to ambulance and hospital telephone numbers.
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.				This requirement is addressed by the above policies, as well as Policy #9.0200, entitled Emergency Evacuation.

ACCESS TO MEDICAL CARE

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

COMPONENTS	YES	No	NA	REMARKS
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	\boxtimes			Staff is trained to respond within 4-minutes. The training officer has conducted time studies for first responders, which has shown response to be within 28 seconds.
Where staff is used to distribute medication, a health care provider properly trains these officers.				Although medications are generally distributed by nursing staff, occasionally COs must distribute medication. All officers are trained annually by an RN in medication delivery and proper documentation of the medication administration record (MAR). All officers completing annual training must pass medication to at least one housing area per year. A detailed curriculum of this training was reviewed.
The medical unit keeps written records of medication that is distributed.				MARs are properly used in the facility to document medication distributed.
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.				Communication is mostly verbal with classification. There is a 'tracking sheet' that accompanies inmates and is accessible and used by both medical and custody staff.
A signed and dated consent form is obtained from a detainee before medical treatment is administered.				As validated in a records review, facility staff obtains a generic consent from all inmates as part of the admissions process. The facility indicates it uses a consent form for invasive procedures. Most consent forms observed in the record (besides the general consent) were for dental procedures.
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.				The facility uses its own release of information form.
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.				Per medical, they receive a faxed transfer list from the Bloomington headquarters. The list progressively grows throughout the day.
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	\boxtimes			Form 553 is completed and copies of medical records are only made as clinically appropriate.
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".	\boxtimes			Per the medical staff, sealed envelopes are used for the 553 form and meds.
	☐ AT-RISK			☐ REPEAT FINDING

Remarks:

The 14-day physical issue was addressed by the Head of DIHS and her clarification is quite clear. Fourteen-day physicals are to include a hands-on evaluation of the detainee. A physical involves the inspection, palpation, auscultation and percussion of a patient's body to determine the presence or absence of physical signs of disease. The SCJ Health Inventory currently used for the 14-day health appraisal does not meet these requirements. According to medical, this form was condensed to its current one-page format in early 2009. The previous form was reviewed and did contain the significant components of a physical examination and would have been acceptable if in place.

The initial medical and mental health screening is comprehensive. The officers obtain detailed information and complete additional screenings should certain chronic conditions be identified. This is very rare in facilities that do not have medical staff stationed in booking. Booking staff interviewed were knowledgeable about medical issues and procedures to ensure access to care.

The medical staff is thorough and attentive to detail. A records review found no discrepancies with the charting and follow-up care. Although medical records are available, the department uses eMD (a computerized program) to document encounters and spend most of their time on eMD. Medical staff utilizes three main functionalities of eMD:

- Charts for encounter documentation. Staff can also pull up medications, allergies and notes, which are helpful in completing the Form 553 for transfers.
- Task Master allows providers to write medication orders. They are printable for staff to transcribe; and
- Schedule allows for appointments and follow-ups to be scheduled and printed out for inmate movement to medical.

Medical also has a program called TB Tracker, which records all information on TB testing: PPD plant dates and read dates; PPD results; and chest x-ray information, when appropriate. This also provides staff with quick TB testing information when completing the 553's for detainee transfer.

This medical department demonstrates a very strong commitment to life-safety issues.



SUICIDE PREVENTION AND INTERVENTION

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	YES	No	NA	REMARKS		
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	\square			Staff receives initial and periodic ongoing, training.		
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.	\boxtimes			Training curriculum was reviewed with the training officer and all requirements of this component are addressed.		
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.				An appropriate mental health screening is conducted by the booking officers. Medical staff reviews all initial mental health assessments.		
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.				Policy for Suicide Prevention and Intervention addresses the requirement.		
The facility has a designated isolation room for evaluation and treatment.				Two rooms (BH5 and BH6) in booking are designated as suicide cells. In addition to COs performing 15-minute checks, these cells also have cameras which display on the Booking Sergeant's monitor.		
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.				The cells are secure; however, each cell has a sprinkler head. This would not present a problem initially when detainees would have only suicide smocks and blankets; however, the facility adheres to a progressive program where clothing and personal items are restored to the patient as they improve. Once the smocks are replaced with clothing and personal items, an item could be placed upon the sprinkler head; however, it would likely break away. The cells could not be entered as both were occupied. The facility reports the State Fire Marshall ordered sprinklers in every cell even though they were designated as safe cells.		
Medical staff has approved the room for this purpose.	\boxtimes			There have been no problems with the sprinklers in the past.		
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	\boxtimes			Custody staff document 15-minute checks on PC Enforcer, the computerized management system. They record the time of the checks, as well as the inmate activity.		
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

The facility is in compliance with this standard. Interviews with correctional officers in admissions confirm their awareness of suicidal behavior and procedures to follow if suicidal ideology is suspected. There have not been any suicides at the facility. There is concern raised about sprinkler heads in the suicide designated rooms once a detainee earns back clothing and personal items. State law has directed the facility to comply with their requirements.



TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

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

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

AND RELATED NOTIFICATIONS.				
COMPONENTS	YES	No	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.				Detainees who are terminally ill would not be accepted into the facility. If identified here, they would be transferred out.
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: • The detainee's location; and • The limitations placed on visiting.				The facility would defer this responsibility to ICE, as addressed in facility policy.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.				Policy addresses the requirement; however, seriously-ill detainees would be transferred out from the facility.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.				Policy specifically addresses this requirement.
There is a policy addressing "Do Not Resuscitate Orders"				Policy addresses the requirement; however, detainees with serious illnesses would be transferred from the facility.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?				Medical staff indicates if they became aware of a do not resuscitate (DNR) order, efforts to sustain life would continue and the detainee would be transported to the nearest medical facility for care as addressed in policy. An ICE detainee with a DNR order would not be housed here.
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.				Any such detainees would not be housed in the facility.
The facility has written procedures to address the issues of organ donation by detainees.				Policy addresses the requirement. A form is also provided.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	\boxtimes			Policy directs the facility to notify ICE.
The facility has a policy and procedure to address the death of a detainee while in transport.				Policy addresses emergency transports.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.				The Sherburne County Jail (SCJ) is an IGSA, and the ICE FOD would take the lead.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

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

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

COMPONENTS	YES	No	NA	REMARKS
 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? 				The ICE FOD would take the lead.
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	\boxtimes			The ICE FOD would take the lead.
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body.				The ICE FOD would take the lead.
ICE staff follows established procedures to properly close the case of a deceased detainee.				The ICE FOD would take the lead.
☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RIS	K		REP	PEAT FINDING

REMARKS:

There have been no detainee deaths at this facility. While the standard is mostly not applicable since the facility does not accept a seriously or terminally-ill detainee, if one were to become seriously ill the SCJ would defer to ICE authorities. The ICE Field Office would take charge of deaths.

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AUDITOR'S SIGNATURE / DATE

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SECURITY AND CONTROL STANDARDS

CONTRABAND

POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.

COMPONENTS	YES	No	NA	REMARKS		
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.				SCJ policy, entitled Contraband, addresses all issues related to the discovery and handling of contraband items.		
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.						
Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	\boxtimes					
Altered property is destroyed following documentation and using established procedures.	\boxtimes					
Before confiscating religious items, the OIC or designated investigator contacts a religious authority.	\boxtimes					
Staff follows written procedures when destroying hard contraband that is illegal.				This procedure is addressed in SCJ policy, entitled Inmate Introduction of Contraband, Frisk Searches, Strip Searches, and Body Cavity Searches.		
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.	×			The facility retains some contraband items for use in staff training.		
☑ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

The facility is compliant with all components of this ICE standard.



DETENTION FILES

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

COMPONENTS	YES	No	NA	REMARKS
A detention file is created for every new arrival whose stay will exceed 24 hours.				Detention files are stored in a secure room adjacent to the booking department.
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	\boxtimes			Files contain the following: Booking Sheet; Intake Interview Form; Inmate Transfer Report; Inmate Tracking sheet and disciplinary Log; Incident Reports; Disciplinary Procedure Report; Primary Security Level Assignment Form; Classification Review Notice(s); fingerprint cards; Property Inventory Forms: and National Crime Information Center (NCIC) documents.
 The detainee's detention file also contains documents generated during the detainee's custody. Special requests Any G-589s and/or I-77s closed-out during the detainee's stay Disciplinary forms/Segregation forms Grievances, complaints, and the disposition(s) of same 				
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.				
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.				
The officer closing the detention file makes a notation that the file is complete and ready to be archived.				
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.				
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.				Logs to check files in and out are located adjacent to the file cabinets.
ACCEPTABLE DEFICIENT	AT-	-Risk		REPEAT FINDING

REMARKS:

Detention files are maintained for every detainee and contain pertinent documentation. The facility also maintains many files and documents on the automated ENFORCE program. Since the ICE portion of the booking process usually occurs at the St. Paul, Minnesota Field Office, documentation maintained in the A-files was not available at the SCJ.

b6,b7c / 12-10-09
AUDITOR'S SIGNATURE / DATE
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DISCIPLINARY POLICY

POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.

COMPONENTS	YES	No	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.				The detainee disciplinary rules are detailed in facility policy, entitled Inmate Discipline, as well as in the inmate handbook.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	\boxtimes			
Written rules prohibit staff from imposing or permitting the following				
sanctions:		ļ		
 corporal punishment 				
 deviations from normal food service 	_			
• clothing deprivation	\boxtimes		Ш	
• bedding deprivation				
denial of personal hygiene items		 		
loss of correspondence privileges				
deprivation of physical exercise				
The rules of conduct, sanctions, and procedures for violations are			П	
defined in writing and communicated to all detainees verbally and in writing.			Ш	
The following items are conspicuously posted in Spanish and English,				
and other dominate languages used in the facility:				
Rights and Responsibilities				
Prohibited Acts	\boxtimes			
Disciplinary Severity Scale				
• Sanctions	'			
When minor rule violations or prohibited acts occur, informal				The facility places great
resolutions are encouraged.	\boxtimes			emphasis on informal
				resolution.
Incident reports and Notice of Charges are promptly forwarded to the	\boxtimes			
designated supervisor.				
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene	\boxtimes		П	
before an investigation ends.				
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;				The facility utilizes a sergeant to
• Considers written reports, statements, physical evidence, and	\boxtimes			hear both minor and major
oral testimony;			ı	offenses.
 Hears pleadings by detainees and staff representatives; 				
Bases its findings on the preponderance of evidence; and			!	
• Imposes only authorized sanctions				
A staff representative is available if requested for a detainee facing a	\boxtimes			
disciplinary hearing. The facility permits hearing postponements or continuances when				
conditions warrant such a continuance. Reasons are documented.	\boxtimes			
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DISCIPLINARY POLICY

POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.

COMPLIANCE WITH FACILITY ROLES AND REGULATIONS.				
COMPONENTS	YES	No	NA	REMARKS
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.				The facility can impose penalties of up to: 90 days for a Level 2 offense; and 180 days for a Level 3 offense.
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"				The facility has no policy on how to handle confidential-informant information.
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.				
□ ACCEPTABLE □ DEFICIENT □	AT-RISH	ζ		REPEAT FINDING

REMARKS:

The facility is compliant with all components of this ICE standard with the exception of the two components noted above.



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
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.		\boxtimes		There is no policy statement that precludes detainees or detainee groups from exercising control or authority over other detainees.
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees				
Staff is trained to identify signs of detainee unrest. • What type of training and how often?				
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)				
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.				The Jail Commander, the Assistant Jail Commander, and two Captains meet as a committee to carry out this responsibility.
 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				The mutual aid agreements in place are with the: MDOC to provide evacuee bed space: the local fire department: and a local bus company to provide transportation for the evacuees. Other mutual aid agreements with the local hospital and ambulance service are being considered.
All staff receives copies of Hostage Situation Management policy and procedures.				
Staff is trained to disregard instructions from hostages, regardless of rank. Within 24 hours after release, hostages are screened for medical and psychological effects.				
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	\boxtimes			
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.				The three-day menu for both regular meals and special diets is in policy, entitled Emergency Menu.

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COMPONENTS	YES	No	NA	REMARKS
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).				The facility does not have a written plan that identifies the locations of shut-off valves for all utilities.
Written procedures cover:				
Work/Food Strike		ļ	ļ	
Disturbances				
Escapes		ļ	İ	
Bomb Threats				
Adverse Weather				
Internal Searches				
Facility Evacuation		Į.		
Detainee Transportation System Plan				
Internal Hostages			Į.	
Civil Disturbances				
ACCEPTABLE □ DEFICIENT □	AT-RISK			REPEAT FINDING

REMARKS:

The facility does not have an ICE-required written plan identifying the locations of shut-off valves for all utilities. The facility administration is working on a plan to remedy this area of non-compliance. The other area of non-compliance is the facility's failure to have a policy which precludes detainees or detainee groups from exercising control or authority over other detainees



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

YES	No	NA	REMARKS
			Chemical inventories are maintained; however, not in accordance with the NDS. Inventories are required to be kept separately for each substance, with entries for each logged on a separate card or equivalent. This discrepancy was corrected during the review.
			The facility's MSDS file is maintained as a digital record accessible by all staff. The electronic file contains a plant diagram and legend of the storage areas as required. Hard copies of all MSDS are also readily accessible to staff and detainees as required.
			Specific personal protective equipment (PPE) is not available as required by the MSDS. Proper PPE was purchased during the review.
			MSDS files were not readily accessible to staff and detainees in work areas. MSDS files were not available in the laundry area or the upstairs chemical storage area. This was corrected during the review.
\boxtimes			

ENVIRONMENTAL HEALTH AND SAFETY

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COMPONENTS	YES	No	NA	REMARKS
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.				The water temperature in the food service hand sink and the detainee hand sinks in the housing units exceeds the industry standard of 120°. The temperature was measured at 135° in food service and 125° in the housing units.
All toxic and caustic materials are stored in their original containers in a secure area.				
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	\boxtimes			
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.				There were no products identified as containing methyl alcohol.
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	\boxtimes			
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).				
A technically qualified officer conducts the fire and safety inspections.				Staff conducting fire and safety inspections is not technically qualified. Further, written reports of the inspections are not forwarded to the Jail Commander for review; or corrective action, if necessary.
The Safety Office (or officer) maintains files of inspection reports.		×		Written reports are not generated/maintained of the weekly Fire and Safety Inspection reports. The weekly inspections are being documented via a log entry on the facility's activities log.
The facility has an approved fire prevention, control, and evacuation plan.	\boxtimes			
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 				A review of the fire plan indicates that the area-specific diagrams do not include: English and Spanish instructions; "You are here" markers; emergency equipment locations; and areas of safe refuge. Further, there are no directional arrows or evacuation routes in the facility's corridors.

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

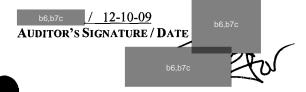
COMPONENTS	YES	No	NA	REMARKS
Fire drills are conducted and documented monthly.				A fire drill was conducted on 10-15-09; however, there is no other documentation to indicate fire drills are conducted on a monthly basis.
A sanitation program covers barbering operations.				Facility policy for Inmate Haircuts covers barbering operations.
The barber shop has the facilities and equipment necessary to meet sanitation requirements.				The facility does not have a dedicated barbershop. Detainees cut their hair in the dayrooms of each unit. A sink with hot and cold running water is not utilized to properly clean the clipper attachments before sanitizing. Spray bottles used in the sanitation of barbering equipment were not labeled until during the review.
The sanitation standards are conspicuously posted in the barbershop.				Sanitation standards are not posted in the barbering area, or with the barbering kit. Sanitation standards were developed during the review.
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes			
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	\boxtimes			
Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections.	\boxtimes			
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.	\boxtimes			
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.				Stericycle has the contract to dispose of infectious/bio-hazardous waste.
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes			Training is conducted as part of the "Delivery of Medication" and "MRSA" curriculum.
Do the methods for handling/disposing of refuse meet all regulatory requirements?	\boxtimes			
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.		\boxtimes		The pest control inspections and services are not performed on a monthly basis. Eco Lab is contracted to provide pest control; however, only on a quarterly basis.

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
Drinking water and wastewater is routinely tested according to a fixed schedule.				The facility's water is supplied and tested by the city of Elk River.
 Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	\boxtimes			
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISE	ζ.	\boxtimes	REPEAT FINDING

REMARKS:

As evidenced by the numerous deficient components noted above, the SCJ does not meet the requirements of the NDS. However, there was an innovation observed during the review which is viewed as a "best practice." The facility has converted their MSDS to digital format and has placed them on a computer drive that is accessible to all staff. Although this does not address the requirement for accessibility to detainees, it greatly enhances the availability to staff.



HOLD ROOMS IN DETENTION FACILITIES

POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.

COMPONENTS	YES	No	NA	REMARKS	
The hold rooms are situated within the secure perimeter.				Hold rooms are located in the booking department within the secure facility.	
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	\boxtimes				
The hold rooms contain sufficient seating for the number of detainees held.					
Bunks, cots, beds, or other related make-shift sleeping apparatus are precluded from use inside hold rooms.	\boxtimes				
The walls and ceilings of the hold rooms are tamper and escape proof.	\boxtimes				
Individuals are not held in hold rooms for more than 12 hours.					
Male and females are segregated from each other.				The booking area has hold rooms designated for males, females, and designee's different security levels.	
Detainees under the age of 18 are not held with adult detainees.				Policy prohibits placing a juvenile and adult in the same cell.	
Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	\boxtimes				
In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.	\boxtimes				
All detainees are given a pat down search for weapons or contraband before being placed in the room.	\boxtimes				
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.					
When the last detainee has been removed from the hold room, it is given a thorough inspection.				Rooms are inspected and cleaned as part of the daily security inspection report.	
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.					
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.				In addition, persons being placed in the hold cells are interviewed regarding medications and health conditions.	
ACCEPTABLE □ DEFICIENT □	AT-RISK REPEAT FINDING				

REMARKS:

The hold cells are not used to house inmates/detainees for over 12 hours. The rooms are clean and closely supervised throughout the day.

AUDITOR'S SIGNATURE / DATE

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KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	YES	No	NA	REMARKS
	IES	140	INA	
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				All the county maintenance staff who service the SCJ has been to a Brinks locksmith training program.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.				The Jail Commander has the responsibility of managing the key and lock control program for the facility.
The security officer, or equivalent in IGSAs, provides training to employees in key control.	\boxtimes			
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	\boxtimes			The key and lock inventory is maintained electronically.
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	\boxtimes			Every security lock in the facility is tested weekly, and lock failures are reported to the maintenance staff for immediate repair.
Facility policies and procedures address the issue of compromised keys and locks.				The procedure for handling compromised keys is in facility Policy, entitled Key Control.
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	\boxtimes			
Only dead bolt or dead lock functions are used in detainee accessible areas.	\boxtimes			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.				
Grand master keying systems are prohibited.		\boxtimes		The facility has a grandmaster key that is never issued.
All worn or discarded keys and locks are cut up and properly disposed of.				
Padlocks and/or chains are prohibited from use on cell doors.	\boxtimes			
 The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101. 				
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.				
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.				

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
Emergency keys are available for all areas of the facility.				Two sets of emergency keys are maintained: one set is located in the secure dispatch office; and the other set is located in the key box in the Jail Commander's office. Both sets are readily available to authorized personnel in the event of an emergency.
The facilities use a key accountability system.				
Authorization is necessary to issue any restricted key.				
 Individual gun lockers are provided. They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 				
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			The security keys are counted at each shift change.
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 	\bowtie			
ACCEPTABLE DEFICIENT	AT-RISI	ζ		REPEAT FINDING

REMARKS:

The facility administration has made progress on this ICE standard since the last inspection. The facility is now meeting all of the components of this standard, with the exception of having a grandmaster key. The executive staff of the SCJ understand the potential problem a grandmaster key could cause if it fell into the hands of a detainee; therefore, steps have been taken to secure the key in the Jail Commander's office in a lock box with the standing order that it never be issued.



POPULATION COUNTS

POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY.

COMPONENTS	YES	No	NA	REMARKS
Staff conduct a formal count at least once each shift.				The facility conducts five counts daily, with at least one count on each shift.
Activities cease or are strictly controlled while a formal count is being conducted.	\boxtimes			
Certain operations cease during formal counts.				
All movement ceases for the duration of a formal count.				
Formal counts in all units take place simultaneously.	\boxtimes			
Detainee participation in counts is prohibited.				
A face-to-photo count follows each unsuccessful recount.				Every detainee is required to stand during count and present their wristband (which includes a recent photo) to the counting officer for comparison purposes.
Officers positively identify each detainee before counting him/her as present.				
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.				
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.				The out-count at the facility is maintained by the booking officer.
This training is documented in each officer's training folder.				Individual training files are maintained both manually and electronically.
□ ACCEPTABLE □ DEFICIENT □	AT-RI	sk		REPEAT FINDING

REMARKS:

The facility is compliant with all components of this ICE standard.

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AUDITOR'S SIGNATURE / DATE

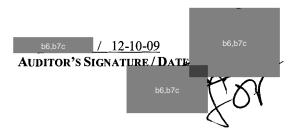
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POST ORDERS

POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT TO THAT POST.

COMPONENTS	YES	No	NA	REMARKS
Every fixed post has a set of post orders.				
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.				
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	\boxtimes			A committee made up of the Jail Commander, the Assistant Jail Commander, and the two Captains has this responsibility. Post orders are reviewed and updated annually by this committee.
The IGSA maintains a complete set (central file) of post orders.	\boxtimes			All post orders are maintained on the facility intranet H drive.
The central file is accessible to all staff.				All personnel can access the facility intranet H drive from every post in the jail.
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.				
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.		\boxtimes		All post orders are dated; however, none are signed.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	\boxtimes			
Procedures keep post orders and logbooks secure from detainees at all times.	\boxtimes			Post orders are kept secured at each work station.
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	\boxtimes			
Armed-post post orders provide instructions for escape attempts. The post orders for housing units track the event schedule.	X			
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.				The activity log is maintained electronically on the computers at each work station.
ACCEPTABLE □ DEFICIENT □	AT-RISI	ζ		REPEAT FINDING

REMARKS:



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	REMARKS
The facility has a comprehensive security inspection policy. The policy specifies: • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement				Facility policy, entitled Security Inspections, covers each of the required items in detail.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.				Officers are required to perform inspections every 30 minutes, the results of which are documented electronically.
Documentation of security inspections is kept on file.				
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.				Every officer can submit a maintenance work request that goes directly to the sergeant on duty from the computer locate d at each duty post. The sergeant then sends the work order to the maintenance department to schedule the requested repair.
The front-entrance officer checks the ID of everyone entering or exiting the facility.	\boxtimes			
All visits are officially recorded in a visitor logbook or electronically recorded.	\boxtimes			All visits are logged both manually and electronically.
The facility has a secure visitor pass system.				
Every Control Center officer receives specialized training.		<u> </u>		
The Control Center is staffed around the clock.				
Policy restricts staff access to the Control Center.				
Detainees are restricted from access to the Control Center.		<u> </u>	<u> </u>	
Communications are centralized in the Control Center.	\square			
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit		\boxtimes		The facility does not maintain a vehicle log since no vehicle is allowed into the security envelope of the jail.
Officers thoroughly search each vehicle entering and leaving the facility.				The facility does not search vehicles since no vehicle is allowed into the security envelope of the jail
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	\boxtimes			
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	\boxtimes			
The SMU entrance has a sally port.				
Written procedures govern searches of detainee housing units and personal areas.	\boxtimes			

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.

DE RESTRICTED TO EXTERNOED TERSONNEE WITH A THOROUGH GROUNDING IN TACEART OF ERRATIONS.						
COMPONENTS	YES	No	NA	REMARKS		
Housing area searches occur at irregular times.				Random searches are performed daily by the security patrol staff.		
Every search of the SMU and other housing units is documented.						
Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.						
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	\boxtimes					
Daily procedures include: • Perimeter alarm system tests; • Physical checks of the perimeter fence; and • Documenting the results.				The facility has neither a perimeter alarm system nor a perimeter fence; however, the outside area of the jail is checked via a perimeter search by a CO on each shift.		
Visitation areas receive frequent, irregular inspections.			<u> </u>			
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

The facility is compliant with all the components of this ICE standard with the exception of maintaining a vehicle log and searching vehicles entering the facility. The facility administration does not feel the need to perform either function because no vehicle is allowed to enter the security envelope of the facility.



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 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.				Facility policy, entitled Administrative Segregation, addresses this procedure in detail.
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, and: • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?				Every detainee in segregation status is reviewed every Monday. Each review is documented, and a copy is provided to the detainee.
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.	\boxtimes			
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.	\boxtimes			
 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. 				Each detainee in segregation status is reviewed every Monday. Each review is documented, and a copy is provided to the detainee.
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.	\boxtimes			The detainee may appeal utilizing the facility's grievance process.
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.				
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.				
All cells are equipped with beds. • Every bed is securely fastened to the floor or wall.	\boxtimes			

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COMPONENTS	YES	NO	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy limit. • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures?				The facility does not exceed the design capacity in the SHU.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.				
Detainees receive three nutritious meals per day, from the general population's menu of the day. • Do detainees eat only with disposable utensils? • Is food ever used as punishment?				
 Each detainee maintains a normal level of personal hygiene in the SMU. The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 				
 The detainees are provided: Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 				
 A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays. 				Health care professionals visit the detainees in administrative segregation at least once each shift.
Procedures comply with the "Visitation" standard. • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours.				The facility does not have a visiting room. All visits are conducted via a video device.
Visits from clergy are allowed.				
 Detainees have the same law-library access as the general population. Are they required to use the law library ☐ Separately, or ☐ As a group? Are legal materials brought to them? 				Each detainee in administrative segregation submits a request for legal material that is subsequently delivered to him/her in the housing area, similar to GP detainees.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.				All detainee activity is recorded electronically.

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COMPONENTS	YES	No	NA	REMARKS
 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 applicable medication during every shift. • Staff 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; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.				All detainee activity is recorded electronically.
A new record is created for each week the detainee is in Administrative Segregation. • The weekly records are retained in the SMU until the detainee's return to the general population.				All detainee activity is recorded electronically.
☐ ACCEPTABLE ☐ DEFICIENT	☐ AT-Ri	sk		REPEAT FINDING

REMARKS:

The facility is compliant with all the components of this ICE standard.



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.

	¥7	No	N.A.	BLUE STATE
COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.				Facility policy, entitled Inmate Discipline, details how detainees are to be placed in disciplinary segregation.
The sanctions for violations committed during one incident are limited to 60 days.				The facility can impose penalties of up to: 90 days for a Level 2 offense; and 180 days for a Level 3 offense
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.				
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. • After each formal review, the detainee receives a written copy of the decision and supporting reasons.				Each detainee in segregation status is reviewed every Monday. Each review is documented with a copy going to the detainee
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	\square			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	\boxtimes			
 Living conditions in disciplinary SMUs remain the same regardless of behavior. If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 				
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	\boxtimes			
The quarters used for segregation are: • Well-ventilated. • Adequately lighted. • Appropriately heated. • Maintained in a sanitary condition.				
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	\boxtimes			
The number of detainees confined to each cell or room is limited to the number for which the space was designate. • Does the OIC approve excess occupancy on a temporary basis?				The facility does not exceed the design capacity in the SHU.
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.	\boxtimes			
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	\boxtimes			
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. • Food is not used as punishment.				Detainees who throw food or other items at staff may be placed on a food loaf diet, lasting no longer than four days.
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.				

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COMPONENTS	YES	No	NA	REMARKS
 Detainees receive, unless documented as a threat to security: Barbering services; Recreation privileges; Other-than-legal reading material; Religious material; The same correspondence privileges as other detainees; and Personal legal material. 				Detainees in disciplinary segregation are not allowed to possess other-than-legal reading material while held in that status.
 When phone access is limited by number or type of calls, the following areas are exempt: Calls about the detainee's immigration case or other legal matters; Calls to consular/embassy officials; and Calls during family emergencies (as determined by the OIC/Warden). 				
A health care professional visits every detainee in disciplinary segregation every week day. • The shift supervisor visits each segregated detainee daily • Weekends and holidays.	\boxtimes			Health care professionals visit the detainees in disciplinary segregation at least once each shift
SMU detainees are allowed visitors, in accordance with the "Visitation" standard.				Detainees in disciplinary segregation status routinely lose their ability to have general visits.
 SMU detainees receive legal visits, as provided in the "Visitation" standard. Legal service providers are notified of security concerns arising before a visit. 				
 Visits from clergy are allowed. The clergy member is given the option of visiting/not visiting the segregated detainee. Violent/uncooperative detainees are denied access to religious services when safety and security would otherwise be affected. 				
 SMU detainees have law library access. Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. 	\boxtimes			The facility does not have a law library. Each detainee in disciplinary segregation submits a request for legal material that is subsequently delivered to him/her in the housing area similar to GP detainees.
All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	\boxtimes			All detainee activity is recorded electronically.

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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COMPONENTS	YES	No	NA	REMARKS
The SPC's, the Special Management Housing Unit Record (I-888 or equivalent), is prepared as soon as the detainee is placed in the SMU. • All I-888s are filled out by the end of each shift. • The CDF/IGSA facility use Form. • I-888 (or equivalent local form).				
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 				All detainee activity is recorded electronically.
■ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING

REMARKS:

Although the facility is non-compliant with three components, it generally meets the NDS.



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.				A committee comprised of the Jail Commander, the Assistant Jail Commander, and the two Captains work jointly to insure this area remains compliant.
Department heads are responsible for implementing this standard in their departments.				
Tool inventories are required for the: • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory.	\boxtimes			
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 				The facility utilizes two fully equipped maintenance carts to store all the tools needed to service the institution. An inventory is performed at the conclusion of each maintenance service call by the maintenance officer and the CO who provided the security over the repair.
The facility has a tool classification system. Tools are classified according to: • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous).				
Department heads are responsible for implementing tool-control procedures.	\boxtimes			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.		\boxtimes		The tools are not marked.
 The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice. 				
Each facility has procedures for the issuance of tools to staff and detainees.	\boxtimes			
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools.				The procedure for addressing the issue of lost tools is detailed in SCDC policy, entitled Jail Repair and Jail Physical Plant Maintenance.
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes			The county maintenance staff removes the broken or worn out tools from the facility and properly disposes of them.

TOOL CONTROL

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COMPONENTS	YES	No	NA	REMARKS	
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.					
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING	

REMARKS:

The facility is compliant with all components of this ICE standard with the exception of having their tools marked for easy identification, control and accountability. The facility administration indicates they will make this corrective action a priority.



TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL. ☐ STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES No NA REMARKS Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of \boxtimes П Every transporting officer required to drive a commercial size bus has The county does not utilize a valid Commercial Driver's License (CDL) issued by the state of \Box \boxtimes П buses for detainee transportation Supervisors maintain records for each vehicle operator. 冈 Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and \boxtimes П П 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; \boxtimes П П 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. The county does not utilize \boxtimes When buses travel in tandem with detainees, there are two buses for detainee transportation qualified officers per vehicle. purposes. An unaccompanied driver may transport an empty vehicle. Before the start of each detail, the vehicle is thoroughly searched. M Positive identification of all detainees being transported is confirmed. The positive identification of all detainees being transported is \boxtimes П performed jointly by the ICE staff and the transportation officers. All detainees are searched immediately prior to boarding the vehicle \boxtimes by staff controlling the bus or vehicle. The facility ensures that the number of detainees transported does not \boxtimes exceed the vehicles manufacturer's occupancy level. Protective vests are provided to all transporting officers. Although staff is required to purchase their own vests, they \boxtimes П \Box are reimbursed for half of the cost by the state, and half of the cost by the county. The vehicle crew conducts a visual count once all passengers are on board and seated. \boxtimes \Box П

 \boxtimes

Additional visual counts are made whenever the vehicle

Policies and procedures are in place addressing the use of restraining

makes a scheduled or unscheduled stop.

equipment on transportation vehicles.

TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES,

SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL. ☐ STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. **COMPONENTS** YES No NA REMARKS Officers ensure that no one contacts the detainees. \boxtimes П 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 \boxtimes П by dieticians utilized by ICE. The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and \boxtimes П resolves questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. Vehicles have: Two-way radios; Cellular telephones; and \boxtimes П Equipment boxes stocked in accordance with the Use of Force Standard. The vehicles are clean and sanitary at all times. X Personal property of a detainee transferring to another facility is: Inventoried; \boxtimes Inspected; and Accompanies the detainee. The following contingencies are included in the written procedures for vehicle crews: Attack Escape Hostage-taking Detainee sickness All of these contingency plans Detainee death \boxtimes П are covered in SCDC policy, Vehicle fire entitled Transport Emergencies. Riot Traffic accident Mechanical problems Natural disasters Severe weather Passenger list includes women or minors **ACCEPTABLE DEFICIENT** ☐ AT-RISK ☐ REPEAT FINDING

REMARKS:

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FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL

OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE: **COMPONENTS** NA REMARKS YES Written policy authorizes staff to respond in an immediate-use-Facility policy details the guidance to staff \square of-force situation without a supervisor's presence or direction. on use of force (UOF) issues. 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 \boxtimes \Box others, officers must try to resolve the situation without resorting to force. Written policy asserts that calculated rather than immediate use \boxtimes of force is feasible in most cases. The facility subscribes to the prescribed Confrontation The facility administration emphasizes the Avoidance Procedures. utilization of confrontation avoidance \boxtimes Ranking detention official, health professional, techniques through staff training and and others confer before every calculated use of policy. When a detainee must be forcibly moved and/or restrained, and The Security Patrol officers assigned to there is time for a calculated use of force, staff uses the Use-ofeach shift are the designated first \boxtimes Force Team Technique. responders and are trained to act Under staff supervision. accordingly. Staff members are trained in the performance of the Use-of- \boxtimes Force Team Technique. All use-of-force incidents are documented and reviewed. M П Staff: Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; \boxtimes Use only as much force as necessary to control the detainee; and Use restraints only when other nonconfrontational means, including verbal persuasion, have failed or are impractical. Medication may only be used for restraint purposes when \boxtimes authorized by the Medical Authority as medically necessary. Use-of-Force Team follows written procedures that attempt to Facility policy details the guidance to staff П X П prevent injury and exposure to communicable disease(s). on UOF issues. Standard procedures associated with using four-point restraints include: Soft restraints (e.g., vinyl); Dressing the detainee appropriately for the temperature; Pursuant to policy, four-point restraints are A bed, mattress, and blanket/sheet; applied to detainees at this facility through Checking the detainee at least every 15 minutes; \boxtimes \Box the use of a restraint chair. No ICE Logging each check; detainee has been subjected to four-point Turning the bed-restrained detainee often enough restraints this calendar year. to prevent soreness or stiffness; Medical evaluation of the restrained detainee twice per eight-hour shift; and When qualified medical staff is not immediately available, staff position the detainee "face-up". The shift supervisor monitors the detainee's position/condition \boxtimes \Box every two hours. He/she allows the detainee to use the rest room at

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

COMPONENTS	YES	No	NA	REMARKS
these times under safeguards.				
All detainee checks are logged.	\boxtimes			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes			
 When the OIC authorizes use of non-lethal weapons: Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 				The supervisory staff is trained and authorized to use the Taser gun if warranted. Only one ICE detainee has been tasered in the last calendar year.
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted				
Protective gear is worn when restraining detainees with open cuts or wounds.	\boxtimes			
Staff documents every use of force and/or non-routine application of restraints.	\boxtimes			
It is standard practice to review any use of force and the non-routine application of restraints.				
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. • Specialized training is given and Officers are certified in all devices they use.				
in SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?				
✓ ACCEPTABLE ☐ DEFICIENT		AT-RIS	ĸ	REPEAT FINDING

REMARKS:

The facility is compliant with most components of this ICE standard. No ICE detainees have been subjected to being restrained in the restraint chair in the last calendar year, and one ICE detainee was tasered in January 2009.

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AUDITOR'S SIGNATURE / DATE

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STAFF DETAINEE COMMUNICATIONS

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

COMPONENTS	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.						
Scheduled visits are posted in ICE detainee areas.				Notification regarding weekly visits is posted in the units holding detainees.		
Visiting staff observe and note current climate and conditions of confinement at each IGSA.				Sanitation, food service, health services, general morale and other conditions of confinement are checked.		
ICE information request Forms are available at the IGSA for use by ICE detainees.	\boxtimes					
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.						
ICE staff responds to a detainee request from an IGSA within 72 hours.	\boxtimes					
ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.		×		Detainees are usually processed into custody at the St. Paul Field Office. Although not provided in writing at this time, detainees are made aware of their right to communicate with ICE officials.		
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

ICE officials visit the facility at least weekly and have good communication with detainees in the housing units. When ICE staff enters the unit, detainees are notified of their presence via an intercom announcement. However, notification regarding a detainee's right to correspond with ICE staff is not provided in writing.



DETAINEE TRANSFER STANDARD

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

The state of the s				
COMPONENTS	YES	No	NA	REMARKS
When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS	\boxtimes			ICE detainees are processed at the St. Paul Field Office. Deportation staff notifies the representative of record.
Notification includes the reason for the transfer and the location of the new facility.	\boxtimes			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.				
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	\boxtimes			
Facility policy mandates that: • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.				
The detainee is provided with a completed Detainee Transfer Notification Form.	\boxtimes			This form is generated at the Field Office and a copy is placed in the A-file.
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			ICE staff use both the G-391 and/or the I-203 to authorize removal from the facility.
For medical transfers: The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee.	\boxtimes			
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.				This facility does not have a DIHS component.
For medical transfers, transporting officers receive instructions regarding medical issues.	\boxtimes			Issues regarding acute conditions, medication schedules, etc. would be relayed to transport staff.
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	\boxtimes			
Transfer and documentary procedures outlined in Section C and D are followed.				
Meals are provided when transfers occur during normally schedule neal times.	\boxtimes			The facility provides sack lunches for transfers which occur during scheduled meal times.

DETAINEE TRANSFER STANDARD

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED								
VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING								
WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE								
IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR W	ILL CONSI	DER THE	DETAINE	E'S STAGE WITHIN THE REMOVAL				
PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN RE	ASONABLI	E DRIVING	G DISTAN	CE OF THE FACILITY, AND WHERE				
THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.								
COMPONENTS YES NO NA REMARKS								
An A File or work folder accompanies the detainee when transferred	\boxtimes							
to a different field office or sub-office.		L]					
Files are forwarded to the receiving office via overnight mail no later		*						
than one business day following the transfer.	\boxtimes							
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING								

REMARKS:

An interview with the ICE Deportation Officer indicates detainees are usually processed at the St. Paul Field Office and then transferred to the facility. Detainees leaving the facility are likewise taken to the Field Office for processing after they leave the SCJ. Transfer operations at the facility are in page 2.

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



MEMORANDUM FOR:

Scott Baniecke

AUG 1 9 2009

Field Office Director St. Paul Field Office

FROM:

Robert P. Helwig

Assistant Director for Management

SUBJECT:

Sherburne County Jail Annual Detention Review

The annual review of the Sherburne County Jail conducted on November 4-6, 2008, in Elk River, Minnesota, has been received. The Review Authority (RA) has assigned an interim rating of **Deficient** due to the use of Electro Muscular Disruption Devices (EMDDs) in this facility; otherwise a rating of "Acceptable" would have been assigned.

The G-324A worksheets provided by the Reviewer-In-Charge indicated the facility was deficient with the Environmental Health and Safety, and Key and Lock Control Standards. On December 17, 2008, Gerard Flores, Supervisory Immigration Enforcement Agent, advised Veronica Franco, Detention and Deportation Officer, that the facility has been advised of the deficient findings and is working to correct the deficiencies. A Plan of Action is required to address these deficiencies and the line item deficiencies noted in the Admission & Release, Access to Medical Care, Hold Rooms in Detention Facilities, Correspondence and Other Mail, Detainee Handbook, Food Service, Funds and Personal Property, Recreation, Visitation, Hunger Strikes, Disciplinary Policy, Emergency Plans, Security Inspections, Special Management Unit (Administrative Segregation and Disciplinary Segregation), Tool Control, Transportation, and Use of Force Standards.

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

1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A, Detention Facility Review Form, the G-324A Worksheet, RIC Summary Memorandum, and a copy of this memorandum.

Subject: Sherburne County Jail Annual Detention Review

Page 2

- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the 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 a follow-up on the above noted deficiencies within 90 days.

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

Should you or your staff have any questions regarding this matter, please contact
Unit Chief, Detention Standards Compliance Unit at (202) 732-b6.67c

cc: Official File

ICE: HQDRO: TMarich:2-6428:

b2High