05-32-96

N/A

Basic Rates per Man-Day

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

A. Type of Facility Reviewe	d	Estimated Man-day	ys Per Year	:		
ICE Service Processi	ng Center	32,000				
ICE Contract Detent	ion Facility	-				
I =	tal Service Agreement	G. Accreditation	Certificate	es		
	· ·	List all State or Na	tional Accr	editatio	on[s] receiv	ed:
B. Current Inspection						
Type of Inspection		Check box if f	acility has n	no accre	editation[s]	
Field Office HQ Inspe	ction					
Date[s] of Facility Review		H. Problems / Co	mplaints (Copies	s must be a	ttached)
March 23-25, 2010		The Facility is und				
,		Court Order			Action Ord	_
C. Previous/Most Recent Fa	cility Review	The Facility has Si				
Date[s] of Last Facility Review	V	Major Litigatio		_	afety Issues	
March 24-26, 2009		Check if None		Dire; S.	arety 155the	,
Previous Rating		Check if Itohe	•			
☐ Superior ☐ Good ☐ Acc	eptable 🗌 Deficient 🗌 At-Risk	I. Facility Histo	rv			
		Date Built	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
D. Name and Location of Fa	cility	Built 2003-05; Op	nanad Tuna	2005		
Name		Date Last Remode				
Boone County Jail		N/A	ned of Opgi	aded		
Address (Street and Name)					A 11-1	
3020 Conrad Lane		Date New Constru	iction / Bed	space I	Added	
City, State and Zip Code		N/A	D1 1			
Burlington, Kentucky 41005		Future Construction				
County		Yes No D				
Boone		Current Bed space			pace (# Nev	
Name and Title of Chief Executive	Officer (Warden/OIC/Supt.)	424	Numb	er: N/A	Date: N/	<u> </u>
(b)(6), (b)(7)(C)						
Telephone # (Include Area Code)		J. Total Facility				
859-3846), (b)(7)(C)	11 11 11	Total Facility Intal	<u>ke</u> for previo	ous 12	months	
Field Office / Sub-Office (List Off		9,601				
Chicago, Illinois / Louisville Distance from Field Office	, Kentucky	Total ICE Man-day	ys for Previ	ous 12	months	
350 miles / 100 miles		31,716				
330 miles / 100 miles						
E. ICE Information		K. Classification			s and CDF	
	1 Dt- (t-t')		L-	1	L-2	L-3
Name of LCI (Last Name, Title	e and Duty Station)	Adult Male				
(b)(6), (b)(7)(¢)LCI / MGT	/D + T + C	Adult Female				
Name of Team Member / Title	/ Duty Location					
(b) (6), (b)(7)(C)I-Security / MGT	/D · T · ·					
Name of Team Member / Title		L. Facility Capac	city			
(b)(6), (b)(7)(OCI-Medical Care / M			Rated	Ope	rational	Emergeno
Name of Team Member / Title		Adult Male	354		354	434
(b)(6), (b)(7)(CI-Food Service /		Adult Female	70		70	90
Name of Team Member / Title		Facility holds J	uveniles Off	enders	16 and older	r as Adults
(b)(6), (b)(7)(©)CI-Environment a	Health and Safety / MGT					
	_	M. Average Dail	y Populatio	n		
F. CDF/IGSA Information C			IC		USMS	Other
Contract Number	Date of Contract or IGSA	Adult Male	35	-	43	283

N. Facility Staffing Level

Adult Female

Security:

May 26, 1996

Support:

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	2-P	1-P	2-P	0
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	2	1	1	0
Assault:	Types (Sexual Physical, etc.)	0	1-P	0	0
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	0	1	0	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		3	2	2	1
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)	3-V	2-V	3-V	1-V
Restraints applied/used	Type (C=Chair, B=Bed, BB=Board, O=Other)	С	С	С	С
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	1	0
Grievances:	# Received	0	1	1	4
	# Resolved in favor of Offender/Detainee	0	1	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	3	1	1	2
	# Psychiatric Cases referred for Outside Care	0	0	0	0

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

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

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

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

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

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

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 COMPI	LIANCE INSPECTOR
Lead Compliance Inspector: (Print Name)	Signature
(b)(6), (b)(7)(C)	
Title & Duty Location	Date
LCI, MGT	March 25, 2010
TEAM	MEMBERS
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)(C) CI-Security, MGT	(b)(6), (b)(7)(C) CI-Medical Care, MGT
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)(C) CI-Food Service, MGT	(b)(6), (b)(7)(C) CI-Environmental Health and Safety, MGT
Recommended Rating: Superior Good Acceptable Deficient At-Risk	
Comments:	
described as: a white male; date of birth (DOR))(6), (b)(7)(C) nd be count of kidnapping. While on an indoor recreation yard, with a count of kidnapping.	chainlink fence for a roof, inmate (b)(6), (b)(7)(C), (b)(7)e
	b)(7)c, (b)(7)e Inma (c)(6), (b)(7)(w)as the only
(b)(6), (b)(7)c, (b)(7)e inmate on the recreation yard at the time he escaped. He was approximate on the recreation yard at the time he escaped.	
(b)(7)(E)	

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



MEMORANDUM FOR:

Richard A. Wong

MAY 1 1 2010

Field Office Director

Chicago Field Office

FROM:

Robert P. Helwig

Assistant Director for Detention and Removal Management

ph

SUBJECT:

Boone County Jail Annual Review

The annual review of the Boone County Jail conducted on March 23-25, 2010 in Burlington, Kentucky has been received. A final rating of <u>Acceptable</u> has been assigned.

The G-324A worksheets provided by the Lead Compliance Inspector (LCI) indicated the facility was deficient with the Environmental Health and Safety, Post Orders, Tool Control, and Staff Detainee Communication standards. The Plan of Action created in response to the Quick Report corrected the Post Orders, Tool Control, and Staff Detainee Communication standards which were found to be deficient. A Plan of Action is required to address the deficiencies identified in the Environmental Health and Safety standard.

The rating was based on the LCI Summary Memorandum and supporting documentation. The Field Office Director must remedy the above deficiencies 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-324B Detention Facility Review Form, the G-324B Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The Field Office Director is responsible for ensuring that the facility responds to all findings and a Plan of Action is submitted to the Review Authority (RA) within 30 days.
- 3) The RA will advise the Field Office Director once the Plan of Action is approved.
- 4) Once a Plan of Action is approved, the Field Office Director shall schedule a follow-up on the above noted deficiencies within 90 days.

The Field Office is responsible for assisting the Intergovernmental Service Agreement (IGSA) facility to respond to the 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 Gary Mead, Deputy Assistant Director, Detention Management Division at (202) 732(6), (b)(7)(C)

cc: Official File ICE:HQDRO: (b)(6), (b)(7)(C) 4/26/2010 (b)(7)e

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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.

deficiencies noted in the report.	
Lead Compliance Inspector: (Print Name) (b)(6), (b)(7)(C) Title & Duty Location	(b)(6), (b)(7)(C)
LCI, MGT	March 25, 2010
Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Security, MGT Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Food Service, MGT	Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Medical Care, MGT Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Environmental Health and Safety, MGT
Recommended Rating: Good Acceptable Deficient	

Comments:

Escape. On 09-10-09, at approximately 12:40 PM, inmate (b)(6), (b)(7)(C) (non-ICE detainee) escaped for	rom the BCJ. The inmate was
described as: a white male; date of birth (DOB))(6), (b)(7)(Cand being held on two counts of burglary, one counts of burglary,	count of robbery and one
count of kidnapping. While on an indoor recreation yard, with a chainlink fence for a roof, inmate	(b)(6), (b)(7)(C), (b)(7)e
(b)(6), (b)(7)c, (b)(7)e	
(b)(6), (b)(7)c, (b)(7)e	Inma(te)(6), (b)(7)(0)as the only
inmate on the recreation yard at the time he escaped. He was apprehended a few hours later by a Boone C	ounty Sheriff's Deputy.

At-Risk

(b)(7)(E) are not utilized at this facility.

Local Jail - IGSA

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
Name
Boone County Jail
Address (Street and Name)
3020 Conrad Lane
City, State and Zip Code Burlington, Kentucky 41005
County
Boone
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent) (b)(6), (b)(7)(C)
Name and Title of Lead Compliance Inspector (b)(6), (b)(7)(C)
Date[s] of Review
March 23-25, 2010
Type of Review
$oxed{oxed}$ Headquarters $oxed{oxed}$ Operational $oxed{oxed}$ Special Assessment $oxed{oxed}$ Other

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DETAINEE SERVICES STANDARDS (SECTION I)
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GROUP PRESENTATIONS ON LEGAL RIGHTS
ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS
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HOLD ROOMS IN DETENTION FACILITIES
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS POST ORDERS
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS POST ORDERS SECURITY INSPECTIONS
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL POPULATION COUNTS POST ORDERS SECURITY INSPECTIONS SPECIAL MANAGEMENT UNIT (ADMINISTRATIVE SEGREGATION)
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL
HOLD ROOMS IN DETENTION FACILITIES KEY AND LOCK CONTROL
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)
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
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)

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 law library is located in a room adjacent to the detainee/inmate living area.
The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.				The facility uses LexisNexis as the source for Attachment A documents.
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	\boxtimes			
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.				The law library has copies of LexisNexis and the West Law Program. There are sufficient supplies for daily use.
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.				
Where provided, the Lexus Nexus library is updated and is current.		\bowtie		The last update of LexisNexis dated 12-31-09 was installed by the facility Information Technician (IT). However, the facility has since received another update, which has not yet been installed.
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is orwarded and reviewed by ICE prior to inclusion.				
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.				The facility IT inspects and updates the computer with the LexisNexis program provided by the ICE Field Office.
Detainees are offered a minimum 5 hours per week in the law library. <u>Detainees are not required to forego recreation time in lieu of library usage</u> . Detainees facing a court deadline are given priority use of the law library.	\boxtimes			Detainees can access the law library a minimum of 5 hours each week. They must submit a request slip to the control room deputy to be put on a list to go to the law library.
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.	\boxtimes			Requests for materials are submitted to the Chief Deputy who then obtains the material for the detainee; however, since the West Law Program was added, they have not had any requests.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
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.				
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.				The facility has not had any instance in which a detainee was denied access to legal materials.

ACCESS TO LEGAL MATERIALS

COMPONENTS	YES	No	NA	REMARKS
All denials of access to the law library fully documented.				Any denials to access the law library would be documented; however, there have been no denials.
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	\boxtimes			ICE would be informed of any detainees being denied access to the law library.
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING

(b)(6), (b)(7)(C) / 03-AUDITOR'S SIGNATURE /

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.				The detainee signs for a copy of the detainee handbook provided during the admission process, which is available in English and Spanish. The ICE National Detainee Handbook is also provided to detainees. There is no formal orientation presentation.
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.				When an ICE detainee is brought into the facility, medical staff goes to the booking area to conduct the initial health screening.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	\boxtimes			The classification officer classifies detainees prior to their being placed in population. The criminal history is provided 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.				
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.				Staff at this facility prepare a complete inventory of each detainee's possessions; however, the detainee does not receive a copy of this inventory.
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.				
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.				
Staff completes paperwork/forms for release as required.				
ACCEPTABLE DEFICIENT	AT-R	lisk		REPEAT FINDING

REMARKS:

Although staff prepares a	complete inventory of each o	detainee's possessions, they do not provide the detainee with a copy.
(b)(6), (b)(7)(C) / 0. AUDITOR'S SIGNATURE	(b)(6), (b)(7)(C)	

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 NA	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.				This facility utilizes the Objective Jail Classification System (OJCS).
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.	\boxtimes			
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.				
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.				At this facility, detainees and non-detainees are classified as minimum, medium or maximum security, with each classification housed separate from the others.
A detainee's classification-level does not affect his/her ecreation opportunities. Detainees recreate with persons of similar classification designations.				
Detainee work assignments are based upon classification designations.				Non-ICE detainee work assignments are based upon classification designations. ICE detainees at this facility do not have work assignments.
The classification process includes reassessment/ reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				
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.	\boxtimes			All classification assignment appeals are addressed through the jail grievance procedure.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.				
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.				Classification designations may be appealed to the Jailer, who is the final authority at this facility.
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.				
☐ ACCEPTABLE ☐ DEFICIENT			AT-RIS	SK REPEAT FINDING

REMARKS:

The facility complies wi	h the requirements	of the standard.
	_	

(b)(6), (b)(7)(C) / 03-AUDITOR'S SIGNATURE /

(b)(6), (b)(7)(C)

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

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

COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each	1 2.03	110	INA	
housing or common area, or provided to each detainee via a		$ \Box$		The rules for correspondence and other mail are addressed in the detainee handbook and also
detainee handbook.		-		appear on the jail television channel broadcast.
The facility provides key information in languages other than	-	+-	 	appear on the jair television channel broadcast.
English; In the language(s) spoken by significant numbers of				
detainees. List any exceptions.		"		
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				
business day of its entering the internal mail system (excluding				
weekends and holidays).				
Staff does not open and inspect incoming general correspondence				This component specifically applies to an
and other mail (including packages and publications) without the				SPC/CDF. It is the facility's policy that all mail
detainee present unless documented and authorized in writing by	🖳			is opened and inspected for contraband without
the Warden or equivalent for prevailing security reasons.				the detainee's being present.
Staff does not read incoming general correspondence without the				
Warden's prior written approval.		ш.		
Staff does not inspect incoming special Correspondence for	l	l		
physical contraband or to verify the "special" status of enclosures			📙	
without the detainee present.				
Staff is prohibited from reading or copying incoming special	\boxtimes			
correspondence.			$\vdash =$	
staff is only authorized to inspect outgoing correspondence or				
other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or		_		
orderly operation, endanger the recipient or the public, or might		⊔		
facilitate criminal activity.				
Correspondence to a politician or to the media is processed as			<u> </u>	
special correspondence and is not read or copied.				
The official authorizing the rejection of incoming mail sends	ļ			Although a detainee is provided a written notice
written notice to the sender and the addressee.				of the rejection of any incoming mail, no
				notification is provided by the facility to the
			:	sender.
The official authorizing censorship or rejection of outgoing mail	M			
provides the detainee with signed written notice.				
Staff maintains a written record of every item removed from	\boxtimes			
detainee mail.				
The Warden or equivalent monitors staff handling of discovered				
contraband and its disposition. Records are accurate and up to	\boxtimes			
date.				
The procedure for safeguarding cash removed from a detainee				
protects the detainee from loss of funds and theft. The amount of				The facility utilizes a Kiosk Deposit Machine.
cash credited to detainee accounts is accurate. Discrepancies are			İ	All cash taken from a detainee is counted and
documented and investigated. Standard procedure includes issuing a receipt to the detainee.	\boxtimes			documented by (7)(10) fficers. The cash is then
a receipt to the detaillee.				put in the Kiosk Machine and automatically
				applied towards the detainee's commissary
				account. A receipt is placed in the detainee's file.
Original identity documents (e.g., passports, birth certificates) are			-	IIIC.
immediately removed and forwarded to ICE staff for placement in		\Box		
A-files.			<u> </u>	

CORRESPONDE	NCE A	TO QV	HER M	AIL	
DOLLOW ALL DACHETIES WHILE PROLING OF A DESCRIPTION OF THE PROLING OF THE PROPERTY OF THE PROP					
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEN	D AND I	RECEIV	E CORRI	ESPONDENCE IN A TIMELY MANNER, SUBJECT TO	
LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY TO THE SAME I IMITATIONS. FACH FACH ITY WILL WITHER VIDISTRU	Y OPERA Di Pee ite	TION O	THEFA	CILITY. 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 document(s) At this facility, if the detainee requests a copy of					
upon request.				his/her identity document(s), it is provided.	
Staff disposes of prohibited items found in detainee mail in	-			(-), 11 10 p. (-)	
accordance with the "Control and Disposition of Contraband"					
Standard or the similar prevailing policy in IGSAs.					
Every indigent detainee has the opportunity to mail, at				Indigent detainees can order envelopes at no	
government expense, reasonable correspondence about a legal		ΙП		charge through the commissary and the	
matter, in three one ounce letters per week and packages				envelopes are delivered to them every Monday.	
deemed necessary by ICE.				the start of the s	
The facility has a system for detainees to purchase stamps and for	<u> </u>	l			
mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.		╽╚			
The facility provides writing paper, envelopes, and pencils at no	<u></u>				
cost to ICE detainees.	\boxtimes				
A COUNTAIN D. Drivery or	Г		D		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDIN				☐ REPEAT FINDING	
D					
REMARKS:					
It is facility policy to open and inspect all mail without the detained	a haina :	arogont			
to is meanly policy to open and hispect an man without the detailed	e oemg l	nesent.			

(b)(6), (b)(7)(C) / 03-2 AUDITOR'S SIGNATURE / I

DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION OLICIES, 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 \boxtimes Spanish, or into the next most-prevalent Language(s). The handbook is supplemented by the facility orientation video, An orientation video is provided via a where one is provided. \boxtimes П П designated closed circuit television channel to which each cell block has access. All staff members receive a handbook and training regarding the \boxtimes П handbook contents. The handbook is revised as necessary and there are procedures in Recommended changes are submitted through place for immediately communicating any revisions to staff and \boxtimes П the administrative Captain to the Jailer for detainees. approval. There an annual review of the handbook by a designated committee \boxtimes \Box or staff member. The detainee handbook addresses the following issues: Personal Items permitted to be retained by the detainee; X П Initial issue of clothes, bedding and personal hygiene The detainee handbook states in clear language the basic detainee \boxtimes responsibilities. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification M ppeals process. The handbook states when a medical examination will be X П conducted. The handbook describes the facility, housing units, dayrooms, in- \boxtimes dorm activities, and special housing units. 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 M П authorized, clothes washing and drying procedures, and expected personal hygiene practices. The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be X П afforded the opportunity to shave first. The handbook describes barber hours and hair cutting restrictions. X The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone 冈 demand is high; and policy and procedures for emergency phone The handbook addresses religious programming. \boxtimes The handbook states times and procedures for commissary or X vending machine usage, where available. The handbook describes the detainee voluntary work program. Although ICE detainees do not work in this facility, a voluntary work program is \boxtimes П addressed in the ICE National Detainee

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he handbook describes the library location and hours of operation.

and law library procedures and schedules.

Handbook which is available to all detainees.

DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HA	NDBOOL	K TO SER	VE AS A	N OVERVIEW OF, AND GUIDE TO, THE DETENTION
POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY.	THE HA	NDBOOI	K WILL	ALSO DESCRIBE THE SERVICES, PROGRAMS, AND
OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDIN	NG THE F	ACILITY	, ICE, P	RIVATE ORGANIZATIONS, ETC. EVERY DETAINEE
WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO TH	1			<u> </u>
COMPONENTS	YES	No	NA	REMARKS
The handbook describes attorney and regular visitation hours,				
policies, and procedures.		 _		
The handbook describes the facility contraband policy.		<u> </u>		
The handbook describes the facility visiting hours and schedule, and visiting rules and regulations.				
The handbook describes the correspondence policy and procedures.	<u> </u>	 		
		├ └		
The handbook describes the detainee disciplinary policy and procedures, including:		ľ		
Prohibited acts and severity scale sanctions;				
Time limits in the Disciplinary Process; and			凵	
 Summary of the Disciplinary Process, and 				
The grievance section of the handbook explains all steps in the		<u> </u>		
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		l i		
grievance with ICE.		l 🖳		
• Staff/detainee availability to help during the grievance	\boxtimes			
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 procedures	\boxtimes			-
for general population and segregation.	<u></u>			
The handbook describes the facility recreation policy including:			_	Recreation is described as being provided a
Outdoor recreation hours.	\boxtimes			minimum of 3 days per week for a total of at
Indoor recreation hours. The last transfer of				least 5 hours per week.
The handbook describes the detainee dress code for daily living; and work assignments.	\boxtimes			
The handbook specifies the rights and responsibilities of all				
detainees.			Ш	
△ ACCEPTABLE ☐ DEFICIENT		AT-RI	SK	REPEAT FINDING
REMARKS: The facility complies with the manifest of the lard.				

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AUDITOR'S SIGNATURE /

FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.

COMPONENTS	YES	No	NA	REMARKS
The food service program is under the direct supervision of a <u>professionally trained</u> and certified 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 Food Service Administrator (FSA) for this facility is a registered nutritionist and is solely responsible for the food service operation.
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.				The on-duty Shift Sergeant is the backup person for the FSA in her absence.
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	\boxtimes			
Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.				Although there is not a "knife cabinet" or "knife box", the knives are secured to a work station at all times except when removed for cleaning by a staff member. The work station has a bar code strip that is scanned by the on duty deputy on a scheduled basis. Each work station has a knife sheath (storage area) for each knife. A knife inventory is maintained in the FSA's office. Knives remain secured to the work station 24/7 unless removed for cleaning.
All knives not in a secure cutting room are physically secured to he workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.	\boxtimes			
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.				
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	\boxtimes			
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	\boxtimes			
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.				
During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.				
The Cook Supervisor documents all training in individual detainee detention files.	\boxtimes			

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
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.				Detainees do not work in this facility; however, inmate workers earn credit towards their sentence for their work.
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	\boxtimes			Actual elapsed time from the evening meal until breakfast is 12 hours (5 PM to 5 AM).
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	\boxtimes			
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.				
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	\boxtimes			
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.				Although the FSA is a registered nutritionist, the 35-day cyclic menu is approved by the Registered Dietician from the Kentucky Department of Corrections (KDOC).
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.				
The Cook Foreman has the authority to change menu items if necessary. • If yes, documenting each substitution, along with its justification • With copy to FSA	\boxtimes			
All staff and volunteers know and adhere to written "food preparation" procedures.				Inmate volunteer staff are adequately trained to follow written procedures.
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.				
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 recommended daily allowances (RDAs); Staff routinely provide hot water for instant beverages and foods; Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.				
A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.				
The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial neals for the following calendar year.				A religious holiday schedule is on file.

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 common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for-Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. The food service program addresses medical diets.				Medical diets are documented via a bar code
				scanning system upon delivery to the diner in the housing unit. Each scan is date/time recorded and entered into the system as documentation of menu compliance. A history is retained on all diet deliveries.
Satellite-feeding programs follow guidelines for proper sanitation.	\boxtimes			
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	\boxtimes			
All meals are provided in nutritionally adequate portions.	M			
Food is not used to punish or reward detainees based upon behavior.	\boxtimes			
 The food service staff instructs detainee volunteers on: Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food; and The sanitary operation, care, and maintenance of equipment. 				
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes			
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?				Inspections are conducted by the duty officer and the FSA.
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?	\boxtimes			The most recent inspection was conducted 03-23-10 and was conducted by "in-house" staff.
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.				
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	\boxtimes			A record is maintained on file in the office of the FSA.
Staff documents the results of every refrigerator/freezer temperature check.	\boxtimes			Records are maintained in the office of the FSA.
The cleaning schedule for each food service area is conspicuously posted.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.				
Storage areas are locked when not in use.				·

FOOD SERVICE										
POLICY: EVERY FACILITY W	ILL PROVIDE NDARDS.	DETAINEES IN ITS CAR	E WITH NUTRITIO	US AND APPE	TIZING MEALS, PREPARED IN ACCORDANCE WITH					
Com	IPONENTS		YES NO	NA	REMARKS					
⊠ АССЕРТ	ABLE	☐ DEFICIENT	☐ AT-	Risk	REPEAT FINDING					
REMARKS:										
The facility complies with the	e requiremen	ts of the standard.								
(b)(6), (b)(7)(C) / 03-2; AUDITOR'S SIGNATURE	(b)(6), (b)(7	7)(C)								

FUNDS AND PERSONAL PROPERTY									
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES 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									
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).				Incoming funds are posted electronically to a Kiosk and a personal account is created with receipts provided to staff and the detainee. This practice is accomplished after two officers conduct a manual count in front of the detainee.					
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.									
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). <u>For IGSAs and CDFs</u> , using a personal property inventory form that meets the ICE standard?	\boxtimes			Personal property inventory includes 5x7 photo identification.					
Staff forwards an arriving detainee's medication to the medical staff.				This practice was observed to take place during intake within the first hour after arrival.					
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.				A record of weekly inventory audits is maintained in the office of the Administrative Captain.					
b)(7)(E)officers are present during the processing of detainee funds and valuables during in-processing to the facility(b)(7)(E)officers verify funds and valuables.									
Staff searches arriving detainees and their personal property for contraband.	\boxtimes								
Staff procedures follow written policy for returning forgotten property to detainees.									
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes								
Staff follows written procedures when returning property to detainees.	\boxtimes								
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes								
The facility attempts to notify an out-processed detainee that he/she left property in the facility: By sending written notice to the detainee's last known address; Via certified mail; and The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.	\boxtimes								
The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE. Acceptable Deficient	⊠ AT-RIS	□ SK		☐ REPEAT FINDING					

REMARKS: (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) AUDITOR'S SIGNATURE / D

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.	\boxtimes			
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.	\boxtimes			Grievance forms are printed in English and Spanish.
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 or substantiated cases of staff harassing, disciplining, penalizing or otherwise retaliating against a detainee who lodged a complaint.
 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			A log with date/time stamp supports all forwarded ICE detainee documents.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING

REMARKS:

The facility complies with the requirements of the standard.

(b)(6), (b)(7)(C) / 03-AUDITOR'S SIGNATUR

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 This facility has had two legal The Field Office is responsive to requests by attorneys and accredited rights group presentations in the M П representatives for group presentations. last 12 months, one on 07-08-09 and one on 01-15-10. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to \boxtimes П attorneys or accredited representatives. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the \boxtimes П attorney or accredited representative. At least 48 hours prior to the Posters announcing presentations appear in common areas at least 48 hours presentation, flyers are given to \boxtimes in advance and sign-up sheets are available and accessible. each detainee outlining the group presentation. No detainees have been denied Documentation is submitted and maintained when any detainee is denied \boxtimes П П permission to attend a permission to attend a presentation and the reason(s) for the denial. presentation. When the number of detainees allowed to attend a presentation is limited, he facility provides a sufficient number of presentations so that all detainees \boxtimes П signed up may attend. The facility would provide for Detainees in segregation, unable to attend for security reasons, may request any detainee in segregation to \square separate sessions with presenters. Such requests are documented. have a separate session with the presenters. Interpreters are admitted when necessary to assist attorneys and other legal \boxtimes representatives. Legal rights groups are given as Presenters are afforded a minimum of one hour to make the presentation and \boxtimes П much time as they need to make to conduct a question-and-answer session. their presentations. Staff permits presenters to distribute ICE-approved materials. \boxtimes Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is \boxtimes П 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 To date, no group presenters suspension are documented. The Headquarters Office for Detention and \boxtimes П have had their privileges Removal, Field Operations and Detention management Division, is notified suspended. when a group or individual is suspended from making presentations. The Field Office has provided The facility plays ICE-approved videotaped presentations on legal rights at M П tapes of legal rights groups which regular opportunities, at the request of outside organizations. are played at the facility. A copy of the Group Legal Rights Presentation policy, copy of the Group Legal Rights Presentation policy, including including attachments, is \boxtimes attachments, is available to detainees upon request distributed by the presenters at the time of the presentation if requested.

	GROUP LEGAL I	RIGHTS P	RESENT	ATIONS	3	
POLICY: FACILITIES HOUSING ICE DET THE PURPOSE OF INFORMING THEM OF U OF EACH FACILITY. ICE ENCOURAGES	J.S. IMMIGRATION LAW AT	ND PROCED	URES, CON	SISTENT V	WITH THE	SECURITY AND ORDERLY OPERATION
RIGHTS AND OPTIONS WITHIN IT. CHECK HERE IF NO GROUP PRESE OVERALL AND CONTINUE ON WITH NI	EXT PORTION OF WORKS		HIN THE P.	AST 12 M	ONTHS. M	AARK STANDARD AS ACCEPTABLE
Compon	ENTS		YES	No	NA	REMARKS
ACCEPTABLE	☐ DEFICIENT		AT-RISK	C		REPEAT FINDING
REMARKS:						
The facility complies with the requirem	ents of the standard					
(b)(6), (b)(7)(C) _/	(b)(7)(C)		-			

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 CE 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 NA No REMARKS The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels. \boxtimes П П The supply of these items exceeds the minimum required for the number of detainees. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: ICE detainees receive an additional 2 One uniform shirt and one pair of uniform pants, or one jumpsuit; \boxtimes \Box П pairs of socks and 3 pairs of One pair of socks; underwear. One pair of underwear (Daily change); and One pair of facility-issued footwear. Additional clothing is available for changing weather conditions, or as \boxtimes seasonally appropriate. New detainees are issued clean bedding, linens, and towels. They receive at a minimum: One mattress; One blanket; \boxtimes In addition, mattresses are issued. Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions. Detainees assigned to special work areas are clothed in accordance with the П \boxtimes Detainees do not work at this facility. equirements of the job. Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. X П Sheets - weekly. Towels - weekly. Pillowcases - weekly. Food service detainee volunteer workers are permitted to exchange outer \boxtimes П П Detainees do not work at this facility. garments daily. Volunteer detainee workers are permitted to exchange outer garments more \boxtimes Detainees do not work at this facility. frequently. ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING REMARKS:

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(b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) / 03-25-1 AUDITOR'S SIGNATURE / I

MARRIAGE REQUESTS							
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.							
COMPONENTS	YES	No	NA	REMARKS			
The Field Office considers detainee marriage requests on a case-by-case basis.	\boxtimes						
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.				All marriage requests from detainees are passed to the Field Office Director (FOD) for handling.			
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.							
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes						
ACCEPTABLE DEFICIENT	AT-RISI	ζ.		REPEAT FINDING			

REMARKS:

The facility complies with the requirements of the standard.

(b)(6), (b)(7)(C) / 03-2 AUDITOR'S SIGNATURE

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, stepparent, 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)(7)(Difficers.				
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-RISI	ζ		REPEAT FINDING

REMARKS:	
(b)(6), (b)(7)(C) / 03-25-10 AUDITOR'S SIGNATURE / D	

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	YE		No	T NY A	
	The facility has a recreation program and facility.			No	NA	REMARKS
	A recreational specialist (for facilities with more than 350 datains and 4-11	070	'-+	Щ.	 	
	the program activities and offerings to the detainee population.	.018				Although the requirement for a
	1 1			_		recreational specialist applies
				\boxtimes		specifically to an SPC/CDF, all
						staff officers at this facility are cross-trained to conduct
┢	Pagular maintanna 1				1	recreational activities.
1	Regular maintenance keeps recreational facilities and equipment in go condition.	ood 🛛				Total delivities.
┢						
1	The recreational specialist or trained equivalent supervises detain recreation workers.	nee 🛛	T			
r						
1	The recreational specialist or trainee equivalent oversees recreation program for special housing units (SHU) and special-needs detainees.	ms 🖂				
r	Dayrooms offer sedentary activities, e.g., board games, cards, television.			<u> </u>		
上	Outside activities are restricted to limited-contact sports.		\perp			
	o words detaylites are restricted to firmled-contact sports.					No contact sports are permitted
Г	Each detainee has the opportunity to participate in daily recreation.		1			during recreation hours.
	Detainees have access to recreation activities outside the housing units for		4.			
	least one hour daily, 5 days a week.	at				By policy and practice, recreation
	and the contract of the contra			\boxtimes		is offered a minimum of 3 days
L		_				per week for at least 5 hours per
L	Staff checks all items for damage and condition when equipment is returned	4 1	-		-,-,-	week.
Þ	Staff conducts searches of recreation areas before and after use.	d. 🛛	-	井		
	All recreation areas under constant staff supervision.	<u> </u>	-	닏니	L	
L						Staff supervise recreation either
	Supervising staff is equipped with radios.		+-			by "line of sight" and/or cameras.
[the facility provides detainees in the SHII at least one hour of autiliary	r.	+-	ᆜᆛ		
	cereauon ume dany, nye times per week					
Ι	Detainees in disciplinary/administrative segregation receives a sixty		+-			
	Apianation when a panel revokes his/her recreation privileges	" 🛛				
<u>_</u> >	pecial programs or religious activities are available to detained		+-	 		
ν	of only of the control of the contro		† '		_ <u></u>	
Ψ	ortion of the facility where detainees are present					
V	Tisitors, relatives or friends are not allowed to serve as volunteers.		1	7		
<u> 2</u>	If outdoor recreation is offered, check this box. No further inform	ation is re	eani	red wh	en out	door moone tier in the
					ch out	ion recreation is offered.
aı	ter six months?		,	_	_	
	 If yes, written procedures ensure timely review of all eligible detainees. 			J		
\overline{C}						
de	ase officers make written transfer recommendations about every six-month stainee to the OIC.		F			
Tł	ne OIC documents all detainee-transfer decisions, whether yes or no.					
do	ne detainee's written decision for or against an offered transfer cumented in his/her A-file.		Г			
	aff notifies the detainee's legal representative of his/her decision to					
aco	cept/decline a transfer.		Г	7		
If:	no recreation is available, the ICE Districts routinely review transfer					
eli	gibility for all detainees after 60 days.		Г	7		
Γh	e A-file of every detainee who is held more than 60 days without access					
O I	coreation contains either a transfer-waiver signed by the detained and a		_	,	$_{\Box}$ $_{\Box}$	
OIC	C's written determination of the detainee's ineligibility for transfer.		L.	_ _		
					1	J

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROOF POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECTION.	GRAMS ANI ECT THEIR	O ACTIVIT SAFETY A	IES TO AI	LL ICE DETAINEES, TO THE EXTENT ARE.
The detainee's legal representative is notified of the detainee's/OIC's decision.				
ACCEPTABLE DEFICIENT	AT-RISI	ζ		REPEAT FINDING
REMARKS:				
The facility complies with the requirements of the standard.				
(b)(6), (b)(7)(C) / 03-25-1 AUDITOR'S SIGNATURE / I (b)(6), (b)(7)(C)				

RELIGIOUS PR	ACTICES	, .		
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REPRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFE BUDGETARY CONSIDERATIONS.	EASONABL ETY, SECU	E AND EQU	JITABLE ORDERL	OPPORTUNITIES TO PARTICIPATE IN THE Y OPERATIONS OF THE FACILITY AND
COMPONENTS	YES	No	NA	REMARKS
Detainees are allowed to engage in religious services.				REMARKS
Space is available for detainees to conduct religious services.		一百		
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 possession.		† 🗇 [–]		
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	\boxtimes			All volunteer credentials are retained at the facility and exchanged for a photo I.D. upon entry.
Members of faiths not represented by clergy may conduct their own services within security allowances.	\boxtimes			
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-Risi	ζ		REPEAT FINDING
REMARKS:				

Religious activities are acco	emplished through an extensive	community volunteer program	under the supervision of the facility's
Administrative Captain.	, ,	Tomassiney volunteer program	ander the supervision of the facility's

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DETAINEE TELEPHONE ACCESS

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 The detainees at this facility have access to \boxtimes П waking hours. telephones from 7 AM to midnight. The telephone policy is explained in the Upon admittance, detainees are made aware of the facility's telephone \boxtimes detainee handbook and is also addressed via access policy. the broadcast on the jail television channel. Access rules are posted in housing units. \boxtimes The facility makes a reasonable effort to provide key information to Key information is provided to detainees in detainees in languages spoken by any significant portion of the \boxtimes both English and Spanish. facility's population. Telephones are provided at a minimum ratio of one telephone per 25 \boxtimes П detainees in the facility population. Telephones are inspected regularly by facility staff to ensure that they M П are in good working order. The facility administration promptly reports out-of-order telephones X П to the facility's telephone service provider. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and \boxtimes П completed timely. Detainees are afforded a reasonable degree of privacy for legal \boxtimes phone calls. A procedure exists to assist a detainee who is having trouble placing \boxtimes П a confidential call. The facility provides the detainees with the ability to make non- \boxtimes collect (special access) calls. Special Access calls are at no charge to the detainees. X The OIG phone number is programmed into The OIG phone number for reporting abuse is programmed into the the facility phone system. Detainee phones detainee phone system and the phone number was checked by the \bowtie П throughout the facility were checked and a inspector during the review. live person was reached on each phone. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate \Box \Box \boxtimes The facility meets the requirements. 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 X \Box П Legal Services List". Upon approval of the Field Office, the Special arrangements are made to allow detainees to speak by facility will make arrangements for a telephone with an immediate family member detained in another X П detainee to call an immediate family member Facility. detained in another facility. Any telephone restrictions are documented. M The shift supervisor is advised of any The facility has a system for taking and delivering emergency emergency phone calls relating to a detainee. \boxtimes detainee telephone messages. and will then have a staff member deliver the message to the detainee. Emergency phone call messages are immediately given to detainees. \boxtimes Detainees are allowed to return emergency phone calls as soon as \boxtimes possible. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including X consultation calls.

POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DE COMPONENTS	YES	No	NA	REMARKS
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.				REMINICIO
Detainees in disciplinary segregation are allowed phone calls for amily 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 letainee telephones that phone calls made by the detainees may be nonitored. Special Access calls are not monitored.				A notification message regarding the monitoring of detainee phone calls is programmed into the phone system.
ACCEPTABLE DEFICIENT		AT-RISI	ζ	REPEAT FINDING
REMARKS:				

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VISITATION

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

COMPONENTS	YES	No	NIA	Paulanyo
	IES	NO	NA	REMARKS The facility a visiting school of the continuous state of the continuo
There is a written visitation schedule and hours for general visitation.				The facility's visiting schedule is outlined in the detainee handbook and also addressed on the jail television channel broadcast.
The visitation hours tailored to the detainee population and the demand for visitation.	\boxtimes			The facility's visiting hours are Tuesdays and Saturdays from 7:30 to 10:30 AM.
The visitation schedule and rules are available to the public.				
The hours for all categories of visitation are posted in the visitation waiting area.	\boxtimes			At this facility, a television is set up in the visitor waiting area which broadcasts the visitation rules and schedule.
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.				The general public can access the rules regulating visitation on the facility's website or by viewing them on the television in the visitor waiting area. However, they are not available in writing.
A general visitation log is maintained.	\boxtimes			
The detainees are permitted to retain personal property items specified in the standard.				
A visitor dress code is available to the public.				
Visitors are searched and identified according to standard requirements.				The facility utilizes non-contact visiting; therefore, visitors are not searched.
The requirement on visitation by minors is complied with.				
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.			\boxtimes	Minors are allowed to visit at this facility.
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.			\boxtimes	Minors are allowed to visit at this facility.
Detainees in special housing are afforded visitation.	\boxtimes			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			Attorneys at this facility are allowed to visit 24 hours a day.
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.	\boxtimes			
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.				
There are written procedures governing detainee searches.				
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	\boxtimes			Strip searches are not required after every contact visit with a legal representative unless there is reason to believe the detainee has contraband.
Prior to each visit, legal service providers and assistants are dentified per the standard.				
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.				

VISITATION								
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.								
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.				All requests for visits by non-governmental organizations (NGOs) must be submitted in writing to the ICE Field Office for approval.				
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	\boxtimes			•				
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.				Any request for a detainee to be examined by an independent medical service is referred to ICE for approval.				
ACCEPTABLE DEFICIENT		AT-RI	SK	REPEAT FINDING				
REMARKS:								
The facility complies with the requirements of the standard.								

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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.

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.	Ш	凵		
Where possible, physically and mentally challenged detainees participate in				
he 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.				
f a detainee is removed from a work detail, staff places the written				
ustification for the action in the detainee's detention file.				
Staff, in accordance with written procedure, ensures that detainee volunteers				
inderstand their responsibilities as workers before they join the work				
orogram.				
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	ΠR	EPEAT FINDING
REMARKS:				
CENTACKS.				

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.				The Hunger Strike Policy and Procedure addresses this issue.
CDFs and IGSAs immediately report a hunger strike to the ICE.				By policy, medical staff notifies ICE.
The facility has established procedures to ensure staff respond immediately to a hunger strike.				Health Services policy for Sick Call provides the procedure for staff to immediately respond to a variety of health care issues, including a hunger strike.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?	\boxtimes			Hunger Strike Policy and Procedure addresses this issue. Every detainee on a hunger strike is removed from his/her cell to an observation cell.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	\boxtimes			The hunger strike policy provides medical personnel the authority to place an individual in a special management cell.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.				By policy and practice, medical staff records weight and vital signs initially and every 24 hours.
The OIC of the facility obtains a hunger striker's consent before medical treatment.				Consent for treatment is obtained from each detainee at the time of booking.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	\boxtimes			By policy and practice, a signed refusal of treatment is obtained for any detainee refusing consultation, evaluation or treatment.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.				At the time of booking, each detainee is required to wear a bar-coded bracelet. Each time a hunger-striking detainee would be offered a meal, his/her bracelet would be scanned to indicate a meal had been offered. This information is stored in the facility's computerized information management system. Additionally, this information is provided to medical staff.
Staff maintains the hunger striker's supply of drinking water/other beverages.				By policy and practice, beverages are routinely offered and logged as accepted or refused.
During a hunger strike, staff removes all food items from the hunger striker's living area.				Upon declaring a hunger strike, the detainee is moved to an observation cell which is free of any food items.
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			Medical staff document in the detainee's medical record the consumption of any food or fluids.
The medical staff has written procedures for treating hunger strikers.	\boxtimes			Hunger Strike Policy and Procedure provides guidelines for treatment.

HUNGER STRIKES					
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELL SUSTAIN THEIR LIVES.	EDICAL A	AND ADI	MINISTR IVIDUAI	ATIVE MANAGEMENT OF ICE DETAINEES L DETAINEES, FACILITIES WILL STRIVE TO	
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.				By policy and practice, all contact with a hunger-striking detainee is documented in the individual's medical record.	
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.				Interviews with staff and the training officer indicate staff receives training. The issue is reviewed with medical staff during new employee orientation.	
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING	
REMARKS: Following a review of policy, procedure and interviews with staff, it appears At the time of the inspection, it was reported by the facility there had been reprogress during the inspection.				_	
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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
Facilities operate a health care facility in compliance with state and local laws and guidelines.				Professional medical staff are licensed by the State of Kentucky. The facility has a current Clinical Laboratory Improvement Amendment (CLIA) certificate authorizing limited medical testing.
The facility's in-processing procedures for arriving detainees include medical screening.	\boxtimes			Medical staff conduct a medical screening at the time of booking, which is addressed in policy for Medical Screening.
All detainees have access to and receive medical care.				Sick call request slips, written in both English and Spanish, are available upon request. Slips are delivered to the medical unit twice a day and medical staff are on-duty 24/7.
The facility has access to a PHS/DIHS Managed Health Care Coordinator.				The telephone number for the coordinator is available in the medical unit.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	\boxtimes			Health care services are provided through a contract with Southern Health Partners (SHP), Chattanooga, TN, to provide 24/7 on-site medical services. Staffing consists of: a nurse practitioner (NP); registered nurses (RNs); Licensed Practical Nurses (LPSs); a certified medical technician; clerical staff; and an on-call corporate physician.
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.				The medical unit has sufficient space and equipment to meet the needs of the detainee population.
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	\boxtimes			The medical unit is a restricted-access area and is located within the secure perimeter of the facility.
The medical facility entrance includes a holding/waiting room.				Adjacent to the medical unit is a large, secure holding/waiting area.
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	\boxtimes			There are large windows allowing more than sufficient direct observation by staff into the waiting/holding area. In addition to line-of-sight observation, there is camera observation.
Detainees in the holding/waiting room have access to a drinking fountain.	\boxtimes			Detainees in the medical unit holding/waiting area have immediate access to both water and restroom facilities which are located within the waiting area.
 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. 	\boxtimes			Detainee medical records are maintained in a locked cabinet in the medical unit with access limited to medical staff.

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.

D1 1			
Pharmaceuticals are stored in a secure area.			Within the secure medical unit is a locked storage room which contains all the pharmaceutical inventory and medication cart. The medication cart, when not in use, is locked and maintained in the locked storage room. Both the storage room and medication cart have access limited to medical staff. The pharmaceutical inventory is behind a series of three locked doors.
 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. 			Each ICE detainee receives a chest x-ray within one business day of booking in lieu of a TB skin test. At the time of the inspection, there were 69 ICE detainees in the facility. A review of 20 randomly-selected medical records indicated a chest x-ray had been conducted on each within one business day of booking.
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.			At the time of booking, medical staff conducts a medical/mental health screening. If the detainee provides any mental health or high-risk history, a second screening is conducted by a mental health counselor.
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	\boxtimes		Only medical staff completes the medical/mental health screenings.
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.			At this facility, ICE detainees are given priority in completion of required testing/examinations/assessments. A review of 20 randomly-selected ICE detainee medical records indicated all 14-day health appraisals had been completed within 1-3 days of booking.
Detainees in the Special Management Unit have access to health care services.			Sick call request slips are available upon request to all detainees regardless of placement. Medical staff are on-duty 24/7. Medical staff delivers medications to detainees in SMU. If there are no detainees receiving medication and there are no sick call requests, medical unit staff does not visit SMU/segregation daily.
 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 request slips printed in both English and Spanish are available to any detainee upon request. Request slips are delivered by security staff to the medical unit multiple times per day. Additionally, an electronic notice is sent to the medical unit.
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.			Through a contract with SHP, medical staff are on-duty 24/7.
The plan includes an on-call provider.			Since health care staff are on-duty 24/7, security staff notifies them regarding any detainee medical needs.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. The plan includes a list of telephone numbers for local ambulance and Security staff notifies the medical unit. hospital services. Medical unit staff would determine if 911 notification would be necessary. \boxtimes П The community hospital utilized is St. Elizabeth, located in Florence, KY; it is approximately five miles from the facility. The plan includes procedures for facility staff to utilize this emergency Since medical staff are on-duty 24/7, health care consistent with security and safety. both non-emergent and emergent issues are directed to them for handling. In the \boxtimes П П event there is a need to transport a detainee outside the facility, medical staff coordinate the transport with security staff and ICE. Detention staff is trained to respond to health-related emergencies During new employee orientation and within a 4-minute response time. periodically thereafter, security staff are trained in cardio pulmonary resuscitation (CPR), First Aid and the automated external defibrillator (AED for purposes of responding to medical emergencies. П \boxtimes П Following a review of training curriculum and an interview with the training officer, there is no reference specific to a 4-minute response time. Additionally, drills are not conducted to determine response times. Where staff is used to distribute medication, a health care provider Only licensed/certified medical staff П \boxtimes properly trains these officers. distribute medication at this facility. The medical unit keeps written records of medication that is For any detainee receiving medication, distributed. distribution is documented by medical \boxtimes staff on a Medication Administration Record (MAR) specific to the detainee. The Form I-819 (or IGSA equivalent) is used to notify the Facility administration is notified by e-Warden/Facility of a detainee that has special medical needs. \boxtimes П mail from medical staff for any detainee with special medical needs. A signed and dated consent form is obtained from a detainee before It is the policy of this facility to obtain a medical treatment is administered. \boxtimes \Box \Box signed Consent To Treatment for each detainee at the time of booking. Detainees use the I-813 (or IGSA equivalent) to authorize the release The contract medical provider utilizes an of confidential medical records to outside sources. \boxtimes П equivalent form, entitled Authorization For Release of Patient Medical Record. The facility health care provider is given advance notice prior to the An interview with the medical unit release, transfer, or removal of a detainee. clerical person indicated sufficient \boxtimes П П advance notice is provided prior to the transfer of any detainee. Detainee's medical records or a copy thereof, are available and For each detainee exiting the facility, a

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transferred with the detainee.

"MEDICAL CONFIDENTIAL".

ACCEPTABLE

Medical records are placed in a sealed envelope or other container

labeled with the detainee's name and A-number and marked

medical screening form is completed

An interview with the medical unit

REPEAT FINDING

is being met.

which details allergies, current acute or chronic medical issues, and ongoing treatment and medications if applicable.

clerical person indicated this component

REMARKS:

Following a review of policy, procedure, observation of practice and interviews with staff, it appears the components of this standard are being met. There were no deaths reported by the facility for the past year and only licensed medical staff distributes medication.

At the time of the inspection, there were 69 ICE detainees present in the facility. A review of 20 randomly-selected ICE detainee medical records indicated all received the following within the appropriate time frames: an intake medical/mental health screening; TB screening (chest x-ray); and health appraisals.

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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.				Policy for Jail Staff Training, addresses this component. An interview with the training officer indicated staff are trained on the subject during new employee orientation, as well as annually thereafter. In addition, the facility mental health counselor provides training to staff.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.				A review of the training curriculum and an interview with the training officer verified this component is being met.
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.				Medical staff conduct the initial intake screening. If a detainee provides any mental health history or exhibits highrisk behavior, a second screening is conducted by mental health staff.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.				Policy for Psychological and Psychiatric Care of Inmates provides guidelines for referral of at-risk detainees to medical staff/mental health staff.
The facility has a designated isolation room for evaluation and treatment.				The isolation rooms are located in a special management wing.
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.				Observation of the rooms indicates they are acceptable for use.
Medical staff has approved the room for this purpose.				Verbal approval for use of the rooms has been provided by medical.
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	\boxtimes			Suicide observation flow sheets are designed for 15-minute status checks. Additionally, the policy for Hunger Strike addresses this issue.
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

REMARKS:

Following a review of policy/procedure, training curriculum, forms and interviews with staff, it appears the components of this standard are being met.

At the time of the inspection, there were no suicide watches in progress, and it was reported there had been no ICE detainee suicide attempts in the last year.

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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
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	\boxtimes			According to the facility Jailer, detainees who are chronically or terminally ill will be removed from the facility by ICE.
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.				Per ICE staff, this is an ICE responsibility.
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.				According to the facility Jailer, the KDOC Jail Standards govern jail operations, and these standards prohibit jail detainees from having an Advanced Directive/Living Will. As a result, any ICE detainee requesting such would be referred to the ICE Field Office in Chicago. If the request would be approved by the Field Office, the facility would request ICE to remove the detainee from the facility.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.				If a detainee made such a request, the request would be forwarded to ICE for disposition. If approved by ICE, the facility would request the detainee be transferred. The facility, per KDOC Jail Standards, does not permit detainees to develop/implement an Advanced Directive/Living Will.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINALILINESS OR NJURY, 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
There is a policy addressing "Do Not Resuscitate Orders"				Although there is no facility policy addressing this issue, the contract medical provider SHP does have policy J-I-04, End of Life Decision Making, which addresses this component. Again, if a detainee made such a request, the issue would be referred to the ICE Field Office in Chicago for handling. If the request were approved by ICE, the facility would request the detainee be removed as KDOC Jail Standards do not authorize detainees incarcerated in the state to have DNR orders.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?				This issue is addressed in Policy J-I-04.
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.				Pursuant to KDOC Jail Standards, the facility does not recognize a DNR order. In the event a detainee requested such, the matter would be referred to ICE for disposition. If approved by ICE, the facility would request the detainee be removed from the facility.
The facility has written procedures to address the issues of organ donation by detainees.				The facility, which operates under the authority of the KDOC Jail Standards, does not permit any detainee to participate in organ donation. If an ICE detainee made such a request, the issue would be referred to ICE for disposition. If approved by ICE, the facility would request the detainee be removed from the facility.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.				Life Safety/Emergency Procedures for Suicide or Death of an Inmate in Confinement addresses this component.

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 The facility has a policy and procedure to address the death of a detainee while in Policy for Procedures For transport. Transportation of Inmates \boxtimes П Outside the Facility, addresses this component. At all ICE locations the detainee's remains disposed of in accordance with the \boxtimes П This is an ICE responsibility. provisions detailed in this standard. In the event that neither family nor consulate claims the remains, the Field Office The address of this schedules an indigent's burial, consistent with local procedures. \square component was confirmed by If the detainee's is a U.S. military veteran, is the Department of Veterans ICE staff. Affairs notified? An original or certified copy of a detainee's death certificate is placed in the subject's According to facility records a-file. staff, the death certificate would be forwarded to the \boxtimes П ICE field office in Chicago as no A-files are maintained in the facility. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: Policy for Life Performance of an autopsy; Safety/Emergency \boxtimes Who will perform the autopsy; Procedures addresses this Obtaining state approved death certificates; and component. Local transportation of the body. ICE staff follows established procedures to properly close the case of a deceased An interview with an ICE detainee. \boxtimes representative confirmed this component is being met. **ACCEPTABLE** DEFICIENT ☐ AT-RISK REPEAT FINDING

REMARKS:

Following a review of policy, procedure and interviews with staff, it appears the components of this standard are being met.

At the time of the inspection, there were 69 ICE detainees present in the facility. None of these detainees had requested to execute an Advanced Directive/Living Will or DNR Order. The Jailer stated their policy is to not recognize/allow Advanced Directive/Living Wills/DNR Orders; this is pursuant to KDOC Jail Standards which prohibits detainees from entering into such agreements. He advised should an ICE detainee express interest in developing these documents, the request would be forwarded to the ICE Field Office in Chicago for handling. If the request were approved, then the facility would request ICE to remove the detainee from the facility in order to stay in compliance with the KDOC Jail Standards. It is noted, however, this policy (as stated by the Jailer) is not in writing.

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SECURITY AND CONTROL STANDARDS

CONTRABA	ND					
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.				Written policy is outlined in the facility Policies and Procedures Manual (PPM), Security and Control, Section I.		
Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	\boxtimes					
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.				Any religious items identified as contraband are confiscated and placed in the detainee's personal property. No religious authority is consulted.		
Staff follows written procedures when destroying hard contraband that is illegal.						
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.				Hard contraband that may be utilized for training purposes is maintained by the facility as addressed in the facility PPM.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

The facility classifies contraband into two categories: contraband; and dangerous contraband. Contraband is any item which is not allowed by the facility to be in the possession of a detainee/inmate. At the time of confiscation, a receipt is completed.

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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.				A detention file is created for every ICE and non-ICE detainee that is admitted to this facility.
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.				
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same				Of the 69 ICE detainees housed here, 30 detention files were reviewed and met the requirements of the standard.
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.				Detention files are maintained in the booking area of the facility.
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.	\boxtimes			When a detainee is released, the detention file is placed in the archive area with a release form placed in the file.
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.	\boxtimes			Detention files are maintained in the booking department. Staff requesting to review files must come to the booking room to review files; the files do not leave this area.
ACCEPTABLE DEFICIENT	☐ AT-	Risk		REPEAT FINDING

REMARKS:

The facility complies with the requirements of the standard.

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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.

COMPONENTO	1	1	T	T
COMPONENTS The facility has a written disciplination of the control of the contr	YES	No	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.				The facility disciplinary policy is outlined in the PPM and also described in the handbook provided to each detainee upon admission into the facility.
The facility rules state that disciplinary action shall not be capricious or retaliatory.				
Written rules prohibit staff from imposing or permitting the following sanctions:				
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.				
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions				All rules are posted in English and Spanish.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	\boxtimes			
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	\boxtimes			
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	\boxtimes			
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes			
 A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC; Considers written reports, statements, physical evidence, and oral testimony; Hears pleadings by detainees and staff representatives; Bases its findings on the preponderance of evidence; and Imposes only authorized sanctions 				The Shift Supervisor adjudicates infractions at the facility.
A staff representative is available if requested for a detainee facing a disciplinary hearing.	\boxtimes			
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	\boxtimes			
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.				
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	\boxtimes			

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 All forms relevant to the incident, investigation, committee/panel reports, \boxtimes etc., are completed and distributed as required. **ACCEPTABLE** ☐ DEFICIENT ☐ AT-RISK REPEAT FINDING **REMARKS:** Facility disciplinary procedures are outlined in the handbook provided to all detainees upon admission to the facility. Detainees may request assistance in preparing for the disciplinary panel. (b)(6), (b)(7)(C) / 03-

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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

COMPONENTS	YES	No	NA	REMARKS
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.				Policy precluding detainees from exercising control or authority over other detainees is described in the PPM.
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?				The topic of how to identify signs of unrest is addressed in staff pre-service training and annually thereafter. This training is approved by the KDOC.
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.	\boxtimes			The Jailer is responsible for the development and maintenance of all emergency plans and their implementation.
The plans address the following issues:				All staff receives training on emergency plans. Copies are controlled and must be signed out for review.
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	×			Written cooperative contingency plans with local law enforcement, state, and federal agencies are on file, and copies included with restricted contingency plans.
All staff receives copies of Hostage Situation Management policy and procedures.				Staff do not receive copies of the Hostage Situation Management policy; however, all staff are trained on the hostage procedures.
Staff is trained (b)(7)e 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.	\boxtimes			The facility maintains a 15-day supply of meals for staff and detainees.
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	\boxtimes			

EMERGENCY (CONTING	GENCY) I	PLANS		- 44
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGON THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS REMEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND SECONDARY OF THE PROPERTY OF	COMMEND	ED THAT	SPCSAN	DCDES ENTER INTO AGREEMENT VIA
COMPONENTS	YES	No	NA	REMARKS
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Internal Searches Facility Evacuation Detainee Transportation System Plan Internal Hostages Civil Disturbances				
✓ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISK			REPEAT FINDING
REMARKS: The facility maintains a complete set of Emergency Contingency Plans which which is documented in their file (b)(6), (b)(7)(C) / 03-25-1(AUDITOR'S SIGNATURE / D (b)(6), (b)(7)(C)	h are strict	ly contro	lled. All	staff receive training on each plan,

ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

COMPONENTS	YES	No	NA.	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				All hazardous materials enter the facility through a central location, where they are maintained for issue as needed. Supplies are received on Fridays and added to inventory records. However, the issuance of these materials is not documented.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.				Although there is an inventory, and accountability appears to be in place, there are no written procedures. Further, the documentation for the inventory of chemical items appears to account for the bulk items, yet does not document the distribution.
 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 				Although facility policy calls for plant diagrams, there are none.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.				
The MSDSs are readily accessible to staff and detainees in work areas.				A master MSDS file is maintained in the Control Room. Each user job site also has MSDS on site that are specific to their use (i.e., laundry, kitchen, maintenance).
Hazardous materials are always issued under proper supervision. • Quantities are limited; and • Staff always supervises detainees using these substances.				
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.				
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	\boxtimes			
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	\boxtimes			
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	\boxtimes			
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)				A cell area temperature measured 74°F.
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	\boxtimes			Sink and shower temperatures measured 109.43°F.

ENVIRONMENTAL HEALTH AND SAFETY

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COMPONENTS	YES	No	NA	REMARKS
All toxic and caustic materials are stored in their original containers in a secure area.	\boxtimes			
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.			\boxtimes	There are no methyl alcohol products maintained at the facility.
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).				Through conversations with staff, it is apparent they are familiar with applicable codes and regulations.
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			
The Safety Office (or officer) maintains files of inspection reports.	\boxtimes			Files are maintained in the Jailer's office.
The facility has an approved fire prevention, control, and evacuation plan.				Although there is an approved fire prevention, control, and evacuation plan on file in the Jailer's office, the facility does not comply in practice. The policy prohibits smoking; however, smoking is allowed in the maintenance area (non-secured). The plan specifically describes the use of a "posted floor plan", which is not evident. There is not a posted location diagram which identifies firefighting equipment.
 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. 				There are no "public" postings of emergency plans accessible in the building. There are no descriptive floor plans for evacuation in an emergency. Although there are exit signs above the exit doors, there are no directional arrows indicating where exits are located. There are no "area-specific" exit diagrams conspicuously posted.
Fire drills are conducted and documented monthly.				
A sanitation program covers barbering operations.		\boxtimes		Barbering services are provided in the dayrooms, not in a properly-equipped room not used for any other purpose as required by the standard.

ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

COMPONENTS	YES	No	NA	REMARKS
The barber shop has the facilities and equipment necessary to meet sanitation requirements.				There is no separate barber shop. Barbering supplies are contained in a "kit" and issued as needed. Each kit contains necessary cleaning agents.
The sanitation standards are conspicuously posted in the barbershop.				There is no separate barber shop where standards can be posted.
Written procedures regulate the handling and disposal of used needles and other sharp objects.				There were no written procedures regarding the handling/disposal of used needles and sharps other than the medical contractors' Policy J-D-01, which was unavailable at the start of the inspection. The facility modified their medication policy during the review to include the responsibility for the contractor's handling of used needles and sharps.
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	\boxtimes			Kitchen utensils are inventoried daily.
 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.				
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.				Staff follow guidance provided in printed brochures accompanying the spill kits; however, there is no written facility policy or procedures.
Do the methods for handling/disposing of refuse meet all regulatory requirements?				
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.				Monthly pest control inspections/treatments are under contract. Records are maintained in the Administrative Captain's office.
Drinking water and wastewater is routinely tested according to a fixed schedule.	\boxtimes			
 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). 				Generators are on a programmed "test run" cycle which is activated every Wednesday.

	ENVIRONMENTA	AL HEAL	TH AND	SAFETY	ľ	
POLICY: EVERY FACILITY WILL CONTR PROGRAM WILL INCLUDE, AMONG OTH APPLICABLE STANDARDS (E.G., NATION SAFE-HANDLING PROCEDURES	ER THINGS, THE IDENTIFIC	CATION A	ND LABELE	NG OF HA	ZARDOUS MATE	ERIALS IN ACCORDANCE WITH
Сомрон	ENTS		YES	No	NA	REMARKS
☐ ACCEPTABLE	☑ DEFICIENT		AT-RISE	ζ.	REPE	AT FINDING

REMARKS:

The handling of chemicals appears to be safe and practical, and yet there are no written procedures detailing what is to be done. The documentation for the inventory of chemical items accounts for the bulk items arriving at the facility, yet does not document the distribution – thereby negating a 'constant' inventory. The facility policy clearly acknowledges a need for building diagrams; however, they are not in place (believing it would compromise safety/security if detainees knew exit routes). Policy acknowledges a need for public posting of emergency plans, but they are not in place. There are no exit arrows as required. The facility is a smoke-free environment; however, smoking is allowed in the maintenance area of the building. Initially, employees could not identify the written procedures for handling used needles. It was later revealed the medical contractor had a Pharmacy Policy which addressed the proper handling; therefore, the facility made a change to their policy to include this responsibility. While actual practices observed in the aforementioned areas appeared sound, there were no written procedures for the specific functions.

(b)(6), (b)(7)(C) / AUDITOR'S SIGNA (b)(6), (b)(7)(C)

HOLD ROOMS IN DETENTION FACILITIES

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.						
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.				Hold rooms are well ventilated and well lighted with activating switches controlled in the Control Room area.		
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.				No make-shift sleeping apparatus are allowed in hold rooms per the Jail Lieutenant assigned.		
The walls and ceilings of the hold rooms are tamper and escape proof.						
Individuals are not held in hold rooms for more than 12 hours.				Individuals are normally held in hold rooms no longer than two hours.		
Male and females are segregated from each other.						
Detainees under the age of 18 are not held with adult detainees.			\boxtimes	The facility does not house detainees under the age of 18.		
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			Toilet facilities are located in each hold room.		
All detainees are given a pat down search for weapons or contraband before being placed in the room.				Per facility staff, all detainees are pat searched prior to being placed into a hold room.		
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.						
When the last detainee has been removed from the hold room, it is given a thorough inspection.	\boxtimes					
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.				The written evacuation plan is included in the fire plan/evacuation plan of the facility.		
An appropriate emergency service is called immediately upon a determination that a medical emergency may exist.	\boxtimes					
ACCEPTABLE DEFICIENT	AT-RIS	SK		REPEAT FINDING		

REMARKS:

The facility holds detainees in hold room as needed or required to process into and out of the facility. The time spent in a hold room usually does not exceed two hours. Staff have direct supervision of all hold rooms within the facility.

(b)(6), (b)(7)(C) / 03-25 AUDITOR'S SIGNATURE

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	YES	No	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				The lieutenant in charge of key and lock control has not attended an approved locksmith training program. Lock maintenance is contracted to an independent company, as needed, to repair malfunctioning locking mechanisms.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	\boxtimes			
The security officer, or equivalent in IGSAs, provides training to employees in key control.				
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	\boxtimes			There is an inventory maintained on the computer system.
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	\boxtimes			Preventive maintenance is performed by the County Maintenance Department.
Facility policies and procedures address the issue of compromised keys and locks.	\boxtimes			
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				The Jailer, in conjunction with the Deputy, develops policy and procedures as outlined.
Only dead bolt or dead lock functions are used in detainee accessible areas.	X			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.				
Grand master keying systems are prohibited.	\boxtimes			
All worn or discarded keys and locks are cut up and properly disposed of.	\boxtimes			
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.				The facility does not routinely utilize keys; the entire facility uses a key card system. Keys are located in a secure area and are used in emergency situations or as a backup if the system malfunctions, preventing the use of the electronic key card system.
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.				
Emergency keys are available for all areas of the facility.				
The facilities use a key accountability system.				If keys are drawn, the employee scans a bar code and electronically logs the keys out.
Authorization is necessary to issue any restricted key.				

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.

RE 13 AND LOCKS.	11			
COMPONENTS	YES	No	NA	REMARKS
 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. 	\boxtimes			
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			
 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. 	×			
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ.		REPEAT FINDING

REMARKS:

The facility utilizes a key card system for access to all areas of the facility. A control officer can override any key card or shut the system down and control all areas of the facility. Emergency keys are located in a secure area which may be drawn to access areas of the facility in an emergency or when circumstances prevent the use of the electronic key card system.

(b)(6), (b)(7)(C) / 03-25-AUDITOR'S SIGNATURE /

POPIII.		

POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTA	ABILITY FOI	RALLDET	AINEES. T	HISREOURES	THATTHEY
CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT,	WITH ADD	ITIONAL	FORMAL A	AND INFORM	AL COUNTS
CONDUCTED AS NECESSARY.					

COMPONENTS	YES	No	NA	REMARKS
Staff conduct a formal count at least once each shift.				The facility conducts three formal counts each day. There is a count conducted at the beginning of each shift.
Activities cease or are strictly controlled while a formal count is being conducted.				
Certain operations cease during formal counts.				
All movement ceases for the duration of a formal count.				
Formal counts in all units take place simultaneously.				
Detainee participation in counts is prohibited.				
A face-to-photo count follows each unsuccessful recount.				
Officers positively identify each detainee before counting him/her as present.	\boxtimes			
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.				Informal counts are conducted at each meal service. Emergency counts may be order by the Shift Supervisor.
The control officer (or other designated position) maintains an out-count record of all detainees temporarily leaving the facility.	\boxtimes			
This training is documented in each officer's training folder.				
□ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING

REMARKS:

The facility utilizes a bar code scanner to assist with the facility headcount. When officers conduct the count they identify the detainee/inmate and scan the bar code adjacent to each door to indicate the detainee/inmate is present. These entries are automatically logged into the computer system which accounts for all detainees/inmates assigned to the facility. At the conclusion of the physical headcount, staff responsible report to booking and sign the count sheet as verification of their headcount.

(b)(6), (b)(7)(C) / 03-25-10 AUDITOR'S SIGNATURE / D

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. The facility does not maintain post orders as defined in the П \boxtimes NDS. They do maintain a daily schedule in the control and booking areas for staff review. Each set contains the latest inserts (emergency memoranda, etc.) and The facility distributes policy revisions. memoranda and other essential information to their staff via an e-П \boxtimes П mail system. The employee is required to review all incoming correspondence prior to logging into the system. One individual or department is responsible for keeping all post-orders A Lieutenant is designated to be current with revisions that take place between reviews. responsible for post orders; however, since they are not \boxtimes prepared according to NDS requirements, there is no way to confirm they are current. The IGSA maintains a complete set (central file) of post orders. There are no post orders as X defined in the NDS. The central file is accessible to all staff. There are no post orders as \boxtimes defined in the NDS. The OIC or Contract / IGSA equivalent initiates/authorizes all post-order The Jailer oversees what the changes. \boxtimes П facility refers to as their post order process. The OIC or Contract / IGSA equivalent has signed and dated the last page There are no signatures on post \Box M of every section. orders in the facility. A review/updating/reissuing of post orders occurs regularly and at a The facility does not maintain a minimum, annually. \boxtimes \Box set of post orders as defined in the NDS. Procedures keep post orders and logbooks secure from detainees at all The facility does not maintain times. post orders as defined in the NDS. They do maintain a daily \square П schedule in the control and booking areas for staff review. which is secure from detainees Every armed-post officer qualifies with the post weapon(s) before assuming All jailers are qualified with \boxtimes П post duty. weapons. Armed-post post orders provide instructions for escape attempts. The only armed post identified (b)(7)e There M are no post orders available for this duty. The post orders for housing units track the event schedule. There are no post orders as П X \Box required in the standard. Housing-unit post officers record all detainee activity in a log. The post Housing Unit post officers record order includes instructions on maintaining the logbook. all detainee activity as required. \boxtimes П Post orders do not include instructions on maintaining the logbook. ☐ ACCEPTABLE **□** DEFICIENT ☐ AT-RISK REPEAT FINDING

REMARKS:

The facility does not maintain a complete set of post orders as required by the ICE NDS. There are two binders maintained in the facility which are identical in composition (one is maintained in the booking area and the other in the control area). Both binders contain a daily schedule and identify locations of lighting and speaker systems within the facility; the Jailer and his staff believe this meets NDS requirements. However, neither binder contains written orders nor specifies the duties of each post in the facility, along with the procedures to be followed in carrying out those duties.

(b)(6), (b)(7)(C) / 03-25 AUDITOR'S SIGNATURE

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				The facility has a security inspection policy outlined in the facility's PPM.
Every officer is required to conduct a security check of his/her assigned area. The results are documented.	\boxtimes			
Documentation of security inspections is kept on file.				All inspections are logged into a computer utilizing bar codes.
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	\boxtimes			
The front-entrance officer checks the ID of everyone entering or exiting the facility.				
All visits are officially recorded in a visitor logbook or electronically recorded.	\boxtimes			
The facility has a secure visitor pass system.		\boxtimes		The facility does not utilize a visitor pass system.
Every Control Center officer receives specialized training.				
The Control Center is staffed around the clock.				
Policy restricts staff access to the Control Center.				Policy does not restrict access to the Control Center.
Detainees are restricted from access to the Control Center.				
Communications are centralized in the Control Center.				
Officers monitor all vehicular traffic entering and leaving the facility.	\square			
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				This component is specific to SPC's/CDF's. No vehicular traffic enters a sensitive area of the facility. All deliveries are received at a loading dock outside the secure perimeter.
Officers thoroughly search each vehicle entering and leaving the facility.	\boxtimes			This component is specific to SPC's/CDF's.
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.	\square			
Written procedures govern searches of detainee housing units and personal areas.				
Housing area searches occur at irregular times.	\mathbb{N}			
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.				

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 Walls, fences, and exits, including exterior windows, are inspected for \boxtimes defects once each shift. Daily procedures include: Perimeter alarm system tests; П \boxtimes (b)(7)ePhysical checks of the perimeter fence; and Documenting the results. Visitation areas receive frequent, irregular inspections. \boxtimes **ACCEPTABLE** ☐ **DEFICIENT** REPEAT FINDING ☐ AT-RISK **REMARKS:**

The facility conducts sec	curity inspections and logs them int	to a computerized bar code system wh	ich maintains a permanent record of all
inspections.		, ,	T P T T T T T T T T T T T T T T T T T T
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(b)(6), (b)(7)(C) / 03-25 **AUDITOR'S SIGNATURE**

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.				The Jailer has designated the classification officers to conduct evaluations of detainees requiring placement in the SMU for administrative reasons.
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.				All detainees placed in Administrative Segregation are reviewed by the classification officers prior to placement in Administrative Segregation. However, there is no subsequent copy of an order provided to the detainee.
 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?	\boxtimes			Supervisory staff conduct this review per the Jailer.
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.				Detainees are allowed to review decisions; however, are not provided copies of the decision and justification for each review.
 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. 			×	There have been no detainees housed in Administrative Segregation in excess of 30 days.
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.			\boxtimes	There have been no detainees housed in Administrative Segregation in excess of 30 days.
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.				
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	\boxtimes			
The SMU is:				
 Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition. 				

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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COMPONENTS	YES	No	NA	REMARKS
All cells are equipped with beds.				
Every bed is securely fastened to the floor or wall. The second of the secure of the second of				
 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 administrative segregation area provides for single cells for all detainees.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	\boxtimes			
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. 				All privileges and activities are logged into a computerized bar code system and are maintained in a permanent log.
A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays.				A health care professional only visits a detainee upon request or when medications are needed by the detainee.
Procedures comply with the "Visitation" standard. The detainee retains visiting privileges; and The visiting room is available during normal visiting hours.				
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 Separately. As a group? Are legal materials brought to them? 				
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	\boxtimes			
 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). 				

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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REMARKS:

Detainees placed in administrative segregation are reviewed by the booking/classification officers as designated by the Jailer. The facility should ensure regular health care professional visits are made to the Administrative Segregation area.

(b)(6), (b)(7)(C) / 03-25-10**AUDITOR'S SIGNATURE / DATE** REPEAT FINDING

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.				
The sanctions for violations committed during one incident are limited to 60 days.				Sanctions for violations are limited to a maximum of 60 days per infraction. Disciplinary policy is outlined in the facility's Procedures and Policy Manual.
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.				A completed disciplinary segregation order accompanies the detainee into the SMU; however, the detainee does not receive a copy. The facility allows the detainee to review the order and the copy is then placed into the detainee's detention file.
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.				Detainees do not receive a written copy of decisions and supporting reasons for their continued housing in the SMU.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.				
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.				
 Living conditions in disciplinary SMUs remain the same regardless of behavior. If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	\boxtimes			
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.				
The quarters used for segregation are: Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition.				
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.				
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?	\boxtimes			The SMU provides single cells for all detainees.
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.				The facility does not utilize dry cells.
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.	\boxtimes			
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	\boxtimes			

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

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. 				All activities and privileges are scanned into a permanent computer log.
 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.				A health care professional does not visit every detainee in disciplinary segregation every week day as required. A detainee must submit a request for medical treatment (sick call slip) to be seen by a medical professional.
SMU detainees are allowed visitors, in accordance with the "Visitation" standard.	\boxtimes			
 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. 				
All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	\boxtimes			All detainee-related activities are scanned into a computerized log utilizing a bar code.
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).				

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

COMPONENTS	YES	No	NA		REMARKS	- 4.8
 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. 					REMARKS	
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT F	INDING	

REMARKS:

All detainees housed in the SMU are housed in single cells and provided with hygiene items and other materials as required by the NDS. Copies of their disciplinary summary are reviewed with them; however, they are not provided a copy. A medical professional does not see each detainee housed in the SMU each weekday as required, but rather only on request. The facility should ensure regular health care professional visits are made to the Disciplinary Segregation area.

(b)(6), (b)(7)(C) 3 / 03-AUDITOR'S SIGNATU

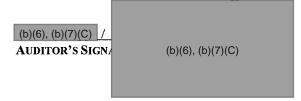
TOOL CONTROL

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.

COMPONENT		YES	No	NA	REMARKS
There is an individual who is responsible procedure and an inspection system to insu	are accountability.		×		There is no individual designated as bring responsible for tool control. Tool control procedures are developed and utilized by the Boone County Maintenance Department (not associated with the jail) and the kitchen.
Department heads are responsible for imp departments.	lementing this standard in their				
Tool inventories are required for the:					A tool inventory is maintained in the food service department; however, no other departments have tools or a tool inventory.
 The facility has a policy for the regular inv. The policy sets minimum time line necessary documentation. ICE facilities use AMIS bar code 	es for physical inventory and all labels when required.				The facility does not have a tool control policy that sets minimum time lines for physical inventory with necessary documentation.
The facility has a tool classification system to: Restricted (dangerous/hazardous) Non-Restricted (non-hazardous).					Tools are not classified according to restricted and non-restricted tools.
Department heads are responsible fo procedures.					A Lieutenant is responsible for tools in the kitchen and has implemented a tool control procedure.
The facility has policies and procedures in parked and readily identifiable.					Tools assigned to the kitchen are not marked.
in such a way that missing to	ored tools are accountable. hat can be mounted) are stored ol is readily notice.				Tools in the kitchen area are stored in an open area and are accessible to anyone assigned to the area.
Each facility has procedures for the issuance			\boxtimes		The facility does not have procedures for the issuance of tools to staff and detainees.
The facility has policies and procedures to The policy and procedures include: • Verbal and written notification; • Procedures for detainee access; ar • Necessary documentation/review	nd		\boxtimes		The facility does not have a policy and procedure that addresses these issues.
Broken or worn out tools are surveyed and and secure manner.	disposed of in an appropriate	\boxtimes			
All private or contract repairs and maintena ICE, or other visitors, submit an inventory nto or departure from the facility.		\boxtimes			
ACCEPTABLE	□ Deficient □	AT-RISK			REPEAT FINDING

REMARKS:

The facility does not have one individual who is responsible for developing a tool control procedure and an inspection system to ensure accountability of all tools in the facility. The kitchen area is the only location inside the secure perimeter where tools are utilized; however, there is no system for the classification of tools as hazardous and non-hazardous. Tools in the kitchen are also accessible to anyone entering the area.



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 compliance. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of П employment. Supervisors maintain records for each vehicle operator. Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and П 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; \Box 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. (b)(7)(E)officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are 0)(7)(E \Box П qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. Before the start of each detail, the vehicle is thoroughly searched. Positive identification of all detainees being transported is confirmed. All detainees are searched immediately prior to boarding the vehicle by staff \Box controlling the bus or vehicle. The facility ensures that the number of detainees transported does not П exceed the vehicles manufacturer's occupancy level. are provided to all transporting officers. The vehicle crew conducts a visual count once all passengers are on board and seated. Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. Policies and procedures are in place addressing the use of restraining П equipment on transportation vehicles. Officers ensure that no one contacts the detainees. • (b)(7)(E) officer remains in the vehicle at all times when detainees are П П П present. Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by П dieticians utilized by ICE.

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
 The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. 				
Vehicles have: • • • (b)(7)e				
The vehicles are clean and sanitary at all times.				
Personal property of a detainee transferring to another facility is:				
The following contingencies are included in the written procedures for vehicle crews: • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors				
ACCEPTABLE DEFICIENT	AT-RISE	(REPEAT FINDING

REMARKS:

All transportation is hand	
(b)(6), (b)(7)(C) / 03-25 AUDITOR'S SIGNATURE	(-)(-), (-)(-)

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
Written policy authorizes staff to respond in an immediate-use-of- force situation without a supervisor's presence or direction.				Written policy is outlined in the facility's PPM.
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	\boxtimes			
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	\boxtimes			
The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	\boxtimes			
When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. • Under staff supervision.				
Staff members are trained in the performance of the Use-of-Force Team Technique.				Per the training lieutenant, all staff members on the (b)(7)e are trained. This training is approved by the KDOC.
All use-of-force incidents are documented and reviewed.				
 Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 				
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	\boxtimes			
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	\boxtimes			
Standard procedures associated with using four-point restraints include: • Soft restraints (e.g., vinyl); • Dressing the detainee appropriately for the temperature; • A bed, mattress, and blanket/sheet; • Checking the detainee at least every 15 minutes; • Logging each check; • Turning the bed-restrained detainee often enough to prevent soreness or stiffness; • 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 facility does not utilize four-point restraints. Detainees requiring restraint are placed into a (b)(7)e and are under the direct supervision of staff.

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALLOTHER 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
The shift supervisor monitors the detainee's position/condition every two hours. • He/she allows the detainee to use the rest room at these times under safeguards.	\boxtimes			
All detainee checks are logged.	\boxtimes			All checks are logged into and maintained in a computerized bar code system.
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. 				
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	\boxtimes			
Protective gear is worn when restraining detainees with open cuts or wounds.				
Staff documents every use of force and/or non-routine application of restraints.				
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. 				All officers receive training in self-defense and confrontation avoidance in pre-service training and annually thereafter.
In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	\boxtimes			All UOF incidents are fully documented.
☐ ACCEPTABLE ☐ DEFICIENT	☐ AT-RISK			REPEAT FINDING

REMARKS:

All UOF incidents in the facility are fully documented. Staff are trained in confrontation avoidance; and when possible, they utilize a trained $_{(b)(7)e}$ when force becomes necessary.

(b)(6), (b)(7)(C) / 03-25-10 AUDITOR'S SIGNATURE / D. (b)(6), (b)(7)(C)

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.				The ICE Enforcement Agent (IEA) stated weekly announced and unannounced visits do not occur.	
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.				Scheduled weekly visits are not conducted. The IEA stated he is at the facility three to four times each week when he brings in a detainee.	
Scheduled visits are posted in ICE detainee areas.				No schedule of visits is posted in the detainee area.	
Visiting staff observe and note current climate and conditions of confinement at each IGSA.				The IEA comes to the facility to check the detainee phones and note current climate and conditions of confinement of detainees.	
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.	\boxtimes				
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 notified of their right to correspond with ICE staff through the detainee handbook and this is also reflected on the booking form which the detainee signs.	
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

REMARKS:

In addition to no schedule of visits being posted in detainee areas of the	ne facility, the IEA advised neither: weekly announced and
unannounced visits occur; nor are scheduled weekly visits conducted.	The IEA stated that he is at the facility three to four times each week
when he brings in a detained	and the state of t

(b)(6), (b)(7)(C) / 03-: AUDITOR'S SIGNATURE / 1

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.

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				The Field Office makes the transfer notification to the legal representative of the detainee.
Notification includes the reason for the transfer and the location of the new facility.				
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. 				This is outlined in the facility's policy on transfers.
The detainee is provided with a completed Detainee Transfer Notification Form.				The IEA stated that the Field Office provides the detainee with a copy of this form.
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.				A Form I-203, Order to Detain or Release, is used.
 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. 				
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 DIHS staff.
For medical transfers, transporting officers receive instructions regarding medical issues.				The facility's medical staff provides the transferring ICE officers with information regarding any medical needs associated with the detainee.
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.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.	\boxtimes			Sack lunches are provided when needed.
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	\boxtimes			

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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. **COMPONENTS** YES No NA REMARKS Files are forwarded to the receiving office via overnight mail no later than \boxtimes one business day following the transfer. **ACCEPTABLE** ■ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING

REMARKS:

The facility complies with the requirements of the standard.

(b)(6), (b)(7)(C) / 03 AUDITOR'S SIGNATURE