A. Type of Facility Reviewed	Estimated Man-days Per Year:			
☐ ICE Service Processing Center☐ ICE Contract Detention Facility				
 ☑ ICE Intergovernmental Service Agreement 	G. Accreditation Certificates			
_	List all State or Nation			ed:
B. Current Inspection				
Type of Inspection	☐ Check box if facility has no accreditation[s]			
Field Office HQ Inspection	T D 11 / G			
Date[s] of Facility Review 12/4/2018 - 12/6/2018	H. Problems / Complaints (Copies must be attached)			
12/4/2010 - 12/0/2010	The Facility is under Court Order or Class Action Finding Court Order Class Action Order			
C. Previous/Most Recent Facility Review	The Facility has Significant Litigation Pending			
Date[s] of Last Facility Review	Major Litigation Life/Safety Issues			
12/12/2017 - 12/14/2017	Check if None.			
Previous Rating				
Superior Good Acceptable Deficient At-Risk	I. Facility History			
D. Name and Location of Facility	Date Built			
Name	Date Lead Demodals d	T T	1.1	
Morgan County Adult Detention Center	Date Last Remodeled	or Upgra	ded	
Address (Street and Name)	Date New Construction	on / Red si	nace Added	
211 East Newton Street	Date New Constructive	on / Dea s _i	pace raded	
City, State and Zip Code	Future Construction Planned			
Versailles, MO 65084 County	Date:			
Morgan	Current Bed space	Future I	Bed space (# Nev	w Beds only)
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)		Number	:: Date:	
	T (F) (15 114 D	1.40		
Telephone # (Include Area Code)	J. Total Facility Population Total Facility Intake for previous 12 months			
Field Office / Sub-Office (List Office with oversight responsibilities)	Total Facility Ilitake	or previou	is 12 monuis	
Kansas City, MO	Total ICE Man-days for Previous 12 months			
Distance from Field Office				
150 miles				
P. JOPI 6	K. Classification Lo			
E. ICE Information Name of Inspector (Leat Name Title and Duty Station)	A 1 1/3 / 1	L-1	L-2	L-3
Name of Inspector (Last Name, Title and Duty Station) / LCI/Detainee Rights / Nakamoto Group	Adult Male Adult Female	N/A	N/A	N/A
Name of Team Member / Title / Duty Location	Adult Female	N/A	N/A	N/A
/ Medical SME / Nakamoto Group				
Name of Team Member / Title / Duty Location	L. Facility Capacity			
/ Safety SME / Nakamoto Group		ated	Operational	Emergency
Name of Team Member / Title / Duty Location				
/ Security SME / Nakamoto Group				
Name of Team Member / Title / Duty Location				
/ Medical SME / Nakamoto Group	M A DUD			
F. CDF/IGSA Information Only	M. Average Daily P			Othor
Contract Number Date of Contract or IGSA		ICE	USMS	Other
Basic Rates per Man-Day		↓	—————————————————————————————————————	
	N. Facility Staffing	Level		
Other Charges: (If None, Indicate N/A)	Security: Support:			

Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	3	3	5	2
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	1	2	2	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	1	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	3=V	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	С	N/A
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	1	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	6	11	6	23
	# Resolved in favor of Offender/Detainee	3	9	3	21
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	15	13	10	5
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

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

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

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

Lead Compliance Inspector: (Print Name)

LCI Review Assurance Statement

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

Signature

Title & Duty Location	Date		
Lead Compliance Inspector, The Nakamoto Group, Inc.	12/6/2018		
Team Members			
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
, Safety SME, The Nakamoto Group, Inc.	, Medical SME, The Nakamoto Group, Inc.		
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location		
, Security SME, The Nakamoto Group, Inc.	, Medical SME, The Nakamoto Group, Inc.		
Recommended Rating: Superior Good Acceptable Deficient At-Risk			

Comments: The Sexual Abuse and Assault Prevention and Intervention Standard was inspected during this inspection but is not referenced in the Standards Review Summary Report. The Standard was rated as Meets Standard for this inspection.

There was one allegation of sexual abuse and assault during the inspection period. The allegation referenced a detainee-on-detainee incident and was determined to be unfounded. One detainee was removed from the facility. The reporting, investigation and follow up was in accordance with standard and policy guidelines.

There have been no deaths, suicide attempts or escapes during this inspection period.

During the inspection period there were four use of force incidents involving ICE detainees. There was one calculated use of force incident. The incident involved a cell extraction. A detainee refused to come out of his cell after numerous orders by staff. Staff used confrontation avoidance techniques prior to the use of force and when they were unsuccessful, the staff used a Taser to subdue the detainee. The detainee was restrained and placed in a restraint chair according to policy. The review of documentation confirmed that officers' actions were within the guidelines of the standard. The officer using the Taser was properly trained and certified for use. Staff

and the detainee were checked by medical personnel after the situation was under control. The incident was not videotaped. The fixed camera in the booking area recorded the incident, with the exception of the activity in the holding cell. The operations sergeant reported that the facility does not have a hand-held video camera. During the inspection, the OIC purchased a video camera.

There were three incidents involving immediate use of force on ICE detainees. Two of these incidents involved detainees who refused multiple orders from staff. Each detainee was placed in restraints and then into the restraint chair. In both incidents, staff followed policy and standard guidelines. Each detainee was checked by medical staff once the situation was under control. In the third incident, a detainee was disrupting his housing unit and refused staff orders to calm down. After several verbal attempts were unsuccessful, staff used OC, restrained the detainee and moved him to a holding cell. The detainee was seen by medical staff and properly decontaminated in the booking area. There were no injuries as a result of any of these incidents.

Oleoresin capsicum (OC) pepper spray is the only chemical agent authorized for use. Canines may be used for contraband detection, but not in the presence of detainees. Tasers are approved for use, when necessary.

The statistics reported on the Significant Incident Summary Report reflect the ICE population.