
Condition of Confinement Inspection Worksheet

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

This Form is to be used for Inspections of Facilities used over 72 Hours



Performance-Based National Detention Standards Inspection Worksheet for Over 72 Hour Facilities

5-11-09 update

- ☐ Intergovernmental Service Agreement (IGSA)
☐ ICE Service Processing Center (SPC)
☒ ICE Contract Detention Facility (CDF)

Name Broward Transitional Center	
Address (Street and Name) 3900 North Powerline Road	
City, State and Zip Code Pompano Beach, Florida 33073	
County Broward	
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) (b)(6), (b)(7)c Facility Administrator	
Name and Title of Lead Compliance Inspector (b)(6), (b)(7)c LCI	
Date[s] of Review From 11/30/2010 to December 2, 2010	
Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other	

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is “Performance-Based”?

Unlike “policy and procedures” that focus solely on what is to be done, performance-based policy starts with a focus on the results or outcomes that the required procedures are expected to accomplish. Each National Detention Standard has been revised to produce Expected Outcomes that are clearly stated. Each standard reflects the overall mission and purpose of the agency and contributes to the goal that has been articulated.

Expected Practices found in the National Detention Standards (NDS) represent what is to be done to accomplish the Expected Outcomes that will meet the Purpose and Scope of the Detention Standard.

Outcome Measures (**key indicators**) are identifiers used to verify whether a facility is accomplishing the goals, of the outcomes expected.

The original 38 NDS have been revised into 41 performance-based standards. During the development four new standards were added to include: News Media, Searches of Detainees, Sexual Abuse and Assault Prevention and Intervention and Staff Training. The two standards on Special Management Units were condensed into one standard. The new performance-based standards have incorporated American Correctional Association (ACA) Adult Local Detention Facility standards, which are the industry benchmark.

Worksheet Overview

There are two sets of Detention Review Worksheets that are used to assess facility compliance with the National Detention Standards (NDS). Both sets of these worksheets are derived from the policy and procedures set forth in the NDS. The G324A is for use with facilities that house detainees for over 72 hours, while the G324B is for use with facilities that house detainees for less than 72 hours.

The G324B is for use with facilities that house detainees less than 72 hours and does not contain the same amount of requirements as the G324A in the following NDS: Correspondence and Other Mail, Escorted Trips for Non-Medical Emergencies, Law Libraries and Legal Material, Legal Rights Group Presentations, Marriage Requests, Recreation, and Voluntary Work Program. These standards were not included in the prior version of the G324B, due to the short term nature of detention in facilities that are used for 72 hours or less. These sections are now included in the G324B but only to the extent that facilities seek applicability and are not mandated by ICE. For example, voluntary work programs are not required, but if detainees work, compliance with the NDS is required.

Mandatory components in several of the standards have been indicated in the worksheets. Mandatory items are those which must be met in order for the facility to receive a “*Meets Standards*” rating for that standard. These mandatory components typically represent life safety issues. A “*Does Not Meet Standards*” on one of these components is very serious. Failing to meet one of the mandatory components means that the overall facility review rating will be “*Does Not Meet Standards*”.

The *Outcome Measures Worksheet* section is completely new for the performance-based NDS. The Outcome Measures Worksheets will be completed by facility staff prior to arrival of the review team at the facility to be reviewed. Ideally, this information will be maintained on a continuous basis by the facility as part of a **key indicators** database to provide a perpetual record for monitoring facility performance. The Reviewer in Charge (RIC) will review facility outcome measures data and provide analysis of the data to describe facility performance and trends.

Worksheet Completion

Reviewers are required to complete each item within each section of the G324A and G324B Detention Review Worksheets. Worksheets are in a uniform format with 5 columns with NDS purpose and scope cited at the top of the worksheet. Column 1 contains the NDS standard assessment component. Columns 2-4 are provided for the ratings assigned to each component that is assessed. While there is a column titled N/A or not applicable, the N/A rating should be used rarely and only when applicable. The remarks section is provided for reviewers to include details on each rating that may raise a question such as the “Does Not Meet Standard” or “N/A” ratings.

A Remarks section is also provided at the end of the outcome measures section for summary comments and analysis of outcome measures data. The information included in the worksheet components remarks sections and in the final summary remarks section should be considered for inclusion in the reviewer report that summarizes the overall facility review process.

Outcome Measures Completion

The Outcome Measures Worksheets will be completed by facility staff prior to arrival of the review team. Ideally, this information will be maintained on a continuous basis by the facility as part of a **key indicators** database to provide a perpetual record for monitoring facility performance. Data should be verified as accurate by the facility before including it in the database. Outcome measure data is intended to assess facility issues related to the NDS, so care should be taken to focus on ICE related issues. For example when computing the average daily population (ADP), assess and provide information on the ICE population.

The RIC will review facility outcome measures data and provide analysis of the data to describe facility performance and trends. In a few instances outcome measures are not provided for some the NDS because after careful consideration of the standard the assessment process has been determined to be more process oriented in nature.

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Section I SAFETY

- 1 Emergency Plans**
- 2 Environmental Health and Safety**
- 3 Transportation (By Land)**

PART 1 – 1. EMERGENCY PLANS

This Detention Standard ensures a safe environment for detainees and employees by having in place contingency plans to quickly and effectively respond to any emergency situations that arise and to minimize their severity.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainees are protected from: <ul style="list-style-type: none"> Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> What type of training and how often? 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive specified training during pre-training and annually thereafter. Staff receive a handout providing the same information.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Methods of information dissemination include incident reports, shift reports and verbal communications via chain of command.
5. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A staff member has been designated to manage emergency plans.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All staff receive training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The plans address the following issues: <ul style="list-style-type: none"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The plan addresses all bulleted items. The last review of emergency plans was in excess of one year; however, revisions to procedures were properly communicated during the lapse period.
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contingency plans are laid out in a manner consistent with this component.

PART 1 – 1. EMERGENCY PLANS

This Detention Standard ensures a safe environment for detainees and employees by having in place contingency plans to quickly and effectively respond to any emergency situations that arise and to minimize their severity.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contingency plans require notification of the local police during an emergency. Police make the decision whether to notify neighbors of the emergency.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility does not have any cooperative contingency plans with Local, State or Federal agencies.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility does not conduct mutual aid drills or tests of the emergency plans with other agencies or departments.
14. All staff receive copies of the Facility Hostage policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive handouts that provide need to know information regarding hostage situations. They (staff) do not receive the plan in its entirety. There is no specific language in this NDS requiring that employees receive the complete hostage plan. The facility satisfies the requirements stipulated in the NDS.
15. Staff are trained (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes a contractual translation service that would be employed for hostage situations, should language be a factor in hostage negotiations. The service is provided by telephone.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plans include color coded facility diagrams and photos of the utility controls for easy sight identification.

PART 1 – 1. EMERGENCY PLANS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All indicated plans within this component are in place. Plans relative to adverse weather and evacuation are well thought out, given potential for hurricanes in this area.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 1. EMERGENCY PLANS

☒ Meets Standard
☐ Does Not Meet Standard
☐ N/A
☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility meets the requirements of this standard, except as noted below.

The facility does not have any cooperative contingency plans with Local, State or Federal agencies and does not conduct mutual exercises. The facility administrator shared that he has made efforts to secure such agreements, but they likely will not happen because government agencies are unwilling to enter into a memorandum of understanding with a private entity.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a well managed system for storing, issuing and maintaining inventories for hazardous materials.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chemical inventory systems were observed throughout the facility. The maintenance area uses a digital scale to ensure accurate notations on chemical logs.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Master MSDS binders are located in Safety, Maintenance and the Medical Department. The files were up- to- date and included the required safety notification information.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> Wear personal protective equipment. Report hazards and spills to the designated official. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MSDSs are located in all areas where chemicals are used or stored.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervise detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning chemicals issued to the laundry, kitchen and housing units are properly secured and supervised.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposal of excess hazardous chemicals is discussed during orientation training.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff receive a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training records revealed that advance chemical use and control training is part of employee and detainee orientation.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Officer conducting the fire and safety inspections has a degree in safety and over 30 years of experience in the field.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed that the facility fire plan has been approved by the local authority having jurisdiction.
17. The plan requires: <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire drills are conducted quarterly. Copies of the control center logs are attached to the actual fire drill, ensuring timely notification and evacuation.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barbering operations are conducted in a designated room. The physical facilities and equipment meet the sanitation requirements.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical Services policy provides guidance on the disposal of used sharps.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill kits were noted throughout the facility.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stericycle is the licensed medical waste contractor disposing of bio-hazardous waste on a regular basis.
27. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Broward County Water and Wastewater Services routinely test the potable water supply for this facility. Water quality reports were available for review.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed that emergency generators are tested weekly. Quarterly load bearing tests and annual generator maintenance is conducted by Power Depot.
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not conduct operations that require hazardous materials storage rooms, therefore, none exist.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Health Services Administrator (HSA) conducts visual inspections of the medical facility. Written inspections noting the area condition are not currently recorded or maintained. The HSA developed a form during this review to record daily inspection findings.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Medical Services Quality Assurance/Infection Control Committee reviews the facility environmental health program quarterly. This review specifically evaluates sources of injuries and modes of transmission of communicable diseases.
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

This facility has been under renovation for over a year. Areas affected by the renovations include the food service dining room and administrative areas. The construction representative reported that fire and city inspections are scheduled. The facility cannot take over full control of the areas until they pass inspection. To date, there is no firm completion date.

The physical plant is a converted two story motel with exterior doors which enter into a main courtyard. Approximately four detainees share each room. The lighting, heat and air are controlled in the individual rooms. The facility is fully sprinkled. The renovated areas have been linked with the existing fire alarms systems which annunciate in the control center. New magnetic fire doors have been installed during the renovation process, enhancing the level of fire protection for the detainee population.

The facility has a well managed chemical control system in place which includes documented staff and detainees training. There are two fully equipped designated rooms for barbering operations. Detainees reported that they felt the facility was safe and clean.

The Health Services Administrator (HSA) developed a form during this review to record daily inspections of the medical services area.

This facility does not conduct operations that require hazardous materials storage rooms, therefore, none exist.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 1 – 3. TRANSPORTATION (BY LAND)

This Detention Standard prevents harm to the general public, detainees, and staff by ensuring that vehicles are properly equipped, maintained, and operated and that detainees are transported in a secure, safe and humane manner, under the supervision of trained and experienced staff.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual driver records are obtained every six months, via the Florida Motor Vehicle Registration Agency for verification of driving records of transportation unit staff.
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector monitored an actual "pre-trip" inspection being conducted on a transportation van by one of the assigned drivers. The checklist used was comprehensive.
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The transportation coordinator maintains a running total of driving hours to ensure compliance with this component.
8. (b)(7)(e) officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)(e) qualified officers per vehicle. (b)(7)(e) driver transports an empty vehicle. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 3. TRANSPORTATION (BY LAND)

This Detention Standard prevents harm to the general public, detainees, and staff by ensuring that vehicles are properly equipped, maintained, and operated and that detainees are transported in a secure, safe and humane manner, under the supervision of trained and experienced staff.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. All uniformed officers (b)(7)e in accordance with the (b)(7)e and/or applicable contract policy when transporting detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the transportation unit locker room during the course of drivers readying themselves for duty. (b)(7)e (b)(7)e
14. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Officers ensure that no one contacts the detainees. • (b)(7)e officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The vehicle crew inspects all Food Service meals 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff interviews and transportation unit procedures support compliance with this component. A cleaning schedule, was observed, that verifies related cleaning functions for transportation vehicles.
19. Vehicles have: • • • • (b)(6), (b)(7)c	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility complies with all facets of this component. It should be noted that while vehicles are (b)(7)e
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 3. TRANSPORTATION (BY LAND)

This Detention Standard prevents harm to the general public, detainees, and staff by ensuring that vehicles are properly equipped, maintained, and operated and that detainees are transported in a secure, safe and humane manner, under the supervision of trained and experienced staff.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> Is inventoried. Is inspected. Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> Attack Escape Hostage-taking Detainee sickness Detainee death Vehicle fire Riot Traffic accident Mechanical problems Natural disasters Severe weather Passenger list is not exclusively men or women or minors 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All required procedures are located in the transportation manual that accompanies each transport.

PART 1 – 3. TRANSPORTATION (BY LAND)

☒ **Meets Standard**
 ☐ **Does Not Meet Standard**
 ☐ **N/A**
 ☐ **Repeat Finding**

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The transportation unit consists of (b)(7)e vehicles owned by the facility and (b)(7)e vehicles owned by ICE. The vehicles owned by ICE (b)(7)e are dedicated to the facility and are routinely driven by facility staff. This unit provides transportation services to ICE within Central and Southern Florida.

The facility is compliant with this standard.

(b)(6), (b)(7)c / December 2, 2010
 Reviewer's Signature / Date

Performance-Based National Detention Standards

Section II SECURITY

- 4 Admission and Release**
- 5 Classification System**
- 6 Contraband**
- 7 Facility Security and Control**
- 8 Funds and Personal Property**
- 9 Hold Rooms in Detention Facilities**
- 10 Key and Lock Control**
- 11 Population Counts**
- 12 Post Orders**
- 13 Searches of Detainees**
- 14 Sexual Abuse and Assault Prevention and Intervention**
- 15 Special Management Units**
- 16 Staff-Detainee Communication**
- 17 Tool Control**
- 18 Use of Force and Restraints**

PART 2 – 4. ADMISSION AND RELEASE
This Detention Standard protects the community, detainees, staff, volunteers, and contractors by ensuring secure and orderly operations when detainees are admitted to or released from a facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility and ICE National Handbook are provided to every person admitted to this facility.
2. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff conducts an assessment during the intake process.
3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees admitted to this facility are low risk, non-criminal, Level 1 detainees.
4. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility stated that no strip searches were conducted during the past year
6. The "Contraband" standard governs all personal property searches. IGSAs and CDFs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff complete 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff complete paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 4. ADMISSION AND RELEASE

This Detention Standard protects the community, detainees, staff, volunteers, and contractors by ensuring secure and orderly operations when detainees are admitted to or released from a facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. ICE staff enter all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The orientation material is available in English, Spanish and Creole.

PART 2 – 4. ADMISSION AND RELEASE

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

In addition to the facility handbook and orientation video shown during in-processing, another formal orientation is held at 8 a.m. on the next business day, after admission. This orientation provides an opportunity to provide detailed information about the facility and respond to any detainee questions or concerns. Both types of orientation were observed.

In accordance with facility policy, a strip or body cavity search would be based on probable cause and requires the prior approval of the Facility Administrator and ICE. No strip or body cavity searches were reported during the past year.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 2 – 5. CLASSIFICATION SYSTEM

This Detention Standard protects the detainees, staff, contractors, volunteers, and the community from harm, and contributes to orderly facility operations, by requiring a formal classification process for managing and separating detainees that is based on verifiable and documented data.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE handles classification at this facility. Only Level 1, low risk, non-criminal, detainees are housed at this facility.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility intake staff reviews the available information, but ICE performs the classification.
4. Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility only houses Level 1 detainees and reassessments are only conducted when based on new information.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook describes how to appeal a classification designation.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 5. CLASSIFICATION SYSTEM

This Detention Standard protects the detainees, staff, contractors, volunteers, and the community from harm, and contributes to orderly facility operations, by requiring a formal classification process for managing and separating detainees that is based on verifiable and documented data.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 5. CLASSIFICATION SYSTEM

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

ICE handles the classification of detainees at this facility. Only Level 1, low risk, non-criminal, detainees are held at this facility.

Females and males are housed separately. The facility does allow male and female family members to visit and eat certain meals together. These activities are controlled and supervised by staff.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 2 – 6. CONTRABAND

This Detention Standard protects detainees and staff and enhances facility security and good order by identifying, detecting, controlling, and properly disposing of contraband.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is a minimum security facility that allows significant freedom in allowable personal property. The majority of contraband is found during the intake process.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Procedures do not require that a religious authority be consulted prior to confiscation of religious items.
6. Staff follow written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not use hard contraband for official use.
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facilities with Canine Units only use them for contraband detection.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not have a canine unit, nor does it utilize canine units on facility grounds.

PART 2 – 6. CONTRABAND

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

Except as noted below, the facility is in compliance with this standard.

Facility procedure does not require consultation with a religious authority before confiscating a religious item. It should be noted that detainees are allowed significant freedom in what religious items are allowed.

The facility does not have a canine unit, nor do they utilize canine units.

Hard contraband is not retained for official use.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

PART 2 – 7. FACILITY SECURITY AND CONTROL

This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of sign-in logs reflects compliance with this component.
2. At least one male and one female staff are on duty where both males and females are housed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility conducts an annual staffing analysis that is used for budgeting and roster management.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control center staff receives on the job training and must demonstrate proficiency with related equipment and communication systems.
6. Policy restricts staff access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees do not have access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Communications are centralized in the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central Control is secure and properly equipped for its function.
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A listing of employee contact information is maintained in the Control Center.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In addition to a printed phone listing, the Control Center can initiate an automated telephone call back system for all staff. This system is maintained and is tested quarterly.
12. Staff make watch calls every half-hour between 6 PM and 6 AM.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	While the facility does not make security call ins as mentioned in this component, the standard allows the facility administrator the option on not requiring such calls.
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 7. FACILITY SECURITY AND CONTROL

This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicular traffic does not enter sensitive areas of the facility.
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicular traffic does not enter sensitive areas of the facility.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicles do not enter sensitive areas of the facility.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perimeter security is adequate for this facility. There have been no escapes in the last year. Public access is controlled.
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Housing area searches occur at irregular times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Locking devices have been removed from all detainee rooms. Security posts have line of sight with the room exteriors.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While there is no SMU, searches of housing units are documented on weekly search forms.

PART 2 – 7. FACILITY SECURITY AND CONTROL

This Detention Standard protects the community, staff, contractors, volunteers, and detainees from harm by ensuring that facility security is maintained and that events that pose a risk of harm are prevented.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not have a Special Management Unit.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not have a Special Management Unit.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's system of inspections seems to be effective in identifying concerns and having those concerns remedied.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is no perimeter fence.
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is no perimeter fence at this facility.

FACILITY SECURITY AND CONTROL

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility is compliant with this standard.

Vehicular traffic does not enter sensitive areas of the facility.

The facility does not have a Special Management Unit.

There is no perimeter fence.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

This Detention Standard ensures that detainees' personal property is safeguarded and controlled, specifically including funds, valuables, baggage and other personal property, and that contraband does not enter a detention facility.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation of the admission process confirmed that facility staff process detainee property in the presence of the detainee.
4. (b)(7)e officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)e officers verify funds and valuables.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e officers verified the funds and valuables for two detainees processed during this review. Forms and logs also require (b)(7)e signatures.
5. For IGSA's and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Two detainees, observed during processing, received the original inventory form after processing.
7. Staff forward an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff search arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Property discrepancies are reported to the Administrative Lieutenant.
10. Staff follow written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy outlines the procedures for handling lost or missing property as required by ICE.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

This Detention Standard ensures that detainees' personal property is safeguarded and controlled, specifically including funds, valuables, baggage and other personal property, and that contraband does not enter a detention facility.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff obtain a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff obtains forwarding addresses during the admissions process.
14. It is standard procedure for two officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observed the distribution process of the G-589s during the admission of two detainees. G-589's were distributed, as required by the standard.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Staff tag large valuables with both a G-589 and an I-77.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The supervisor verifies the accuracy of every G-589.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The supervisor ensures that: <ul style="list-style-type: none"> Detainee funds are, without exception, deposited into the cash box; Every property envelope is sealed. All sealed property envelopes are placed in the safe. Large, valuable property is kept in the secured locked area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff secure every container used to store property with a tamper-proof numbered strap.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff uses an alternative method of tamper-proof tape to ensure the security of the storage property containers.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

This Detention Standard ensures that detainees' personal property is safeguarded and controlled, specifically including funds, valuables, baggage and other personal property, and that contraband does not enter a detention facility.

☐ **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	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The I-77 number was excluded from the logbook entries and added during this review.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A Supervisory Immigration Enforcement Officer is not required to accompany the detention staff for a weekly audit in a CDF facility. Local Supervisory ICE officers do not conduct weekly property audits.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The facility positively identifies every detainee being released or transferred.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures are in place to notify supervisory personnel of lost/damaged property claims. Record reviews indicate that one lost property claim was investigated since the last facility review.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

☒ **Meets Standard**
☐ **Does Not Meet Standard**
☐ **N/A**
☐ **Repeat Finding**

Remarks: (Record significant facts, observations, other sources used, etc.)

Staff interviews, work practice observations and logbook and policy reviews verify that this facility ensures the security of detainee funds and personal property.

The I-77 number was excluded from the logbook entries and added during this review.

A Supervisory Immigration Enforcement Officer is not required to accompany the detention staff for a weekly audit in a CDF facility. Local Supervisory ICE officers do not conduct weekly property audits.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
6. Detainees are not held in hold rooms for more than 12 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
7. Male and females detainees are segregated from each other at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
23. The maximum occupancy for the hold room will be posted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

This Detention Standard ensures the safety, security, and comfort of detainees temporarily held in Hold Rooms pending further processing. The maximum aggregate time an individual may be confined in a facility's Hold Room is 12 hours.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
25. Staff does not permit detainees to smoke in a hold room.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments." Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no hold rooms.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

This facility has no hold rooms. ICE detainees have been pre-screened and classified by ICE for placement at this minimum security facility. Hold rooms are not a necessary part of the intake process as detainees are promptly processed and moved into general population housing.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 2 – 10. KEY AND LOCK CONTROL

This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The individual designated as the facility key control officer is a certified locksmith, with a significant amount of training in detention grade locking systems.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training module used for staff training in key control was reviewed. The locksmith conducts the staff training.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support ongoing preventative maintenance and care of locking systems.
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No unauthorized locks were observed in detainee accessible areas. The facility has removed non-authorized locks from living areas and detainee accessible areas.
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with this component was confirmed by our team CI with expertise in the area of environmental safety.
14. The operational keyring sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 10. KEY AND LOCK CONTROL

This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> Identifiable Numbers of keys on the ring are cited? Keys cannot be removed from issued key rings 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key rings consist of secured cable loops. Brass tags identify the ring and number of keys on the ring.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A complete set of emergency keys are located in (b)(7)e
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes an automated (b)(7)e
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key control training is provided as part of the pre-service and annual in-service training curriculum.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While the key control officer is the only person who may add or remove a key from a key ring, he must first have authorization from the facility administrator.
25. The splitting of key rings into separate rings is not authorized.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 10. KEY AND LOCK CONTROL

<input checked="checked" type="checkbox"/> Meets Standard	<input type="checkbox"/> Does Not Meet Standard	<input type="checkbox"/> N/A	<input type="checkbox"/> Repeat Finding
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Remarks: *(Record significant facts, observations, other sources used, etc.)*
The facility complies with this standard.

(b)(6), (b)(7)c December 2, 2010
Reviewer's Signature / Date

PART 2 – 11. POPULATION COUNTS

This Detention Standard protects the community from harm and enhances facility security, safety, and good order by requiring that each facility have an ongoing, effective system of population counts and detainee accountability.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A formal count is conducted at least once on each shift. An 8:00 p.m. master count includes a face-to-photo identification.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector monitored a formal count. Fifteen minutes prior to count, all detainees are directed back to their living areas or secured in their work area for count.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Formal counts in all units take place simultaneously.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Officers do not allow detainee participation in the count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A face-to-photo count follows each unsuccessful recount.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Officers positively identify each detainee before counting him/her as present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security officers receive training in count procedures as part of the pre-service and annual in-service training programs.

PART 2 – 11. POPULATION COUNTS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The facility is in compliance with this standard.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 2 – 12. POST ORDERS

This Detention Standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties, and responsibilities of that post.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is tasked with keeping Post Orders current and generating revisions as authorized by the facility administrator.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All Post Orders were found to be current.
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sign off sheets were reviewed and support compliance with this component.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The only armed posts are</p> <div style="background-color: #cccccc; padding: 5px; text-align: center;">(b)(7)e</div>

PART 2 – 12. POST ORDERS

This Detention Standard protects detainees and staff and enhances facility security and good order by ensuring that each officer assigned to a security post knows the procedures, duties, and responsibilities of that post.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The Post Orders for housing units track the daily event schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The daily event schedule is part of the housing area Post Orders.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit logs and Post Orders were reviewed and are consistent with the provisions of this component.

PART 2 – 12. POST ORDERS

☒ Meets Standard
☐ Does Not Meet Standard
☐ N/A
☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility is in compliance with this standard.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 2 – 13. SEARCHES OF DETAINEES

This Detention Standard protects detainees and staff and enhances facility security and good order by detecting, controlling, and properly disposing of contraband.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no strip searches reported during the past year.
7. Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no body cavity searches reported during the past year.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no "dry cells" at this facility.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Canines have not been used at this facility during the past year.

PART 2 – 13. SEARCHES OF DETAINEES

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

There are no "dry cells" at this facility.

Facility policy adequately addresses the requirements of this standard.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

PART 2– 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policies BTC 1-15 and Health Services 707 details the components of the program, which are compliant with the required elements of the standard. The program begins with review of prevention, awareness and reporting of sexual abuse and assault with the detainee upon intake by the intake officer. Screening for high risk behavior is done at intake by nursing staff and detainees determined to be high risk are transferred.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy is signed and dated by the Field Office Director.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A sample of new employee and annual training records was reviewed, which indicated that staff are trained initially and annually. The training outline indicated that prevention and intervention issues required by the standard are addressed in the training.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The intake form that the detainee signs acknowledging receipt of various items including the receipt of the handbooks and acknowledgement that he was verbally informed of the sexual assault program and where it is located in the handbooks.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notices are posted on bulletin boards adjacent to the telephones, the intake area and the waiting rooms of the clinic.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The one page, tri-fold brochure is available in the intake and medical waiting rooms. Brochures are replenished by the Facility Director of Compliance.

PART 2– 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nurses ask screening questions during the initial intake screening of each detainee to determine high risk potential. ICE is notified of detainees determined to be high risk to assault others or who have a sex offender history and the detainees are transferred. Detainees determined to be high risk for victimization are referred to the social worker for assessment and counseling and then to a mental health professional, if indicated. If the mental health professional determines the detainee to be at high risk for victimization, then notification to ICE is made and the detainee is transferred.
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility report indicates that there have been no incidents of detainee on detainee sexual abuse or assault in the past year.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility report indicates that there have been no incidents of sexual abuse or assault by staff on a detainee in the past year.
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There were no records to review to determine the effectiveness of interventions, given there have been no incidents reported in the past year.
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Policy requires the specific elements of this component, however, given there were no incidents reported, there was no documentation to review to determine compliance.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2– 14. SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to policy and staff statements, detainees would be referred to the community hospital for medical assessment, treatment and collection of evidence. The detainee would also be referred to the community based mental health clinic for counseling and support services regarding sexual abuse.
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

☒ **Meets Standard**
 ☐ **Does Not Meet Standard**
 ☐ **N/A**
 ☐ **Repeat Finding**

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility reported that there have been no cases of sexual assault or abuse during the past year.

The Facility Compliance Director serves as the Sexual Abuse and Assault Coordinator and has the responsibility for logging, tracking and reporting of statistical data regarding sexual abuse and assaults. In addition, he is responsible to ensure the required Sexual Assault Awareness Brochure is available to detainees and that the Sexual Assault Awareness Notice is properly posted.

This facility was previously a motel and detainees are housed in the individual rooms, usually four detainees per room. Sexual assault awareness notices are not placed in each room, but are placed in prominent general access areas, specifically the intake waiting area, clinic waiting rooms and bulletin boards by the detainee telephones.

Screening is initially performed by nurses at intake to identify detainees at high risk for assaultive and abusive behavior or at high risk for victimization. ICE is notified of detainees in either high risk category and the detainee is transferred. A review of twenty five medical records indicated compliance with the intake screening requirement. None were identified as high risk.

Training is provided to new employees and repeated annually. (b)(7) nurses and (b)(7) detention staff responded correctly when asked what they would do if a detainee reported to them that they had been sexually abused or assaulted.

Although there have been no incidences, the facility staff appear knowledgeable of the importance of this issue and their duty to report. The facility policy and procedures are compliant with this standard.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

PART 2 – 15. SPECIAL MANAGEMENT UNITS

This Detention Standard protects detainees, staff, contractors, volunteers, and the community from harm by segregating certain detainees from the general population in Special Management Units (SMUs) with an Administrative Segregation section for detainees segregated for administrative reasons and a Disciplinary Segregation section for detainees segregated for disciplinary reasons.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
4. (MANDATORY) Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: <ul style="list-style-type: none"> The time and date of the visit, and Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: <ul style="list-style-type: none"> In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. In CDFs and IGSA facilities form I-888 or a comparable form is used. In SPCs and CDFs: <ul style="list-style-type: none"> By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> Whether the detainee ate, showered, exercised, and took any medication, and Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
16. Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted for some cases (violent, mentally disordered, bizarre behavior, suicidal).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
18. The facility administrator (or designee) visits each SMU daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
23. Detainees in an SMU may write and receive letters the same as the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
24. Detainees in an SMU ordinarily retain visiting privileges.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard. Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> Supported by compelling security concerns, For the shortest period required for security, and Fully documented in the SMU housing logbook. ICE/DRO is notified every time law library access is denied. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
38. Recreation for detainees in the SMU is separate from the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security. Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances. The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Written order for administrative SMU placement, pending disciplinary hearings, are prepared at the facility prior to the detainee's transfer. A review of documentation shows that the detainee receives a copy of the order within acceptable timeframes. The violation report and disciplinary report follow the detainee.</p>
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This facility has no Special Management Unit.</p>

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMU placements at this facility.
48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMU placements at this facility.
49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification. A similar review is done every 30 days thereafter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMU placements at this facility.
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act. The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility).</p> <p>The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation.</p> <p>When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no Special Management Unit.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The facility does not have a Special Management Unit and therefore procedures required for placing detainees in a SMU are not needed or used at this facility.

This facility houses non-criminal ICE detainees, who have been classified by ICE as low security risks. In the event that a detainee becomes a danger to him / herself or others, that person is promptly transported to an increased security facility for handling. Detainees who need to be housed administratively in a Special Management Unit are transferred to a facility that can accommodate that need. This inspector reviewed cases where detainees needing special management housing were immediately transferred to an increased security facility, which could provide SMU housing. Incident reports and / or detainee violation reports follow the transfer.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

This Detention Standard enhances security, safety, and orderly facility operations by encouraging and requiring informal direct and written contact among staff and detainees, as well as informal supervisory observation of living and working conditions.

It also requires the posting of Hotline informational posters from the Department of Homeland Security Office of the Inspector General.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logbooks were reviewed that documented compliance with this requirement.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scheduled visits occur on Tuesday and Thursday.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Visiting ICE staff observe and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The National Detainee Handbook describes the right to correspond with ICE, but the facility handbook does not.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

ICE staff are assigned to this facility on a full time basis. Facility and ICE staff were observed having frequent interaction with detainees. Detainees have adequate means to present any issues of concern to facility or ICE staff.

(b)(6), (b)(7)c December 2, 2010
Reviewer's Signature / Date

PART 2-17. TOOL CONTROL

This Detention Standard protects detainees, staff, contractors, and volunteers from harm and contributes to orderly facility operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintenance supervisor is designated as the tool control officer. This individual performs all provisions of this component.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has no warehouse. Protocol requires that tools are held or delivered directly to the tool control officer.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of all four areas identified in this component reflects adequate control.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not have an electronics shop. All other referenced areas have tool inventories.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site tool inventories were available in all areas inspected that have tools assigned.
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous) • Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2-17. TOOL CONTROL

This Detention Standard protects detainees, staff, contractors, and volunteers from harm and contributes to orderly facility operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector checked tools in maintenance, armory and food service and found tools maintained in a manner consistent with this component. Spot checks and tool counts coincided with the site inventory.
12. Tools removed from service have their shadows removed from shadow boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Sterile packs are stored under lock and key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with this component was confirmed by our team medical CI.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> Verbal and written notification. Procedures for detainee access. Necessary documentation/review for all incidents of lost tools. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no tools reported missing this past reporting period. Policy and procedure is consistent with requirements of the component.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector monitored contractors being processed out with tools. The inventory was checked by the gate officer and was found to be consistent with the inventory taken during admittance.

PART 2-17. TOOL CONTROL				
This Detention Standard protects detainees, staff, contractors, and volunteers from harm and contributes to orderly facility operations by maintaining control of tools, culinary utensils, and medical and dental instruments, equipment, and supplies.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Hoses longer than three feet in length are classified as a restricted tool.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hoses are stored outside the secure perimeter in a shed. Hoses are tagged, inventoried and treated as tools in a manner consistent with the requirement.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scissors are not used for in-processing.
PART 2-17. TOOL CONTROL				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility is in compliance with this standard.

The facility has no warehouse for receipt of tools. They are delivered directly to the tool control officer.

Scissors are not used for in-processing.

(b)(6), (b)(7)c December 2, 2010
 Reviewer's Signature / Date

PART 2 – 18. USE OF FORCE AND RESTRAINTS

This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. 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, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While policy and procedure does not specifically state the circumstances identified in this component, it does require that staff only use force as a last resort in the defense of self or others. In all cases, the staff member must attempt to resolve the situation, absent use-of-force.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure contains a use-of-force continuum that is consistent with the standard requirement.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While the title "Confrontation Avoidance Procedures" is not specifically used in facility policy and procedure, the concept and expected practices are consistent with requirements.
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no calculated use-of-force incidents this past reporting period. Should calculated use-of-force be necessary, the facility does have (b)(7)e that is trained in team use-of-force techniques.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility (b)(7)e (b)(7)e is trained in use-of-force team techniques. This inspector reviewed applicable training curriculum and files to confirm compliance.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use-of-force in any form is a rare occurrence at this facility. One use-of-force incident was recorded this past reporting period and documentation included notation of medical review. Four video cameras are in storage in the armory, Central Control, North Housing Officer's Station, and South Officer Housing Station. These cameras are ready for use by (b)(7)e for among other things, calculated use-of-force incidents.
10. Staff: <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not use medication for restraint purposes.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e is equipped for and trained in procedures that attempt to prevent injury and exposure to communicable diseases. Team members are trained in body fluid cleanup.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> • Soft (nylon/leather) restraints. • Dressing the detainee appropriately for the temperature. • A bed, mattress, and blanket/sheet. • Checking the detainee at least every 15 minutes. • Logging each check. • Repositioning detainee often enough to prevent soreness or stiffness. • Medical evaluation of the restrained detainee twice per eight-hour shift. • When qualified medical staff are not immediately available, staff position the detainee "face-up." 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize four/five point restraints. Detainees in need of such restraint are transported to an increased security facility.
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Four and five point restraints are not used at the facility.
15. All detainee checks are logged.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Checks are not necessary, as this restraint method is not used.
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> • Medical staff are 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not have a Special Management Unit.
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> • Medical personnel are consulted 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Policy and procedure does not provide guidance on how to restrain a pregnant detainee.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff document every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

This Detention Standard authorizes staff to use necessary physical force, after all reasonable efforts to otherwise resolve a situation have failed, and only for protection of self, detainees, or others, for prevention of escape or serious property damage, or to maintain the security and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. • Specialized training is given to officers ensuring they are certified in all devices approved for use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e
26. The use of canines is restricted to contraband detection purposes only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canines are not used at the facility.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

Policy and procedure does not provide guidance on how to restrain a pregnant detainee.

The facility does not use medication for restraint purposes or utilize four/five point restraints.

The facility does not have a Special Management Unit.

Canine units are not utilized at the facility.

(b)(7)e

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

This Detention Standard promotes a safe and orderly living environment for detainees by expecting detainees to comply with facility rules and regulations and imposing disciplinary sanctions to control the behavior of those who do not.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a written disciplinary system that is consistent with requirements of this component.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> corporal punishment deviations from normal food service clothing deprivation bedding deprivation denial of personal hygiene items loss of correspondence privileges deprivation of legal access and legal materials deprivation of physical exercise 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provisions of this component are part of the orientation process and are included in the facility handbook provided to detainees.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All bulleted provisions of this component are posted in English and Spanish in day rooms and in the recreation yards.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 3 – 19. DISCIPLINARY SYSTEM

This Detention Standard promotes a safe and orderly living environment for detainees by expecting detainees to comply with facility rules and regulations and imposing disciplinary sanctions to control the behavior of those who do not.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and procedures, records of proceedings and interview with disciplinary panel chair persons support compliance with this component.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not have a Special Management Unit. Allowable sanctions are not exceeded.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is language in policy and procedures that speak to the handling of confidential sources.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 3 – 19. DISCIPLINARY SYSTEM

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The facility is has few occasions where the formal use of the disciplinary process is required.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

Section IV CARE

20 Food Service

21 Hunger Strikes

22 Medical Care

23 Personal Hygiene

24 Suicide Prevention and Intervention

25 Terminal Illness, Advance Directives, and Death

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service program is under the direct supervision of a professionally trained Food Service Manager (FSM). The FSM has many years of food service experience and is Serv-Safe certified. The cook supervisor responsibilities are determined by the FSM and are posted in the food service department.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed that training related to detainee issues is conducted annually for the food service personnel.
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dough cutters are used in lieu of knives at this facility. Kitchen utensils are inventoried and maintained on a shadow board within an approved locked cabinet. The on-duty cook supervisor controls the key that locks the device.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dough cutters are used in lieu of knives and are not required to be physically secured to a work station. Staff routinely monitors the condition of the kitchen utensils as part of the daily inspections.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yeast is not used or stored at this facility. Nutmeg and other spices are secured in a cabinet, separate from the other dry storage items.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security personnel assigned to food service conduct daily searches of the detainee work area.
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FSM monitors the population counts conducted by the custodial personnel assigned to food service.

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. (MANDATORY) There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed that detainee workers are checked in by the security personnel, while cook supervisors conduct daily health checks.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> • Safe work practices and methods. • Safety features of individual products/ pieces of equipment. • Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of several detainee training records confirmed that required safety training is conducted.
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Three hot meals are served daily at this facility.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The new serving line is equipped with "sneeze guard" protection.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Facility uses a 42 day menu cycle.
18. (MANDATORY) A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility master-cycle menus and medical/religious diets undergo a complete nutritional analysis annually by the corporate registered dietitian. All menus are certified, prior to being incorporated into the food service program.

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The cook supervisor has the authority to make menu changes. Documentation for substitutions are reviewed and approved by the FSM.
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pre-packaged Kosher meals are used for detainees who wish to be placed on the common-fare program.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious diet requests are submitted to the FSM or the Programs Manager. Programs contacts local religious leaders for guidance and approval for placement on a religious diet.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service department has been renovated and is awaiting final approval to open the dining room. A modified satellite feeding program is currently in place. Food items are prepared and placed on a steam table serving line. Meals are plated and served in disposable containers.
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperatures taken during this review fell within the "safe" temperature range. Hot foods were above 140 degrees, while cold items were below 40 degrees.
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee orientation records include training on personal hygiene, sanitary techniques for food handling and equipment training.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. (MANDATORY) The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written policy and practice confirmed that weekly food service inspections are conducted and documented.

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. (MANDATORY) Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food service renovations shutdown the dish machine on August 8, 2010. Dish machine temperature logs were available for review from November 2009 through August 18, 2010. Those records indicated that the dish machine maintained appropriate temperatures for each wash cycle.
37. (MANDATORY) Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refrigeration/freezer unit temperatures are documented on daily production logs.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security personnel assigned to food service routinely conducts shakedowns. Food service personnel are trained and may assist.
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE supervisory staff routinely participates in dining room supervision.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility conducts monthly and quarterly cost analysis of all food service programs.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47. Staff comply with the ICE requirements for "food receipt and storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 20. FOOD SERVICE

This Detention Standard ensures that detainees are provided a nutritionally balanced diet that is prepared and presented in a sanitary and hygienic food service operation.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service renovation includes the expansion of the dining room. The new space provides more space to ensure adequate time for the consumption of daily meals.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Florida State Department of Health conducts annual inspections at the facility. The last inspection received a satisfactory rating in September of 2010.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. (MANDATORY) The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Erlich Pest Control conducts monthly pest control operations for this facility. The FSM oversees the contract for this service.
FOOD SERVICE				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The food service area has been under renovation for over a year. The kitchen and dining room have been expanded to better accommodate the detainee population. The facility is awaiting approval from local fire and city inspectors to open the dining facility. Food preparation is conducted in the new spacious kitchen. Meals are currently plated and served in disposable containers. Detainees pick up their meals from food service for consumption in their rooms or in the yard.

The FSM is professionally trained, while supervising (b)(7)e cook supervisors and (b)(7)e. Approximately (b)(7)e detainees work in food service daily. Food service personnel appeared knowledgeable in food preparation and handling techniques. The sanitation level was excellent. Three attractive hot meals are served daily. Detainee interviews offered positive comments about the quality and quantity of food served at this facility.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 4 – 21. HUNGER STRIKES

This Detention Standard protects detainees' health and well-being by monitoring, counseling and, when appropriate, treating any detainee who is on a hunger strike.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 513 addresses the procedures for the management of detainees during a hunger strike. The facility reports no hunger strikes within the past year. Three nurses and two detention officers were interviewed regarding the procedure. The officers correctly answered that they immediately report any detainee who is refusing to eat to the nurses. The nurses confirmed that staff usually notify them of any refusals to eat and that they talk to the detainee to assess why he is refusing to eat, counsel the detainee regarding the importance of eating and of dealing with concerns through appropriate channels. There is a nursing protocol that guides this initial intervention. If the detainee refuses to eat for 72 hours, then he is referred to the facility physician and the facility procedure and treatment protocol is implemented.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires notification to specific staff including ICE. Notification is done verbally via phone call and in writing via email and a standardized form.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All direct care staff receive training during new employee training and annually regarding recognizing a hunger strike, the importance of referring the detainee for assessment and notification requirements. Staff directly supervising detainees notify the nurse and their own immediate supervisor.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy is compliant with this component. The Health Services Administrator (HSA) stated that the detainee would be admitted to the infirmary for observation.

PART 4 – 21. HUNGER STRIKES

This Detention Standard protects detainees' health and well-being by monitoring, counseling and, when appropriate, treating any detainee who is on a hunger strike.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to staff, the detainee would be placed in the infirmary observation room.
6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedure is compliant with this component. The HSA stated that the height, weight and vital signs are taken upon admission to the infirmary and at least every twenty four hours.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A consent specific to treatment and assessment during a hunger strike would be obtained according to the HSA.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the HSA, if the detainee refuses to sign the consent, or rejects medical evaluation or treatment, he would be asked to sign a refusal form. If he refuses to sign, (b)(7) staff will sign verifying the detainee's refusal of treatment and refusal to sign the form.
9. Unless otherwise directed by the medical authority, staff deliver three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA confirmed that three meals per day would be offered to the detainee, regardless of any statements made by the detainee. Response to the offering of the tray is included on the hunger strike form.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee would have access to water, as each infirmary room has a sink. The standard requires that an adequate supply of drinking water be provided, thus facility practice would be compliant with this component.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires this component and the HSA states that the detainee would have no commissary privileges.
12. Staff are directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA states that all intakes would be recorded per facility policy.

PART 4 – 21. HUNGER STRIKES

This Detention Standard protects detainees' health and well-being by monitoring, counseling and, when appropriate, treating any detainee who is on a hunger strike.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The medical staff have written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a physician treatment guideline and a supporting nursing protocol for the assessment and treatment of a detainee on a hunger strike. The treatment guidelines specify lab tests to be performed, measurement of intake, ongoing assessment and monitoring, the involvement of, and coordination with, mental health professionals, and when to refer to a medical or psychiatric facility. A specific form is utilized to document all assessments, observations, interventions, treatment, the response/actions of the detainee, and reports to designated staff. Daily reports of the detainee's status would be made to appropriate facility and ICE staff. The HSA confirms that this would be the process followed.
14. Staff document all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA explained that all interactions with the detainee are documented on the Hunger Strike form.
15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All direct care staff receive training during new employee training and annually, regarding recognizing a hunger strike, the importance of referring the detainee for assessment and notification requirements. Medical staff receives the same training and in addition, receive training specific to assessment and intervention techniques initially and annually via in-service programs, as evidenced by a review of the training guidelines utilized and the training records of nurses.

PART 4 – 21. HUNGER STRIKES

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility reports that they have had no detainees go on a hunger strike during the past year. Facility policy and medical protocols are compliant with the standard, but given there were no strikes, there was no documentation to review in order to validate that practice is compliant with policy. The detention officers interviewed gave an immediate and correct response as to their responsibility to observe for signs of detainees refusing to eat and their duty to report. Nurses and the Health Services Administrator also correctly responded to their roles. Based on the compliance of the facility policy and the responses of staff, this standard is compliant.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires compliance with state laws and standards of professional practice. Required medical and nursing staff licenses were checked and all are current and on file. State certificates and licenses for pharmacy, x-ray and lab were observed and are current and displayed as required. According to policy and job descriptions, nurses practice under the supervision of the facility physician. Nursing protocols, approved by the GEO Medical Director and the facility physician, guide treatment provided by nursing staff.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The intake medical assessment process was observed twice. (b)(7)e nurses observed were consistent in doing the intakes. The nurse first completed the tuberculosis (TB) screening form and then the detainee received a chest x-ray. The digital x-ray machine which has been in use for approximately eight months, is located in a secure, access limited to medical staff only room, in the intake area. The digital equipment allows for immediate transmission to the radiologist for a quick report. The report is received electronically and is printed and filed in the medical record. The actual x-ray and the report are also stored in the vendor specific computer for subsequent access, if needed. The x-ray process was observed. A review of twenty five medical records indicated that all x-rays were done at the time of the intake assessment and all reports were received in less than four hours, including those done between the hours of 10:00 p.m. and 6:00 a.m.. New detainees remain in the intake or medical waiting areas and are not placed into general housing until the x-ray report is received indicating it is negative for TB. After the x-ray, the nurse completes the screening questions for past history and current medical and mental health status. These screening forms are completed only by nurses and include all of the components required by the standard. The nurse also verbally explains to the detainee how to access medical services and has the detainee sign a statement acknowledging this information was told to him. The consent for routine treatment is also signed by the detainee at this time. The nurse obtains height, weight, vital signs, and pregnancy test on all females, and writes an intake nursing progress note summarizing the findings of the intake screening and subsequent referrals and nursing actions.</p>

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
3. (MANDATORY) The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy 303 requires a facility specific staffing plan that is signed by the Health Services Administrator, Facility Administrator and Regional Health Authority. Current staffing was in accordance with the current, signed staffing plan. Staffing includes (b)(7)(e) full time contract physician, (b)(7)(e) RN health services administrator (HSA), (b)(7)(e) RNs, (b)(7)(e) PNs, and (b)(7)(e) medical records clerk. This is an increase of (b)(7)(e) PNs over last year's staffing. Nurses are present twenty four hours per day, seven days per week. Typical staffing is (b)(7)(e) nurses on the day shift and (b)(7)(e) on the night shift, Monday through Friday, and (b)(7)(e) on each shift on the week-end, with at least (b)(7)(e) RN every shift. The nurses work twelve hour shifts. The HSA and the physician are on-call twenty four hours per day, seven days per week. Twenty five medical records were reviewed. Times of intake screening, chest x-ray, pregnancy testing, physical exams, response to medical and nursing sick calls, administration of medications, transcribing of orders, and completion of discharge summaries, were audited. All services were provided within the required time frames or less, indicating that staffing is adequate to support the scope of services expected.</p>

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
4. (MANDATORY) Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are given both an ICE National Handbook and a facility handbook during the intake process. The facility handbook is available in English, Spanish, and Creole. A summary of medical services provided and how to access the services is in both of the handbooks. Form HS-118 is signed by each detainee during intake indicating that he/she was informed verbally about how to access health services and that he/she received the handbooks. The facility contracts with a telephonic interpreter service which is available twenty four hours per day, seven days per week. The service is referred to as the Translation Line and is available on any telephone. This service is frequently utilized for detainees requiring an interpreter. A log of each call is maintained for each phone indicating the date and time, detainee, language requested, and purpose. A review of the logs in the intake and medical areas indicated an approximate average of twenty calls per day for medical use, including intake medical assessment. Observation of the use of the service indicated it was easy to use.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has twenty four hour on-site nursing services as evidenced by the staff schedule. The HSA and physician are on-call twenty four hours per day. Emergency medical, dental and mental health care that cannot be provided at the facility is provided at the local community hospital. Emergency transportation is provided by the community ambulance service.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon hiring, the new employee is referred by the facility human resources department (HR) to a local vendor for TB testing (PPD) and the opportunity to receive the Hepatitis B vaccine. The facility HR department tracks these referrals and results. Direct care staff are required to have annual TB tests. HR tracks this process. The vendor provides these services on-site at the facility on a quarterly basis.
7. Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All health care services are provided by the physician or a licensed nurse. The health services administrator maintains a tracking system to ensure all providers have current licenses. There is a current license verification form from the appropriate State Boards for each nurse and the physician. Each nurse is provided a detailed job description with their letter of offer for employment, as evidenced by auditing a sample of both RN and LPN employee files.
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are given both a standard ICE handbook and a facility handbook during the intake process. The facility handbook is available in English, Spanish and Creole. A summary of medical services provided and how to access the services is in both of the handbooks. Form HS-118 is signed by each detainee during intake indicating that he/she was informed verbally about how to access health services and that he/she received the handbooks. All medical files of the twenty five audited contained the receipt form. All detainees interviewed indicated that they had been informed of how to see medical staff and were given the handbooks. The Translation Line is utilized when needed for detainees requiring an interpreter as evidenced by the call log.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff includes a physician, Registered Nurses, and Licensed Practical Nurses. The applicable state board issues licenses. The HSA prints on-line licensure verification for each employee and maintains a file and tracking system to ensure current licensure. Current licensure was observed as on file for all medical staff.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none">When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Newly admitted detainees receive initial medical, dental and mental health screening by a nurse during the intake process, within 12 hours of arrival. Review of twenty five medical records validate this process and, in fact, indicated that the screening was typically performed within two hours. Detention officers do not perform the initial screening, however, they do ask several questions immediately upon arrival to determine the general condition of the detainee, in order to determine whether or not immediate medical attention is required, prior to the routine nurse screening.
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Translation Line as earlier described, is utilized when needed for detainees requiring an interpreter. A Translation Line Call Log is maintained for each phone documenting each time this service is utilized. A review of the log in the intake areas indicated an average use of twenty calls per day, many that were noted as for intake assessment.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical clinic consists of three exam rooms and two observation/infirmiry rooms, providing adequate private space for detainee interviews, examination and treatment. No care was observed being provided in the common infirmiry space observable by other detainees. Each exam room was furnished with its own equipment.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical clinic is located off the main hallway of the building that includes the new cafeteria and kitchen and the courts. Entry to this hallway is through the security check point at the main entrance. Access is restricted and controlled by a detention officer. Detainees in the clinic for any reason are under direct supervision of assigned detention staff.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two waiting rooms, one for males and one for females. Both have access to a water dispenser and a bathroom. They are separated by the nurse's station and have separate entrances to the clinic.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention officer is assigned to the clinic, whenever detainee services are being provided or a detainee is admitted to the infirmary. The officer maintains a log of all detainee movement in and out of the clinic.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Both waiting rooms have access to a water dispenser and a bathroom.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The clinic space includes a large, designated medical records room that is for the storage and processing of records. The room is adjacent to the nurse's station, is locked and access is limited to the medical staff. The Medical Records Clerk's work space is located in this room. Current and archived records are filed separately. The medical record is separate from the detainee detention file.
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Form 118, consenting to treatment, is signed and dated by the detainee during the intake process. Observation of the intake process and twenty five medical file reviews validated compliance with this standard. All files had the consent present and it was signed and dated during the admission process.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees sign a form, authorizing consent to release their medical record(s) to outside sources when a request is received. The same consent form is utilized prior to release of a detainee's medical record to himself/herself.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The standard requires advance notice, but does not require a specific amount of time. A review of thirty two, 203 notifications indicated that all, but six were sent the day prior to the detainee departure date.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedure requires a transfer summary be prepared for each detainee, prior to departure and that the summary be sent with the detainee and a copy kept in the medical record. Appropriate medical records to ensure continuity of care should also be sent with the detainee. Review of twenty five medical records indicated compliance with this component.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation of folders prepared for departure indicated compliance with this component. The transfer notice is also taped to the outside of the envelope.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a TB screening assessment and a chest x-ray at the time of the admission process, therefore the PPD (TB Test) is not administered. The x-ray is performed on-site and the results are received within four hours. This process allows for the detainees to be definitively cleared of infectious tuberculosis prior to placement in general housing, without the 3 day wait required for the PPD test results and the additional wait for the diagnostic x-ray. All medical files reviewed indicated the detainee received a chest x-ray during the intake process, always in less than four hours and the majority within two hours.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mental health screening is done by a nurse during the intake medical screening process before assignment to housing, utilizing a specific set of screening questions. Detention officers do not perform the intake mental health screenings. The review of medical files indicated that mental health screenings were done on all twenty five during the intake process.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedure requires that the physician or RN reviews the intake medical and mental health screening forms and performs the physical exam within twenty four hours. The facility physician trains the RNs to perform this exam. Any detainee who is identified as having an acute or chronic condition during the intake assessment of the RN exam is referred to the physician. The medical file review indicated compliance with this standard, as all intake assessments were reviewed by the RN within twenty four hours, and more typically within the same day.
26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Health appraisals and physical examinations are conducted on all detainees within 14 days of arrival. A review of medical records indicated compliance with this component, as all physical exams were completed within fourteen days, more typically in less than two days.
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>28. Staff provide detainees with health- services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sick call request slips are available in English, Spanish and Creole and are obtained by the detainee from detention staff. The detainee places the request in one of several locked boxes, clearly marked for this purpose. Boxes are located in the detention officer's office area, at the pill window and in the hallway by the clinic entrance. The requests are collected daily by nursing staff and addressed every morning, seven days per week, during nursing sick call. Interviews of nurses, detention staff and detainees all validated this process as their responses were consistent.
29. (MANDATORY) 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has nurses on-site twenty four hours per day. Facility policy outlines emergency procedures, such as man-down and disaster response. Any staff may call 911 for emergency medical response when indicated.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility physician and health services administrator are on-call 24/7.
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone listings for all medical staff, the local hospital, ambulance (911), and facility department heads is available to all staff via computer listing and postings.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy is specific to procedures and requires regular emergency drills. Documentation of drills is maintained by the health services administrator and drills were held in accordance with policy.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training requirements for all direct care staff include training on responding to health related situations within four minutes, CPR and First Aid and the use/location of first aid kits. The facility training coordinator schedules new employee and annual refresher training for all staff. A log of training due, notification to staff for scheduled training and training completed is maintained by the training coordinator. Each employee has an individual training record validating training provided/completed. A random sample review of training files indicated that staff receive the training initially and annually and are in compliance with this policy and standard.
34. Where staff are used to distribute medication, a health care provider properly trains these officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All prescription medications are administered by nurses. Non-prescription (over the counter-OTC) medications ordered by the physician are administered by the nurses routinely. Inhalers and some OTC medications are allowed to be kept on person for self administration by the detainee. Detention officers distribute only one of three OTC medications (aspirin, Tylenol, antacid) at the request of the detainee from a stock supply in the officer's office. Training is provided to officers by nursing staff during initial new employee training and annually. Facility policy details procedures for this process. Observation of the detention officer process and review of the documentation indicated compliance with facility procedure and this component.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy is very specific and comprehensive regarding pharmaceutical management. The facility uses a mail order pharmacy vendor. The vendor does on-site inspections on a regular basis to ensure compliance with sound standards and expected practices. In addition, the state health department performs annual inspections and issues licensure authorizing the operation of the facility pharmacy. The latest Pharmacy Vendor and Health Department reviews were reviewed and noted as compliant. All pharmaceuticals are stored in this secure space. Observation of medication administration by nursing demonstrated compliance with standards of nursing practice.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include:</p> <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy 405.1 and 405.2 address pharmaceutical management and prescribing medication practices. The facility utilizes the ICE DIHS Formulary and the ICE non-formulary request form/process. The facility formulary is consistent with the ICE formulary. Physician medication orders include duration of administration and/or stop dates and cannot be refilled without a physician order. There are specific procedures for ordering, receiving/reconciling, administration, storage, disposal, and reclamation of medications. In accordance with policy, state pharmacy law and vendor agreement, un-used medications, originally provided to the facility from the pharmacy vendor, are returned to the vendor for cost credit. Controlled substances, needles and syringes are behind second locks, separate from each other and other pharmacy supplies. All sharps are stored in the Pharmacy. Perpetual inventories/sign-outs are maintained for each and counts at each shift change are performed and documented to verify correct counts. Verification of current counts was performed. Observation of logs, policy, processes, and staff interviews indicate understanding and compliance with this component.</p>
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility pharmacy is located within the clinic and accessible only through the clinic. It has one point of entry via a solid core door that automatically locks when closed. Access is limited to nursing staff only, as is clearly posted at the pharmacy door. The pharmacy has solid walls and a solid ceiling. Acoustical tiles are suspended to reduce sound, but the ceiling and walls join just above to create a barrier, thus a solid ceiling. All medications are stored in the secure pharmacy.</p>

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> Administration and management in accordance with state and federal law. Supervision by properly licensed personnel. Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. Accountability for administering or distributing medications in a timely manner and according to physician orders. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainee's medications are administered via a locking pass-through window drawer. The window is covered with a pull down, solid, metal guard, and both the guard and the drawer are locked when not in use. Medication administration is performed only by nurses and these nurses are supervised by the health services administrator. The pharmacy is inspected and monitored by both the pharmacy vendor and the state health department. A medication administration record (MAR) is used to document all medications administered to detainees. Established medication distribution times are posted. Nurses specifically call for detainees who do not show up for their medications. Observation of the process indicated compliance.</p>
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medication distribution is in accordance with facility procedures which are compliant with standards of nursing and pharmacy practice. A medication administration record (MAR) is utilized to record all medications given to detainees. A comparison of physician orders to MARs indicated compliance with the orders.</p>
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy prohibits administration of medication by detainees. Medications are distributed by nurses. Observation of the medication administration process indicates compliance with this component.</p>

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training is provided to officers by nursing staff during initial new employee training and annually. Facility policy details procedures for this process. Observation of the process and review of the documentation indicated compliance with facility procedure and this component. The guidelines for officers are posted in the officer's office for reference.
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special medical needs are communicated to the Facility Administrator, department heads and ICE via a group email list. Several email notifications were reviewed.
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specialists in the community provide medical services to detainees, when required care cannot be provided at the facility. A referral is made by the facility with ICE approval. Approval for these referrals is requested via the online ICE TAR system.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include:</p> <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy 521 includes numerous Physician Practice Guidelines for management of infectious and communicable diseases, including but not limited to, tuberculosis, hepatitis, HIV, and avian flu. These guidelines include diagnostic and treatment guidelines, isolation requirements, reporting requirements per state regulations, and follow-up procedures. All detainees with a communicable disease are followed in Chronic Care Clinic. The facility coordinates with and utilizes the resources of the local Health Department to augment teaching and counseling resources. Informational brochures and posters are provided by the health department. Facility staff are trained initially and annually on blood-borne pathogens and communicable disease prevention, as evidenced by the training records. Education is provided to the detainee by the RN during Chronic Care Clinical visits.</p> <p>The diagnosis of a detainee with a communicable disease is not shared with detention staff. Medical information is not shared without the consent of the detainee. All media requests are handled per policy 6.06, which requires that all requests are handled through specifically designated administrative and/or corporate staff. Hepatitis vaccine and flu vaccine are offered to all staff. Flu vaccine is offered to all detainees. Pneumonia vaccine is offered to detainees with chronic conditions.</p> <p>The health services administrator collects data regarding infectious and communicable disease prevalence in the facility and reports this data for evaluation and planning purposed via the Quarterly Report /Quarterly meeting with the Facility Administrator and other Department Heads.</p>

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not have a negative pressure room, therefore, detainees diagnosed with a communicable disease are sent to the local hospital for treatment. Detainees with communicable diseases that do not require a negative pressure room are isolated and treated in the infirmary.
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All new arrivals receive a chest x-ray. Detainees are held in intake until the results are obtained, which is typically within two hours. This process was confirmed by observation and medical records review.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees suspected of or diagnosed with TB are referred to the local hospital, as the facility has no negative pressure room.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility vans are utilized to provide non-emergent transportation to an off-site medical provider. Mode of transport is decided by the medical provider. Notification of off-site appointments and any special transportation requirements is provided by medical staff to the transportation team via email group list. A standard form is utilized to communicate with the transportation department. Several of these notification forms were observed during preparation to distribute.
49. Detainee who requires close, chronic, or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Physician Practice Guidelines are utilized to guide care plans and include components for reporting, prevention and directions to direct care staff. Of the twenty five charts reviewed, five were chronic care. In all cases, there was a physician treatment plan, nurse assessment and documentation of education provided.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All female detainees are tested for pregnancy, upon arrival, during the intake process via urine dip-stick testing. If pregnant, the detainee will be seen immediately, or no later than the next regular physician clinic, by the physician who will make a referral to the community OB provider, who will direct all OB care from that point. All pregnant women receive modified diets as appropriate to include additional calories and snacks, pre-natal vitamins and education regarding pregnancy from the RN during chronic care clinic. The facility social worker assesses the detainee for any non-medical needs and provides counseling, as appropriate. At the time of the inspection, there was one pregnant detainee who was admitted ten days prior to the review and an appointment with the obstetrician was already scheduled.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
51. (MANDATORY) Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 510 Chronic Care and 701 Special Needs address procedures for the management of detainees with chronic conditions. The physician writes an order to place the detainee in chronic care clinic and orders testing, treatment and follow-up via orders. All detainees in the chronic care clinic will see the RN monthly or more often if physician ordered. The detainee will see the physician as ordered or at least every three months. The Chronic Care Clinic RN Coordinator tracks detainee's physician and nursing appointments, progress or lack thereof, compliance with treatment, and several other factors and communicates information regarding detainee health status to the physician. Detainees will have an annual physical exam if they are still at the facility. Observation of the Chronic Care Clinic process, tracking, scheduling, and QA process for this group of detainees indicates compliance with the policy. Five medical records of detainees in chronic care clinic indicated compliance with this standard.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Designated staff with a need to know, including the Facility Administrator, are notified via group email notification of detainee special needs. This email system was observed.

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This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dental screening is performed by a RN during the intake screening process. Acute and emergent conditions are referred to the physician for evaluation and referral to a community dentist, if necessary. The referral is approved by ICE. Care is routinely limited to pain management, treatment for infection and extractions. Detainees in residence for longer than six months can be referred to the dental provider for additional services, if they request those services. Of the files reviewed, four complained of dental concerns and all were referred to the dental provider after assessment by the facility physician.
54. (MANDATORY) Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per policy 505, mental health screening is performed by nurses during the intake process utilizing an approved screening tool. If the screening indicates the need for additional assessment, the detainee is referred to the facility physician, who will make a referral to the community mental health provider clinic, Compass Health. Two charts reviewed showed compliance with the referral procedure for detainees screened as needing further mental health assessment. Compass Health develops the treatment plan and provides a copy to the facility, including the need for a return appointment if indicated.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees who experience an acute mental health episode are referred by the facility physician to the community mental health provider, Compass Health. Such referral was observed on day two of the inspection.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical and mental health encounters are conducted in treatment or interview rooms that are private. Female staff attends appointments with female detainees when the provider is a male. Observation of numerous detainee services provided in the clinic indicated that services were always provided in private and with gender appropriate supervision.
57. (MANDATORY) Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 505 requires the comprehensive evaluation be done within 14 days of the referral. These evaluations are performed by mental health professionals at the community based mental health provider clinic. Of the two records reviewed that were referred, both received the evaluation by a licensed mental health provider within the required fourteen days.
58. (MANDATORY) Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify: <ul style="list-style-type: none"> • The conditions under which restraints may be applied; • The types of restraints to be used; • How a detainee in restraints is to be monitored; • The length of time restraints are to be applied; • Requirements for documentation, including efforts to use less restrictive alternatives; and • After-incident review. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The health services administrator reports that they do not do medical or mental health restraints at the facility and the monthly reports indicate that there have been none in the past year. Policy 903 Therapeutic Restraints, directs that a detainee requiring such a restraint be sent to the local hospital.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • Document that less restrictive intervention options have been exercised without success; • Detail how the medication is to be administered; • Monitor the detainee for adverse reactions and side effects; and • Prepare treatment plans for less restrictive alternatives as soon as possible. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 107.2 addresses each component of this standard; however, local practice is that involuntary administration of psychotropic medication does not occur at the facility. If a detainee refuses medication that is deemed necessary, then the detainee is sent to the local hospital and ICE will work with the hospital to obtain the necessary court order.
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Initial dental screening is done by a nurse during the intake admission medical screening process. A more comprehensive screening is done by an RN or physician within 14 days, during the physical exam. The file review indicated compliance with this component.
<p>61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 402 addresses the management of first aid kits and includes all elements of this component. There is a list of first aid kit contents, number and location signed by the Facility Administrator and Health Services Administrator. First aid kits are locked. When opened and used, they are brought to the clinic for restocking as soon as possible, within the same shift. All kits are unlocked and inspected monthly by nursing staff. A log is maintained indicating compliance with this standard.
<p>62. An automatic external defibrillator should be available for use at the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has one AED that is located in an exam room in the clinic. The AED is tested daily and a log is maintained.

PART 4 – 22. MEDICAL CARE

This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical and administrative staff all stated that situations requiring the consideration of forced treatments are referred to the local hospital and reported to ICE immediately.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA meets quarterly with the facility administrator in a Q/A meeting that includes the key department heads. The meeting has a formal agenda with both standing, routine agenda items. Minutes are recorded, including assignments and follow up to actions, from the previous meeting. A review of minutes of the past four meetings indicates compliance with this component.
65. (MANDATORY) Biohazard waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is no dental equipment at this facility as that service is provided off-site. Medical equipment and surfaces are decontaminated with Sani-Cloths. Disposable equipment is utilized to avoid cross contamination. Stericycle is the biohazard waste management vendor and they pick up waste every two week's which is documented by a pick-up log.
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 105 requires monthly staff meetings with medical staff to address operational issues and provide in-service education. It also requires quarterly meeting with department heads. Minutes for both of these meeting were reviewed for the past 9 months. The quarterly meeting routinely addresses 19 items reflective of operational statistics that indicate workload, resource needs and trends in health care needs/demands of detainees. GEO regional and corporate staff do operational reviews of the clinic and personal reviews of the physician and HSA annually, utilizing a specific set of performance indicators.

PART 4 – 22. MEDICAL CARE

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The inspection found all applicable components in this standard to be compliant. The facility does not have any SMUs and therefore the component that addresses provision of health care in SMUs is non-applicable.

The facility is ACA Accredited.

The most common detainee languages are English, Spanish and Creole. An impressive practice is the common use of a telephonic language interpretation system to ensure accurate communication with detainees. Logs indicated that the service is utilized about twenty times per day in the clinic. Observation of this resource indicated an easy and efficient resource to ensure that appropriate treatment is provided and communicated to detainees.

Dental, mental health, specialty care, inpatient, and emergency services are provided off-site at the community hospital, local mental health clinic and by individual community providers via contractual arrangements. Pharmacy and laboratory services are provided by national vendors through contractual agreements. Chest x-rays are done in the on-site x-ray room. The x-ray equipment is digital allowing for online transmission of the radiograph to the radiologist for reading and the receipt of a written report within four hours or less. This ability to quickly rule out tuberculosis prevents cases of not yet diagnosed TB from being placed in general housing. All detainees are offered the hepatitis B vaccine and seasonal flu vaccines.

Of significant impact to medical services, the facility has a constant and large turnover averaging seven hundred to eight hundred admissions and the same number of discharges, per month. The large number of detainees requiring intake assessment, follow-up and discharge summaries within short time frames, added to the usual medical needs of 700 resident detainees, results in a very busy clinic. Detainees access medical care by submitting a written sick call or by asking detention staff to notify the clinic. Sick call is provided daily. This process was audited and found to be accessible, respectful of confidentiality and timely.

Review of monthly reports for the past ten months indicate that in addition to admission and intake contacts, on average, the clinic will have in one month over 6000 non-sick-call nursing encounters, 450 nursing sick calls, 500 physician encounters, and will administer medications to over 25% of the population from over 300 prescriptions written. Typically, the facility will have (b)(6), (b)(7)c, two to three pregnant females, three hospitalizations, one emergency room referral, three infirmary admissions, and twenty referrals to off-site specialty care which includes mental health.

All on-site medical services are provided in the secure, limited access clinic that is under constant supervision of a detention officer. New detainee intake assessments can also be done in the intake area in a private, limited access, typically equipped exam room, specifically designed for that purpose. The clinic has three exam rooms, two detainee observation/infirmity rooms, a medical records office, HSA office, pharmacy/dispensary, nurse's station, supply/storage room, biohazard/utility room, and two waiting rooms with bathrooms. Medications are distributed to detainees in the covered, outdoor, central plaza through a secure pill window drawer in the pharmacy. The space is adequate for the services provided and is clean, well equipped and well organized.

Medical staff are GEO employees, except the physician who is contracted. The HSA supervises the clinic staff and manages all medical services. GEO regional health services staff provide clinical and health care management supervision to the HSA and she report locally to the Facility Administrator. The facility physician is supervised by the regional and corporate GEO Medical Directors. Physician and nursing policy, procedure and practice protocols guide daily practice of all health care providers. In addition to the physician and health services administrator, there are (b)(7)e Ns (b)(7)e LPNs and (b)(7)e medical records clerk. Clinical staffing for this facility is considered adequate, however, the addition of a clerical support staff would assist nurses with the large amounts of paper flow and tracking allowing them more time to perform clinical tasks.

Twenty five medical files were reviewed to determine if required services were provided to detainees within the appropriate timeframes and to determine whether medical needs were addressed. Elements audited were times intervals of intake screening, chest x-ray, pregnancy testing, physical exams, response to medical and nursing sick calls, administration of medications, transcribing of orders, chronic care clinic, off-site referrals to specialty care, and completion of discharge summaries.. All services were provided within the required time frames or less, indicating that staffing is adequate to support the scope of services expected and clinic systems exist to facilitate compliance providing the expected services.

Detainee medical files are restricted to medical staff only. They have a standard format and are well organized and securely managed and stored. Each file has a problem list listing acute and chronic medical problems. Physician generated treatment plans are present for detainees with chronic conditions and these detainees are managed in chronic care clinic.

Monthly medical staff meetings and quarterly meeting with administrators and department heads occur and minutes reflect the sharing of workload and performance data, trends, resources, environmental, safety, and operational concerns, and general issues associated with medical services. Corrective action plans are developed and tracked. Observation of operations and interviews of medical, detention, administrative, and ICE staff indicate a supportive and collaborative working relationship between departments.

Policy and procedures are found to be compliant with this standard. Observation of the clinic functions, inspection of the facility, staff and detainee interviews, and medical file reviews, indicate compliance with policy, procedures and this standard and are timely, appropriate and of good quality.

(b)(6), (b)(7)c

/ December 2, 2010

Reviewer's Signature / Date

PART 4 – 23. PERSONAL HYGIENE

This Detention Standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a supply of clothing, linens and personal hygiene items that exceeds the average daily population of detainees in accordance with local policy 4.04...
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are issued two of each item, meeting the requirement of the standard for a CDF.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 23. PERSONAL HYGIENE

This Detention Standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee housing room has one shower. Rooms house no more than six detainees. Monthly water temperature checks are performed by the facility safety manager, as evidenced by a log kept for that purpose. Water temperature is set to be within the 100 -110 degree range and is controlled with a mixing valve.
8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 4 – 23. PERSONAL HYGIENE

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

Issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items meet or exceed the requirements of this standard. Detainees sign an acknowledgement of the receipt of and responsibility for the clothing and bedding issued and rules regarding these items. The exchange schedule is posted. Detainee workers are allowed to exchange clothing more often as appropriate. Detainee kitchen workers change into a white jumpsuit while working in the kitchen. There is a supply of clothing, linens and personal hygiene items that exceeds the average daily population of detainees.

Detainees have access to a commissary for purchase of additional items.

Each housing room has a shower, toilet and sink and houses no more than six detainees, therefore exceeding the standard.

Facility policy and practices are compliant with this standard.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

This Detention Standard protects detainees' health and well being by training staff to prevent suicide by recognize potential signs and situations of risk and to intervene with appropriate sensitivity, supervision, referral, and treatment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility screens and refers detainees identified at risk for suicide; however, they do not provide evaluation, supervision or inpatient mental health treatment services onsite. Mental Health Services policy 706 - addendum, addresses the suicide and intervention plan and is approved and dated by the Facility Administrator.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> Intake screening and referral requirements; The identification and supervision of suicide-prone detainees; Staff training requirements; The management and reporting of suicidal incidents, suicide watches, and deaths; Provision of safe housing for suicidal detainees; Debriefing of any suicides and suicide attempts by administrative, security, and health services staff; Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.; Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Observation and file review indicate that the facility program includes screening of all new admissions using a standardized screening tool, referral of detainees considered to be high risk to the physician for further assessment and referral to the community mental health clinic, if appropriate for evaluation, crisis intervention and treatment.</p> <p>Detainees suspected of suicidal behavior are referred to the medical department for evaluation by the physician, as evidenced by documentation in the medical records and an incident witnessed during the inspection.</p> <p>Detainees considered to be at risk are transferred, as this facility has no isolation room or on-site mental health professionals.</p> <p>All staff are trained on recognizing signs of suicidal behavior and reporting and referral requirements, as evidenced by the review of the training schedule, training module and training records.</p>
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the required training topics, training outline and a sample of training records indicate that all staff receive this training initially and annually in compliance with this component.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

This Detention Standard protects detainees' health and well being by training staff to prevent suicide by recognize potential signs and situations of risk and to intervene with appropriate sensitivity, supervision, referral, and treatment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Effective communication between correctional and health care personnel, Necessary referral procedures, Housing observation and suicide-watch level procedures, Follow-up monitoring of detainees who have already attempted suicide, and Reporting and written documentation procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training outline includes all elements of this component.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> Screening does not occur later than one working day after the detainee's arrival. Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A medical file review indicated that detainees are screened during the admission process by nursing staff, utilizing a standardized tool/form. Screening occurs on the day of arrival, within twelve hours, typically within two hours.
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees identified at screening to be at risk for suicide are referred to the physician, who will assess the detainee and refer them to the off-site mental health clinic if appropriate. One such referral was observed during the inspection.
<p>7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not returned to the facility if they are at risk. ICE transfers the detainee. The procedure is to not return the detainee to the facility.
<p>8. The facility has a designated isolation room for evaluation and treatment.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site, thus this component is not applicable.
<p>9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site.
<p>10. Medical staff have approved the room for this purpose.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

This Detention Standard protects detainees' health and well being by training staff to prevent suicide by recognize potential signs and situations of risk and to intervene with appropriate sensitivity, supervision, referral, and treatment.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site.
13. In CDFs or IGSA's, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not treat suicidal detainees on site.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires that serious suicide attempts and completed suicides will be analyzed via a mortality review process and that debriefing will be provided to staff and other detainees that were potentially affected by the incident. There were no suicides at the facility during the past year, so there were no documents to review to determine compliance.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility screens and refers detainees identified at risk for suicide; however, they do not provide evaluation, supervision or inpatient mental health treatment services onsite. Screening is done at intake and anytime potentially suicidal behavior is observed. Further assessment is performed by the facility physician, who determines whether referral to the community mental health clinic is warranted. If a detainee is determined to be at risk of suicide, he/she is transferred.

The facility is in compliance with the standard for the components that apply to the services that they provide on-site.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH

This Detention Standard ensures that each facility's continuum of health care services addresses terminal illness, fatal injury, and advance directives and provides specific guidance in the event of a detainee's death.

☐ 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	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 706 outlines the criteria for detainee transfer for medical reasons. ICE and the facility work collaboratively to transfer detainees who are seriously ill to another location.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE notifies the next of kin when a detainee is seriously ill and will assist the next of kin regarding visitation of the detainee.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees requesting a living will and/or advanced directive are referred to ICE, who will have the ICE attorney meet with the detainee.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may request a Do Not Resuscitate Order after consultation with the ICE attorney.
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees at the end of life point are not housed at the facility. ICE procedure details the process regarding the detainee at end of life and involvement of the family regarding therapeutic treatment.
6. The facility notifies ICE/DRO 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 IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility will notify the ICE Regional Medical Director and the local ICE staff, who will involve ICE legal.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH

This Detention Standard ensures that each facility's continuum of health care services addresses terminal illness, fatal injury, and advance directives and provides specific guidance in the event of a detainee's death.

☐ 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	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; • Performance of an autopsy. • Person(s) to perform the autopsy. • Obtaining State approved death certificates. • Local transportation of the body.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff will handle per ICE 7-9.0 and the related checklist.

PART 4 – 25. TERMINAL ILLNESS, ADVANCE DIRECTIVES, AND DEATH

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility does not accept severely or terminally ill detainees. There have been no detainee deaths at this facility. In the event a detainee becomes severely or terminally ill, or dies while in the facility, there are policies and procedures in place to guide appropriate processes that are compliant with the requirements of this standard.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

Section V ACTIVITIES

- 26 Correspondence and Other Mail**
- 27 Escorted Trips for Non-Medical Emergencies**
- 28 Marriage Requests**
- 29 Recreation**
- 30 Religious Practices**
- 31 Telephone Access**
- 32 Visitation**
- 33 Voluntary Work Program**

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

This Detention Standard ensures that detainees will be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee mail is described in the facility handbook.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mail is usually distributed same day, Monday - Friday.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logs are maintained and were observed by this inspector.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is described in the facility handbook.
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

This Detention Standard ensures that detainees will be able to correspond with their families, the community, legal representatives, government offices, and consular officials consistent with the safe and orderly operation of the facility.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Staff maintain a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Such documents are hand delivered to ICE staff based at the facility.
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SMU detainees have the same correspondence privileges as general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility stated that they have increased the publications available to detainees within the facility to meet the standard requirement for access "to general interest publication". The National Detainee Handbook prohibits "subscriptions to publications, magazines and catalogs.

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

Remarks: *(Record significant facts, observations, other sources used, etc.)*

There are no SMUs at this facility.

The facility stated that they have increased the publications available to detainees within the facility to meet the standard requirement for access "to general interest publication". The National Detainee Handbook prohibits "subscriptions to publications, magazines and catalogs.

Mail and correspondence is handled in accordance with the requirements of this standard and the facility maintains written documentation of key correspondence activities.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES

This Detention Standard permits detainees to maintain ties with their families and the community by providing detainees emergency staff-escorted trips into the community to visit critically ill members of the immediate family or to attend their funerals.

☒ **Standard NA: Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> • Funeral • Deathbed 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Each escort detail includes at least (b)(7)(e) officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES

This Detention Standard permits detainees to maintain ties with their families and the community by providing detainees emergency staff-escorted trips into the community to visit critically ill members of the immediate family or to attend their funerals.

☒ **Standard NA:** Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Escort officers ensure that detainees: <ul style="list-style-type: none"> Conduct themselves in a manner that does not bring discredit to ICE/DRO. Do not violate federal, state, or local laws. Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. Do not arrange to visit family or friends unless approved before the trip. Make no unauthorized phone calls. Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility routinely subjects a detainee returning from an escorted trip to a search, urinalysis, breathalyzer, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Standard procedure requires the immediate return to the facility of any detainee who violates trip rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The Field Office Director is the approving official for all non-medical escorted trips.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Facility procedures comply with the following ICE Standards: <ul style="list-style-type: none"> Transportation (Land Transportation Restraints applied strictly in accordance with the Use of Force Standard. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 27. ESCORTED TRIPS FOR NON-MEDICAL EMERGENCIES

☐ Meets Standard
 ☐ Does Not Meet Standard
 ☒ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)
ICE handles all escorted non-medical emergency trips.

(b)(6), (b)(7)c / December 2, 2010
 Reviewer's Signature / Date

PART 5 – 28. MARRIAGE REQUESTS

This Detention Standard ensures that each marriage request from an ICE/DRO detainee receives a case-by-case review and based on internal guidelines for approval of such requests.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All marriage requests are reviewed by the local ICE supervisory staff.
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The on-site ICE supervisory staff makes the final decision on marriage requests. The facility and detainee receive a written copy of the decision.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When permission is denied, the local ICE supervisory staff states the basis for the decision, with instructions on how the detainee may appeal.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Program Manager shall provide the detainee with a time and place to make wedding arrangements.
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The marriage request process is explained in the National Detention Handbook. The local handbook supplement does not provide guidance on marriage requests.
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The standard requires a Field Office Director review all marriage requests.

PART 5 – 28. MARRIAGE REQUESTS

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

Detainees receive information on the marriage request process in the National Detention Handbook and during orientation to the facility. The facility forwards all marriage requests to the on-site ICE supervisory staff for review. This facility processes an average of five or six marriage requests per month. Ninety two marriages have been conducted at the facility since the last review.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 5 - 29. RECREATION

This Detention Standard ensures that each detainee has access to recreational and exercise programs and activities, within the constraints of safety, security, and good order.

☒ If outdoor recreation is offered check this box. Items 19-27 should then be marked "N/A".

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility employ (b)(7)e full time recreation specialists.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daily documented equipment and grounds inspections are conducted by the recreation staff.
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not have a Special Management Unit. Recreation programming is not required. Programs are tailored for the occasional special needs detainee.
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Soccer, basketball and volleyball are offered daily.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed on the main compound (courtyard) from 6:00 a.m. to 10:00 p.m. Detainees are not allowed outdoor recreation during work and count times.
10. Staff check all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conduct searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recreation and security staff conduct daily searches of the courtyard area.
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.

PART 5 - 29. RECREATION

This Detention Standard ensures that each detainee has access to recreational and exercise programs and activities, within the constraints of safety, security, and good order.

☒ If outdoor recreation is offered check this box. Items 19-27 should then be marked "N/A".

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Potential volunteers are screened by ICE to ensure the volunteers are not related to anyone detained at the facility.
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Outdoor recreation is offered at this facility.
20. If yes, written procedures ensure timely review of all eligible detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
21. Case officers make written transfer recommendations about every six-month detainee to the Facility Administrator.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
23. The detainee's written decision for or against an offered transfer documented in his or her A-file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
24. Staff notify the detainee's legal representative of his or her decision to accept/decline a transfer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
26. Does the A-file of every detainee held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee or the Facility Administrator's written determination of the detainee's ineligibility for transfer.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
27. The detainee's legal representative is notified of the detainee's/Facility Administrator's decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

PART 5 - 29. RECREATION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The facility has an open courtyard design. Detainees may participate in indoor and outdoor recreation opportunities from 6:00 a.m. to 10:00 p.m., excluding work and count times. (b)(7)e full time recreational specialists develop and tailor a variety of recreation offerings for the detainee population.

This facility does not have a Special Management or Disciplinary Segregation Unit; therefore, requirements for recreational opportunities do not apply.

Outdoor recreation is offered seven days per week. Transfer considerations are not required because outdoor recreation is available.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 5 – 30. RELIGIOUS PRACTICES

This Detention Standard ensures that detainees of different religious beliefs are provided reasonable and equitable opportunities to participate in the practices of their respective faiths, constrained only by concerns about safety, security, the orderly operation of the facility, or extraordinary costs associated with a specific practice.

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are posted in the male and female housing areas.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a small chapel for religious services.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All "holy day" observances are honored at this facility.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not have a Special Management Unit. Meeting religious practice needs are not required.
RELIGIOUS PRACTICES				

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

The facility has a very active religious services schedule. (b)(7)e volunteers provide religious services three to four times weekly. Detainees routinely conduct their own services. Religious leaders of different faiths provide services in at least two other languages.

This facility does not have a Special Management Unit. Meeting religious practice needs are not required.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 5 – 31. TELEPHONE ACCESS

This Detention Standard ensures that detainees may maintain ties with their families and others in the community by providing them reasonable and equitable access to telephone services.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephones may be used between 6 a.m. and 11 p.m., except during facility counts.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility offers sixty seven telephones for detainee use.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility and ICE staff performs telephone checks. A computer log for telephone issues noted during the past week was reviewed.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee completed a call to a consular office, at the request of the inspector, using the instructions posted near the phones. The voice quality was good.
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility meets the telephone requirement.

PART 5 – 31. TELEPHONE ACCESS

This Detention Standard ensures that detainees may maintain ties with their families and others in the community by providing them reasonable and equitable access to telephone services.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
26. When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee completed a call, at the inspector's request, to the OIG using the instructions posted on the bulletin board. The voice quality of the call was good.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 31. TELEPHONE ACCESS

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility meets the telephone requirement.

There are no SMUs at this facility.

Two detainees completed calls from different telephones at the request of the inspector. One call was to the OIG and the other was to the Mexican Consular Office. Instructions posted near the telephones were used to complete these calls. The inspector spoke with the answering persons to describe the purpose of the calls.

A telephone mounted on a movable cart in the Health Care Unit did not have OIG or pro-bono postings. In the intake area, a posting for OIG did not provide the correct steps needed to call the OIG and there was no pro-bono list posted. The facility handbook does not address telephone procedures for calling the OIG or pro-bono organizations.

The facility provides excellent telephone access, except as noted above. The telephone system allows callers to leave a voice message for a detainee that is retrieved the next time the detainee uses the telephone. Detainees were observed to be making extensive use of the telephones. Several detainees expressed their satisfaction with the telephone services, when asked.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 5 – 32. VISITATION

This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors in English, Spanish, and other major languages spoken in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minors are allowed to visit.
11. 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit
12. 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit at this facility.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No visits have been denied during the past year.
14. Detainees in special housing are afforded visitation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no special housing areas at this facility.
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are six booth areas in a room for attorney meetings.

PART 5 – 32. VISITATION

This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 32. VISITATION

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

Minors are allowed to visit at this facility.

Attorney have contact visits with detainees.

Male and female detainees are subject to the same general contact visitation rules, except male detainees may only receive a visit every other weekend and females may receive a visit each weekend. General visitation is permitted on Saturday and Sunday.

(b)(6), (b)(7)c / December 2, 2010
Reviewer's Signature / Date

PART 5 – 33. VOLUNTARY WORK PROGRAM

This Detention Standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order. While not legally required to do so, ICE/DRO affords working detainees basic Occupational Safety and Health Administration (OSHA) protections.

☐ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Opportunities for work outside the secure perimeter are not permitted at this facility.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follow written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy places the selection of detainees for the voluntary work program on ICE. The Case Management Coordinator will secure ICE approval prior to placement.
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The volunteer program agreement includes work hours and pay rate.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a system in place to document the removal of a detainee from a work detail, which includes the detainee's signature.
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documented safety training was available for review.
11. Medical staff screen and formally certifies detainee food service volunteers; • Before the assignment begins • As a matter of written procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee medical screenings are completed prior to placement on a work detail.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 33. VOLUNTARY WORK PROGRAM

This Detention Standard provides detainees opportunities to work and earn money while confined, subject to the number of work opportunities available and within the constraints of safety, security, and good order. While not legally required to do so, ICE/DRO affords working detainees basic Occupational Safety and Health Administration (OSHA) protections.

☐ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are instructed in writing and verbally to report all injuries.

PART 5 – 33. VOLUNTARY WORK PROGRAM

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility has a comprehensive system for voluntary work program placement. Detainees submit a request to work with the Case Management Coordinator. Those requests are forwarded to ICE for review. ICE generates a Volunteer Work Program packet with a color photo of the detainee and their approval. The Case Manager ensures that a medical screening is completed prior to a work detail assignment.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

This Detention Standard requires that, upon admission, every detainee be provided comprehensive written orientation materials that describe such matters as the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in English, Spanish, and other languages and that detainees acknowledge receipt of those materials.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility issues a local handbook and the ICE National Detention Handbook.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee handbooks are available in English, Spanish and Creole.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The USCIS Interpreter's Unit in New York is on contract to provide interpretive services for this facility.
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The handbook supplements the facility orientation video where one is provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy revisions are communicated immediately through daily detainee orientation and bulletin board announcements.
7. There is an annual review of the handbook by a designated committee or staff member.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

This Detention Standard requires that, upon admission, every detainee be provided comprehensive written orientation materials that describe such matters as the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in English, Spanish, and other languages and that detainees acknowledge receipt of those materials.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hair care and barbershop hours are posted in the day rooms and outside the shops.
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library/leisure reading section provides detailed information for those detainees who require assistance with their legal issues.
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The handbook/supplement provides local ICE contact information.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The handbook supplement does not provide local ICE contact information.
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

This Detention Standard requires that, upon admission, every detainee be provided comprehensive written orientation materials that describe such matters as the facility's rules and sanctions, disciplinary system, mail and visiting procedures, grievance system, services, programs, and medical care, in English, Spanish, and other languages and that detainees acknowledge receipt of those materials.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDFs procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook supplement provides a comprehensive explanation of the grievance process.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. • In dorm leisure activities. • Rules for television viewing. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Social workers and case management staff ensure that oral orientation material is provided to illiterate detainees.

PART 6 - 34. DETAINEE HANDBOOK

☒ Meets Standard
 ☐ Does Not Meet Standard
 ☐ N/A
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

Each detainee receives the National Detention Handbook with the local supplement. Illiterate or non-English speaking detainees receive orientation information orally, via video or through the interpretive services.

The handbook supplement does not provide local ICE contact information.

(b)(6), (b)(7)c

December 2, 2010

Reviewer's Signature / Date

PART 6 – 35. GRIEVANCE SYSTEM

This Detention Standard protects detainees' rights and ensures they are treated fairly by providing a procedure by which they may file formal grievances and receive timely responses.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grievance procedures are clearly outlined in the facility supplemental handbook.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. 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 or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff interviews confirmed that emergency grievance identification training was successful.
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complains" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The captain maintains a manual grievance log. The small number of grievances filed in the past year have not warranted the need to identify nuisance complaints.

PART 6 – 35. GRIEVANCE SYSTEM

This Detention Standard protects detainees' rights and ensures they are treated fairly by providing a procedure by which they may file formal grievances and receive timely responses.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook cautions detainees against abusing the grievance system.
11. Staff are required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff comply with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. <u>In SPCs and CDFs</u> , when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. <u>In SPCs/CDFs</u> , the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 – 35. GRIEVANCE SYSTEM

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

Only six grievances have been filed in the past year. It is apparent that facility staff communicates with detainees regularly and resolve issues informally. Policy and procedures are in place to review grievances and ensure timely responses.

The review team observed frequent interaction between detainees and all levels of facility and ICE staff which may be an explanation for the small number of grievances filed during the last year.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and legal materials.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. 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. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Attachment A list was posted in the library.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are six computers available with LexisNexis. Four of the six computers were operable at the time of the review.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The LexisNexis discs were not the most current volume.
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

This Detention Standard protects detainees' rights by ensuring their access to courts, counsel, and legal materials.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility.
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Facility staff inform ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

Remarks: *(Record significant facts, observations, other sources used, etc.)*

Access to legal materials is provided via LexisNexis and hard bound legal books.

Access to the law library is described in the facility handbook and exceeds the minimum requirements of the standard. Detainees were observed using the law library and LexisNexis on more than one occasion. Detainees stated that they had adequate access and the staff member assigned to the Library was responsive to requests for assistance.

The LexisNexis software was one version out-of-date. The current software version was loaded onto the LexisNexis computers before the completion of the review.

There are no SMUs at this facility.

(b)(6), (b)(7)c / December 2, 2010
 Reviewer's Signature / Date

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

This Detention Standard protects detainees' rights by ensuring their access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input type="checkbox"/> 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.				
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE/DRO Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no SMUs at this facility, nor are there any detainees held in segregation status/s at this facility.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff permit presenters to distribute ICE/DRO-approved materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff are present but do not monitor conversations with legal providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS				
This Detention Standard protects detainees' rights by ensuring their access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input type="checkbox"/> 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.				
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Some audio - visual is available, upon request.
PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

Remarks: *(Record significant facts, observations, other sources used, etc.)*

There are no SMUs at this facility, nor are there any detainees held in segregation status at this facility.

The Florida Immigration Advocacy Center (FIAC) has conducted weekly Group Legal Rights Presentations during the past year. Normally, FIAC conduct a Tuesday morning presentation for Chinese men / women and another for Spanish speaking women. On Wednesday morning, a presentation is provided for Haitian women and afternoon presentation for Haitian men and for Spanish speaking men. Attendance records are kept and were observed. Individual meetings are permitted after the group presentation as needed and this was observed.

ICE also arranges for consular presentations, upon request. A presentation being given by the Consular Office of Brazil was observed. Approximately fifty detainees were in attendance.

(b)(6), (b)(7)c December 2, 2010
 Reviewer's Signature / Date

Section VII ADMINISTRATION & MANAGEMENT

38 Detention Files

39 News Media Interviews and Tours

40 Staff Training

41 Transfer of Detainees

PART 7 – 38. DETENTION FILES

This Detention Standard contributes to efficient and responsible facility management by maintaining for each detainee booked into a facility for more than 24 hours a file of all significant information about that person.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention file checklist is used to document the required items in the file.
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The active detention files are in a secure office and stored in locked file cabinets
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Appropriate staff have 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A log is maintained in the file cabinet to document the logging out of files.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 38. DETENTION FILES

This Detention Standard contributes to efficient and responsible facility management by maintaining for each detainee booked into a facility for more than 24 hours a file of all significant information about that person.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 38. DETENTION FILES

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

Several active detention files were reviewed and no concerns were noted.

A detention file checklist is attached to the outside of each file. An admission and orientation checklist is contained in each file to document the presence of required items in the file.

(b)(6), (b)(7)c December 2, 2010

Reviewer's Signature / Date

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

This Detention Standard ensures that the public and the media are informed of events within the facility's areas of responsibility through interviews and tours.

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director. All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

There have been no news organization interviews during the past year. Tours of the facility are coordinated with and approved by ICE.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training coordinator holds several training certifications to include training for trainers.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training plans and topics are reviewed annually by the local facility administrator and the regional corporate office.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none">• Individual training folders,• Other training records systems, and/or• Electronic systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Formal training activities are manually recorded in individual folders.

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>New employees and contractors receive forty hours of training, which includes all listed items of this component. Volunteers currently receive a two hour orientation. Beginning in 2011, the facility will require all new volunteers to complete more in depth training to satisfy the standard requirements.</p>

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Clerical/support employees who have minimal detainee contact receive a minimum of:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • National Detention Standards. • Key and Lock Control. • Suicide risk and prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Full time clerical/support employees receive a forty hour orientation training, which includes all listed training components.

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>8. Professional and support employees (including contractors) who have regular or daily detainee contact will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lesson plans reviewed for the segment of training are very detailed and comprehensive.

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed that supervisory personnel receive a twenty four hour block of instruction on "Correctional Supervision".

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. (MANDATORY) Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Policy and practice does not authorize any personnel to use chemical agents at this facility.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. New staff are required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drug free workplace program acknowledgements are maintained in individual employee personnel files.

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Code of ethics acknowledgements are maintained in individual employee personnel files.
<p>20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has developed specific lesson plans for training staff to respond to health related emergencies within four minutes.

PART 7 – 40. STAFF TRAINING

This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Understanding that sexual abuse or assault is never an acceptable consequence of detention. Recognizing housing or other situations where sexual abuse or assault may occur. Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Referral procedures, Housing observation and suicide-watch level procedures, and Follow-up monitoring of detainees who have attempted suicide. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Annual training records include suicide prevention.
<p>23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hunger strikes are part of the emergency plan review conducted during orientation and annually thereafter.
<p>24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING				
This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include: <ul style="list-style-type: none"> • The requirements of this Detention Standard • The use of force continuum • Communication techniques • Cultural diversity • Dealing with the mentally ill • Confrontation-avoidance techniques • Approved methods of self-defense • Force cell-move techniques • Communicable diseases, particularly precautions to be taken for use of force • Application of restraints (progressive and hard) • Reporting procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tuition incentives are available to employees for continued education.
PART 7 – 40. STAFF TRAINING				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

Remarks: (Record significant facts, observations, other sources used, etc.)

Training topics and lesson plans ensure personnel receive required orientation and annual refresher training. Volunteers routinely receive a two hour orientation to the facility. Beginning in 2011, all new volunteers will be required to complete more in depth training to satisfy the standard requirements.

Policy and practice does not authorize any personnel to use chemical agents at this facility.

(b)(6), (b)(7)c December 2, 2010
 Reviewer's Signature / Date

PART 7 - 41. TRANSFER OF DETAINEES

This Detention Standard ensures that transfers of detainees from one facility to another are professionally and responsibly managed in regard to notifications, detainee records, safety and security, and protection of detainee funds and personal property.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. 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 within 24 hours of transfer. <ul style="list-style-type: none"> The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a G-28 is on file, ICE will make the notifications. Blank G-28 forms are available in the main lobby. After a detainee signs a G-28, the attorney may place the completed form in a designated locked box. ICE staff retrieves and process the G-28 daily, Monday - Friday.
2. Notification includes the reason for the transfer and the location of the new facility,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Facility policy mandates that: <ul style="list-style-type: none"> 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. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. For medical transfers: <ul style="list-style-type: none"> The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A medical summary is prepared for each transfer.
9. Detainees 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 - 41. TRANSFER OF DETAINEES

This Detention Standard ensures that transfers of detainees from one facility to another are professionally and responsibly managed in regard to notifications, detainee records, safety and security, and protection of detainee funds and personal property.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 - 41. TRANSFER OF DETAINEES

☒ Meets Standard ☐ Does Not Meet Standard ☐ N/A ☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

The facility and ICE process a high volume of detainee movement in and out of the facility. The presence of ICE staff facilitates the coordination and transfer of detainees in accordance with the requirements of this standard.

(b)(6), (b)(7)c / December 2, 2010

Reviewer's Signature / Date

A. Type of Facility Reviewed

- ☐ ICE Service Processing Center
☒ ICE Contract Detention Facility
☐ ICE Intergovernmental Service Agreement

Estimated Man-days Per Year
255,500

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
November 30- December 2, 2010

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
November 11-13, 2010

Previous Rating
☐ Superior ☐ Good ☒ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
Broward Transitional Center
Address (Street and Name)
3900 North Powerline Road
City, State and Zip Code
Pompano Beach, Florida 33073
County
Broward
Name and Title of Facility Administrator (Warden/OIC/Superintendent)
(b)(6), (b)(7)c Facility Administrator
Telephone # (Include Area Code)
954 957 (b)(6), (b)(7)c
Field Office / Sub-Office (List Office with oversight responsibilities)
Miami, FL
Distance from Field Office
25 miles

E. ICE Information

Name of Inspector (Last Name, Title and Duty Station)
(b)(6), (b)(7)c ECI / MGT of America
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c CI-Security / MGT of America
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c CI-Medical Care / MGT of America
Name of Team Member / Title / Duty Location
(b)(6), (b)(7)c CI-Food Service and Environmental Health and Safety /
Name of Team Member / Title / Duty Location
/ /

F. CDF/IGSA Information Only

Contract Number
HSCE DM-09-D00006
Date of Contract or IGSA
April 21, 2009
Basic Rates per Man-Day
(b)(4) guaranteed; (b)(4)
plus (b)(4)
Other Charges: (If None, Indicate N/A)
Transportation is charged at a flat rate of (b)(4)
(b)(4) \$1.00 per detainee worker per day; On-call
hospital post @ (b)(4); transportation officer
overtime (b)(4)

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA

☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding
☐ Court Order ☐ Class Action Order

The Facility has Significant Litigation Pending
☐ Major Litigation ☐ Life/Safety Issues

☒ Check if None.

I. Facility History

Date Built
1996
Date Last Remodeled or Upgraded
March 2009 - Completion is is nearing but a date for expected completion was not provided.
Date New Construction / Bedspace Added
N/A
Future Construction Planned
☐ Yes ☒ No Date:
Current Bedspace
700
Future Bedspace (# New Beds only)
Number: N/A Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
8370

Total ICE Mandays for Previous 12 months
213,709

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	600	N/A	N/A
Adult Female	100	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	600	600	600
Adult Female	100	100	100
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	497	0	0
Adult Female	85	0	0

N. Facility Staffing Level

Security:
(b)(7)e
Support:
(b)(7)e

Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. 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.

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	0	1-P	4-P	0
	With Weapon	0	0	0	0
	Without Weapon	0	1	4	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	0	0	1-P	0
	With Weapon	0	0	0	0
	Without Weapon	0	0	1	0
Number of Forced Moves, incl. Forced Cell moves ³		0	0	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	1	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility					
Offender / Detainee Medical Referrals as a result of injuries sustained.		20	18	3	13
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	0	0	1	3
	# Resolved in favor of Offender/Detainee	0	0	1	1
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	72	44	43	37
	# Psychiatric Cases referred for Outside Care	2	4	7	5

¹ Any attempted physical contact or physical contact that involves two or more offenders

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

³ Routine transportation of detainees/offenders is not considered "forced"

⁴ 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					
1. Meets Standards 2. Does Not Meet Standards 3.Repeat Finding 4. Not Applicable		1	2	3	4
PART 1 SAFETY					
1	Emergency Plans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Transportation (By Land)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 2 SECURITY					
4	Admission and Release	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Sexual Abuse and Assault Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 3 ORDER					
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 4 CARE					
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	Personal Hygiene	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 5 ACTIVITIES					
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PART 6 JUSTICE					
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 7 ADMINISTRATION & MANAGEMENT					
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39	News Media Interviews and Tours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name) (b)(6), (b)(7)c Title & Duty Location LCI, MGT of America	Signature Date December 4, 2010
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Team Members	
Print Name, Title, & Duty Location (b)(6), (b)(7)c CI-Security, MGT of America Print Name, Title, & Duty Location (b)(6), (b)(7)c CI- Food Service & Environmental Health and Safety, MGT of America Print Name, Title, & Duty Location	Print Name, Title, & Duty Location (b)(6), (b)(7)c CI-Medical Care, MGT of America Print Name, Title, & Duty Location Print Name, Title, & Duty Location Print Name, Title, & Duty Location Print Name, Title, & Duty Location Print Name, Title, & Duty Location

Recommended Rating:

☒ **Meets Standards**
☐ **Does Not Meet Standards**

Comments: There were no deaths, attempted suicides, escapes or attempted escapes reported during the past year

Four / Five point restraints are not used at this facility and there are no SMUs.

(b)(7)e

Canines were not used at the facility during the past year.

All detainees at this facility are non-criminal, low risk, Level 1 ICE detainees. The facility operates in a relaxed atmosphere facility where there is frequent interaction between detainees, facility staff and ICE staff. Detainees are permitted to spend nearly all day outside if they choose to do so. The average length of stay was reported to be approximately thirty days. At the time of the review, the longest remaining detainee had been at the facility since March of this year.

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



U.S. Immigration and Customs Enforcement

MEMORANDUM FOR: Marc J. Moore
Field Office Director
Miami Field Office

FROM: Gary E. Mead
Assistant Director for Detention Management

SUBJECT: Broward Transitional Center Annual Review

The annual review of the Broward Transitional Center conducted on November 30 - December 2, 2010, in Pompano Beach, Florida has been received. A final rating of **Meets Standards** has been assigned. No further action is required and this review is closed.

The rating was based on the Lead Compliance Inspector (LCI) Summary Memorandum and supporting documentation. The Field Office Director must initiate the following actions in accordance with the Detention Management Control Program (DMCP):

- 1) The Field Office Director, Enforcement and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before November 30, 2011.

Should you or your staff have any questions regarding this matter, please contact (b)(6), (b)(7)c (Acting) Deputy Assistant Director, Detention Division at (202) 732- (b)(6), (b)(7)c

cc: Official File

ICE:HQERO: (b)(6), (b)(7)c 12/16/2010

(b)(7)e

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