MGTOF AMERICA, INC.
1333 New Hampshire Avenue NWWashington, DC 20036
Contract \# HSCECR-09-C-00004
ICE Detention Standards
Compliance Review
Charleston County Detention Center
Facility:
Inspection Date: June 8-10, 2010
Report Date: ..... June 12, 2010

1333 New Hampshire Ave. NW
Suite 300
Washington, DC 20036
202/ 419-3930 (T)
202/ 419-3931 (F)
www.MGTofAmerica.com

June 12, 2010

FROM:
James M. Chaparro
Director
Office of Detention and Removal Operations
(b)(6), (b)(7)(c)

SUBJECT:
Charleston County Detention Center
Annual Detention Review

MGT of America, Inc. performed an annual inspection for compliance with the Immigration and Customs Enforcement (ICE) National Detention Standards (NDS) at the Charleston County Detention Center located in Charleston, South Carolina during the period of June 8-10, 2010. This facility is an IGSA.

The annual inspection was performed under the guidance of (b)(6), (b)(7)(c) Lead Compliance Inspector. Team members were:

| Subject Matter Field | Team Member |  |  |
| :--- | :--- | :---: | :---: |
| Security |  |  |  |
| Medical Care |  |  |  |
| Food Service |  |  |  |
|  |  |  |  |
| Environmental Health and Safety |  |  |  |

## Type of Review

This review is a scheduled annual inspection, which is performed to determine overall compliance with the ICE NDS for Over 72 hour facilities. The facility received a previous rating of "Acceptable" during the April 2009 inspection.

## Review Summary

The facility is currently accredited by the National Commission on Correctional Health Care (NCCHC). The facility is not currently accredited by the American Correctional Association (ACA) or the Joint Commission on Accreditation of Health Organizations (JCAHO).

## Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance as a result of the 2009 and 2010 NDS annual inspections.

| 2009 Inspection |  |
| :--- | ---: | ---: | ---: |
| Compliant | 35 |
| Deficient | 0 |
| At-Risk | 0 |
| Repeat Deficiency | 0 |
| Not Applicable | 3 |$\quad$| 2010 Inspection |  |
| :--- | ---: |
| Compliant | 35 |
| Deficient | 0 |
| At-Risk | 0 |
| Repeat Deficiency | 0 |
| Not Applicable | 3 |

## LCI Issues and Concerns

No standards were found "Deficient" during this inspection.

## Recommended Rating and Justification

The LCI recommends the facility receive a rating of "Acceptable." The facility displays a clean, safe and secure environment.

## LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely recorded on the G-324A worksheet and are supported by documentation in the inspection file. An out brief was conducted at the facility. In addition to the entire inspection team, the following were present: Chief Deputy
 IEA; and (b)(6), (b)(7)(c) ICE, SIEA.
(b)(6), (b)(7)(c) Lead Compliance Inspector, MGT

Printed Name/Title

June 12, 2010
Date

Signature: $\qquad$

Type of Facility Reviewed
ICE Service Processing Center
ICE Contract Detention Facility
ICE Intergovernmental Service Agreement

## B. Current Inspection

Type of Inspection
$\square$ Field Office $\triangle$ HQ Inspection
Date[s] of Facility Review
June 8-10, 2010

## C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
April 14-16, 2009
Previous Rating
$\square$ Superior $\square$ Good $\boxtimes$ Acceptable $\square$ Deficient $\square$ At-Risk
D. Name and Location of Facility

Name
Charleston County Detention Center
Address (Street and Name)
3841 Leeds Avenue
City, State and Zip Code
North Charleston, SC 29405
County
Charleston
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)
ef Deputy (b)(6), (b)(7)(c) Jail Administrator
relephone \# (Include Area Code)
843 \$2) 96 ), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Atlanta / Charleston
Distance from Field Office
300 / 10

## E. ICE Information

Name of LCI (Last Name, Title and Duty Station)
(b) (6), (b)(7) 1 (cCl / MGT of America

Name of Team Member / Title / Duty Location
(b)(6), (b) (7) (b)Cl-Security / MGT of America

Name of Team Member / Title / Duty Location
(b) (6), (b) (7) KCI-Medical Care / MGT of America

Name of Team Member / Title / Duty Location
(6), (b)(7) WCI-Food Service and Environmental Health and

Safety / MGT of America
F. CDF/IGSA Information Only

| Contract Number <br> $71-0002-0044$ | Date of Contract or IGSA <br> July 1, 2007 |
| :--- | :--- |
| Basic Rates per Man-Day <br> $\$ 55.00$ <br> Other Charges: (If None, Indicate N/A) <br> Transport / (b)(4) per hour and GSA mileage. <br> Estimated Man-days Per Year: |  |

## G. Accreditation Certificates

List all State or National Accreditation[s] received:
NCCHC (August 2007)
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
$\square$ Court Order $\quad \square$ Class Action Order

The Facility has Significant Litigation Pending
$\square$ Major Litigation $\square$ Life/Safety Issues
Q Check if None.

## I. Facility History

Date Built
April 2010
Date Last Remodeled or Upgraded
In progress at this time.
Date New Construction / Bed space Added
April 2010
Future Construction Planned
$\square$ Yes $\boxtimes$ No Date:
Current Bed space $\quad$ Future Bed space (\# New Beds only)
2112
Number: N/A Date: N/A

## J. Total Facility Population

Total Facility Intake for previous 12 months 32,847
Total ICE Man-days for Previous 12 months 8362
K. Classification Level (ICE SPCs and CDFs Only)

|  | L-1 | L-2 | L-3 |
| :--- | :--- | :--- | :--- |
| Adult Male | N/A | N/A | N/A |
| Adult Female | N/A | N/A | N/A |

L. Facility Capacity

| Adult Male | Rated | Operational | Emergency |
| :--- | :---: | :---: | :---: |
| Adult Female | 11993 | 1993 | See <br> comments. |
| $\square$ | 119 | See <br> comments. |  |

Facility holds Juveniles Offenders 16 and older as Adults
M. Average Daily Population

|  | ICE | USMS | Other |
| :--- | :---: | :---: | :---: |
| Adult Male | 22.24 | 118.2 | 1590 |
| Adult Female | .66 | 5.99 | 156 |

N. Facility Staffing Level

| Security: <br> b)(7)(e) | (¢) Support: |
| :---: | :---: |

Department Of Homeland Security
Immigration and Customs Enforcement

Detention Facility Inspection Form
Facilities Used Over 72 hours

## 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.

| Incidents | Description | Jan - Mar | Apr - Jun | Jul -- Sept | Oct - Dec |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Assault: Offenders on Offenders ${ }^{1}$ | Types (Sexuat ${ }^{2}$, Physical, etc.) | Physical | Physical | Physical | Physical |
|  | With Weapon | 0 | 0 | 0 | 0 |
|  | Without Weapon | 23 | 11 | 45 | 50 |
| Assault: <br> Detainee on Staff | Types (Sexual Physical, etc.) | Physical | Physical | Physical | Physical |
|  | With Weapon | 0 | 0 | 0 | 0 |
|  | Without Weapon | 9 | 11 | 12 | 21 |
| Number of Forced Moves, incl. Forced Cell moves ${ }^{3}$ |  | 0 | 5 | 2 | 1 |
| Disturbances ${ }^{4}$ |  | 22 | 18 | 12 | 18 |
| Number of Times Chemical Agents Used |  | 0 | 0 | 0 | 0 |
| Number of Times Special Reaction Team loyed/Used |  | 111 | 161 | 167 | 124 |
| \# Times Four/Five Point Restraints applied/used | Number/Reason (M=Medical, $\mathrm{V}=$ Violent Behavior, $\mathrm{O}=$ Other) | 2-V | 0 | 1-V, 1-M | 5-V, 1-M |
|  | Type ( $\mathrm{C}=$ Chair, $\mathrm{B}=\mathrm{Bed}$, $\mathrm{BB}=$ Board, $\mathrm{O}=$ Other) | C | 0 | C | C |
| Offender / Detainee Medical Referrals as a result of injuries sustained. |  | 15 | 27 | 26 | 10 |
| Escapes | Attempted | 1 | 1 | 1 | 0 |
|  | Actual | 0 | 0 | 0 | 1 |
| Grievances: | \# Received | 316 | 243 | 274 | 191 |
|  | \# Resolved in favor of Offender/Detainee | 5 | 1 | 13 | 1 |
| Deaths | Reason ( $\mathrm{V}=$ Violent, $\mathrm{I}=\mathrm{Illn}$ ness, $\mathrm{S}=$ Suicide, $\mathrm{A}=$ Attempted Suicide, $\mathrm{O}=$ Other) | 0 | 1-I,4-A | 1-I, 2-A | 2-1, 4-A |
|  | Number | 0 | 1 | 1 | 2 |
| Psychiatric / Medical Referrals | \# Medical Cases referred for Outside Care | 157 | 167 | 92 | 110 |
|  | \# Psychiatric Cases referred for Outside Care | 4 | 3 | 7 | 8 |

Any attempted physical contact or physical contact that involves two or more offenders
Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting
Routine transportation of detainees/offenders is not considered "forced"
Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

| DH | CE Detention Standards Review Summary Report |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1．A |  | 5．Not Applicable |  |  |  |  |  |
| Detainee Services |  |  | 1．2．3． 4. |  |  |  | 5. |
| 1. <br> 2. <br> 3. <br> 4. | Access to Legal Materials |  | 区 | $\square$ | $\square$ | $\square$ |  |
|  | Admission and Release |  | 区 | $\square$ | $\square$ |  |  |
|  | Classification System |  | 区 | $\square$ | $\square$ | $\square$ |  |
|  | Correspondence and Other Mail |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 5．Detainee Handbook |  |  | 区 |  |  |  |  |
| 6. | Food Service |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 7. | Funds and Personal Property |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 8. | Detainee Grievance Procedures |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 9. | Group Presentation On Legal Rights |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 10. | Issuance of Clothing，Bedding and Towels |  | Q | $\square$ | $\square$ | $\square$ |  |
| 11. | Marriage Requests |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 12. | Non－Medical Emergency Escorted Trips |  | $\square$ | $\square$ | $\square$ | $\square$ | 区 |
| 13. |  |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 14. | Religious Practices |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 15. | Access to Telephones |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 16. | Visitation |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 17. | Voluntary Work Program |  | $\square$ |  | $\square$ | $\square$ | 区 |
| Health Services |  |  |  |  |  |  |  |
| 18．Hunger Strikes |  |  | 区 | $\square$ | $\square$ | $\square$ |  |
|  |  |  | 区 | $\square$ | $\square$ | $\square$ |  |
|  |  |  | 区 |  | $\square$ | $\square$ |  |
| 21. | Terminal Illness，Advanced Directives and Death |  | 区 | $\square$ | $\square$ |  |  |
| Security and Control |  |  |  |  |  |  |  |
| 22．Contraband | Contraband |  | 区 |  | $\square$ | $\square$ |  |
| 23. | Detention Files |  | 区 | $\square$ | $\square$ |  |  |
| 24. | Disciplinary Policy |  | 区 | $\square$ | $\square$ |  |  |
| 25. |  |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 26. | Emergency Plans |  | 区 |  |  | $\square$ |  |
| 27. | Environmental Health and Safety Hold Rooms in Detention Facilities |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 28. | Key and Lock Control |  | 区 |  | $\square$ | $\square$ |  |
| 29. | Population Counts |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 30. |  |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 31. | Security Inspections |  | 区 |  | $\square$ |  |  |
| 32. | Special Management Units（Administrative Segregation） |  | 区 | $\square$ | $\square$ |  |  |
| 33. | Special Management Units（Disciplinary Segregation） |  | 区 | $\square$ | $\square$ |  |  |
| 34. | Tool Control |  | 区 | $\square$ | $\square$ | － |  |
| 35. | Transportation（Land Transportation） |  | $\square$ | $\square$ | $\square$ | $\square$ | 区 |
| 36. | Use of Force |  | 区 |  | $\square$ | $\square$ |  |
| 37. | Staff／Detainee Communication（Added August 2003） |  | 区 | $\square$ | $\square$ | $\square$ |  |
| 38. | Detainee Transfer（Added September 2004） |  | 区 | $\square$ | $\square$ | $\square$ |  |

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

## 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.


|  | Mevbers |
| :---: | :---: |
| Print Name, Title, \& Duty Location | Print Name, Title, \& Duty Location |
| (b)(6), (b)(7)(c) CI-Security, MGT of America | (b)(6), (b)(7)(c) CI - Food Service and Environmental Health and Safety, MGT of America |
| Print Name, Title, \& Duty Location | Print Name, Title, \& Duty Location |

Comments:
The data included in this report covers the fourteen months since the last inspection. The inspection set for April 13, 2010 was rescheduled for ICE's request.

Facility Background: The facility has had four significant milestones in becoming what it is today. The portion of the facility that was opened in 1966 has been closed and is under renovation for other use by Charleston County. The portion of the facility that opened in 1994 had eight housing units. Some of the units are occupied today and some are closed and undergoing renovation. All eight units will be renovated and used by the facility. Then in 2007, two new housing units were opened. This year twenty-one dormitory style units were completed, each with a capacity of 64 beds. Also opened this year were a new kitchen, laundry, Intake Area, Medical Unit, Records Area and Administrative Offices.

Facility Capacity: Staff advised that no emergency capacity has been established because the Sheriff is on record as stating that all new intakes will be accepted.

| Deaths: On April 29, 2010, a |
| :--- |
| developed | (b)(6),(b)(7)c non-ICE detainee had been sent to the local hospital for breathing problems. He

Rescue efforts were not successful.

Attempted Suicides: Since the last inspection fourteen months ago, there have been ten unsuccessful suicide attempts involving nonICE detainees. A review of these incident reports found that one of these attempts was of a more serious nature but did not result in serious injury.

Escapes: On Mav 27.2010, a county detainee escaped from the $\quad$ (b)(7)(e) area when he is believed to have $\quad$ (b)(7)(e) and escaped by (b) $(7)(e)$ The escapee was returned to the facility in less than 48 hours. The matter is under investigation.
(b)(7)(e)

Canines: Canines have not been used at this facility during the past year.

## U.S. Immigration

and Customs

## Enforcement

MEMORANDUM FOR: Felicia S. Skinner

FROM:

SUBJECT: Field Office Director
Atlanta Field Office
Robert P. Helwig
Assistant Director for Detention and Removal Management

The annual review of the Charleston County Detention Center conducted on June 8-10, 2010 in Charleston, South Carolina has been received. A final rating of Acceptable 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, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
2) The next annual review will be scheduled on or before June 8, 2011.

Should you or your staff have any questions regarding this matter, please contact Gary Mead, Deputy Assistant Director, Detention Management Division at (202) 73(6) (6), (b)(7)c
cc: Official File

| ICE:HQDRO | (b)(6), (b)(7)c $\quad 06 / 22 / 2010$ |
| :--- | :--- | :--- |

## A. Type of Facility Reviewed

| $\square$ | ICE Service Processing Center |
| :--- | :--- |
| $\square$ | ICE Contract Detention Facility |
| ICE Intergovernmental Service Agreement |  |

## B. Current Inspection

| Type of Inspection |
| :--- |
| $\square$ Field Office $\boxtimes$ HQ Inspection |
| Date[s] of Facility Review |
| June 8-10, 2010 |

## C. Previous/Most Recent Facility Review

| Date[s] of Last Facility Review <br> April 14-16,2009 |
| :--- |
| Previous Rating |
| $\square$ Superior $\square$ Good $\boxtimes$ Acceptable $\square$ Deficient $\square$ At-Risk |

D. Name and Location of Facility

Name
Charleston County Detention Center
Address (Street and Name)
3841 Leeds Avenue
City, State and Zip Code
North Charleston, SC 29405
County
Charleston
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)
Chief Deputy (b)(6), (b)(7)(c) Jail Administrator
Telephone \# (Include Area Code)
843 (2)96), (b) (7) (c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Atlanta / Charleston
Distance from Field Office
$300 / 10$

## E. ICE Information

Name of LCI (Last Name, Title and Duty Station)
(b) (6), (b)(7) $\mathrm{Ic} \mathrm{CI} / \mathrm{MGT}$ 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)I-Medical Care / MGT of America

Name of Team Member / Title / Duty Location
(b)(6), (b)(7))(0CI-Food Service and Environmental Health and Safety / MGT of America

## F. CDF/IGSA Information Only

| Contract Number <br> $71-0002-0044$ | Date of Contract or IGSA <br> July 1, 2007 |
| :--- | :--- |
| Basic Rates per Man-Day <br> $\$ 55.00$ |  |
| Other Charges: (If None, Indicate N/A) <br> Transport / | (b)(4) per hour and GSA mileage. |
| Estimated Man-days Per Year: <br> 8362 |  |

## G. Accreditation Certificates

List all State or National Accreditation[s] received: NCCHC (August 2007)

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 |

I. Facility History

| Date Built <br> April 2010 |
| :--- |
| Date Last Remodeled or Upgraded <br> In progress at this time. |
| Date New Construction / Bed space Added <br> April 2010 |
| Future Construction Planned <br> $\square$ Yes $\boxtimes$ No Date: |
| Current Bed space <br> 2112 |
| Future Bed space (\# New Beds only) <br> Number: N/A Date: N/A |

## J. Total Facility Population

Total Facility Intake for previous 12 months 32,847
Total ICE Man-days for Previous 12 months 8362
K. Classification Level (ICE SPCs and CDFs Only)

|  | L-1 | L-2 | L-3 |
| :--- | :--- | :--- | :--- |
| Adult Male | N/A | N/A | N/A |
| Adult Female | N/A | N/A | N/A |

## L. Facility Capacity

|  | Rated | Operational | Emergency |
| :--- | :---: | :---: | :---: |
| Adult Male | 1993 | 1993 | See <br> comments. |
| Adult Female | 119 | 119 | See <br> comments. |
| $\square$ |  |  |  |

M. Average Daily Population

|  | ICE | USMS | Other |
| :--- | :---: | :---: | :---: |
| Adult Male | 22.24 | 118.2 | $\mathbf{1 5 9 0}$ |
| Adult Female | .66 | 5.99 | $\mathbf{1 5 6}$ |

## N. Facility Staffing Level

| Security: | Support: |
| :--- | :--- |
| b) $(7)($ ( $)$ | (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.

| Incidents | Description | Jan - Mar | Apr - Jun | Jul - Sept | Oct - Dec |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Assault: Offenders on Offenders ${ }^{1}$ | Types (Sexual ${ }^{2}$, Physical, etc.) | Physical | Physical | Physical | Physical |
|  | With Weapon | 0 | 0 | 0 | 0 |
|  | Without Weapon | 23 | 11 | 45 | 50 |
| Assault: <br> Detainee on Staff | Types (Sexual Physical, etc.) | Physical | Physical | Physical | Physical |
|  | With Weapon | 0 | 0 | 0 | 0 |
|  | Without Weapon | 9 | 11 | 12 | 21 |
| Number of Forced Moves, incl. Forced Cell moves ${ }^{3}$ |  | 0 | 5 | 2 | 1 |
| Disturbances ${ }^{4}$ |  | 22 | 18 | 12 | 18 |
| Number of Times Chemical Agents Used |  | 0 | 0 | 0 | 0 |
| Number of Times Special <br> Reaction Team <br> Deployed/Used |  | 111 | 161 | 167 | 124 |
| \# Times Four/Five Point Restraints applied/used | Number/Reason (M=Medical, $\mathrm{V}=$ Violent Behavior, $\mathrm{O}=$ Other | 2-V | 0 | 1-V, 1-M | 5-V, 1-M |
|  | $\text { Type }(\mathrm{C}=\text { Chair, } \mathrm{B}=\mathrm{Bed} \text {, }$ $\mathrm{BB}=\text { Board, } \mathrm{O}=\text { Other })$ | C | 0 | C | C |
| Offender / Detainee Medical Referrals as a result of injuries sustained. |  | 15 | 27 | 26 | 10 |
| Escapes | Attempted | 1 | 1 | 1 | 0 |
|  | Actual | 0 | 0 | 0 | 1 |
| Grievances: | \# Received | 316 | 243 | 274 | 191 |
|  | \# Resolved in favor of Offender/Detainee | 5 | 1 | 13 | 1 |
| Deaths | Reason (V=Violent, I=Illness, <br> $\mathrm{S}=$ Suicide, $\mathrm{A}=\mathrm{Attempted}$ <br> Suicide, $\mathrm{O}=$ Other) | 0 | 1-I,4-A | 1-I, 2-A | 2-I, 4-A |
|  | Number | 0 | 1 | 1 | 2 |
| Psychiatric / Medical Referrals | \# Medical Cases referred for Outside Care | 157 | 167 | 92 | 110 |
|  | \# Psychiatric Cases referred for Outside Care | 4 | 3 | 7 | 8 |

[^0]FOR OFFYCIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)
Form G-324A SIS (Rev. 7/9/07)

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

| 区 | $\square$ | $\square$ | $\square$ |
| :---: | :---: | :---: | :---: |
| 区 | $\square$ | $\square$ | $\square$ |
| 区 | $\square$ | $\square$ | $\square$ |
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| 区 | $\square$ | $\square$ | $\square$ |
| 区 | $\square$ | $\square$ | $\square$ |

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

## LCI Review Assurance Statement

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

| LEAD COMPLIANCE INSPECTOR |  |
| :--- | :--- |
| Lead Compliance Inspector: (Print Name) | Signature |
| (b)(6), (b)(7)(c) |  |
| Title \& Duty Location | Date |
| LCI, MGT of America | June 12, 2010 |


| TEAM MEMBERS |  |
| :--- | :--- |
| Print Name, Title, \& Duty Location | Print Name, Title, \& Duty Location |
| (b)(6), (b)(7)(c) CI-Security, MGT of America | (b)(6), (b)(7)(c) CI - Food Service and 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 |  |

## Recommended Rating:

## Superior <br> Good <br> Acceptable <br> Deficient <br> At-Risk

Comments:

The data included in this report covers the fourteen months since the last inspection.
Facility Background: The facility has had four significant milestones in becoming what it is today. The portion of the facility that was opened in 1966 has been closed and is under renovation for others uses by Charleston County. The portion of the facility that opened in 1994 had eight housing units. Some of the units are occupied today and some are closed and undergoing renovation. All eight units will be renovated and used by the facility. In 2007, two new housing units were opened. This year twenty-one dormitory style units were completed, each with a capacity of 64 beds. Also opened this year were a new kitchen, laundry, Intake Area, Medical Unit, Records Area and Administrative Offices.

Facility Capacity: Staff advised that no emergency capacity has been established because the Sheriff is on record as stating that all new intakes will be accepted.

Deaths: On April 29, 2010, a $\quad$ (b)(6), (b)(7)c non-ICE detainee had been sent to the local hospital for breathing problems. He developed
(b)(6), (b)(7)c Rescue efforts were not successful.

On December 16, 2009, at 11:42 am, a $\quad$ (b)(6), (b)(7)c $\quad$ non-ICE detainee had been at a local hospital for (b)(6), (b)(7)c ince the prior day. He died at the hospital from a (b)(6), (b)(7)c

On September 27, 2009, at 10:24 am, a $\quad$ (b)(6), (b)(7)c non-ICE detainee was housed in the Medical Unit. He was being observed during "alcohol withdrawal". He was found unresponsive and rescue efforts were not successful.

On December 13, 2009, at 10:15 pm, a (b)(6), (b)(7)c non-ICE detainee had been placed in the emergency restraint chair because she was banging her head and opening her dialysis port. She was found non- responsive, and rescue efforts were not successful.

Attempted Suicides: Since the last inspection fourteen months ago, there have been ten unsuccessful suicide attempts involving nonICE detainees. A review of these incident reports found that one of these attempts was of a more serious nature but did not result in serious injury.

Escapes: On May 27, 2010, a county detainee escaped from the
(b) $(7)$ (e) area when he is believed to have
(b) (7) (e) and escaped by (b) (7)(e) The escapee was returned to the facility in less than 48 hours. The matter is under investigation.
(b)(7)(e)

Canines: Canines have not been used at this facility during the past year.
(b) $(7) \mathrm{e}$

## Condition of Confinement Review Worksheet

(This document must be attached to each G-324A Inspection Form) This Form to be used for Inspections of all Facilities Used Over 72 Hours


## ICE Detention Standards Review Worksheet

> Local Jail - IGSA

State Facility - IGSA
ICE Contract Detention Facility

| Name <br> Charleston County Detention Center <br> Address (Street and Name) <br> 3841 Leeds Avenue <br> City, State and Zip Code <br> North Charleston, SC 29405 <br> County <br> Charleston <br> Name and Title of Chief Executive Officer (Warden/OIC/Superintendent) <br> Chief Deputy (b)(6), (b)(7)(c) Jail Administrator <br> Name and Title of Lead Compliance Inspector <br> (b)(6), (b)(7)(c) <br> Date[s] of Review <br> June 8-10, 2010 <br> Type of Review <br> $\square$ Headquarters $\quad \square$ Operational $\quad \square$ Special Assessment |
| :--- |

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## SECTION I

## DETAINEE SERVICES STANDARDS

## ACCESS TO LEGAL MATERIALS

Bolicy：Faciuties holding iCE detainees shall permit detainees access to a law library，and provide legal materials， CIUTIES，EQUIPMENT，DOCUMENI COPYING PRIVIIBGES，AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS

| －Components | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The facility provides a designated law library for detainee use． | 区 | $\square$ | $\square$ | A computer with LexisNexis software and a printer is affixed to a mobile cart on wheels．This cart was located in Unit C2G which housed male ICE detainees． |
| 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． | 区 | $\square$ | $\square$ |  |
| The library contains a sufficient number of chairs，is well lit，and is reasonably isolated from noisy areas． | 区 | $\square$ | $\square$ |  |
| The law library is adequately equipped with typewriters and／or computers，and has sufficient supplies for daily use by the detainees． | $\square$ | 区 | $\square$ | One must stand when using the computer on the mobile cart． The printer had no paper． |
| In addition to the physical law library，detainees have access to the Lexus Nexus electronic law library． | $\square$ | 区 | $\square$ | Detainees only have access to LexisNexis． |
| Where provided，the Lexus Nexus library is updated and is current． | $\square$ | 区 | $\square$ | The LexisNexis was updated in early December 2009. |
| 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 ICE prior to inclusion． | 区 | $\square$ | $\square$ | No requests to donate legal materials have been received during the past year，but staff advised that requests would be reviewed by ICE． |
| here is a designated ICE or facility employee who inspects，updates，and aintains／replaces legal materials and equipment on a routine basis． | 区 | $\square$ | $\square$ |  |
| 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． | 区 | $\square$ | $\square$ | Staff stated that access would be granted，as needed． |
| Detainees may request materials not currently in the law library．Each request is reviewed and，where appropriate，an acquisition request is timely initiated．Requests for copies of court decisions are accommodated within $3-5$ business days． | 区 | $\square$ | $\square$ | Detainees may submit request forms，which are then sent to the facility＇s full time paralegal． |
| Detainees are permitted to assist other detainees，voluntarily and free of charge，in researching and preparing legal documents，consistent with security． | 区 | $\square$ | $\square$ | － |
| Illiterate or non－English－speaking detainees without legal representation receive access to more than just English－language law books after indicating their need for help． | 区 | $\square$ | $\square$ |  |
| 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． | 区 | $\square$ | $\square$ |  |
| Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population，barring security concerns．Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions． | 区 | $\square$ | $\square$ | No requests were received during the past year from ICE detainees to use the LexixNexis computer while housed in the SMUs．Staff indicated that the LexisNexis computer would be rolled to that location when a request is approved． |
| All denials of access to the law library fully documented． | 区 | $\square$ | $\square$ |  |



## Remarks:

Facility policy provides detainees access to legal materials via LexisNexis. This software program, which was last updated in December 2009, is available on a computer that is placed on a cart with wheels. In order to use this computer, one must stand. A printer is also affixed to the computer on the cart but, at the time of the inspection, the printer was out of paper.

Requests from detainees for legal documents, copies, information, etc. are directed to the staff paralegal, who responds to the request within a week. The paralegal uses the internet access to West Law to access requested information.

The facility does not have a general library, but donated books are available in the housing units for use by the detainees.
(b)(6), (b) (7) (c)
(b)(6), (b)(7)(c) $/$ 6-10-2010

## Auditor's Signature / Date

Rolicy: All detainees wil be admitied and reieased in A Manner that ensures therr yealth, safety, and welfare. The MISSIONS PROCEDURE WILI, AMONG OTHER THINGS INCLUDF: MEDICAI SGREENING; A FIE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WIL BE INVENTORIED, DOCUMENTLD, AND SAFEGUARDED AS NECESSARY.

In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of 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.

Medical screenings are performed by medical staff or persons who have received specialized training for the purpose of conducting an initial health screening.

Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.
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 ossible.
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.
All releases are properly coordinated with ICE using a Form I-203.


## REMARKS:

The facility handbook is the primary means by which detainees receive an orientation to the facility. An orientation video is also shown in the housing unit to all ICE detainees.
l AUDITOR'S SIGNATURE/DATE

## CLASSIFICATION SYSTEM

OLICY：ALI FACIITIES WILL DEVELOP AND MPLEMENT A SYSIEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFLED．THE ASSIFICATION SYSTEM WIL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATI CATEGORY，PHYSICALIY SEPARATED FROM DETAINEES IN OTHER CATEGORIES

| Components | YeS | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a system for classifying detainees．In CDFs and IGSAs，an Objective Classification System or similar is used． | 区 | $\square$ | $\square$ | The computer based classification system used scores detainees in one of eight classification categories．These scores range from＂high＂to＂very low＂．The detainee is then classified as minimum， medium or maximum． |
| The facility classification system includes： |  |  |  |  |
| －Classifying detainees upon arrival； <br> －Separating from the general population those individuals who cannot be classified upon arrival； and <br> －The first－line supervisor or designated classification specialist reviewing every classification decision． | 区 | $\square$ | $\square$ | The lieutenant or sergeant assigned to the Classification Department reviews each classification decision． |
| The intake／processing officer reviews work－folders，A－ files，etc．，to identify and classify each new arrival． | 区 | $\square$ | $\square$ |  |
| Staff uses only information that is factual，and reliable to determine classification assignments．Opinions and unsubstantiated／unconfirmed reports may be filed but are not used to score detainees classifications． | 区 | $\square$ | $\square$ |  |
| Housing assignments are based on classification－level． | 区 | $\square$ |  |  |
| A detainee＇s classification－level does not affect his／her recreation opportunities．Detainees recreate with persons similar classification designations． | 区 | $\square$ | $\square$ |  |
| etainee work assignments are based upon classification designations． | 区 | $\square$ | $\square$ |  |
| The classification process in includes reassessment／reclassification．At IGSA＇s，detainees may request reassessment 60 days after arrival． | 囚 | $\square$ | $\square$ | Based on security classification，the computer schedules a reclassification assessment date in 30 ， 60 or 90 days．Other events may trigger an earlier reclassification．A detainee may request a reassessment at anytime． |
| Procedures exist for a detainee to appeal their classification assignment．Only a designated supervisor or classification specialist has the authority to reduce a classification－level on appeal． | 囚 | $\square$ | $\square$ | IGSAs need not use only a designated supervisor or classification specialist to reduce a classification－ level on appeal．At this facility，detainees may make a request，at anytime，for classification reassessment．The Classification Department will review and respond to the request promptly． |
| Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days． | $\square$ | $\square$ | 区 | Only SPCs／CDFs are required to handle classification appeals within the time frames described in this component．The facility responds to classification requests as soon as possible． |
| Classification designations may be appealed to a higher authority，such as the Warden or equivalent． | $\square$ | $\square$ | 区 | Classification designations appealed to a higher authority applies only to SPCs and CDFs．At this facility，the handbook describes how appeals may be made to the Classification Department，but can be appealed upward． |
| The Detainee Handbook or equivalent for IGSAs explains the classification levels，with the conditions and restrictions applicable to each． | 区 | $\square$ | $\square$ |  |
| \ACCEPTABLE $\quad \square$ DeFICIENT | T $\square$ At－Risk $\quad \square$ Repeat Finding |  |  |  |

## Remarks:

This facility uses an objective computer based classification system. The Classification Department is staffed with officers and supervisors who specialize in classification.

Most male ICE detainees are housed in unit C3L and female ICE detainees are housed in unit C2G.


## CORRESPONDENCE AND OTHER MAIL

policy：all fachuties wll ensure that detanees send and receive correspondence in a tmely manner，subject to MTATIONS REQURED FOR TIE SAFETY，SECURTY，AND ORDERIY OPERATION OPTHEFACIUTY．OTHER MAII：WIL BE PERMITTED，SUBIECTTO fhe same lmitations．Each facilty wil widely distribute its cuidrunes concerning correspondence and other mall．

| COMIPONENTS |
| :--- |
| The rules for correspondence and other mail are posted in each <br> housing or common area，or provided to each detainee via a <br> detainee handbook． |


| The facility provides key information in languages other than English；In the language（s）spoken by significant numbers of detainees．List any exceptions． |
| :---: |
| Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected． |
| Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system（excluding weekends and holidays）． |
| Staff does not open and inspect incoming general correspondence and other mail（including packages and publications）without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons． |
| Staff does not read incoming Warden＇s prior written appro |


| YES | No | NA | －REMARKS |
| :---: | :---: | :---: | :---: |
| 区 | $\square$ | $\square$ | Posting correspondence procedures in housing units or common areas is required only for SPCs／CDFs．At this facility，correspondence rules and other information is provided in the detainee handbook．However，it is not posted in the housing units． |
| 区 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ | Mail is picked up at the facility，by the U．S． Postal Service，Monday－Saturday． |
| 区 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ | Reading incoming general correspondence without the Warden＇s approval is only required for an SPC／CDF．At this facility，general mail is opened and inspected，but not read． |
| 囚 | $\square$ | $\square$ |  |
| 【 | $\square$ | $\square$ |  |
| 囚 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ | IGSAs are not required to notify the addressee of incoming mail that was rejected．According to staff，detainees are notified when incoming mail is rejected． |
| 囚 | $\square$ | $\square$ |  |
| 区 | $\square$ | $\square$ | The detainee receives a property receipt for any items removed from the mail and placed in his／her property．If cash or a money order is received，a receipt is issued to the detainee showing the funds deposited into his account． |
| 区 | $\square$ | $\square$ |  |

## CORRESPONDENCE AND OTHER MAIL

PoLICy: All fachities wil ensure that detainees send and receive correspondence in a timely manner, subiect to MITATIONS REOUIRED FOR THESAFETY, SECURITY, AND ORDERLY OPERATION OFTIE FACIITYY. OTHER MAIL WIL BEPERMITIED, SUBIECTTO same limilations. Each faciemy will widely distribute its guibelines concerning correspondence and other mail.
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.
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.
Staff provides the detainee a copy of his/her identity document(s) upon request.
Staff disposes of prohibited items found in detainee mail in accordance with the "Control and Disposition of Contraband" Standard or the similar prevailing policy in IGSAs. Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.
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.
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.
$\left.\begin{array}{l|l|l|c|c|}\hline & & & \\ \hline\end{array}\right]$

EMARKS:
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) / 6-10-2010

AUDITOR'S SIGNATURE/DATE

## DETAINEE HANDBOOK

POLICY：EVERY OIC WILL DEVELOPA SITE－SIECIITC DETAINEE HANDBOOKTO SER VE AS AN OVERVIEW OF，AND GUIDE TO，THE DETENIION HICIES，RUIES，AND PROCEDURES IN EFFECT AT THE FACIIHY：THE HANDBOOK WII AISO DESCRIBE THE SERVICES，PROGRAMS，AND －Pportunimes availabie tirough various sources，including the facility，ICE，private organizations，etc．Every detainbe WIII RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TOTHE FACILIIY．

| Components | YES | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The detainee handbook is written in English and translated into Spanish，or into the next most－prevalent Language（s）． | 区 | $\square$ | $\square$ |  |
| The handbook is supplemented by the facility orientation video， where one is provided． | 囚 | $\square$ | $\square$ |  |
| All staff members receive a handbook and training regarding the handbook contents． | 区 | $\square$ | $\square$ |  |
| The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees． | 区 | $\square$ | $\square$ |  |
| There an annual review of the handbook by a designated committee or staff member． | 囚 | $\square$ | $\square$ |  |
| The detainee handbook addresses the following issues： <br> －Personal Items permitted to be retained by the detainee； and <br> －Initial issue of clothes，bedding and personal hygiene items． | 区 | $\square$ | $\square$ | $\pm$ |
| The detainee handbook states in clear language the basic detainee responsibilities． | 囚 | $\square$ | $\square$ |  |
| The handbook clearly outlines the methods for classification of detainees，explains each level，and explains the classification appeals process． | 区 | $\square$ | $\square$ |  |
| he handbook states when a medical examination will be onducted． | 区 | $\square$ | $\square$ | The handbook states that a medical examination will be conducted by a medical professional within fourteen days of arrival． |
| The handbook describes the facility，housing units，dayrooms，in－ dorm activities，and special housing units． | 区 | $\square$ | $\square$ | In－dorm activities are not posted in the detainee handbook．During the inspection， the in－dorm activities were incorporated into the handbook． |
| The handbook describes official count times and count procedures；meal times and feeding procedures；procedures for medical or religious diets；smoking policy；clothing exchange schedules；and，if authorized，clothes washing and drying procedures，and expected personal hygiene practices． | 区 | $\square$ | $\square$ | The handbook does not specify meal times． However，this was corrected during the inspection． |
| The handbook describe times and procedures for obtaining disposable razors，and allows that detainees attending court will be afforded the opportunity to shave first． | 区 | $\square$ | $\square$ | Razors are given out three times a week． Detainees attending court are provided the opportunity to shave before court． |
| The handbook describes barber hours and hair cutting restrictions． | 区 | $\square$ | $\square$ |  |
| The handbook describes the telephone policy；debit card procedures；direct and free calls；locations of telephones；policy when telephone demand is high；and policy and procedures for emergency phone calls． | 区 | $\square$ | $\square$ | Debit card，direct and free call procedures were not specified in the detainee handbook． However，these procedures were added to the handbook during the inspection． |
| The handbook addresses religious programming． | 区 | $\square$ | $\square$ |  |
| The handbook states times and procedures for commissary or vending machine usage，where available． | 区 | $\square$ | $\square$ |  |
| The handbook describes the detainee voluntary work program． | 区 | $\square$ | $\square$ | ICE detainees are not permitted to participate in the voluntary work program． |
| We handbook describes the library location and hours of eration，and law library procedures and schedules． | 区 | $\square$ | $\square$ |  |

## DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A STTE-SEECLHC DETAINEE HANDBOOK TO SERVE AS AN OVER VIEW OF, AND GUIDETO, THE DETENTION rolicies, rules, and procedures in brfect at the faciliy. The handbook will also describe the services, programs, and portuntties availablethrough various sources, including thefacilty, ICE, private organizations, etc. Every detainee
WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILTTY.


## REMARKS:

In-dorm activities, meal times, debit card, direct and free call procedures, guarantee against retaliation by staff for filing a grievance, and sick call procedures for segregation detainees were not addressed in the detainee handbook. During the inspection, all these areas were incorporated into the detainee handbook.
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) $\perp$ b-1U-2010
\% AUDITOR'S Signature/ Date


| Components－$\quad-2$ | YES | No | NA | －Remarks－ |
| :---: | :---: | :---: | :---: | :---: |
| Detainees at CDFs are paid in accordance with the＂Voluntary Work Program＂standard．Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay． | $\square$ | $\square$ | 囚 | IGSAs are not required to pay detainees in accordance with the Voluntary Work Program standard．At this facility，ICE detainees are not permitted to participate in the voluntary work program． |
| 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． | 囚 | $\square$ | $\square$ |  |
| For cafeteria style operations，a transparent＂sneeze guard＂ protects both the serving line and salad bar line． | 囚 | $\square$ | $\square$ | Satellite feeding of detainees is conducted at this facility．The staff dining area has a sneeze guard over the serving and salad bar line． |
| The facility has a standard 35 －day menu cycle．IGSAs use a 35 day or similar system for rotating meals． | 『 | $\square$ | $\square$ | IGSAs are not required to have a 35 －day menu cycle．A 28 －day menu cycle is utilized by this food service operation． |
| The FSA or facility considers the ethnic diversity of the facility＇s detainee population when developing menu cycles （Provide examples）． | 区 | $\square$ | $\square$ | To provide ethnic diversity in the menu，corn－ bread，grits，tacos，tetrazzini，tamale pie， stroganoff，and pinto beans are some of the food items served． |
| A registered dietitian conducts a complete nutritional analysis of every master－cycle menu planned． | 区 | $\square$ | $\square$ |  |
| The FSA has established procedures to ensure that items on the master－cycle menu are prepared and presented according to approved recipes． | 区 | $\square$ | $\square$ |  |
| The Cook Foreman has the authority to change menu items if cessary． <br> －If yes，documenting each substitution，along with its justification <br> －With copy to FSA | ® | $\square$ | $\square$ | IGSAs are not required to give the Cook Foreman authority to change menu items when necessary．At this facility，both the lead cook and cook supervisors have the authority to change the menu up to twice a week，if necessary．The food service supervisors notify the Food Service Administrator of any changes to the menu． |
| All staff and volunteers know and adhere to written＂food preparation＂procedures． | 囚 | $\square$ | $\square$ |  |
| Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA． | 囚 | $\square$ | $\square$ |  |
| A common－fare menu available to detainees whose dietary requirements cannot be met on the main line． <br> －Changes to the planned common－fare menu can be made at the facility level； <br> －Hot entrees are offered three times a week； <br> －The common－fare menus satisfy nutritional recommended daily allowances（RDAs）； <br> －Staff routinely provide hot water for instant beverages and foods； <br> －Common－fare meals are served with： <br> －Disposable plates and utensils． <br> －Reusable plates and utensils． <br> －Staff use separate cutting boards，knives，spoons， scoops，etc．，to prepare the common－fare diet items． | 区 | $\square$ | $\square$ |  |
| supervisor at the command level must approve a detainee＇s removal from the Common－Fare Program． | マ | $\square$ | $\square$ | The Chaplain approves the removal of detainees from the common－fare program． |

The Warden，in conjunction with the chaplain and／or local religious leaders，provides the FSA a schedule of the ceremonial meals for the following calendar year．
The common－fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year．
－Muslims fasting during Ramadan receive their meals after sundown．
－Jews who observe Passover but do not participate in the Common－Fare Program receive the same Kosher－ for－Passover meals as those who do participate．
－Main－line offerings include one meatless meal（lunch or dinner）on Ash Wednesday and Fridays during Lent．
The food service program addresses medical diets．
Satellite－feeding programs follow guidelines for proper sanitation．

The common－fare program accommodates Ramadan and Passover，but does not meet the requirements for Ash Wednesday or Fridays during Lent．

| sanitation． | $\square$ | 区 | $\square$ | have locking devices which could lead to potential sanitation issues．Locking devices were acquired during the inspection to secure the carts． |
| :---: | :---: | :---: | :---: | :---: |
| Hot and cold foods are maintained at the prescribed，＂safe＂ temperature（s）while being served． | $\square$ | 区 | $\square$ | Temperature checks of food being plated for the noon meal were as follows：Potatoes－180 degrees，hot dogs－172 degrees，coleslaw－42 degrees，green beans－170 degrees，milk－43 degrees．The fish did not meet the required temperature of 140 degrees．The temperature was 120 degrees and it was returned to the oven to heat．Temperature checks conducted on June 10，2010，found rice－ 152 degrees， chili－150 degrees，corn bread and cake at room temperature，which meet the standards of safe temperatures． |
| All meals are provided in nutritionally adequate portions． | 区 | $\square$ | $\square$ |  |
| Food is not used to punish or reward detainees based upon behavior． | 区 | $\square$ | $\square$ |  |
| The food service staff instructs detainee volunteers on： <br> －Personal cleanliness and hygiene； <br> －Sanitary techniques for preparing，storing，and serving food；and <br> －The sanitary operation，care，and maintenance of equipment． | 区 | $\square$ | $\square$ |  |
| Everyone working in the food service department complies with food safety and sanitation requirements． | 区 | $\square$ | $\square$ |  |
| Standard operating procedures include weekly inspections of all food service areas，including dining and food－preparation areas and equipment． <br> －Who conducts the inspections？ | 区 | $\square$ | $\square$ | Officers inspect all areas of the Food Service Department on a daily basis． |
| Equipment is inspected for compliance with health and safety codes and regulations． <br> －When was the most recent inspection？ <br> －Which agency conducted the inspection？ | 区 | $\square$ | $\square$ | On February 16，2010，the Deputy State Fire Marshal conducted an equipment inspection， for compliance with health and safety codes and regulations． |


| POIICY：EVERY PACILITY WILI PROVIDE DETAINEES IN ITS CARE WITH NUTRIIOUS ANDAPPETIZANGMEAIS，PREPAREDIN ACCORDANCE WIH <br> POIICY：EVERY FACIIITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRIIOUS AND APPETIZING MEAIS，PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS． |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 4 Components | Yes | NO | NA | Hf．REMARKS |
| Reports of discrepancies are forwarded to the Warden or designated department head，and corrective action is scheduled and completed． | 区 | $\square$ | $\square$ |  |
| Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal． | 区 | $\square$ | $\square$ |  |
| Staff documents the results of every refrigerator／freezer temperature check． |  |  |  | Staff documents all refrigerator／freezer temperature checks．However，refrigerator number two was logged with temperatures |
|  | 区 | $\square$ | $\square$ | ranging from $38-56$ degrees．The Food Service Director stated the internal thermometer was not used，and that the external thermometer was not accurate．At the time of the inspection，the refrigerator temperature was 39 degrees． |
| The cleaning schedule for each food service area is conspicuously posted． | $\square$ | 区 | $\square$ | Cleaning schedules were not posted；however， this was corrected during the review． |
| Procedures include inspecting all incoming food shipments for damage，contamination，and pest infestation． | 区 | $\square$ | $\square$ |  |
| Storage areas are locked when not in use． | 区 | $\square$ |  |  |
| $\triangle$ ACCEPTABLE $\quad \square$ DEFICIENT | $\square$ AT－RISK |  |  | $\square$ Repeat Finding |

## REMARKS：

is recommended that the facility provide training that specifically addresses detainee－related issues，and that the common－fare program be expanded to incorporate the observance of Lent by providing a meatless meal for lunch and dinner on Fridays during Lent and Ash Wednesday．

Closer observance of temperature checks of food being plated needs to be conducted to ensure items meet the required temperatures prior to plating．Temperature readings of the thermometers located inside the refrigeration units need to be conducted to assure consistency of temperatures．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）
1．6－10－2010
AUDITOR＇S SIGNATURE／DATE
$\square$ Standard Na：（IGSA OnLy）Cueck tmis boxifailitcedetainee funds，valuables and Propertyare handied oniy by the ICE Field OfIICE or SUb－Office in Control of tile deiainde case．

| COMPONENTS | YES | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Detainee funds and valuables are properly separated，stored，and are accessible only by designated supervisor（s）． | 区 | $\square$ | $\square$ |  |
| Detainees＇large valuables are secured in a location accessible to designated supervisor（s）or processing staff only． | $\triangle$ |  | $\square$ |  |
| Staff itemizes the baggage and personal property of arriving detainees （including funds and valuables）．For IGSAs and CDFs，using a personal property inventory form that meets the ICE standard？ | 区 | $\square$ | $\square$ |  |
| Staff forwards an arriving detainee＇s medication to the medical staff． | 区 |  | $\square$ |  |
| Audits of baggage and non－valuable property occur each quarter and audits are logged and verified． | $\square$ | $\square$ | 区 | Quarterly audits of property are not required by IGSAs，and are not conducted at this facility． |
| （b）（7）（e）$)$ fficers are present during the processing of detainee funds and valuables during in－processing to the facility．（b）（7）（e）$\downarrow f f i c e r s$ verify funds and valuables． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility $(b)(7)(0)(7)(\circ)$ fficers verify funds that are in excess of $\$ 300$ or more．Funds less than $\$ 300$ are signed off on $b(x)$ ）（7）（ $\beta$ ）fficer．The detainee signs a receipt for any funds processed at the time of arrival． |
| Staff searches arriving detainees and their personal property for ntraband． | $\square$ | $\square$ | 【 | IGSAs are not required to search arriving detainees and their personal property for contraband．At this facility，staff searches arriving detainees and their personal property for contraband． |
| Staff procedures follow written policy for returning forgotten property to detainees． | $\square$ | 区 | $\square$ | There is no written policy for returning forgotten property to detainees． |
| Property discrepancies are immediately reported to the CDEO or Chief of Security． | $\square$ | $\square$ | 区 | Property discrepancies are required to be reported immediately to the CDEO or Chief of Security in CDFs／SPCs．Property discrepancies found at this facility are immediately reported to a supervisor． |
| Staff follows written procedures when returning property to detainees． | 区 |  | $\square$ |  |
| CDF／IGSA facility procedures for handling detainee property claims are similar with the ICE standard． | 区 | $\square$ | $\square$ |  |
| The facility attempts to notify an out－processed detainee that he／she left property in the facility： <br> －By sending written notice to the detainee＇s last known address； <br> －Via certified mail；and <br> －The notice state that the detainee has 30 days in which to claim the property，after which it will be considered abandoned． | $\square$ | $\square$ | 区 | IGSAs are not required to notify out－ processed detainees of personal property left at the facility． <br> Procedures at this facility include contacting the detainee by phone to notify that he／she left property at the facility．Property that is not claimed by ICE detainees is given to ICE agents． |

## FOR OFICIAL USE ONLY（LAW ENFORCEMENT SENSITHE） <br> Page 18 of 81

## FUNDS AND PERSONAL PROPERTY

Policy: All fachities willimplement rrocedures to controland safeguard detainees' personal property. Procedures will PROVIDE FOR TLE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTIER PERSONAL PRORERTY;TIE DOCUMENTATION AND gCEIPTING OF SURRENDERED PROPERTY; AND THE INITAI AND REGULARIY SCHEDULED INVENTORYING OF AII FUNDS, VALUABIES, AND OTHER PROPERTY.

Standard na: (IGSA ONLY) Check this box ifalli ICE detainee Funds, Valuables and Properiy are handled oniy by The ICD Pield Office or Sub-Ofeice nn conirol of the detainee case.

The facility disposes of abandoned property in accordance with written procedures.

- If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.

IGSAs are not required to dispose of abandoned property in accordance with written procedures. This facility does not have written procedures for the disposal of abandoned property. Staff stated that any abandoned property of ICE detainees is given to the ICE agent.

## Repeat Finding

## REMARKS:

It is recommended that written procedures be established for returning forgotten and abandoned property.
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) / 6-10-2010

AUDITOR's Signature / Date

## DETAINEE GRIEVANCE PROCEDURES

POLICY：EVERY FACILITY WILL DEVELOP AND MPLEMENI STANDARD OPERATING PROCEDURES（SOPS）FOR ADDRESSING DETAINER RIEVANCES IN TMMBLY FASHION，EACH STEP IN THE PROCESS WILLOCCUR WITHIN THE PRESCRIBED TME FRAME．AMONG OTHER THINGS，A AREVANCE WILL BE PROCESSED，INVESTIGATED，AND DECDED（SUBJECT TO APPEAL）IN ACCORDANCE WITH THE SOPS；A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED N TIE SOPS．STANDARD PROGEDURE WIL INCLUDE PROVIDING THE DETAINEE WITH A WRITEN RESPONSE TO ANY FORMALGRIEVANCE，WHCH WILI INCLUDETHEBASIS FOR THE DECISION．TIEFACIITYY WILLALSOESTABLISHSTANDARD PROCEDURES FOR MANDIINO EMERGENCY GRIEVANCES．ALI GRIEVANCES WILLRECEIVESUPERVISORY REVIEW．REPRLSALAGAINSTIHEFIER OF A GRIEV ANCE WILI NOT BE TOI ERATED．

COMPONENTS
Written procedures provide for the informal resolution of oral grievances（Not mandatory）．

| Written procedures provide for the informal resolution of oral grievances（Not mandatory）． | 区 | $\square$ | $\square$ |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
| Detainees have access to the grievance committee（or equivalent in IGSA），using formal procedures． <br> －Detainees may seek help from other detainees or facility staff when preparing a grievance． <br> －Illiterate，disabled，or non－English－speaking detainees receive special assistance when necessary． | 区 | $\square$ | $\square$ | The grievance committee is comprised of a lieutenant， captain，and unit officer． |
| Every member of the staff knows how to identify emergency grievances， including the procedures for expediting them． | 区 | $\square$ | $\square$ |  |
| There are documented or substantiated cases of staff harassing， disciplining，penalizing，or otherwise retaliating against a detainee who lodged a complaint： <br> －If yes，explain． | $\square$ | 区 | $\square$ | There have been no documented or substantiated cases of staff retaliation against a detainee who lodged a complaint． |
| Procedures include maintaining a Detainee Grievance Log． <br> －If not，an alternative acceptable record keeping system is maintained． <br> －＂Nuisance complaints＂are identified in the records． <br> －For quality control purposes，staff document nuisance complaints received but not filed． | 区 | $\square$ | $\square$ | IGSAs are not required to identify nuisance complaints or document nuisance complaints received but not filed．All complaints，including nuisance complaints，are treated and processed and tracked as grievances．Nuisance complaints are not tracked． |
| Staff is required to forward any grievance that includes officer misconduct to a higher official or，in a CDF／IGSA facility，to ICE． | 区 | $\square$ | $\square$ |  |

$\square$ ACCEPTABLE $\square$ DEFICIENT $\square$ AT－RISK $\quad \square$ REPEAT FINDING

## Remarks：

All grievances，to include informal，are documented in a computerized program．Detainees may complete an inmate grievance form or call the Grievance Hotline by dialing 114 on the housing unit telephones．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）$/ 6-10-2010$
（）AUDITOR＇S SIGNATURE／DATE

## GROUPIEGAL RIGHIS PRESENTATIONS

ROLICY: FACIITIES HOUSING ICE DETAINEES SHALI PERMITAUTHORIZE PERSONS TO MAKEPRESENIATIONS TOGROURSOFDETAINEES FOR IE PURPOSE OF INFORMING THEM OF U.S. MMMGRATION LAW AND PROCEDURES, CONSISTENT WIIHIHE SECURITY AND ORDERLY OPERATION OF EACH PACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSIRUCT DETAINEES ABOUTTHE IMMIGRATION SYSTEM AND THEIR RIGHIS AND OPIIONS WIIHIN IT.
 OVERAII, AND CONIINUE ON WIIH NEXT PORTION OF WORKSILEET.
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.
Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification to attorneys or accredited representatives.
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.
When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so that all detainees signed up may attend.
Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.
Interpreters are admitted when necessary to assist attorneys and other gal representatives.
rresenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.
Staff permits presenters to distribute ICE-approved materials.
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.
Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations.
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request

## $\boxtimes$ acceptable <br> $\square$ Deficient <br> At-Risk <br> $\square$ Repeat Finding

## Remarks:

The facility stated that there have been no requests for a Group Legal Rights Presentation during the past year.
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) 6-10-2010

AUDITOR'S SIGNATURE / DATE

## ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

POLICY: ICE REQURES THAT AMIFACIIIIES HOUSING ICE DETAINBES PROVIDE CLEAN CLOTHING, BEDDING, IINENS ANDTOWELS TOEVERY ICEDETANEE UPON ARRIVAI. FURTHER, FACI ITIES SHAII PROVIDEICE DETAINLES WITH LEGULAREXCIAANGES OFCLOTIING, IINENS, AND UWELS FOR AS LONG AS THEY REMAIN IN DETENTION.


The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels.

- The supply of these items exceeds the minimum required for the number of detainees.
All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:
- One uniform shirt and one pair of uniform pants, or one jumpsuit;
- One pair of socks;
- One pair of underwear (Daily change); and
- One pair of facility-issued footwear.

Additional clothing is available for changing weather conditions, or as seasonally appropriate.
New detainees are issued clean bedding, linens, and towels. They receive at a minimum:

- One mattress;
- One blanket;
- Two sheets;
- One pillowcase;
- One towel; and
- Additional blankets are issued based on local weather conditions.
Detainees assigned to special work areas are clothed in accordance with
"he requirements of the job.
Setainees are provided clean clothing, linen and towels.
- Socks and undergarments - exchanged daily.
- Outer garments - twice weekly.
- Sheets - weekly.
- Towels - weekly.
- Pillowcases - weekly.

Food service detainee volunteer workers are permitted to exchange outer garments daily.

| garments daily. | $\square$ | $\square$ | $\boxed{l}$ |
| :--- | :--- | :--- | :--- | :--- |
| Volunteer detainee workers are permitted to exchange outer garments <br> more frequently. | $\square$ | $\square$ | lo exchange outer food service <br> garments daily, this facility allows <br> garments to be exchanged daily, or <br> as needed. |

## ® ACCEPTABLE

$\square$ DEFICIENT
AT-RISK
Detainees are provided clean clothing, linen and towels with the exception of pillowcases because pillows are built into the mattresses.

Even though IGSAs are not required to exchange outer food service garments daily, this facility allows garments to be exchanged daily, or as needed.
IGSAs are not required to exchange volunteer detainee workers' garments more frequently. This facility does their garments, as needed.

| $\triangle$ ACCEPTABLE | $\square$ DEFICIENT | $\square$ AT-RISK | $\square$ REPEAT FINDING |
| :---: | :---: | :---: | :---: |

## REMARKS:

Detainees at this facility have access to a washer and dryer in their housing unit to launder their clothes, as needed. They may also send their clothes to the laundry based on scheduled days. Towels for showers are issued immediately before a shower is taken and returned upon completion of the shower. Additional clothing is not issued for changing weather conditions. Pillowcases are not issued, because pillows are built into the mattress.

[^1](b)(6), (b)(7)(c)

## MARRIAGE REQUESTS

Policy：All detainee mardiage requests will riceive casd－by－case consideration from ice management．

| Components－ | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The Field Office considers detainee marriage requests on a case－by－case basis． | 区 | $\square$ | $\square$ | Marriage requests by ICE detainees are forwarded to the Atlanta Field Office and Probate Court for approval． |
| The Field Office Director reviews every marriage request rejected by a Warden／OIC or IGSA．Rejections are documented． | 区 | $\square$ | $\square$ |  |
| It is standard practice to require a written request for permission to marry． | 区 | $\square$ | $\square$ |  |
| The written request includes a signed statement or comparable | 区 | $\square$ | $\square$ |  |
| documentation from the intended spouse，confirming marital intent． |  |  |  |  |
| The Warden／OIC provides a written copy of his／her decision to the detainee and his／her legal representative． | 囚 | $\square$ | $\square$ |  |
| When permission is denied，the Warden／OIC states the basis for his／her decision． | 囚 | $\square$ | $\square$ |  |
| The Warden／OIC provides the detainee with a place and time to make wedding arrangements． | 区 | $\square$ | $\square$ |  |
| $\triangle$ Acceptable $\quad \square$ Deficient | $\square$ At－Risk ． |  |  | $\square$ Repeat Finding |

## REMARKS：

There have been no marriage requests from ICE detainees during the past year．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）$\quad$／$\quad 6-10-2010$
diditor＇s Signature／Date

## NON-MEDICAL EMERGENCY ESCORTED TRIPS

Ponicy: The Immigration and Customs Enforcement (ICE) may provide detainees with staff-escorted trips into tie MMMUNITY FOR THE PURPOSE OF VISITING CRITICALIY IIL MEMBERS OF THE DETAINEE'S MMEDIATEPAMILY, OR FOR ATIENDING FUNERAIS.

区 Standard N/A: Check this box if all ICE Non-Medical Emergency Escorted Trips are handied only by tae ICE Field Omilce or Sub-Office in conirol of thi detainiee case.

| Componenis mis | YeS | No | NA | Remaiks |
| :---: | :---: | :---: | :---: | :---: |
| The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <br> - Funeral; or <br> - Deathbed | $\square$ | $\square$ | $\square$ |  |
| The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family". | $\square$ | $\square$ | $\square$ |  |
| The IGSA facility notifies ICE of all detainee requests for non-medical escorts. | $\square$ | $\square$ | $\square$ |  |
| 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. | $\square$ | $\square$ | $\square$ |  |
| Each escort includes at leasb)(7)(eqfficers. |  |  |  |  |
| 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. | $\square$ | $\square$ | $\square$ |  |
| Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee. | $\square$ | $\square$ | $\square$ |  |
| Escort officers are precluded from accepting gifts/gratuities from a tainee, or detainee's relative or friend for any reason. | $\square$ | $\square$ | $\square$ |  |
| scort officers ensure that detainees: <br> - Conduct themselves in a manner that does not bring discredit to the ICE; <br> - Do not violate federal, state, or local laws; <br> - Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; <br> - Make no unauthorized phone calls; and <br> - Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return. | $\square$ | $\square$ | $\square$ |  |
| Standard procedure requires the immediate return to the facility of any detainee who violates trip rules. | $\square$ | $\square$ | $\square$ |  |
| $\square$ ACCEPTABLE $\quad \square$ DEFICIENT $\quad \square$ AT-RISK |  |  |  | $\square$ Repeat Finding |

## Remarks:

All non-medical emergency trips are handled by ICE.
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) $\quad$ 6-10-2010

AUDITOR'S SIGNATURE / DATE

| RECREATION |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| POLICY：It IS ICE POLGC TO provide access to recreational programs and activities to all ICE detainees，to the extent OSSIBLE，UNDER CONDIIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE． |  |  |  |  |
|  |  |  |  |  |
| Componints | Yes | No | NA |  |
| The facility has a recreation program and facility． | 区 | $\square$ |  | －Ramaks indor |
| A recreational specialist（for facilities with more than 350 detainees）tailors the program activities and offerings to the detainee population． | $\square$ | $\square$ | 囚 | A recreation specialist for a facility that has a population of more than 350 detainees is not required by IGSA facilities． This facility does not have a recreation specialist．No formal program activities are provided to the detainee population． |
| Regular maintenance keeps recreational facilities and equipment in good condition． | 区 | $\square$ | $\square$ |  |
| The recreational specialist or trained equivalent supervises detainee recreation workers． | 区 | $\square$ | $\square$ |  |
| The recreational specialist or trainee equivalent oversees recreation programs for special housing units（SHU）and special－needs detainees． | 囚 | $\square$ | $\square$ |  |
| Dayrooms offer sedentary activities，e．g．，board games，cards，television． | 囚 | $\square$ | $\square$ | Dayrooms offer television， chess，checkers，connect four， dominos，and cards． |
| Outside activities are restricted to limited－contact sports． | $\square$ | 囚 | $\square$ | There is no outdoor recreation． The recreation area used by detainees is enclosed with windows that open for sunlight and air． |
| Wach detainee has the opportunity to participate in daily recreation． | 区 | $\square$ | $\square$ |  |
| etainees have access to recreation activities outside the housing units for at least one hour daily， 5 days a week． | $\square$ | 区 | $\square$ | There is no outdoor recreation． The recreation area used by detainees is enclosed with windows that open for sunlight and air．Recreation in this area is available to ICE detainees from 6：30 am to 11：30 pm， seven days a week，with the exception being at count and meal times． |
| Staff checks all items for damage and condition when equipment is returned． | $\square$ | $\square$ | 区 | No recreation equipment is issued to detainees． |
| Staff conducts searches of recreation areas before and after use． | 区 | $\square$ | $\square$ |  |
| All recreation areas under constant staff supervision． | 囚 | $\square$ | $\square$ | The unit officer and the control center supervise recreation areas in the housing units． |
| Supervising staff is equipped with radios． | 区 | $\square$ | $\square$ |  |
| The facility provides detainees in the SHU at least one hour of outdoor recreation time daily，five times per week． | $\square$ | 区 | $\square$ | Detainees in the administrative housing unit receive recreation five days a week．Disciplinary status detainees receive recreation three days a week． |
| Detainees in disciplinary／administrative segregation receive a written explanation when a panel revokes his／her recreation privileges． | 区 | $\square$ | $\square$ |  |
| Special programs or religious activities are available to detainees． | 区 | $\square$ | $\square$ |  |

## RECREATION

POLICY: IT IS ICE PDIICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACIIVITIES TO ALL. ICE DETAINEES, TO TIIE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.
$\left.\left.\begin{array}{|l|l|l|l|l|l|}\hline \text { Yolunteers are required to sign a waiver of liability before entering a secure } & & & & \begin{array}{l}\text { IGSAs are not required to have } \\ \text { volunteers sign a waiver of } \\ \text { liability prior to entering the } \\ \text { facility. A waiver of liability is } \\ \text { signed by volunteers prior to the facility where detainees are present. } \\ \text { entering this facility. }\end{array} \\ \hline \text { Visitors, relatives or friends are not allowed to serve as volunteers. } & & & & \begin{array}{l}\text { Visitors, relatives or friends are } \\ \text { not allowed to serve as } \\ \text { volunteers at SPC/CDFs. }\end{array} \\ \text { Background checks are }\end{array}\right] \begin{array}{l}\text { conducted by this facility prior } \\ \text { to persons becoming an } \\ \text { approved volunteer. }\end{array}\right]$

## REMARKS:

Each general housing unit has an enclosed area with a roof and concrete walls that contain eight exterior screened, open-aired windows at allows circulation of the sun and air. The recreation area is accessed directly from the housing units, and this affords easy access and availability of this area. However, the recreation area does not meet the NDS for outdoor recreation. No ICE detainees have been held at this facility for six months. The facility must develop a written policy and procedures to address the outdoor recreation standard requirements for ICE detainees that might be held longer than six months.

Detainees housed in Disciplinary Segregation receive one hour of recreation three days a week.
(b)(6), (b)(7)(c)
$=(\mathrm{b})(6),(\mathrm{b})(7)(\mathrm{c}) \quad 6-10-2010$
Auditor's Signature / Date

## RELIGIOUS PRACTICES

POLICY：FACILILES WIL PROVIDE ICE DETAINEES OF AIL FAITHS WITH REASONABIE AND LQUUTABLE OMPORTUNIIES TOPARILCPATEIN THE ACTICES OF THER FAITH，IMMIED ONLY BY THE CONSTRAINTS OF SAFETY，SECURTY，THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS．

| －Components－－ | Yes | No | NA | REmARKS |
| :---: | :---: | :---: | :---: | :---: |
| Detainees are allowed to engage in religious services． | 区 | $\square$ | $\square$ |  |
| Space is available for detainees to conduct religious services． | 区 | $\square$ | $\square$ | The multi－purpose rooms are used for religious services． |
| The facility allows detainees to observe the major＂holy days＂of their religious faith． <br> －List any exceptions． | 囚 | $\square$ | $\square$ |  |
| The facility accommodates recognized holy－day observances by： <br> －Providing special meals，consistent with dietary restrictions； <br> －Honoring fasting requirements； <br> －Facilitating religious services；and <br> －Allowing activity restrictions． | $\square$ | $\square$ | 区 | IGSA facilities are not required to accommodate holy－day observances．This facility observes holy－days by providing special meals．Fasting is also permitted．Religious services are facilitated by the religious department． |
| Each detainee is allowed religious items in his／her immediate possession． | 区 | $\square$ | $\square$ | Detainees are permitted to retain Prayer rugs，Bibles，In－Touch magazines，and a religious newsletter developed by the Chaplain． |
| Volunteer＇s credentials are checked and verified before allowing participation in detainee programs． | 区 | $\square$ | $\square$ |  |
| Members of faiths not represented by clergy may conduct their own rrvices within security allowances． | 区 | $\square$ | $\square$ |  |
| etainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility． | 囚 | $\square$ | $\square$ | Individual clergy visits are made to detainees housed in SMU． |
| $\triangle$ Acceptable $\quad \square$ Deficient $\quad \square$ At－Risk $\quad \square$ Repeat Finding |  |  |  |  |

## Remarks：

Three pastors provide Spanish services on Saturdays twice each month，in the multi－purpose room．On alternate Saturdays，Bible studies are also provided．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）／6－10－2010
DAUDITOR＇S Signature／Date

|  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| olicy：all faciuties housing ice detainees wil permit detanees＇reasonable and equttable access to telephones． |  |  |  |  |
| Components ent | Yes | No | NA | Remarks |
| Detainees are allowed access to telephones during established facility waking hours． | 区 | $\square$ | $\square$ |  |
| Upon admittance，detainees are made aware of the facility＇s telephone access policy． | 囚 | $\square$ | $\square$ | Telephone access for the general and SMU population is described in the facility handbook．Each detainee is also given an instruction sheet providing information on what occurs when making their first call． |
| Access rules are posted in housing units． | 区 | $\square$ | $\square$ |  |
| The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility＇s population． | 区 | $\square$ | $\square$ | The facility handbook is available in English and Spanish． |
| Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population． | 区 | $\square$ | $\square$ |  |
| Telephones are inspected regularly by facility staff to ensure that they are in good working order． | 囚 | $\square$ | $\square$ |  |
| The facility administration promptly reports out－of－order telephones to the facility＇s telephone service provider． | 囚 | $\square$ | $\square$ |  |
| The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun and completed timely． | 区 | $\square$ | $\square$ |  |
| Detainees are afforded a reasonable degree of privacy for legal phone calls． | 区 | $\square$ | $\square$ |  |
| A procedure exists to assist a detainee who is having trouble acing a confidential call． | 囚 | $\square$ | $\square$ |  |
| he facility provides the detainees with the ability to make non－ collect（special access）calls． | 囚 | $\square$ | $\square$ |  |
| Special Access calls are at no charge to the detainees． | 区 | $\square$ | $\square$ |  |
| The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review． | 『 | $\square$ | $\square$ | Using the posted instructions，a test call was successfully completed to the OIG from a detainee telephone in Unit C2G． |
| 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． | $\square$ | $\square$ | 区 | The facility meets the telephone requirements． |
| No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved ＂Free Legal Services List＂． | 囚 | $\square$ | $\square$ |  |
| Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility． | 区 | $\square$ | $\square$ | A detainee may request to telephone a family member in another facility． |
| Any telephone restrictions are documented． | 区 | $\square$ | $\square$ |  |
| The facility has a system for taking and delivering emergency detainee telephone messages． | 区 | $\square$ | $\square$ |  |
| Emergency phone call messages are immediately given to detainees． | 区 | $\square$ | $\square$ |  |
| Detainees are allowed to return emergency phone calls as soon as possible． | 囚 | $\square$ | $\square$ |  |
| Detainees in disciplinary segregation are allowed phone calls lating to the detainee＇s immigration case or other legal matters， including consultation calls． | 囚 | $\square$ | $\square$ | In addition，detainees in disciplinary segregation status may make at least one personal telephone call weekly． |

POLICY：AlL Facilities housing ICE detainees will permit detainees＇reasonabie and eouitable access to telephones．

| Components | YeS | NO | NA | － |
| :---: | :---: | :---: | :---: | :---: |
| etainees in disciplinary segregation are allowed phone calls to consular／embassy officials． | 区 | $\square$ | $\square$ |  |
| Detainees in disciplinary segregation are allowed phone calls for family emergencies． | 区 | $\square$ | $\square$ |  |
| Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population． | $\square$ | 区 | $\square$ | Detainees in administrative segregation may make calls from 9 am to $11 \mathrm{am}, 2 \mathrm{pm}$ to 4 pm ，and 7 pm to 11 pm ． |
| When detainee phone calls are monitored，notification is posted by detainee telephones that phone calls made by the detainees may be | 区 | $\square$ | $\square$ |  |
| monitored．Special Access calls are not monitored． |  |  |  |  |
| $\triangle$ ACCEPTABLE $\quad \square$ DEFICIENT | $\square$ At－Risk $\square$ Repeat Finding |  |  |  |

## REMARKS：

Overall，the facility complies with the NDS regarding Telephone Access with one exception．Detainees in administrative segregation and protective custody have access to telephones six hours per day．However，this is not the same access as detainees in general population．


|  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| POLICY：ICE SHALL PERMIT DETAINESS TO VIITT WITH FAMILY，F MEDIA． |  |  |  | es，Spectalinterist groups，and thenews |
| ovisions for NGO visitation，as stated in the Detention Standards，are complied with． | 囚 | $\square$ | $\square$ |  |
| Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval． | 囚 | $\square$ | $\square$ |  |
| Former detainees or aliens in proceedings，requesting to visit with a detainee，are referred to the OIC or ICE Field Office． | 区 | $\square$ | $\square$ |  |
| Procedures are in place，consistent with the detention standard， for examinations by independent medical service providers and experts． | 囚 | $\square$ | $\square$ | Staff advised that the Jail Administrator and Health Care Administrator consider requests for independent medical examinations．The requesting party is responsible for expenses associated with the examination． |
| $\triangle$ Acceptable $\square$ Deficient $\square$ At－Risk $\square$ Repeat Finding |  |  |  |  |

## REMARKS：

The facility provides non－contact video visitation．Every housing unit has video visitation equipment．The visitors use the equipment in an area near the lobby entrance．There are 31 video booths．A visitor was observed having trouble with the equipment during a video visit，and trouble with the audio on the handset was identified as the problem．Staff was made aware of this problem，and it was resolved by replacing the handset．Later that day，a visitor advised that her video visitation was going well with the equipment．

Legal visits are usually non－contact in a private room that has a slot in the window for document exchange．Upon request，contact legal visits may take place in one of four multi－purpose rooms near the housing units．

## VOLUNTARY WORK PROGRAM

OLICY: IN EVERY FACIITYY OFHERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILLHAVE THE OPRORTUNITY TO WORK AND EARN oney by participating. Whilir notifgaliy reouired, ICE affords detainee workers basic occupationalsafety and healti ADMINISTRATION (OSHA) PROTECTIONS.

区 Check liere mice detainees are not autuorizntio work at Theicsa factity. Mark na on Form G-324a, page 3 AND MOVE TO NEXT SECIION.

| \% Components | YES | No | NA | 3 \% Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Does the facility have a voluntary work program? <br> - Do ICE detainees participate? | $\square$ | $\square$ | $\square$ |  |
| Detainee housekeeping meets neatness and cleanliness standards. | $\square$ |  |  |  |
| Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter. | $\square$ | $\square$ | $\square$ |  |
| Written procedures govern selection of detainees for the Voluntary Work Program. | $\square$ | $\square$ | $\square$ |  |
| Where possible, physically and mentally challenged detainees participate in the program. | $\square$ | $\square$ | $\square$ |  |
| The facility complies with work-hour requirements for detainees, not exceeding: <br> - Eight hours a day and Forty hours a week. | $\square$ | $\square$ | $\square$ |  |
| Detainee volunteers generally work according to fixed schedule. |  |  |  |  |
| If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file. | $\square$ | $\square$ | $\square$ |  |
| Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program. | $\square$ | $\square$ | $\square$ |  |
| The voluntary work program meets: <br> - OSHA, NFPA, ACA standards | $\square$ | $\square$ | $\square$ |  |
| Medical staff screen and formally certify detainee food service volunteers. <br> - Before the assignment begins; and <br> - As a matter of written procedure | $\square$ | $\square$ | $\square$ |  |
| Detainees receive safety equipment/ training sufficient for the assignment. |  |  |  |  |
| Proper procedure is followed when an ICE detainee is injured on the job. |  | $\square$ | $\square$ |  |
| $\square$ ACCEPTABLE $\quad \square$ Deficient $\quad \square$ | $\square$ AT-RISK |  | Repeat Finding |  |

## REMARKS:

The facility does not offer a voluntary work program for ICE detainees.

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

## (b)(6), (b)(7)(c) L 6-10-2010

Auditor's Signature / Date

# SECTION II HEALTH SERVICES STANDARDS 

| Components |
| :--- |
| When a detainee has refused food for 72 hours，it is standard practice for |

staff to refer him／her to the medical department．

## HUNGER STRIKES

|  | $\square$ | $\square$ | 区 | nee refuses meals for longer |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | than 24 hours．The housing sergeant notifies the Health Services Administrator or the facility physician． |
| CDFs and IGSAs immediately report a hunger strike to the ICE． | 区 | $\square$ | $\square$ | Hunger strike notification is made through the local ICE office in Charleston． |
| The facility has established procedures to ensure staff respond immediately to a hunger strike． | 区 | $\square$ | $\square$ | Carolina Center for Occupational Health（CCOH）policy J－F－02－B addresses hunger strike procedures． Facility staff refers a hunger striking detainee to medical staff after 24 hours of meal refusal． |
| Policy and procedure require that staff isolate a hunger－striking detainee from other detainees． <br> －If yes，in an observation room？ | $\square$ | $\square$ | 区 | IGSAs are not required to isolate a hunger striking detainee from other detainees．The facility does house hunger striking detainees in an area that allows caloric intake to be monitored and measured． |
| Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room． | $\square$ | $\square$ | 区 | In IGSAs，medical personnel are not required to be authorized to place a detainee in a Special Management Unit or locked hospital room．In this facility，detainees may be housed in the infirmary． |
| Medical staff records the weight and vital signs of a hunger－striking detainee at least once every 24 hours． | $\square$ | $\square$ | 囚 | In IGSAs，medical staff are not required to record the weight and vital signs of a hunger striking detainee at least once every 24 hours． Facility medical staff assess hunger striking detainees for dehydration and malnutrition，as well as vital signs and weight every 24 hours． |
| The OIC of the facility obtains a hunger striker＇s consent before medical treatment． | 区 | $\square$ | $\square$ | Facility policy 6515，Medical Services，addresses medical consent． Detainees are afforded the same level of informed consent as in any community medical facility for the specific type of treatment involved， including hunger strikes． |

## HUNGERSTRIKES

POLICY: ALL HACILITES wIIL FOLIO NGAGING IN UUNGER STRIKES. BY MONITORING OFTHE HEAITH AND WEIFARE OFTHE INDIVIDUAL DETAINEES, PACIITIES WILL STRIVE TO ISTAIN THEIR UVES.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.
\(\left.\left.$$
\begin{array}{l|l|l|l|l|}\text { who } & & & & \begin{array}{l}\text { In IGSAs, detainees who reject } \\
\text { medical evaluation or treatment are } \\
\text { not required to sign a Refusal of } \\
\text { Treatment form. At this facility, } \\
\text { hunger striking detainees are }\end{array} \\
\text { required to make a refusal directly to } \\
\text { health care staff, which is } \\
\text { documented in the medical record. }\end{array}
$$\right]-\begin{array}{l}IGSAAs are not required to document <br>
and provide the hunger striking <br>
detainee three meals a day. The <br>
facility does offer the hunger striking <br>
detainee each meal served to the <br>

detainee population.\end{array}\right]\)| $\square$ |
| :--- |
| $\square$ |

## REMARKS:

There have been no hunger strikes at this facility since the last inspection. The facility is proactive in identifying potential hunger striking detainees by referring detainees to medical staff after 24 hours of missed meals.

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

(b)(6), (b)(7)(c) / '6-10-2010

Auditor's Signature / Date

| ACCESS TO MEDICAL CARE <br> POUCY：EVERY FACIUTY WILL ESTABUSH AND MAINTAN AN ACCREDTTED／ACCREDITATION－WORTHY HEALTH PROGRAM FOR THE |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| general well－being of ICE detainees． |  |  |  |  |
| Components | Yes | No | NA | Remarks |
| Facilities operate a health care facility in compliance with state and local laws and guidelines． | 区 | $\square$ | $\square$ | The facility infirmary is licensed by the state of South Carolina．The facility is accredited by the National Commission on Correctional Health Care． |
| The facility＇s in－processing procedures for arriving detainees include medical screening． | 区 | $\square$ | $\square$ | Medical screening is provided by medical personnel on admission． |
| All detainees have access to and receive medical care． | 区 | $\square$ | $\square$ | All detainees are informed verbally and in writing on how to access medicat care．Notices are also posted in English and Spanish． |
| The facility has access to a PHS／DIHS Managed Health Care Coordinator． | 区 | $\square$ | $\square$ | The facility has access to a managed health care coordinator through the local ICE office in Charleston． |
| The medical staff is large enough to provide，examine，and treat the facility＇s detainee population． | 区 | $\square$ | $\square$ | Medical staff includes a medical director，a physician，a dentist，a physician＇s assistant（b）（7）（eqgistered <br>  certified medical assistants，a dental technician，a medical records clerk，and a site coordinator． |
| The facility has sufficient space and equipment to afford detainee privacy when receiving health care． | 囚 | $\square$ | $\square$ | The facility Health Service Unit（HSU） is new and is described in detail below． The medical staff moved into the new HSU during the inspection． |
| The medical facility has its own restricted－access area．The restricted access area is located within the confines of the secure perimeter． | $\square$ | $\square$ | 区 | At an IGSA，the medical facility，or health service unit（HSU），is not required to have its own restricted access area．At this facility，the HSU does have its own restricted－access area，and is located within the confines of the secure perimeter． |
| The medical facility entrance includes a holding／waiting room． | $\square$ | $\square$ | 囚 | IGSAs are not required to have a holding／waiting room in the Health Services Unit（HSU）．The facility does have a waiting room in the HSU containing 12 chairs． |
| The medical facility＇s holding／waiting room is under the direct supervision of custodial staff． | $\square$ | $\square$ | 区 | IGSAs are not required to have the holding／waiting room under the direct supervision of custodial staff．The <br>  supervising the waiting room． |
| Detainees in the holding／waiting room have access to a drinking fountain． | $\square$ | $\square$ | 区 | IGSAs need not provide access to a drinking fountain for detainees in the waiting room．The facility Health Services Unit does not have a drinking fountain．It was reported that should a detainee request water，water would be provided． |

## ACCESS TO MEDICALCARE

POLICY：GVERY FACIITY WILL ESTABISMAND MANTAIN AN ACCREDITED／ACCREDIIATION－WORIHY HEAITH PROGRAM FOR TIE GENERAI WELL－BEING OF ICE DETIAINEES
Medical records are kept apart from other files．They are：
－Secured in a locked area within the medical unit；
－With physical access restricted to authorized medical staff；and
－Procedurally，no copies made and placed in detainee files．
Pharmaceuticals are stored in a secure area．

| cal | 区 | $\square$ | $\square$ | Medical records are kept in rolling files in the medical record room，which is locked．Access is restricted to medical personnel． |
| :---: | :---: | :---: | :---: | :---: |
|  | $\square$ | $\square$ | 】 | It is not a requirement of IGSAs to store pharmaceuticals in a secure area． The facility stores all pharmaceuticals in secure areas，including a medication room in the infirmary and a medication room outside of the pharmacy and in the pharmacy itself．All of these areas have access restricted to medical personnel． |
| the <br> one <br> the | ® | $\square$ | $\square$ | In 21 of 21 medical records reviewed， detainees received Tuberculosis（TB） screening within accepted timeframes． All received testing within one business day of arrival at the facility．During detainee interviews，detainees were able to describe the TB testing process． |
| It | 囚 | $\square$ | $\square$ | IGSAs are not required to provide mental health screening to detainees before assignment to a housing unit． The facility provides mental health screening upon arrival and before assignment to a housing unit，by a health care provider． |
| r | $\square$ | $\square$ | 囚 | IGSA＇s are not required to have the health care provider promptly review screening forms to identify detainees needing medical attention．At this facility，medical staff provides the initial screening，thus identifying such detainees on admission． |
|  | 区 | $\square$ | $\square$ | In 21 of 21 medical records reviewed， detainees received physical exams within 14 days of admission． |

## ACCESSTO MEDICAI, CARE

POLICY: EvERY FACIITY WILL ESTABLISH AND MAINIAIN AN ACCREDIED/ACCREDITATION-wORTHY IIEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINBES.
 care services. by medical personnel is based on the degree of isolation. There are three levels of segregation at the facility.
Detainees in Administrative and Disciplinary Segregation have no contact with other detainees. Medical personnel make rounds in Administrative and Disciplinary segregation at least daily. The other level of segregation at the facility permits detainees limited contact with other detainees. Medical personnel make rounds three times per week regarding those detainees.
Documentation of these rounds is found on the special management unit housing log.
IGSAs are not required to provide detainees with health services (sick slips daily, upon request

- Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population.
- Service-request slips are delivered in a timely fashion to the health care provider call) request slips daily, upon request. IGSAs are not required to provide the request slips in languages other than English. The facility provides sick call request slips in English and Spanish, upon request, and medical staff retrieves sick call request slips on a daily basis from the housing units. Medical personnel are on site 24 hours per day, seven days per week. In
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. addition, there is a written procedure for emergency health care as described in facility policy J-E-08, Emergency Services.
While IGSAs are not required to provide an on-call provider for emergencies, the facility does provide both a physician and mid-level on call provider.
While IGSA's are not required to list telephone numbers for local ambulance and hospital services, the facility does provide these telephone numbers Charleston County EMS is used for urgent or emergency care.
While IGSAs are not required to include procedures for staff to utilize emergency health care consistent with security and safety, the facility is responsible for determining the security procedures for the transport of detainees for emergency medical care.


## ACCESS TO MEDICALCARE

POLICY: EVERY FACIITY WIII ESTABIISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEAITH PROGRAM FOR THE GENERAI WELL-BEING OF ICE DETAINEES.
Detention staff is trained to respond to health-related $\quad$. $\quad{ }^{2} \quad$ Facility policy J-C-04, Training for emergencies within a 4 -minute response time.

Where staff is used to distribute medication, a health care provider properly trains these officers. Detention Officers, includes CPR training and responding to healthrelated situations with a goal of a four minute response time.
IGSAs are not required to have health care staff properly train officers in medication distribution. At this facility, custody staff does not distribute medication.
Medication distribution is documented on medication administration records (MARs).
The Form I-819 (or IGSA equivalent) is used to notify the
Warden/Facility of a detainee that has special medical needs.

IGSAs are not required to use Form I-819 or its equivalent to notify the Warden of a detainee that has special needs. Facility policy 6510, Medical Files, describes how the physician shares relevant medical information with the facility administrator.
A signed and dated consent form is obtained from a detainee before medical treatment is administered.

Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.

Detainee's medical records or a copy thereof, are available and transferred with the detainee.

Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".
$\boxtimes$ ACCEPTABLE $\quad \square$ DEFICIENT
AT-RISK
Informed consent is required for invasive procedures or any treatment where there is some risk to the detainee.
In 21of 21 medical records reviewed, consent was obtained from detainees on admission.
Written authorization by the detainee is required to authorize the transfer of health records to outside sources.
A health professional reviews the detainees health record and completes a transfer screening.
Medical records, or a copy, are transferred with a transfer summary form.

Medical records are placed in a sealed envelope.


## REMARKS:

The Carolina Center for Occupational Health $(\mathrm{CCOH})$ took over the health care contract in July 2009.
During the inspection, the Health Services Unit (HSU) moved into new quarters in the facility. The space is large, clean and wellequipped. The outpatient area contains a nurse's station, medical records room, physician's office, medical staff office, dental suite with one chair, a laboratory, three exam rooms, an urgent care room with two dialysis chairs, and a waiting area with 12 chairs. The infirmary or inpatient area contains two negative pressure rooms, two utility rooms, four wards with four beds each, four segregation cells, and one observation cell. There is also a large staff room, a supply room, a detainee multi-purpose room, an office, and a medication room. Adjacent to the health services unit is another office, a conference room, a supply room and the pharmacy.

Mental health staff has office areas adjacent to the HSU. There are also additional rooms used for medical purposes on each housing unit and in the in-processing area. OB/GYN services are provided.

There are two Spanish interpreters on the health care staff.
$100 \%$ of the detainee medical records reviewed, medical screening was provided on admission, as was mental health screening. onsent to medical treatment was obtained. Tuberculosis testing and physical exams were performed well within accepted time frames.

Documentation for 15 sick call visits showed that triage of the sick call took place within 24 hours, and detainees were seen usually within 24 hours or within one business day.
(b)(6), (b)(7)(c)


## SUICIDE PREVENTION AND INTERVENTION

Policy：All detienilon staff working wilh ice detainees will be trained to recognize suicide－risk indicators．Staff wil． indle potentially suicidalindividuals with sensitivity，super vision，and referrals．A clinically suicidal detainee will EECEIVE PREVENTIVE SUPERVISION AND TREATMENT．

| Components | YES | No | NA | REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| Every new staff member receives suicide－prevention training．Suicide－ prevention training occurs during the employee orientation program． | 区 | $\square$ | $\square$ | Staff receives suicide prevention training during orientation and annually． |
| Training prepares staff to： <br> －Recognize potentially suicidal behavior； $\qquad$ <br> －Refer potentially suicidal detainees，following facility procedures；and <br> －Understand and apply suicide－prevention techniques． | 区 | $\square$ | $\square$ | Training provided includes identification，treatment，assessment， monitoring，housing，referral， communication，intervention， notification，and reporting of the suicidal detainee． |
| A health－care provider or specially trained officer screens all detainees for suicide potential as part of the admission process． <br> －Screening does not occur later than one working day after the detainee＇s arrival． | 区 | $\square$ | $\square$ | In 21 of 21 medical records reviewed，detainees received screening for suicidal potential on admission by medical personnel． |
| Written procedures cover when and how to refer at－risk detainees to medical staff and procedures are followed． | 区 | $\square$ | $\square$ | Facility policy J－G－05，Suicide Prevention Program，describes the procedure for referring at risk detainees to medical staff． |
| The facility has a designated isolation room for evaluation and treatment． | 区 | $\square$ | $\square$ | There is a designated isolation room in the infirmary used to house detainees placed on a suicide watch． |
| The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt． | 区 | $\square$ | $\square$ | The designated isolation room has smooth walls and floor，with no protrusions，a ceiling unable to be reached by the detainee，and a smooth，one piece toilet and sink． |
| Medical staff has approved the room for this purpose． | 区 | $\square$ | $\square$ | Medical staff has approved the isolation room． |
| Staff observes and documents the status of a suicide－watch detainee at least once every 15 minutes． | 区 | $\square$ | $\square$ | Staff observes and documents the status of a detainee on suicide watch at least every 15 minutes，or on continuous observation，as ordered by mental health professionals． |
| $\triangle$ ACCEPTABLE $\quad \square$ Deficient | $\square$ AT－RISK |  |  | $\square$ Repeat Finding |

## REMARKS：

There have been no detainee suicides at the faculty since the last review．
During the inspection，two non－ICE detainees were placed on suicide watch．Both were on a 15 minute watch and documentation of the watch was logged by the officer．

Mental health staff is employed by the South Carolina Department of Mental Health．Staff includes a psychiatrist，（b）（7）elicensed master＇s level social workers and（b）（7）${ }^{(1)}$ achelor＇s level clinical counselor．In－patient care may be provided at an outside forensic unit， Just Care，which requires a court order．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）$/$ 6－10－2010
Uditor＇s Signature／Date

## TERMINAL ILLNESS，ADVANCED DIRECTIVES，AND DEATH

POLICY AILFACIITIES HOUSING ICEDETAINEES SHALLHAVEPOLICLES AND PROCEDURES ADDRESSING THEISSUES OFTERMINAL IILNESS OR IURY，MEDICAL AdVANCED directives，and detainee death，to include the procedures to ensure proper notification is PROVIDED TO ICE OFFICIALS，FAMIIY MEMBERS AND OTHER INTERESTED PARILES IN THE EVENT OF A DETAINEEBECOMING TERMINAIIYILLOR INJURED OR DEATH OF A DETAINEE OCCURS．IN ADDITION，THE POLICY WILLCOVER PROCEDURES TO BETAKEN IF THE DEATH OFA DETAINEE occurs while in transit．
Q CHECK THIS BOX IF THE PACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY ORTERMINALIY HLL．INDICAIE NAIN THE APPROPRIATE BOX ITOR THIS PORIION OF THE WORKSHEET．AL．WAYS COMPLETE AIL REMERENCES TO DEIAINEE DEATH AND RELATED NOTIMLCAIIONS．

| Y Componenis | YES | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility． | － | $\square$ | $\square$ | The facility routinely does not accept terminally ill detainees．Should a detainee become terminally ill， $\mathrm{s} / \mathrm{he}$ would be moved to the infirmary or to an outside acute care hospital． |
| The facility or appropriate ICE office promptly notifies the next of kin of the detainee＇s medical condition，to include： <br> －The detainee＇s location；and <br> －The limitations placed on visiting． | 区 | $\square$ | $\square$ | The facility notifies ICE and persons who have been designated by the detainee． |
| There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives． <br> －The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her． | 区 | $\square$ | $\square$ | Facility policy J－1－04 addresses end of life decisions．Detainees approaching the end of life may execute advanced directives，including living wills，health care proxies， and do not resuscitate （DNR）orders． |
| The guidelines provide the detainee the opportunity to have a private attorney prepare the documents． | 区 | $\square$ | $\square$ | There are no written guidelines addressing giving the detainee the opportunity to have a private attorney prepare the documents． However，the facility staff indicated that detainees may use private attorneys to prepare the documents． |
| There is a policy addressing＂Do Not Resuscitate Orders＂ | 区 | $\square$ | $\square$ | Do Not Resuscitate Orders are honored at the facility． |
| Detainees with a＂Do Not Resuscitate＂order in the medical record receive maximal therapeutic efforts short of resuscitation？ | 区 | $\square$ | $\square$ | All maximal therapeutic efforts，short of resuscitation，are given to a detainee with a DNR order． |
| The facility notifies the DIHS Medical Director and Headquarters＇Legal Counsel of the name and basic circumstances of any detainee with a＂Do Not Resuscitate＂ order in the medical record．In the case of IGSAs，this notification is made through the local ICE representative． | 区 | $\square$ | $\square$ | The facility notifies the local ICE office of any detainee with a DNR order． |
| The facility has written procedures to address the issues of organ donation by detainees． | $\square$ | 区 | $\square$ | Organ donation is not addressed in written procedures． |
| The facility has written procedures to notify ICE officials，deceased family kembers and consulates，when a detainee dies while in Service． | ถ | $\square$ | $\square$ | The facility notifies all interested parties in the event of a detainee death． |

## TERMINAL ILLNESS，ADVANCED DIRECIIVES，AND DEATH

Policy All facilimes housing ICE deitanees shailihavepolicies and procedures addressing theissues or terminalillness or INUURY，MEDICAI ADVANCED DIRECTVES，AND DETAINEE DEATH，TO INCIUDE THE PROCEDURES TO ENSURE PROPER NOTITICATION IS IOVIDED TO ICE OFFICIAIS，FAMILY MEMBERS AND OTHER NIERESTED PARTIES NTHEEVENTOF A DETAINEE BECOMINGTERMINAIIYILLOR GNJURED OR DEATH OF A DETAINEE OCCURS．IN ADDIHON，THE POLICY WILLCOVER PROCEDURES TO BETAKEN H THE DEATH OF A DETAINEE occurs while in iransit．
Q CHECK TIIS BOX IF THE FACILITY DORS NOT ACCEPTICE DETAINELS WHO ARESEVBRELY OR TERMNALEYILL．INDICAIE NA IN TIIE APPROPRATLE BOX FOR THIS PORIION OF THE WORKSILET．ALWAYS COMPLETEALL，REIERENCES TO DETANEE DEAMH AND RELATED NOTHICAHIONS．

| \％Componenis | YES | No | NA | REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a policy and procedure to address the death of a detainee while in transport． | 区 | $\square$ |  | Facility policy 6－15．0 describes the procedure to address the deathrof a－ detainee while in transport． The transporting officer must remain with the body until it is released to the County Coroner by the attending physician． |
| At all ICE locations the detainee＇s remains disposed of in accordance with the provisions detailed in this standard． | 区 | $\square$ | $\square$ | The disposition of the body and notification of the detainee＇s next of kin is accomplished through the County Coroner． |
| In the event that neither family nor consulate claims the remains，the Field Office schedules an indigent＇s burial，consistent with local procedures． <br> －If the detainee＇s is a U．S．military veteran，is the Department of Veterans Affairs notified？ | 区 | $\square$ | $\square$ | Indigent burial is arranged through the local ICE office in Charleston． |
| An original or certified copy of a detainee＇s death certificate is placed in the bject＇s a－file． | 区 | $\square$ | $\square$ | A copy of the death certificate is provided to ICE officials． |
| The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as： <br> －Performance of an autopsy； <br> －Who will perform the autopsy； <br> －Obtaining state approved death certificates；and <br> －Local transportation of the body． | 区 | $\square$ | $\square$ | The facility notifies all interested parties in the event of a detainee death including the coroner and appropriate law enforcement officials． |
| ICE staff follows established procedures to properly close the case of a deceased detainee． | 区 | $\square$ | $\square$ | ICE staff at the local office follows established procedures to close the case of a deceased detainee， including the filing of the death certificate in the a－ file． |
| $\triangle$ ACCEPTABLE $\quad \square$ DeFICIENT $\quad \square$ AT－RISK |  | Repeat Finding |  |  |

## Remarks：

There have been four deaths since the last inspection fourteen months ago．All of the deaths involved non－ICE detainees and were of natural causes．During the inspection，the facility opened a new Health Services Unit，which contains a 22－bed infirmary．The infirmary was inspected by the State of South Carolina and certified．Terminally or chronically ill detainees could be cared for in the infirmary．
DNR orders are hopar and the fonitite and a hospice provides end－of－life services in the infirmary．Organ donation is not addressed in written policy．
（b）（6），（b）（7）（c）
（b）（6），（b）（7）（c）0－10－LU1U
Auditor＇s Signature／Date

## SECTION III SECURITY AND CONTROL STANDARDS

| Policy：All detention faciuties wil ensure the proper hand |  |  |  | ontraband．Documentation of |
| :---: | :---: | :---: | :---: | :---: |
| Pntraband destructionis reoured． |  |  |  |  |
| －Components Cole | Yes | No | NA | Remarks |
| The facility follows a written procedure for handling illegal contraband． Staff inventory，hold，and report it when necessary to the proper authority for action／possible seizure． | $\boxtimes$ | $\square$ | $\square$ | Although not required at an IGSA facility，the facility policy provides instructions for the handling of illegal contraband． All illegal contraband is turned over to the Sheriff＇s Office． |
| Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution． | $\square$ | $\square$ | 囚 | IGSAs are not required to retain contraband as evidence that is government property for potential disciplinary action or criminal prosecution．All contraband items are retained by the Sheriff＇s Office as evidence． |
| Staff returns property not needed as evidence to the proper authority． Written procedures cover the return of such property． | $\square$ | $\square$ | 囚 | IGSAs are not required to have written procedures and return property not needed as evidence． At this facility，policy provides guidelines for staff regarding the return of property which is not needed as evidence． |
| Altered property is destroyed following documentation and using established procedures． | $\square$ | $\square$ | 【 | IGSAs are not required to document or use established procedures when destroying altered property．However，this facility＇s policy addresses this component． |
| Before confiscating religious items，the OIC or designated investigator contacts a religious authority． | $\square$ | $\square$ | 区 | IGSAs are not required to contact a religious authority before confiscating religious items．The facility allows detainees to retain approved religious items provided that these items do not jeopardize facility safety and security． |
| Staff follows written procedures when destroying hard contraband that is illegal． | 区 | $\square$ | $\square$ |  |
| Hard contraband that is illegal（under criminal statutes）may be retained and used for official use，e．g．training purposes． <br> If yes，under specific circumstances and using specified written procedures．Hard contraband is secured when not in use． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，hard contraband that is illegal is retained and used for training purposes．The contraband is secured in a（b）（7）e （b）（7）e |
| $\triangle$ Acceptable $\quad \square$ Deficient | $\square$ At－Risk $\quad \square$ Repeat Finding |  |  |  |

## Remarks：

A review of policy and interviews with staff revealed that contraband is confiscated and forwarded to the Sheriff＇s office for storage and dispositio
(b)(6), (b)(7)(c)

## DETENTION FIIES

POLICY：EVERY FACIITY WILL CREATE A DEIENTION FIIE FOR FVERY ICE DETANEE BOOKED INTO THE FACILITY，EXCLUDING ONLY TAINEES SCHEDULED TO dEPART WITHIN 24 UOURS．THE DETENTION FIE WILL CONTAIN COPIES AND，IN SOME CASES，THE ORIGINAL OR sPECIELED DOCUMENTS CONCERNING THE DETAINEE＇S STAY IN THE FACILTY：CLASSIFICAIION SHEET，MEDICAL OUESTIONNAIRE，PROPERTY INVENTORY SIIEET，DISCIPLINARY DOCUMENTS，ETC．

| Compondents | Yes | No | NA | Remakks \％ |
| :---: | :---: | :---: | :---: | :---: |
| A detention file is created for every new arrival whose stay will exceed 24 hours． | 区 | $\square$ | $\square$ | A detention file is created for every new admission to the facility． |
| The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process． | 区 | $\square$ | $\square$ |  |
| The detainee＇s detention file also contains documents generated during the detainee＇s custody． <br> －Special requests <br> －Any G－589s and／or I－77s closed－out during the detainee＇s stay <br> －Disciplinary forms／Segregation forms <br> －Grievances，complaints，and the disposition（s）of same | 区 | $\square$ | $\square$ | －．－－－－－－－－－ |
| The detention files are located and maintained in a secure area．If not， the cabinets are lockable and distribution of the keys is limited to supervisors． | 区 | $\square$ | $\square$ | IGSAs are not required to keep detention files in locked cabinets and limit keys only to supervisor．At this facility，active detention files are kept in the $\square$ <br> （b）（7）e which is staffed 24 hours per day and is secure． Inactive files are moved to the Inactive Records Office，which is located near the $\square$ （b）$(7)(\mathrm{e})$ and is secure． |
| he detention file remains active during the detainee＇s stay．When the tainee is released from the facility，staff adds copies of completed release documents，the original closed－out receipts for property and valuables，the original I－385 or equivalent，and other documentation． | 区 | $\square$ | $\square$ |  |
| The officer closing the detention file makes a notation that the file is complete and ready to be archived． | 区 | $\square$ | $\square$ |  |
| Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office． | 区 | $\square$ | $\square$ |  |
| Appropriate staff has access to the detention files，and other departmental requests are accommodated by making a request for the file．Each file is properly logged out and in by a representative of the responsible department． | 区 | $\square$ | $\square$ | Active detention files do not leave the Processing Record Office |
| $\square$ ACCEPTABLE $\quad \square$ DEFICIENT | $\square$ AT－RISK |  |  | $\square$ Repeat Finding |

## REMARKS：

The Processing Records Office is secure and staffed 24 hours per day．
A review of seven active ICE detainee files found that they contained the required information．
When the facility runs out of storage room，inactive detention files are transferred to the Charleston County Archives Office．
（b）（6），（b）（7）（c）

|  | Yes | NO | NA | REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a written disciplinary system using progressive levels of reviews and appeals． | 区 | $\square$ | $\square$ | The facility policy addresses the disciplinary system，which uses progressive levels of reviews and appeals． |
| The facility rules state that disciplinary action shall not be capricious or retaliatory． | 区 | $\square$ | $\square$ |  |
| Written rules prohibit staff from imposing or permitting the following sanctions： <br> －corporal punishment <br> －deviations from normal food service <br> －clothing deprivation <br> －bedding deprivation <br> －denial of personal hygiene items <br> －loss of correspondence privileges <br> －deprivation of physical exercise |  |  | $\square$ | The facility policy prohibits staff from imposing or permitting items listed in this component． |
| The rules of conduct，sanctions，and procedures for violations are defined in writing and communicated to all detainees verbally and in writing． | 区 | $\square$ | $\square$ |  |
| The following items are conspicuously posted in Spanish and English， and other dominate languages used in the facility： <br> －Rights and Responsibilities <br> －Prohibited Acts <br> －Disciplinary Severity Scale <br> －Sanctions | 区 | $\square$ | $\square$ | IGSAs are not required to post prohibited acts，the disciplinary severity scale and sanctions in Spanish and English．Rights and responsibilities，prohibited acts， disciplinary severity scale and sanctions are addressed in the facility handbook． |
| When minor rule violations or prohibited acts occur，informal resolutions are encouraged． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，the facility encourages informal resolutions when detainees commit minor rule violations． |
| Incident reports and Notice of Charges are promptly forwarded to the designated supervisor． | $\square$ | $\square$ | 区 | IGSAs are not required to promptly forward incident reports and Notice of Charges to a designated supervisor．At this facility，staff forward incident reports and Notice of Charges to the shift supervisor． |
| Incident reports are investigated within 24 hours of the incident．The Unit Disciplinary Committee（UDC）or equivalent does not convene before an investigation ends． | 区 | $\square$ | $\square$ |  |
| An intermediate disciplinary process is used to adjudicate minor infractions． | $\triangle$ | $\square$ | $\square$ | Shift supervisors adjudicate minor infractions． |
| A disciplinary panel（or equivalent in IGSAs）adjudicates infractions． The panel： <br> －Conducts hearings on all charges and allegations referred by the UDC； <br> －Considers written reports，statements，physical evidence，and oral testimony； <br> －Hears pleadings by detainees and staff representatives； <br> －Bases its findings on the preponderance of evidence；and <br> －Imposes only authorized sanctions | $\square$ | $\square$ | Q | Even though IGSAs are not required to comply with all elements of this component，the facility has ab）（7）（e）member panel which adjudicates infractions． |


| DISCIPLINARY POLICY |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Poucy: All faciuttes housing ice detainees are authorized to COMPIANCE WITH FACIITY RULES AND REGULATIONS. | то IMPOSI |  | E BEHAVIOR IS NOT IN |  |
| - Components | Yes | No | NA | Remarks |
| staff representative is available if requested for a detainee facing a disciplinary hearing. | a $\quad \square$ | $\square$ | 区 | This component is only required for SPCs/CDFs. However, the facility provides the detainee a staff representative, if requested, for a disciplinary hearing. |
| The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented. | n $\boxtimes$ | $\square$ | $\square$ |  |
| The duration of punishment set by the OIC, as recommended by the disciplinary pañel, does nöt exceed established sānctions. The māximum time in disciplinary segregation is limited to 60 days for a single offense. | e | $\square$ | $\square$ | The maximum time adjudicated for a disciplinary segregation sanction is 30 days. |
| Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence" | 年 | $\square$ | $\square$ |  |
| All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required. | , $\boxtimes$ | $\square$ | $\square$ | A review of five ICE detainees' disciplinary records revealed that all relevant forms to the incident were distributed. |
| $\triangle$ ACCEPTABLE $\quad \square$ DeFicient | $\square$ At-Risk $\quad \square$ Repeat Finding |  |  |  |

## REMARKS:

A review of five ICE detainees' disciplinary records occurred and documented compliance with the NDS regarding the Disciplinary Policy.

In 6-10-2010, the inspector observed the facility Disciplinary Panel conducting disciplinary hearings. No concerns were noted at that time.

> (b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) 6-10-2010

Auditor's Signature/Date


## EMERGENCY（CONTINGENCY）PLANS

POLICY ALLFACIITIES HOI DINGICE DETAINEES WIL RESPOND TO EMERGENCIES WIH A PREDETERMINED STANDARDIZD PIANTOMINIMIZE THE HARMING OF HUMAN LIFE AND THEDESTRUCTION OFPROPERTY．ITIS RECOMMENDED THAT SPCS AND CDFS ENIERINTO AGREEMENT，VIA IEMORANDUM OF UNDERSTANDING（MOU），WITH FEDERAL，LOCAL AND STATE AGENCIES TO ASSIST IN TMMES OR EMERGENCY．

| 4．Componenis \％ | YeS | No | NA | H Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Emergency plans include emergency medical treatment for staff and detainees during and after an incident． | $\square$ | $\square$ | 区 | IGSAs are not required to comply with this component． However，the facility policy requires medical treatment for staff and ICE detainees during and after an incident． |
| Food service maintains at least 3 days＇worth of emergency meals for staff and detainees． | $\square$ | $\square$ | 区 | Even though IGSAs are not －required to comply with this component，the facility maintains three days of emergency meals for staff and detainees． |
| Written plans identify locations of shut－off valves and switches for all utilities（water，gas，electric）． | $\square$ | $\square$ | 区 | Written plans are not required at an IGSA．However，this facility does have plans to identify the locations of shut－off valves and switches for utilities． |
| Written procedures cover： <br> －Work／Food Strike <br> －Disturbances <br> －Escapes <br> －Bomb Threats <br> －Adverse Weather <br> －Internal Searches <br> －Facility Evacuation <br> －Detainee Transportation System Plan <br> －Internal Hostages <br> －Civil Disturbances | 区 | $\square$ | $\square$ | The facility has the required emergency plans for the 10 instances referenced in this component． |
| E $\square$ Deficient $\square$ AT－Risk $\quad \square$ Repeat Finding |  | $\square$ Repeat Finding |  |  |

## REMARKS：

The facility has developed the required emergency plans designed to address unusual and emergency situations which complies with the NDS regarding Emergency Plans．
（b）（6），（b）（7）（c）

[^2]
## ENVIRONMENTAL HEALTH AND SAFETY

Policy：Every facility willconirolilammable，toxic，and causitcmaterials through a hazardousmaterlalsprogram．The ROGRAM WILL INCLUDE，AMONG OTUER TIINGS，TIE DENIIFICATION AND LABEIING OF IIZARDOUS MATERIALS IN ACCORDANCE WITH APMLICABLE STANDARDS（E．G．，NATIONAL FIRE PROTECTION ASSOGIATION INFPAD；DENTITICATION OF INCOMPATIBIE MATERIALS，AND SAPE－IANDLING PROCEDURES

| Components | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a system for storing，issuing，and maintaining inventories of hazardous materials． | 区 | $\square$ | $\square$ |  |
| Constant inventories are maintained for all flammable，toxic，and caustic substances used／stored in each section of the facility． | 囚 | $\square$ | $\square$ |  |
| The manufacturer＇s Material Safety Data Sheet（MSDS）file is up－to－date for every hazardous substance used． <br> －The files list all storage areas，and include a plant diagram and legend． <br> －The MSDSs and other information in the files are available to personnel managing the facility＇s safety program． | $\square$ | 区 | $\square$ | The master MSDS files are not condensed in one folder，with a single copy of each MSDS for chemicals maintained at this facility．Chemicals utilized in food service were not incorporated into the master MSDS file at the time of the inspection．． |
| All personnel using flammable，toxic，and／or caustic substances follow the prescribed procedures．They： <br> －Wear personal protective equipment；and <br> －Report hazards and spills to the designated official． | 区 | $\square$ | $\square$ |  |
| The MSDSs are readily accessible to staff and detainees in work areas． | 区 | $\square$ | $\square$ |  |
| Hazardous materials are always issued under proper supervision． <br> －Quantities are limited；and <br> －Staff always supervises detainees using these substances． | $\square$ | 区 | $\square$ |  <br> （b）（7）e <br> （b）（7）e contained a dispenser <br> unit to refill cleaning chemicals． unit to refill cleaning chemicals． The undiluted chemicals were unsecured on a shelf in the same location that is accessed by detainees，as needed，without supervision．Chemicals utilized in the Food Service Department were not stored in a secure area． During the inspection，the chemicals in the Food Service Department were moved to a secure area． |
| All＂flammable＂and＂combustible＂materials（liquid and aerosol）are stored and used according to label recommendations． | 区 | $\square$ | $\square$ |  |
| Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements． | 区 | $\square$ | $\square$ |  |
| The facility has sufficient ventilation，and provides and ensures clean air exchanges throughout all buildings． | 区 | $\square$ | $\square$ |  |
| Vents return vents，and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility． | 区 | $\square$ | $\square$ |  |
| Living units are maintained at appropriate temperatures in accordance with industry standards．（ 68 to 74 degrees in the winter and 72 to 78 degrees in the summer．） | 区 | $\square$ | $\square$ | The facility maintains a temperature of 74 degrees throughout the year． |
| Shower and sink water temperatures do not exceed the industry standard of 120 degrees． | 区 | $\square$ | $\square$ | Water temperatures are maintained between 105－108 degrees． |
| ll toxic and caustic materials are stored in their original containers in a secure area． | 区 | $\square$ | $\square$ |  |

## ENVIRONMENTAL．HEALTH AND SAFETY

POLICY：EVERY FACILIIY WILL CONIROLFLAMMABIE，TOXIC，AND CAUSICMATERIAISTHROUGHAHAZARDOUS MATERIALS PROGRAM，THE program will include，among other things，the mentification and labeling of hazardous maierlals in accordance wili yplicable standards（e．g．，Nationai，Fire Protection association［nFPal）；identlication ofincompatible materials，and SAFE－HANDIING PROCEDURES

| Components | YES | No | NA | －Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Excess flammables，combustibles，and toxic liquids are disposed of properly and in accordance with MSDSs． | 区 | $\square$ | $\square$ |  |
| Staff directly supervise and account for products with methyl alcohol． Staff receives a list of products containing diluted methyl alcohol，e．g．， shoe dye．All such products are clearly labeled．＂Accountability＂ includes issuing such products to detainees in the smallest workable quantities． | $\square$ | $\square$ | 区 | Products containing methyl alcohol are not utilized at this facility． |
| Every employee and detainee using flammable，toxic，or caustic materials receives advance training in their use，storage，and disposal． | 区 | $\square$ | $\square$ | Training is provided during orientation to employees on the use of flammable，toxic or caustic materials as well as their use，storage and disposal． |
| The facility complies with the most current edition of applicable codes， standards，and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration（OSHA）． | 区 | $\square$ | $\square$ |  |
| A technically qualified officer conducts the fire and safety inspections． | 区 | $\square$ | $\square$ | On March 19，2010，Pye and Barker Fire and Safety，Inc． conducted the annual fire and safety inspection． |
| The Safety Office（or officer）maintains files of inspection reports． | 区 | $\square$ | $\square$ |  |
| The facility has an approved fire prevention，control，and evacuation plan． | 区 | $\square$ | $\square$ | The Deputy State Fire Marshal approved the fire prevention， control and evacuation plan on March 9， 2010. |
| The plan requires： <br> －Monthly fire inspections； <br> －Fire protection equipment strategically located throughout the facility； <br> －Public posting of emergency plans with accessible building／room floor plans； <br> －Exit signs and directional arrows；and <br> －An area－specific exit diagram conspicuously posted in the diagrammed area． | $\square$ | 区 | $\square$ | Exit diagrams did not include instructions in Spanish．This was corrected during the inspection． |
| Fire drills are conducted and documented monthly． | 区 | $\square$ | $\square$ |  |
| A sanitation program covers barbering operations． | $\square$ | 区 | $\square$ | A sanitation program was not available for barbering operations．During the review， the sanitation program for barbering operations was incorporated into the facility＇s policy on Inmate Personal Hygiene，Bathing and Hair Care． |
| The barber shop has the facilities and equipment necessary to meet sanitation requirements． | $\square$ | 区 | $\square$ | A specific room is not utilized for barber operations．A mattress cover is used as a haircloth and is reused without providing a neck strip for sanitation． |

## ENVIRONMENTAL HEALTH AND SAFEITY

PoLICY：EVERY FACIIIYY WIIICONTROI FLAMMABLE，TOXIC，AND CAUSTICMATERIAIS THROUGH A HAZARDOUSMATERIALS PROGRAM．TIE gROGRAM WILL INCIUDE，AMONG OTHER THINGS，TIE IDENTIHCATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WIIH plicabie standards（e．g．，National Fire Protection Association［nIPA］；ibenilication of incompatible materials，and SAFE－HANDLING PROCEDURES

| \＃！Components \％ | YeS | NO | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The sanitation standards are conspicuously posted in the barbershop． | $\square$ | 区 | $\square$ | The sanitation standards for barbering are not conspicuously posted in the housing units． Corrective action was taken during the inspection to post barbershop standards in the housing units． |
| Written procedures regulate the handling and disposal of used needles and other sharp objects． | 区 | $\square$ | $\square$ |  |
| All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly． | 区 | $\square$ | $\square$ |  |
| Standard cleaning practices include： <br> －Using specified equipment；cleansers；disinfectants and detergents． <br> －An established schedule of cleaning and follow－up inspections． | $\square$ | 区 | $\square$ | Established cleaning schedules were available for medical and floor crews but，not in the housing units or food service． Corrective action was taken during the inspection to post cleaning schedules in food service and the housing units． |
| The facility follows standard cleaning procedures． | 区 | $\square$ | $\square$ |  |
| Spill kits are readily available． | 区 | $\square$ | $\square$ |  |
| licensed medical waste contractor disposes of infectious／bio－hazardous waste． | 区 | $\square$ | $\square$ | The Stericycle Co．has a contract with this facility for the removal of infectious／bio－ hazardous waste． |
| Staff is trained to prevent contact with blood and other body fluids and written procedures are followed． | 区 | $\square$ | $\square$ |  |
| Do the methods for handling／disposing of refuse meet all regulatory requirements？ | 区 | $\square$ | $\square$ | A one year contract with Nature＇s Calling，Inc．for waste removal was activated on 5／5／10． |
| A licensed／Certified／Trained pest－control professional inspects for rodents，insects，and vermin． <br> －At least monthly． <br> －The pest－control program includes preventative spraying for indigenous insects． | $\triangle$ | $\square$ | $\square$ |  |
| Drinking water and wastewater is routinely tested according to a fixed schedule． | 区 | $\square$ | $\square$ | On January 29，2010， Charleston Water Systems tested the drinking water and wastewater，and confirmed compliance with applicable standards． |
| Emergency power generators are tested at least every two weeks． <br> －Other emergency systems and equipment receive testing at least quarterly． <br> －Testing is followed－up with timely corrective actions（repairs and replacements）． | 区 | $\square$ | $\square$ | Charleston Facility Management，HB Con，conducts monthly generator tests and provides repairs as needed．A self－generator test is conducted every Monday． |



## REMARKS:

It is recommended that the master MSDS file be condensed into one folder with the inclusion of chemicals utilized in the Food Service Dēpartment.

It is recommended that the $\square$ (b) (7)e be secured. It is also recommended that staff supervise the distribution of chemicals to detainee workers. It is also recommended that enhanced security measures be implemented in all chemical storage areas.

It is recommended that a sanitation program be implemented for barbering operations. Included in the sanitation program are procedures to address hair cloths and neck strips utilized during barbering.
(b)(6), (b)(7)(c)
$y(\mathrm{~b})(6),(\mathrm{b})(7)(\mathrm{c}) /$ / 6-10-2010
$\gamma$ AUDITOR'S SIGNATURE / DATE

| HOLD ROOMS IN DETENTION FACILITIES |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Components $\longrightarrow$ | Yes | No | NA | Remarks |
| The hold rooms are situated within the secure perimeter． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，seven hold rooms are situated within the secure perimeter． |
| The hold rooms are well ventilated well lighted，and all activating switches are located outside the room． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，observation of all hold rooms noted compliance． |
| The hold rooms contain sufficient seating for the number of detainees held． | $\square$ | $\square$ | 区 | This component is not required at IGSAs，but the hold rooms at this facility have sufficient capacity seating． |
| Bunks，cots，beds，or other related make－shift sleeping apparatus are precluded from use inside hold rooms． | $\square$ | $\square$ | 囚 | IGSAs are not required to comply with this component． However，there are no bunks， cots beds or other make shift sleeping apparatus in the hold rooms at this facility． |
| The walls and ceilings of the hold rooms are tamper and escape proof． | $\square$ | $\square$ | 囚 | This component is only required for SPCs／CDFs．Observation of hold rooms revealed that walls and ceilings are tamper and escape proof． |
| Tdividuals are not held in hold rooms for more than 12 hours． | 区 | $\square$ | $\square$ |  |
| Male and females are segregated from each other． | 区 | $\square$ |  |  |
| Detainees under the age of 18 are not held with adult detainees． | $\square$ | $\square$ | 区 | The facility does not house detainees under the age of 18 ． |
| Detainees are provided with basic personal hygiene items such as water， soap，toilet paper，cups for water，feminine hygiene items，diapers and wipes． | 区 | $\square$ | $\square$ |  |
| In older facilities，officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis． | 区 | $\square$ | $\square$ |  |
| All detainees are given a pat down search for weapons or contraband before being placed in the room． | 区 | $\square$ | $\square$ | Observation of intake and processing procedures revealed detainees are pat searched prior to placement in hold rooms． |
| Officers closely supervise the detention hold rooms using direct supervision（Irregular visual monitoring．）． <br> －Hold rooms are irregularly monitored evert（7）minutes． <br> －Unusual behavior or complaints are noted． | 区 | $\square$ | $\square$ | The design of the facility intake and processing area provides staff clear visual observation of all hold rooms． |
| When the last detainee has been removed from the hold room，it is given a thorough inspection． | 】 | $\square$ | $\square$ |  |
| There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and／or building evacuation． | 区 | $\square$ | $\square$ |  |
| An appropriate emergency service is called immediately upon a determination that a medical emergency may exist． | 区 | $\square$ | $\square$ |  |
| $\boxtimes$ Acceptable $\quad \square$ Deficient | At－R |  |  | Repeat Finding |

## Remarks:

The hold rooms are used for the temporary detention of detainees awaiting removal, transfer, or other processing into/out of the facility mand comply with the NDS.

(b)(6), (b)(7)(c) 6-10-2010

## KEYAND LOCK CONTROL． （SECURITY，ACCOUNTABHLITY AND MAINTLENANCE）

OLICY IT IS THE POLICY OFTHEICE SERVICETO MAINTAIN AN EFFICIENTS YSTEMFOR THE USE，ACCOUNTABILTY AND MAINTENANCEOFALL KEYS AND LOCRS．

| COMPONENTS－ | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The security officer［s］，or equivalent in IGSAs，has attended an approved locksmith training program． | 区 | $\square$ | $\square$ | The security officer has attended the ASSA Lock Company training program． |
| The security officer，or equivalent in IGSAs，has responsibly for all administrative duties and responsibilities relating to keys，locks etc． | 区 | $\square$ | $\square$ |  |
| The security officer，or equivalent in IGSAs，provides training to employees in key control． | 区 | $\square$ | $\square$ | Key control training is provided during pre－service and in－ service training． |
| The security officer，or equivalent in IGSAs，maintains inventories of all keys，locks and locking devices． | 区 | $\square$ | $\square$ |  |
| The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation． | 囚 | $\square$ | $\square$ | The security officer conducts preventive maintenance every 30 days and documentation is maintained in the Jail Management Computer System． |
| Facility policies and procedures address the issue of compromised keys and locks． | 囚 | $\square$ | $\square$ |  |
| The security officer，or equivalent in IGSAs，develops policy and procedures to ensure safe combinations integrity． | $\square$ | 区 | $\square$ | The facility policy does not address safe combination integrity． |
| Only dead bolt or dead lock functions are used in detainee accessible areas． | 囚 | $\square$ | $\square$ |  |
| only authorized locks（as specified in the Detention Standard）are used in detainee accessible areas． | 区 | $\square$ | $\square$ | The facility has an electronic locking system in the housing units and throughout the facility． |
| Grand master keying systems are prohibited． | 区 |  | $\square$ |  |
| All worn or discarded keys and locks are cut up and properly disposed of． | 囚 | $\square$ | $\square$ |  |
| Padlocks and／or chains are prohibited from use on cell doors． | 区 | $\square$ | $\square$ | On－site observation of detainee housing units revealed no evidence that padlocks and／or chains were being used on cell doors at the time of the inspection． |
| The entrance／exit door locks to detainee living quarters，or areas with an occupant load of 50 or more people，conform to： <br> －Occupational Safety and Environmental Health Manual，Ch．3； <br> －National Fire Protection Association Life Safety Code 101. | 囚 | $\square$ | $\square$ |  |
| The operational keyboard is sufficient to accommodate all the facility key rings，including keys in use，and is located in a secure area． | 囚 | $\square$ | $\square$ | The facility has limited keys． <br> （b）（7）e $\quad$ system is used to issue and accommodate all facility keys． |
| Procedures are in place to ensure that key rings are： <br> －Identifiable； <br> －The numbers of keys are cited；and <br> －Keys cannot be removed． | 囚 | $\square$ | $\square$ |  |
| Emergency keys are available for all areas of the facility． | 囚 | $\square$ | $\square$ |  |
| The facilities use a key accountability system． | 区 | $\square$ | $\square$ |  |
| Authorization is necessary to issue any restricted key． | 区 | $\square$ | $\square$ |  |



## REMARKS:

The facility has a well-established key control process.

Keys are limited to essential staff. At the time of the inspection, records were accurate and current and accountability appears to be continuous. Staff appeared to be familiar with key control procedures.
(b)(6), (b)(7)(c)


## POPULATION COUNTS

POLICY：ALLDETENTION FACILIIES SHALL ENSUREAROUND－TIE－CLOCKACCOUNTABIITY FOR AILDETAINEES，TMIS REQUIRESTHATTHEY ONDUCT AT LEASI ONE FORMAL COUNT OF TIE DETAINEE POPULATION PER SUIFT，WITH ADDIIIONAI，FORMAI，AND INFORMAI．COUNTS CONDUCTED AS NECESSARY．

| U W \％Componenis | YES | No | NA | REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| Staff conduct a formal count at least once each shift． | 区 | $\square$ | $\square$ | The facility conducts six formal counts within a 24 hour period． |
| Activities cease or are strictly controlled while a formal count is being conducted． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，all detainee activities cease during a formal count at this facility． |
| Cērtain operations cease during formal counts． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，movement from the housing units ceases during formal count at this facility． |
| All movement ceases for the duration of a formal count． | $\square$ | $\square$ | 区 | This component is only required for SPCs／CDFs．At this facility， movement during count from the intake area is allowed． |
| Formal counts in all units take place simultaneously． | $\square$ | $\square$ | 区 | IGSAs are not required to count simultaneously．At this facility， all housing units＇counts are conducted simultaneously． |
| Detainee participation in counts is prohibited． | $\square$ | $\square$ | 区 | Although not required at an IGSA，detainees at this facility are prohibited from participating in counts． |
| face－to－photo count follows each unsuccessful recount． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，staff conducts a face－to－photo count utilizing the detainee wrist band for photo identification． |
| Officers positively identify each detainee before counting him／her as present． | $\square$ | $\square$ | 区 | This component is only required for SPCs／CDFs．However，the facility policy requires staff to ensure that they positively identify detainees when counting． |
| Written procedures cover informal and emergency counts． <br> －They are followed during informal counts and emergencies． | 区 | $\square$ | $\square$ |  |
| The control officer（or other designated position）maintains an out－ count record of all detainees temporarily leaving the facility． | 区 | $\square$ | $\square$ | Central Control maintains a computerized log of all detainees entering and leaving the facility． |
| This training is documented in each officer＇s training folder． | 区 | $\square$ | $\square$ |  |
| $\triangle$ ACCEPTABLE $\quad \square$ DEFICIENT $\quad \square$ AT－RISK |  |  |  | Repeat Finding |

## REMARKS：

The facility $12: 00 \mathrm{pm}$ formal count was observed and there were no concerns identified．

| POLICY：ICE PROVIDES OFFCERS ALL NBCESSARY GUIDANCE FOR CARRYING OUTTHER DUTIES．THIS GUDANCEINCLUDES THEPOST ORDERS |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
| btablished for every post，whicharereviewed atleast annually，and given toeach officer upon assignment tothat post． |  |  |  |  |
| Components | Yes | No | NA | －Remarks－ |
| Every fixed post has a set of post orders． | 区 | $\square$ | $\square$ |  |
| Each set contains the latest inserts（emergency memoranda，etc．）and revisions． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，this facility＇s post orders contain the latest memoranda from management staff． |
| One individual or department is responsible for keeping all post－orders current with revisions that take place between reviews． | 区 | $\square$ | $\square$ |  |
| The IGSA maintains a complete set（central file）of post orders． | 区 | $\square$ | $\square$ | A complete set of post orders is maintained in the shift supervisor＇s office． |
| The central file is accessible to all staff． | $\square$ | $\square$ | 囚 | Even though IGSAs are not required to comply with this component，staff has access to central files on the Jail Management System． |
| The OIC or Contract／IGSA equivalent initiates／authorizes all post－order changes． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，the Jail <br> Administrator authorizes all post orders changes． |
| The OIC or Contract／IGSA equivalent has signed and dated the last page of every section． | $\square$ | $\square$ | 区 | IGSAs are not required to comply with this component． However，a review of post orders revealed that the Jail Administrator has signed the last page of the post orders． |
| A review／updating／reissuing of post orders occurs regularly and at a minimum，annually． | 区 | $\square$ | $\square$ |  |
| Procedures keep post orders and logbooks secure from detainees at all times． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，post orders are secured in a locked cabinet or desk drawer． |
| Every armed－post officer qualifies with the post weapon（s）before assuming post duty． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，weapons qualification is conducted every two years at this facility． |
| Armed－post post orders provide instructions for escape attempts． | 区 | $\square$ | $\square$ |  |
| The post orders for housing units track the event schedule． | $\square$ | $\square$ | 区 | Although IGSAs are not required to comply with this component，the facility post orders provide guidelines to track housing unit activities． |
| Housing－unit post officers record all detainee activity in a log．The post order includes instructions on maintaining the logbook． | $\square$ | $\square$ | 区 | This component is only required for $\mathrm{SPCs} / \mathrm{CDFs}$ ．At this facility， staff document detainee activities in the Jail Management Computer System． |
| $\boxtimes$ Acceptable $\quad \square$ Deficient | At－R |  |  | Repeat Finding |

## Remarks:

The facility post orders system provides staff necessary guidance for carrying out their duties.

## SECURITY INSPECIIONS

POIICY：POST ASSIGNMENTS IN TIIE FACIITY＇S HGH－RISK AREAS，WIERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED，WILI BE ESTRICTED TO EXPERIENCED PERSONNEI．WITHA THOROUGII GROUNDING IN FACIEIYY OPERATIONS．

|  | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a comprehensive security inspection policy．The policy specifies： <br> －Posts to be inspected； <br> －Required inspection forms； <br> －Frequency of inspections； <br> －Guidelines for checking security features；and <br> －Procedures for reporting weak spots，inconsistencies，and other areas needing improvement | 区 | $\square$ | $\square$ | Facility policy for IGSAs is not required to specify the posts to be inspected or required to have inspection forms．At this facility，policy and post orders establish a systematic physical inspection of all areas of the facility． |
| Every officer is required to conduct a security check of his／her assigned area．The results are documented． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，staff documents security checks of their assigned areas． |
| Documentation of security inspections is kept on file． | $\square$ | $\square$ | 区 | IGSAs are not required to maintain documentation of security inspections． |
| Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，shift supervisors conduct follow－ups with maintenance staff to ensure work orders submitted are completed in a timely manner． |
| The front－entrance officer checks the ID of everyone entering or exiting ne facility． | 区 | $\square$ | $\square$ |  |
| All visits are officially recorded in a visitor logbook or electronically recorded． | 区 | $\square$ | $\square$ | All visitors are required to sign a bound ledger log after being screened at the front entrance． |
| The facility has a secure visitor pass system． | 区 |  |  |  |
| Every Control Center officer receives specialized training． | 区 |  |  |  |
| The Control Center is staffed around the clock． | 区 | $\square$ | $\square$ | Central Control is staffed with （b）（7）（epfficers each shift． |
| Policy restricts staff access to the Control Center． | 区 |  |  |  |
| Detainees are restricted from access to the Control Center． | 区 | $\square$ | $\square$ | The physical design and location of Central Control restricts detainee access． |
| Communications are centralized in the Control Center． | 区 |  |  |  |
| Officers monitor all vehicular traffic entering and leaving the facility． | $\boxtimes$ | $\square$ | $\square$ |  |
| The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility．Each entry contains： <br> －The driver＇s name； <br> －Company represented； <br> －Vehicle contents； <br> －Delivery date and time； <br> －Date and time out； <br> －Vehicle license number；and <br> －Name of employee responsible for the vehicle during the visit | $\square$ | $\square$ | 区 | This component is only required for SPCs／CDFs．At this facility， staff maintains a log of all incoming and departing vehicles． |
| Officers thoroughly search each vehicle entering and leaving the facility． | $\square$ | $\square$ | 区 | IGSA facilities are not required to comply with this component． At this facility，vehicles entering and leaving the facility are not searched． |

## SECURITY INSPECTIONS

POLICY：POST ASSIGNMENTS IN THIE FACILTY＇S HIGH－RISK AREAS，WHERE SPECIAL SECURTY PROCEDURES MUST BEFOLLOWED，WLLEBE RESTRICTED TO EXPERIENCED PERSONNEI WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS．

| \％Components | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components． | 区 | $\square$ | $\square$ |  |
| Tools being taken into the secure area of the facility are inventoried before entering and prior to departure． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，a review of tool inventory forms revealed that staff inventories all tools entering and leaving this facility． |
| The SMU entrance has a sally port． | 区 | $\square$ | $\square$ |  |
| Written procedures govern searches of detainee housing units and personal areas． | 区 | $\square$ | $\square$ |  |
| Housing area searches occur at irregular times． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，staff conducts searches of housing units，and documents the results in the Jail Management Computer System． |
| Every search of the SMU and other housing units is documented． | 区 | $\square$ |  |  |
| Storage and supply rooms，walls，light and plumbing fixtures，accesses， and drains，etc．，undergo frequent，irregular searches．These searches are documented． | 区 | $\square$ | $\square$ | The facility Special Operations Group（SOG）conducts searches of areas listed in this component，and documents the results in the Jail Management Computer System． |
| Walls，fences，and exits，including exterior windows，are inspected for efects once each shift． | 区 | $\square$ | $\square$ |  |
| Saily procedures include： <br> －Perimeter alarm system tests； <br> －Physical checks of the perimeter fence；and <br> －Documenting the results． | 区 | $\square$ | $\square$ |  |
| Visitation areas receive frequent，irregular inspections． | 区 | $\square$ | $\square$ |  |
| $\triangle$ ACCEPTABLE $\quad \square$ DeFICIENT | $\square$ AT－RISK |  |  | Repeat Finding |

## REMARKS：

The facility has a comprehensive security inspection policy that directs frequent and irregular searches of storage／supply room，walls， lights and plumbing fixture，accesses，or drains．

There atb）（7）（wideo surveillance cameras on the outside of the facility．

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

（b）（6），（b）（7）（c）$/$ 6－10－2010
0 Auditor＇s Signature／Date

## SPECIAL MANAGEMENT UNIT（SMU）

## （Administrative Segregation）

OLICY：The Speciai Management Unt reoumid in every faciity isolates certain detainees from the general．population． THE SPECLAL MANAGEMENTUNIT WILLCONSIST OF TwO SECTIONS．ONE，AdMINISTRATHE SEGREGATION，houses detanees isolated for THEIR OWN PROTECTION；THE OTIER FOR DETAINEES BEING DISCIPEINED FOR WRONGDOING（SEE THE＂SPECIAL MANAGEMENT UNTT ［DISCIILINARY SEGREGAIION］＂STANDARD）．

| Components | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The Administrative Segregation unit provides non－punitive protection from the general population and individuals undergoing disciplinary segregation． <br> －Detainees are placed in the SMU（administrative）in accordance with written criteria． | 区 | $\square$ | $\square$ | The facility policy provides written criteria for the operation of the Administrative Segregation Unit． |
| In exigent circumstances，staff may place a detainee in the SMU （administrative）before a written order has been approved． <br> －A copy of the order given to the detainee within 24 hours． | 区 | $\square$ | $\square$ |  |
| The OIC（or equivalent）regularly reviews the status of detainees in administrative detention． <br> －A supervisory officer conducts a review within 72 hours of the detainee＇s placement in the SMU（administrative）． | $\square$ | $\square$ | 区 | IGSAs are not required to comply with this component．At this facility，classification staff reviews the detainee＇s status within 72 hours of placement in SMU． |
| A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation，and： <br> －Every week thereafter for the first month；and <br> －Every 30 days after the first month． <br> －Does each review include an interview with the detainee？ <br> －Is a written record made of the decision and the justification？ | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，classification staff conducts weekly reviews of all detainees in administrative segregation． |
| The detainee is given a copy of the decision and justification for each eview． <br> －The detainee is given an opportunity to appeal the reviewer＇s decision to someone else in the facility． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，all detainees are afforded an opportunity to appeal the reviewer＇s decision to the Operations Captain． |
| The OIC（or equivalent）routinely notifies the Field Office Director（or staff officer in charge of IGSAs）any time a detainee＇s stay in administrative detention exceeds 30 days． <br> －Upon notification that the detainee＇s administrative segregation has exceeded 60 days，the FD forwards written notice to HQ Field Operations Branch Chief for DRO． | $\square$ | $\square$ | 囚 | This component is only required for SPCs／CDFs．At this facility， staff notifies the ICE agent by telephone or e－mail any time a detainee＇s stay in administrative segregation exceeds 30 days． Within the past twelve months， no detainee＇s stay in administrative segregation has exceeded 30 days． |
| The OIC or equivalent）reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU． <br> －A written record is made of the decision and the justification． <br> －The detainee receives a copy of this record． | $\square$ | $\square$ | 区 | IGSA facilities are not required to comply with this component． Classification staff document their decisions and justification and provide the detainee with a copy． |
| The detainee is given the right to appeal to the OIC（or equivalent）the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days． | $\square$ | $\square$ | 『 | Though it is not required at an IGSA facility，detainees may appeal decisions of classification staff to remain in administrative segregation after seven consecutive days． |

POLICY：THE SPECIAI．MANAGEMENT UNIT REQURED IN EVERY PACEITY ISOLATES CERTAIN DETAINBES FROM THEGENERAI．POPULATION． He Special Managemint Untt wili consist oftwo sections：One，Administrative Segregation，houses detainees isol attd for IHEIR OWN PROTECTION；THE OTHER FOR DETAINEES BENG DISCIPLINED FOR WRONGDONG（SEE THE＂SPECLAL MANAGEMENT UNIT ［DISCImINARY SEGREGATION］＂STANDARD）．

|  | Yes | No | NA | －Rementin |
| :---: | :---: | :---: | :---: | :---: |
| Administratively segregated detainees enjoy the same general privileges as detainees in the general population． | $\square$ | 区 | $\square$ | Television is not offered in Administrative Segregation Unit． |
| The SMU is： <br> －Well ventilated； <br> －Adequately lighted； <br> －Appropriately heated；and <br> －Maintained in a sanitary condition． | 区 | $\square$ | $\square$ |  |
| All cells are equipped with beds． <br> －Every bed is securely fastened to the floor or wall． | 区 | $\square$ | $\square$ |  |
| The number of detainees in any cell does not exceed the occupancy limit． <br> －When occupancy exceeds recommended capacity，do basic living standards decline？ <br> －Do criteria for objectively assessing living standards exist？ <br> －If yes，are the criteria included in the written procedures？ | 区 | $\square$ | $\square$ | All cells are single bunked and do not exceed the occupancy limit． |
| The segregated detainees have the same opportunities to exchange／launder clothing，bedding，and linen as detainees in the general population． | 区 | $\square$ | $\square$ | Detainees are offered an opportunity to exchange bedding and clothing twice a week． |
| Detainees receive three nutritious meals per day，from the general opulation＇s menu of the day． <br> －Do detainees eat only with disposable utensils？ <br> －Is food ever used as punishment？ | 区 | $\square$ | $\square$ |  |
| Each detainee maintains a normal level of personal hygiene in the SMU． <br> －The detainees have the opportunity to shower and shave at least three times a week． <br> －If not，explain． | 区 | $\square$ | $\square$ | Detainees are offered a shower daily and must request a razor to shave．The detainee must return the razor，and staff ensures the razor is intact upon return． |
| The detainees are provided： <br> －Barbering services； <br> －Recreation privileges in accordance with the＂Detainee Recreation＂standard； <br> －Non－legal reading material； <br> －Religious material； <br> －The same correspondence privileges as detainees in the general population； <br> －Telephone access similar to that of the general population；and <br> －Personal legal material． | 区 | $\square$ | $\square$ |  |
| A health care professional visits every detainee at least three times a week． <br> －The shift supervisor visits each detainee daily． <br> －Weekends and holidays． | 区 | $\square$ | $\square$ | Health care visits are conducted daily． |
| Procedures comply with the＂Visitation＂standard． <br> －The detainee retains visiting privileges；and <br> －The visiting room is available during normal visiting hours． | 区 | $\square$ | $\square$ | The facility utilizes video visitation on the unit． |
| Yisits from clergy are allowed． | 区 | $\square$ | $\square$ |  |

## SPRCIAL MANAGEMENT UNIT（SMU）

## （Administrative Segregation）

POIICY：THE SPECLALMANAGEMENT UNIT REOUIRED IN EVERY FACIITTY ISOLATES CERTAIN DETAINEES FROM TIE GENERAI POPULAIION． Ye Special Management Unit will Consist oftwo sections．One，Administrative Segregation，houses detainies isolated for IHER OWN Protection；The other for detainees being disciblined for wrongdoing（see the＂Special management Unit ［Discirlinary Segregation］＂standard）．

| Componenis | YES | No | NA | REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| Detainees have the same law－library access as the general population． <br> －Are they required to use the law library $\square$ Separately，or $\square$ As a group？ <br> －Are legal materials brought to them？ | 区 | $\square$ | $\square$ | Detainees are required to submit a request to the facility paralegal for legal material and the material is brought to them． |
| The SMU maintains a permanent log of detainee－related activity，e．g．， meals served，recreation，visitors etc． | 区 | $\square$ | $\square$ |  |
| SPC procedures include completing the SMU Housing Record（I－888） immediately upon a detainee＇s placement in the SMU． <br> －Staff completes the form at the end of each shift． <br> －CDFs and IGSA facilities use Form I－888（or local equivalent）． | 区 | $\square$ | $\square$ | This component is only required for SPCs／CDFs．The facility completes form I－888，Special Management Housing Unit Record，when detainees are place in administrative segregation． |
| Staff record whether the detainee ate，showered，exercised，and took any applicable medication during every shift． <br> －Staff logs record all pertinent information，e．g．，a medical condition，suicidal／assaultive behavior，etc； <br> －The medical officer／health care professional signs each individual＇s record during each visit；and <br> －The housing officer initials the record when all detainee services are completed or at the end of the shift． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，the facility records all items listed in this component on the form I－888， Special Management Housing Unit Record． |
| A new record is created for each week the detainee is in Administrative segregation． <br> －The weekly records are retained in the SMU until the detainee＇s return to the general population． | $\square$ | $\square$ | 区 | Although not required at an IGSA facility，the facility creates a new form I－888 each week the detainee remains in administrative segregation．The form is retained in administrative segregation until the detainee is released． |
| $\triangle$ ACCEPTABLE $\quad \square$ DeFICIENT | $\square$ AT－RISK |  | $\square$ Repeat Finding |  |

## REMARKS：

Overall，the facility complies with the NDS regarding Administrative Segregation with one exception．Television is not offered to detainees in the Administrative Segregation Unit．
（b）（6），（b）（7）（c）
$\gamma(\mathrm{b})(6),(\mathrm{b})(7)(\mathrm{c}) \quad$／6－10－2010
AUDITOR＇S SIGNATURE／DATE

## SPECLALMANAGEMENT UNIT （Disciminary Segrication）

OIICY：EACH FACIITY WILL ESTABLISHA SPECIAL MANAGEMENT UNIT N WUCH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL population．The Sprcial．Management Unit wili have two sections，one for drtainees in administrative Segregation；the OTIIER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS，

| Components | Yes | No | NA | －Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Officers placing detainees in disciplinary segregation follow written procedures． | 区 | $\square$ | $\square$ |  |
| The sanctions for violations committed during one incident are limited to 60 days． | 区 | $\square$ | $\square$ | The sanction for one incident is 30 days． |
| A completed Disciplinary Segregation Order accompanies the detainee into the SMU． <br> －The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation． | 区 | $\square$ | $\square$ | The detainee receives a copy of Notice of Disciplinary Violations form． |
| Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals． <br> －After each formal review，the detainee receives a written copy of the decision and supporting reasons． | 区 | $\square$ | $\square$ | Though it is not required at an IGSA facility，classification staff at this facility provide the detainee with a copy of the decision． |
| The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff． | 囚 | $\square$ | $\square$ |  |
| Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation． | 区 | $\square$ | $\square$ |  |
| Living conditions in disciplinary SMUs remain the same regardless of behavior． <br> －If no，does staff prepare written documentation for this action？ <br> －Does the OIC sign to indicate approval． | $\square$ | 区 | $\square$ | Detainees were sleeping on the floor with a mattress and there was no signed documentation by the management staff that indicated approval．The facility management was made aware of the living condition and moved the detainees to other cells． |
| Every detainee in disciplinary segregation receives the same humane treatment，regardless of offense． | 区 | $\square$ | $\square$ |  |
| The quarters used for segregation are： <br> －Well－ventilated． <br> －Adequately lighted． <br> －Appropriately heated． <br> －Maintained in a sanitary condition． | 【 | $\square$ | $\square$ |  |
| All cells are equipped with beds that are securely fastened to the floor or wall of the cell． | 区 | $\square$ | $\square$ |  |
| The number of detainees confined to each cell or room is limited to the number for which the space was designate． <br> －Does the OIC approve excess occupancy on a temporary basis？ | $\square$ | 区 | $\square$ | The number of detainees confined to a cell exceeds the occupancy limit for which the space was designated．There was no documentation that management staff approved the excess occupancy on a temporary basis．Once advised， the detainees were placed in other cells． |
| When a detainee is segregated without clothing，mattress，blanket，or pillow（in a dry cell setting），a justification is made and the decision is reviewed each shift．Items are returned as soon as it is safe． | 区 | $\square$ | $\square$ |  |

## SPECIAL MANAGEMENT UNIT

## （Discimlinary Segregation）

Policy：Each pacility will establish a Special Management Unit in wilh to isolate certain detainees from the general opulation．The Special Management Unit wili ilave two sections，one for detainees m Administrative Segregation；the OTIER FOR DETAINEES BEING SEGREGATED FOR DISCIPIINARY REASONS．

| Components | Yes | NO | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Detainees in the SMU have the same opportunities to exchange clothing， bedding，etc．，as other detainees． | 区 | $\square$ | $\square$ | Detainees are offered an opportunity to exchange clothing and bedding twice a week． |
| Detainees in the SMU receive three nutritious meals per day，selected from the Food Service＇s menu of the day． <br> －Food is not used as punishment． | 区 | $\square$ | $\square$ |  |
| Detainees are allowed to maintain a normal level of personal hygiene， including the opportunity to shower and shave at least three times／week． | 区 | $\square$ | $\square$ | Detainees are offered a shower three days a week．Detainees must return a razor which staff dispenses and ensures the razor is intact upon return． |
| Detainees receive，unless documented as a threat to security： <br> －Barbering services； <br> －Recreation privileges； <br> －Other－than－legal reading material； <br> －Religious material； <br> －The same correspondence privileges as other detainees；and <br> －Personal legal material． | 区 | $\square$ | $\square$ |  |
| When phone access is limited by number or type of calls，the following areas are exempt： <br> －Calls about the detainee＇s immigration case or other legal matters； <br> －Calls to consular／embassy officials；and <br> －Calls during family emergencies（as determined by the OIC／Warden）． | 区 | $\square$ | $\square$ |  |
| A health care professional visits every detainee in disciplinary segregation every week day． <br> －The shift supervisor visits each segregated detainee daily <br> －Weekends and holidays． | 区 | $\square$ | $\square$ | Health care visits are conducted daily． |
| SMU detainees are allowed visitors，in accordance with the＂Visitation＂ standard． | 区 | $\square$ | $\square$ | The facility utilizes video visitation on the unit． |
| SMU detainees receive legal visits，as provided in the＂Visitation＂ standard． <br> －Legal service providers are notified of security concerns arising before a visit． | 区 | $\square$ | $\square$ |  |
| Visits from clergy are allowed． <br> －The clergy member is given the option of visiting／not visiting the segregated detainee． <br> －Violent／uncooperative detainees are denied access to religious services when safety and security would otherwise be affected． | 区 | $\square$ | $\square$ |  |
| SMU detainees have law library access． <br> －Violent／uncooperative detainees retain access to the law library unless adjudicated a security threat in writing． <br> －Legal material brought to individuals in the SMU on a case－by－ case basis． <br> －Staff documents every incident of denied access to the law library． | 区 | $\square$ | $\square$ | Detainees are required to submit a request to the facility paralegal for any legal material，and the material is brought to them． |
| All detainee－related activities are documented，e．g．meals served， recreation activities，visitors，etc． | 区 | $\square$ | $\square$ |  |

## SPECIAL MANAGEMENT UNIT <br> (Disciplinary Segregation)

Policy: Each fachity will establish a Special Management Unit in which to isolate certain detainees from the generai orulation. The Sfecial Management Unit wil ihave two sections, one for detainees in administrative Segregation; the OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPINARY REASONS.

| COMPONENIS | Yes | No | NA |  |
| :---: | :---: | :---: | :---: | :---: |
| The SPC's, the Special Management Housing Unit Record (I-888or equivalent), is prepared as soon as the detainee is placed in the SMU. <br> - All I-888s are filled out by the end of each shift. <br> - The CDF/IGSA facility use Form. <br> - I-888 (or equivalent local form). | $\square$ | $\square$ | 区 | This component is only required for SPCs/CDFs. The facility completes form I-888, Special Management Housing Unit Record, when detainees are placed in disciplinary segregation. |
| SMU staff record whether the detainee ate, showered, exercised, took medication, etc. <br> - Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. <br> - The health care official sign individual records after each visit. <br> - The housing officer initials the record when all detainee services are completed or at the end of the shift. <br> - A new record is created weekly for each detainee in the SMU. <br> - The SMU retains these records until the detainee leaves the SMU. | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component, the facility records all items listed in this component on form I-888, Special Management Housing Unit Record. |
| $\triangle$ ACCEPTABLE $\quad \square$ DEFICIENT | At-Risk $\square$ Repeat Finding |  |  |  |

## REMARKS:

review of a detainees' status in disciplinary segregation on June 9,2010 , revealed that a non-ICE detainee's disciplinary release date was June 8, 2010. However, the detainee was still in disciplinary segregation. Management staff was notified, and the detainee was released back to general population.

Detainees were observed sleeping on mattresses on the floor in the Disciplinary Segregation Unit. It is recommended that the facility limit the number of detainees confined to a cell to the occupancy for which the space was designed. If the temporary excess occupancy is needed, it is recommended that management staff approve to enable compliance with the NDS.

## TOOLCONTROL

POLICY：ITIS THE POLICY OF ALLFACILTIES THATALLEMPLOYEES SIIALLBERESPONSIBLEIOR COMPLYING WITHTHETOOLCONIROLPOLCY： Yhe Maintenance Supervisor shall maintain a computer gentratted or typewritien Master inventory list of tools and EQUIPMENT AND THE LOGATION IN WHICH TOOIS ARE STORED．THESE INVENTORIES SHALL BE CURRENT，TILED AND READILY AVAILABLEFOR TOOL INVENTORY AND ACCOUNTABUITY DURING AN AUDIT．

| －COmponents | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability． | 区 | $\square$ | $\square$ |  |
| Department heads are responsible for implementing this standard in their departments． | $\square$ | $\square$ | 囚 | Although not required at an IGSA facility，supervisors at this facility are responsible for implementing tool control procedures in their area of responsibility． |
| Tool inventories are required for the： <br> －Maintenance Department； <br> －Medial Department； <br> －Food Service Department； <br> －Electronics Shop； <br> －Recreation Department；and <br> －Armory． | 区 | $\square$ | $\square$ | The maintenance department is located outside of the secure perimeter．There are no tools inside the facility．Medical instruments and food service culinary equipment are recorded on inventories． |
| The facility has a policy for the regular inventory of all tools． <br> －The policy sets minimum time lines for physical inventory and all necessary documentation． <br> －ICE facilities use AMIS bar code labels when required． | ® | $\square$ | $\square$ |  |
| The facility has a tool classification system．Tools are classified according to： <br> －Restricted（dangerous／hazardous）；and <br> －Non－Restricted（non－hazardous）． | $\square$ | $\square$ | 囚 | IGSAs are not required to classify tools as restricted and non－restricted．The facility does not have any tools located inside the secure perimeter． |
| Department heads are responsible for implementing tool－control procedures． | $\square$ | $\square$ | 区 | Even though IGSAs are not required to comply with this component，supervisors are responsible for implementing tool control procedures in their area of responsibility． |
| The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable． | 区 | $\square$ | $\square$ |  |
| The facility has an approved tool storage system． <br> －The system ensures that all stored tools are accountable． <br> －Commonly used tools（tools that can be mounted）are stored in such a way that missing tool is readily notice． | 囚 | $\square$ | $\square$ |  |
| Each facility has procedures for the issuance of tools to staff and detainees． | 区 | $\square$ | $\square$ | Food service staff documents the issuance of culinary equipment using a bound ledger． Tools are not issued to detainees． |
| The facility has policies and procedures to address the issue of lost tools． The policy and procedures include： <br> －Verbal and written notification； <br> －Procedures for detainee access；and <br> －Necessary documentation／review for all incidents of lost tools． | 区 | $\square$ | $\square$ |  |
| Broken or worn out tools are surveyed and disposed of in an appropriate Ind secure manner． | ® | $\square$ | $\square$ |  |

## TOOL CONTROL

POLICY: IT IS THE POLICY OF ALL FACILITLES THATALLEMPLOYEES SHALL BERESPONSIBLEFOR COMPLYING WITHTHE TOOLCONTROLPOUCY. The Maintenance Supervisor shall mainiain a computer generated or typewritten Master inventory list or tools and
OUIPMENT AND THE LOCATION IN WHICHTOOLS ARESTORED. THESE INVENTORIES SHALI.BE CURRENT, FII BD AND READILY AVAIIABIEFOR OOL INVENTORY AND ACCOUNTABIITIY DURING AN AUDIT.

| ITII | Comionenis | - | - | YES | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. |  |  |  | 区 | $\square$ | $\square$ | Upon entry into the facility, all tools brought in by maintenance staff or private contractor are inventoried by the lobby officer as well as when the tools are removed. |
| $\triangle$ ACCEPTABLE $\quad \square$ DEFICIENT |  |  |  | $\square$ AT-RISK |  | $\square$ Repeat Finding |  |

## Remarks:

The facility has adequate tool control policy that complies with the NDS regarding Tool Control. Tools are not retained in the facility.
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) / 6-10-2010

Auditor's Signature / Date

## TRANSPORTATION

## (Land Transportation)

OIICY: THE IMMIGRATION AND NATURAIIZATION SERVICE WIILTAKE ALI NECESSARY PRECAUTIONS TO PROTECTTHELIVES, SAFETY, AND WELFARE OF OUR OFEICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THETRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENIION ENFORCEMENI OHFICERS OR AUTHORIZED CONTRACT PERSONNEL.

Standard na: CIECK tiis boxifall ice Transportation is handled only bytubice fleld office or Sub-officen CONTROL OF THE DETAINEE CASE.

## Comronients

Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.
Supervisors maintain records for each vehicle operator.
Officers use a checklist during every vehicle inspection.

- Officers report deficiencies affecting operability; and
- Deficiencies are corrected before the vehicle goes back into service.
Transporting officers:
- Limit driving time to 10 hours in any 15 hour period;
- Drive only after eight consecutive off-duty hours;
- Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours;
- Drive a 50 -hour maximum in a given work week; a 70 -hour maximum during eight consecutive days;
- During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area-exceeding the 10 -hour limit.
(b)(7)(e)fficers with valid CDLs required in any bus transporting detainees.
- When buses travel in tandem with detainees, there $\operatorname{ar} \varphi \bar{b})(7)(e)$ qualified officers per vehicle.
- (b)(7)(e) driver may transport an empty vehicle. Before the start of each detail, the vehicle is thoroughly searched. Positive identification of all detainees being transported is confirmed. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.
(b)(7)(e) are provided to all transporting officers.

The vehicle crew conducts a visual count once all passengers are on board and seated.

- Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.
Officers ensure that no one contacts the detainees.
- (b)(7)(epfficer remains in the vehicle at all times when detainees are present.
Meals are provided during long distance transfers.
- The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.


## TRANSPORTATION

## (Land Transportation)

POIICY: THE IMMIGRATION AND NATURALIZATION SERVICE WIIL. TAKE AILNECESSARY PRECAUMIONS TO PROTECITUEUVES, SARETY, AND VEI FARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTAIION OF dETAINEES. SIANDARDS AAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OTFICERS OR AUTIIORIZED CONTRACT PERSONNEL.
 CONTROL OF TLE DETAINER CASE.


## Remarks:

Transportation of ICE detainees is handled by a private transportation company contracted by ICE.
(b)(6), (b)(7)(c)

1) (b)(6), (b)(7)(c) $\perp 6-10-2010$

Auditor's Signature / Date

## USE OF FORCE

PoLicy：THE U．S．DEPARTMENT OFHOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATMEAFTER ALL OTHER beasonable efforts to resolve a stuvation have failed．Only that amount or force necessary to gain control of the －DETANEE，TO PROIECT AND ENSURE THE SAFETY OF DETAINEES，STAFF AND OTIERS，TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ensure institution security and goon order may be used．Piysicai restraints necessary to gain conirolof a detainee who APPEARS TO BE DANGEROUS MAY BE EMPLOYED WMEN THE DETANEE：

| Components | YES | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| Written policy authorizes staff to respond in an immediate－use－of－ force situation without a supervisor＇s presence or direction． | 区 | $\square$ | $\square$ | Facility policy authorizes staff to respond in an immediate use of force situation without a supervisor＇s presence or direction． |
| When the detainee is in an area that is or can be isolated（e．g．，a locked cell，a range），posing no direct threat to the detainee or others，officers must try to resolve the situation without resorting to force． | 区 | $\square$ | $\square$ |  |
| Written policy asserts that calculated rather than immediate use of force is feasible in most cases． | 区 | $\square$ | $\square$ |  |
| The facility subscribes to the prescribed Confrontation Avoidance Procedures． <br> －Ranking detention official，health professional，and others confer before every calculated use of force． | 区 | $\square$ | $\square$ |  |
| When a detainee must be forcibly moved and／or restrained，and there is time for a calculated use of force，staff uses the Use－of－ Force Team Technique． <br> －Under staff supervision． | 】 | $\square$ | $\square$ |  |
| Staff members are trained in the performance of the Use－of－Force Team Technique． | 区 | $\square$ | $\square$ |  |
| 11 use－of－force incidents are documented and reviewed． | 区 | $\square$ | $\square$ | A review of five use－of－force incidents involving non－ICE detainees revealed that incidents are documented and reviewed by management staff． |
| Staff： <br> －Do not use force as punishment； <br> －Attempt to gain the detainee＇s voluntary cooperation before resorting to force； <br> －Use only as much force as necessary to control the detainee；and <br> －Use restraints only when other non－confrontational means，including verbal persuasion，have failed or are impractical． | 区 | $\square$ | $\square$ | Facility policy prohibits the use of force as punishment，and subscribes to gaining the detainee＇s voluntary cooperation before employing force． |
| Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary． | 区 | $\square$ | $\square$ |  |
| Use－of－Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease（s）． | 区 | $\square$ | $\square$ | Facility policy requires staff to wear protective gear during use－of－force incidents． |

## USE OF FORCE

Policy：The U．S．Department of Homeland Secturty authorizes the use of force only as alastalternativeafier allotier reasonable efforts to resolve a stuation have failed．oniy that amount or force necessary to gain control or tils getainee，TO protect and ensure the safety of detainees，staff and oihers，To privent serious property damage and to ensure ins titution security and good ordermay be used．Physical restrainis necessary to gain controlof adetainee who APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE：

| Stand Components［－C | Yes | No | NA | －REMARKS |
| :---: | :---: | :---: | :---: | :---: |
| Standard procedures associated with using four－point restraints include： <br> －Soft restraints（e．g．，vinyl）； <br> －Dressing the detainee appropriately for the temperature； <br> －A bed，mattress，and blanket／sheet； <br> －Checking the detaince at least every 15 minutes； <br> －Logging each check； <br> －Turning the bed－restrained detainee often enough to prevent soreness or stiffness； <br> －Medical evaluation of the restrained detainee twice per eight hour shift；and <br> －When qualified medical staff is not immediately available，staff position the detainee＂face－up＂． | 区 | $\square$ | $\square$ | The facility utilizes （b）（7）e $\square$ Staff is required to $\log 15$－minute checks and medical evaluations for the duration of a detainee＇s placement <br> （b）（7）e |
| The shift supervisor monitors the detainee＇s position／condition every two hours． <br> － $\mathrm{He} /$ she allows the detainee to use the rest room at these times under safeguards． | 区 | $\square$ | $\square$ |  |
| All detainee checks are logged． | 区 | $\square$ | $\square$ |  |
| In immediate－use－of－force situations，staff contacts medical staff once the detainee is under control． | 区 | $\square$ | $\square$ |  |
| When the OIC authorizes use of non－lethal weapons： <br> －Medical staff is consulted before staff use pepper spray／non－lethal weapons． <br> －Medical staff reviews the detainee＇s medical file before use of a non－lethal weapon is authorized． | 区 | $\square$ | $\square$ | If time permits，the facility policy requires consultation with medical staff before pepper spray／non－lethal weapons are employed． |
| Special precautions are taken when restraining pregnant detainees． <br> －Medical personnel are consulted | 区 | $\square$ | $\square$ |  |
| Protective gear is worn when restraining detainees with open cuts or wounds． | 区 | $\square$ | $\square$ |  |
| Staff documents every use of force and／or non－routine application of restraints． | 区 | $\square$ | $\square$ |  |
| It is standard practice to review any use of force and the non－ routine application of restraints． | 区 | $\square$ | $\square$ | The facility management staff reviews all use of force，non－routine restraints and use of restraint chair incidents． |
| All officers receive training in self－defense，confrontation－ avoidance techniques and the use of force to control detainees． <br> －Specialized training is given and Officers are certified in all devices they use． | 】 | $\square$ | $\square$ | Staff receives training in self－defense during pre－service and in－service training． <br> （b）（7）e |
| In SPCs，is the Use of Force form is used？In other facilities （IGSAs／CDFs）is this form or its equivalent used？ | 囚 | $\square$ | $\square$ | Although IGSAs are not required to use the Use of Force form，the facility policy requires staff to submit a Use of Force Report and a detailed incident report． |
| $\square$ Accertable $\quad \square$ Deficient | $\square$ At－Risk |  |  | $\square$ Repeat Finding |

## REMARKS:



There ar (7)(deam members assigned to each shift as the (b) (7)e to address incidents such as cell extractions or disturbances.

(b)(6), (b)(7)(c) / 6-10-2010

才 AUDITOR'S SIGNATURE/DATE

## STAFF DETAINEE COMMUNICATIONS

OLICY：PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILTY STAIFAND ICE STAIF DDICE DETAINEE AND TO PERMIIDETAINEES TO MAKE WRITIEN REOUESTS TO ICE STAFF AND RECETVE AN ANSWER IN AN ACCEPTABLE TIME

|  | Yes | No | NA | Remarks |
| :---: | :---: | :---: | :---: | :---: |
| The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA． | 区 | $\square$ | $\square$ | The standard does not specify the frequency of announced and unannounced visits that are required by ICE at an IGSA facility．ICE staff advised that the facility is usually visited on Wednesday or Thursday each week，but they do not announce when they are coming． |
| Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA． | 区 | $\square$ | $\square$ |  |
| Scheduled visits are posted in ICE detainee areas． | $\square$ | 区 | $\square$ | A notice of scheduled visits was not posted in the ICE housing unit．However，interviews with ICE detainees confirmed their awareness that ICE staff usually visit the facility on Wednesday． |
| Visiting staff observe and note current climate and conditions of confinement at each IGSA． | 区 | $\square$ | $\square$ |  |
| ICE information request Forms are available at the IGSA for use by ICE detainees． | $\square$ | 区 | $\square$ | The facility request form is used to handle ICE requests． |
| The IGSA treats detainee correspondence to ICE staff as Special Torrespondence． | 区 | $\square$ | $\square$ |  |
| E staff responds to a detainee request from an IGSA within 72 hours． | 区 | $\square$ |  |  |
| ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement． | 区 | $\square$ | $\square$ |  |
| $\square$ DEFICIENT $\square$ AT－RISK $\square$ REPEAT FInding | At－RISK |  | $\square$ Repeat Finding |  |

## REMARKS：

ICE detainees are usually held at this facility for no more than five days．A review of ICE billing records for three months found that 21 days was the longest length of stay during that period

ICE staff was observed in the male ICE detainee housing unit interviewing detainees and answering questions．
Facility request forms are used instead of ICE request forms．
Notification of scheduled ICE visits are not posted in the ICE housing unit，but ICE detainees expressed knowledge of when these
visits usually occur．
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（b）（6），（b）（7）（c）／6－10－2010
AUDITOR＇S SIGNATURE／DATE

POIICY：ICE WIII MAKE AII NEGESSARY NOTIICATIONS WHEN A DETAINEEIS TRANSFERRED．IFA DETAINEEIS BEINGTRANSIERRED VIATHE StICE Prisoner Ailen Transportation System（IPATS），ICE wil adhere to JPATS protocols．In deciding wiether to rRANSFER A DETAINEE，ICE WHLTAKE INTO CONSIDERATION WHETHER THE DETAINEEIS REPRESENTED BEFORETHEIMMIGRATION COURT．IN SUCH CASES，THE FELD OFFICE DIRECTOR WII CONSIDER THE DETAINEE＇S STAGE WIIIINTHEREMOVALPROCESS，WHETHER THE DETAINEF＇S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OFTHE FACILITY，AND WHERETHE IMMIGRATIONCOURT PROCEEDINGS ARE TAKing Place．

| Components | Yes | No | NA | Remarks－ |
| :---: | :---: | :---: | :---: | :---: |
| When a detainee is represented by legal counsel or a legal representative， and a G－28 has been filed，the representative of record is notified by the detainee＇s Deportation Officer． <br> －The notification is recorded in the detainee＇s file；and <br> －When the A File is not available，notification is noted within DACS | 区 | $\square$ | $\square$ | ICE will handle notifications if a G－28 is on file． |
| Notification includes the reason for the transfer and the location of the new facility． | 区 | $\square$ | $\square$ |  |
| The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved． | 区 | $\square$ | $\square$ |  |
| The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer． | 区 | $\square$ | $\square$ |  |
| Facility policy mandates that： <br> －Times and transfer plans are never discussed with the detainee prior to transfer； <br> －The detainee is not notified of the transfer until immediately prior to departing the facility；and <br> －The detainee is not permitted to make any phone calls or have contact with any detainee in the general population． | $\square$ | 囚 | $\square$ | Policy does not state that times and transfer plans are not to be discussed with detainees． |
| The detainee is provided with a completed Detainee Transfer Notification orm． | 区 | $\square$ | $\square$ |  |
| Form G－391 or equivalent authorizing the removal of a detainee from a facility is used． | 区 | $\square$ | $\square$ |  |
| For medical transfers： <br> －The Detainee Immigration Health Service（or IGSA）（DIHS） Medical Director or designee approves the transfer； <br> －Medical transfers are coordinated through the local ICE office； and <br> －A medical transfer summary is completed and accompanies the detainee． | 区 | $\square$ | $\square$ |  |
| Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee＇s name and A－number，and the envelope is marked Medical Confidential． | $\square$ | $\square$ | 区 | This is an IGSA facility，and ICE staff is not assigned to the facility． |
| For medical transfers，transporting officers receive instructions regarding medical issues． | 区 | $\square$ | $\square$ |  |
| Detainee＇s funds，valuables，and property are returned and transferred with the detainee to his／her new location． | 区 | $\square$ | $\square$ |  |
| Transfer and documentary procedures outlined in Section C and D are followed． | 区 | $\square$ | $\square$ |  |
| Meals are provided when transfers occur during normally schedule meal times． | 区 | $\square$ | $\square$ |  |
| An A File or work folder accompanies the detainee when transferred to a different field office or sub－office． | 区 | $\square$ | $\square$ |  |
| Files are forwarded to the receiving office via overnight mail no later than e business day following the transfer． | 区 | $\square$ | $\square$ |  |

## DETAINEE TRANSFER STANDARD

POLICY: ICE WILL MAKE ALLNECESSARY NOTLICATIONS WHEN A DETANEEIS TRANSFERRED. IFA DELAINEEIS BEINGTRANSFERRED VIATILE justice prisoner Ailen Transfortation System (JPATS), ICE wil. adhere to JPATS protocols. In deciding whether to AANSFER A DETAINEE, ICE WILITAKEINTO CONSIDERATION WHETHER THE DEIANEEIS REPRESENTED BEFORETHE MMMGRATIONCOURT, IN - SUCH CASES, THE FIEID OFICE DIRECTOR WII LCONSIDER THE DETAINER'S STMGE WITHNTHEREMOVALPROCESS, WHEIUER THE DETAINEE'S ATIORNEY IS LOCATED WITHINREASONABLEDRIVING DISTANCE OFTHE GACILITY, AND WHERETHPIMMIGRATION COURTPROCEEDINGS ARE


COMPONENIS
$\triangle$ ACCEPTABLEDEFICIENTAT-RISK
Repeat Finding

## REMARKS:

ICE makes all notifications to the facility by telephone and by fax
(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c) / 6-10-2010

0 AUDITOR'S SIGNATURE/DATE


[^0]:    Any attempted physical contact or physical contact that involves two or more offenders
    Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting
    Routine transportation of detainees/offenders is not considered "forced"
    Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

[^1]:    (b)(6), (b)(7)(c) $/ \perp \quad 6-10-2010$

    AUDITOR'S SIGNATURE / DATE

[^2]:    Auditor＇s Signature／Date

