A. Type of Facility Reviewed ICE Service Processing Center	Estimated Man-da	ays Per Year	:	
ICE Service Processing Center ICE Contract Detention Facility	L			
☐ ICE Intergovernmental Service Agreement	G. Accreditation			
	List all State or N	ational Accr	editation[s] recei	ved:
B. Current Inspection	N 61 1 1 16	0 111 1	11	
Type of Inspection ☐ Field Office ☐ HQ Inspection	Check box if facility has no accreditation[s]			
Date[s] of Facility Review	H. Problems / Complaints (Copies must be attached)			
11/6/2018 - 11/8/2018	The Facility is un			
C. Previous/Most Recent Facility Review	Court Order Class Action Order The Facility has Significant Litigation Pending			
Date[s] of Last Facility Review	Major Litigation Life/Safety Issues			
3/14/2017 - 3/16/2017	Check if Non			
Previous Rating				
Superior Good Acceptable Deficient At-Risk	I. Facility Hist	ory		
D. Name and Location of Facility	Date Built			
Name		1 1 17	1 1	
Cache County Jail	Date Last Remod	eled or Upgr	aded	
Address (Street and Name)	Date New Constr	uction / Bed	space Added	
1225 W. Valley View #100	Bute New Consu	detion / Bed	space raded	
City, State and Zip Code Logan, UT 84321	Future Constructi	on Planned		
County		Date:		
Cache	Current Bed space		Bed space (# No	ew Beds only)
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)		Numb	er: Date:	
T. 1. 1	J. Total Facilit	v Population	1	
Telephone # (Include Area Code)	Total Facility Inta			
Field Office / Sub-Office (List Office with oversight responsibilities)	100011001100	101 pre / 10	7 4 5 1 2 1110114115	
Salt Lake City	Total ICE Man-da	ays for Previo	ous 12 months	
Distance from Field Office				
85 miles	T7 (01 100 41			F 0 1)
E. ICE Information	K. Classification Level (ICE SPCs and CDFs Only) L-1 L-2 L-3			
Name of Inspector (Last Name, Title and Duty Station)	Adult Male	N/A	1 L-2 N/A	L-3 N/A
/ LCI/Detainee Rights / Nakamoto Group	Adult Female	N/A	N/A	N/A
Name of Team Member / Title / Duty Location	Tiddit I dillare	1771	1,771	1771
/ Medical SME / Nakamoto Group			ı	
Name of Team Member / Title / Duty Location	L. Facility Capa	city		
/ Safety SME / Nakamoto Group	L. Facility Capa	city Rated	Operational	Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location	L. Facility Capa		Operational	Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group	L. Facility Capa		Operational	Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location	L. Facility Capa		Operational	Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group		Rated		Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location / Medical SME / Nakamoto Group F. CDF/IGSA Information Only	L. Facility Capa M. Average Dai	Rated	on	Emergency
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location / Medical SME / Nakamoto Group		Rated A population	on _	
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location / Medical SME / Nakamoto Group F. CDF/IGSA Information Only Contract Number Date of Contract or IGSA		Rated A population	on _	
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location / Medical SME / Nakamoto Group F. CDF/IGSA Information Only	M. Average Dai	Rated Rated IV	on _	
Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location Security SME / Nakamoto Group Name of Team Member / Title / Duty Location Medical SME / Nakamoto Group F. CDF/IGSA Information Only Contract Number Date of Contract or IGSA Basic Rates per Man-Day	M. Average Dai	Rated Rated IV	on E USMS	
/ Safety SME / Nakamoto Group Name of Team Member / Title / Duty Location / Security SME / Nakamoto Group Name of Team Member / Title / Duty Location / Medical SME / Nakamoto Group F. CDF/IGSA Information Only Contract Number Date of Contract or IGSA	M. Average Dai	Rated Rated IV	on _	

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:	Types (Sexual ² , Physical, etc.)	0	0	0	0
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	1	0	0	0
Assault:	Types (Sexual Physical, etc.)	0	0	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	0	0	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	1
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	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	0	0
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	0	0	0	1
	# Resolved in favor of Offender/Detainee	0	0	0	0
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	0	0	0	0
	# 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.

	CE 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	
	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	
Health	n Services	
18.	Hunger Strikes	
19.	Medical Care	
20.	Suicide Prevention and Intervention	
21.	Terminal Illness, Advanced Directives and Death	
Securi	ty and Control	
22.	Contraband	
23.	Detention Files	
24.	Disciplinary Policy	
25.	Emergency Plans	
26.	Environmental Health and Safety	
27.	Hold Rooms in Detention Facilities	
28.	Key and Lock Control	
29.	Population Counts	
30.	Post Orders	
31.	Security Inspections	
32.	Special Management Units (Administrative Segregation)	
33.	Special Management Units (Disciplinary Segregation)	
34.	Tool Control	
35.	Transportation (Land management)	
36.	Use of Force	
37.	Staff / Detainee Communication (Added August 2003)	
38.	Detainee Transfer (Added September 2004)	

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

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.

Lead Compliance Inspector: (Print Name)	
	Signature
Title & Duty Location	Date
Lead Compliance Inspector, The Nakamoto Group, Inc.	11/8/2018
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.

There have been no allegations of sexual abuse or assault during this inspection period. There were no deaths or serious suicide attempts since the last inspection.

There have been no use of force incidents involving ICE detainees during this inspection period. All deputies have been trained on the use of force policy and are certified and approved to carry pepper spray. Tasers are also permitted and are available if needed. Canines are used on occasion for contraband detection. The canine unit is not used in the presence of detainees.

The statistics reported on the Significant Incident Summary Report reference the ICE population. The facility did not provide the F. Contract Information or J. Total Facility Population.