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



MEMORANDUM FOR: Katrina S. Kane

Field Office Director Phoenix Field Office

FROM: Robert P. Helwig

Assistant Director for Detention and Removal Management

SUBJECT: Eloy Detention Center Annual Review

The annual review of the Eloy Detention Center conducted on February 16-18, in Eloy, Arizona has been received. A final rating of "<u>Superior</u>" 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 February 16, 2011.

The Field Office is responsible for assisting the Intergovernmental Service Agreement (IGSA) facility to respond to the Immigration and Customs Enforcement findings when assistance is requested. Notification to the facility shall include information that this assistance is available.

Should you or your staff have any questions regarding this matter, please contact Gary Mead, Deputy Assistant Director, Detention Management Division at (202) 73(a), (b),(7),(C)

cc: Official File

ICE:HQDRO: (b)(6), (b)(7)(C) 03/02/2010 (b)(7)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
Eloy Detention Center
Address (Street and Name)
1705 E. Hanna Road
City, State and Zip Code
Eloy, AZ 85131
County
Pinal
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)
(b)(6), (b)(7)(C) <i>Warden</i>
Name and Title of Lead Compliance Inspector
(b)(6), (b)(7)(C)
Date[s] of Review
February 16 - 18, 2010
Type of Review
igtimes Headquarters $igcap$ Operational $igcap$ Special Assessment $igcap$ Other
│ Headquarters │ │ Operational │ │ Special Assessment │ │ Other

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NOTE: FOR EACH STANDARD RATED <u>BELOW</u> ACCEPTABLE, FACILITIES MUST ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, <u>INCLUDING</u> THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

SECTION I DETAINEE SERVICES STANDARDS

ACCESS TO LEGAL MATERIALS

POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.

COMPONENTS	Y	N	NA	REMARKS
The facility provides a designated law library for detainee use.	\boxtimes			The facility provides two law libraries for the general population in the north and south sections. Each library contains a collection of basic federal and immigration law material. Each library also has Lexis Nexis. In addition, computer stations allow access to Lexis Nexis in each of two special holding units and in the living unit in which female detainees are housed.
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.	\boxtimes			
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	\boxtimes			
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	\boxtimes			There are six typewriters and two computer stations in each law library.
In addition to the physical law library, detainees have access to the Lexis Nexis electronic law library.	\boxtimes			
Where provided, the Lexis Nexis library is updated and is current.	\boxtimes			ICE provides quarterly updates of Lexis Nexis. The last update is dated November 26, 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.	\boxtimes			Outside published material is reviewed by ICE staff and, if approved, included in the law library.
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	\boxtimes			
Detainees are offered a minimum 5 hours per week in the law library. <u>Detainees are not required to forego recreation time in lieu of library usage</u> . Detainees facing a court deadline are given priority use of the law library.	\boxtimes			Each housing unit is scheduled for the law library five hours per week. A detainee is afforded extra time if there is a court deadline. Recreation for each housing unit is scheduled at a different time than law library.
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within 3 – 5 business days.	\boxtimes			Requests for material not in the law library is forwarded to ICE. Upon the approval of ICE, the material is then included in the collection. ICE staff indicated that requests are accommodated well within 3-5 days.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	\boxtimes			
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.	\boxtimes			

ACCESS TO LEGAL MATERIALS POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS. COMPONENTS N NA REMARKS Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal \boxtimes materials are accessible within 24 hours of a written request. Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general Lexis Nexis is available in both \times population, barring security concerns. Detainees denied access to legal segregation units. materials are documented and reviewed routinely for lifting of sanctions. All denials of access to the law library fully documented. Facility staff informs ICE Management when a detainee or group of X detainees is denied access to the law library or law materials. Detainees who seek judicial relief on any matter are not subjected to \times reprisals, retaliation, or penalties. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

Legal access for detainees at the facility is governed by facility policy 14.8, Access to Court. The policy complies with the NDS regarding Access to Legal Materials. At the time of the inspection, the level of access granted detainees at the facility appeared to exceed the requirements of this NDS.

(b)(6), (b)(7)(C) February 18, 2010 AUDITOR'S SIGNATURE / DATE

ADMISSION AND RELEASE

POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.

COMPONENTS	Y	N	NA	REMARKS
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	\boxtimes			
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	\boxtimes			Medical staff performs medical screening of detainees during the admission process in the Receiving and Discharge area
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	\boxtimes			Each new arrival is classified during the admissions process. Classification officers base the initial classification on information contained on form 213 provided by ICE. This form contains the detainee's criminal history.
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	\boxtimes			
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.	\boxtimes			The facility policies 9-5.5.c.4.c and 17-100.4 state ICE detainees may be strip searched only upon reasonable suspicion. Examples provided included suspicion of concealing weapons or contraband. Strip searches must be authorized by the Shift Supervisor.
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.	\boxtimes			
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.	\boxtimes			Facility staff indicated that they fill out the I-387 if a detainee makes a lost or missing property claim. This was verified by ICE staff.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	\boxtimes			
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.				A hygiene kit containing soap, toothbrush, toothpaste, and toilet paper is provided to each detainee at the assigned housing unit. These items are replaced without charge when needed.
All releases are properly coordinated with ICE using a Form I-203.	\boxtimes			

ADMISSION AND RELEASE POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY. COMPONENTS Y N NA REMARKS Staff completes paperwork/forms for release as required. ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The NDS for Admission and Release requires that new arrivals are separated from the general population during orientation. The facility does not meet this specific provision since all new detainees are placed in the general population before a formal orientation is provided. However, during the admissions process, a preliminary orientation is provided. All new detainees are given a copy of the National Detention Handbook as well as the facility handbook. They also meet with an ICE representative. Detainees are then taken to their assigned housing unit where the rules are explained, and they are directed to the various postings in the unit which provide information about telephone use, schedules, and grievance procedures. A correctional counselor is on duty until 10:00 p m. and a correctional officer supervises the housing unit.

On the second day at 7:30 a m., all new detainees are provided with a formal orientation. The facility video and the ICE video are shown. After the videos are shown, an opportunity for questions and answers is provided. In addition, DROs meet with each new detainee individually to discuss their cases.

Based on the information provided to detainees during the admissions process, upon placement in a housing unit coupled with the formal orientation provided on the second day, the facility complies with the NDS regarding Admission and Release.

(b)(6), (b)(7)(C) <u>February 18, 2010</u> **AUDITOR'S SIGNATURE / DATE**

CLASSIFICATION SYSTEM

POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES

COMPONENTS	Y	N	NA	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	\boxtimes			The facility uses an objective classification system developed by Corrections Corporation of America, its parent company. Facility policy provides for overrides to insure compliance with the NDS.
 The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. 	\boxtimes			All detainees are classified during the admissions process. The classification coordinator reviews every classification decision.
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	\boxtimes			
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.	\boxtimes			
Housing assignments are based on classification-level.	\boxtimes			Facility policy 18-02BB designates classification levels that may be housed in each housing unit. Assignments are based on classification levels.
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	\boxtimes			Each housing unit, including the segregation units, has scheduled recreation periods.
Detainee work assignments are based upon classification designations.	\boxtimes			_
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	\boxtimes			Facility policy 18-1, Internal Classification Assessment, requires that detainees be reclassified 45-60 days after arrival, and every 90 days thereafter. A review of files confirmed that detainees are reclassified according to policy.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	\boxtimes			Procedures by which detainees may appeal their classification assignments are included in the facility handbook and are posted in the units. All appeals are reviewed the Classification Coordinator.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	\boxtimes			Facility policy, 18-1, Internal Classification Assessment System, requires that appeals be resolved within five business days. A review of logs indicated that appeals are resolved within that time limit.

CLASSIFICATION SYSTEM						
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM ACCORDING TO WHICH ICE DETAINEES ARE CLASSIFIED. THE CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED IN THE APPROPRIATE CATEGORY, PHYSICALLY SEPARATED FROM DETAINEES IN OTHER CATEGORIES						
COMPONENTS	Y	N	NA	REMARKS		
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	\boxtimes					
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	\boxtimes					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

Classification of detainees at the facility is governed by various policies included in Chapter 18 of the facility policy manual. These policies meet the requirements of the NDS regarding Classification System. Interviews with classification staff, file reviews, and review of logs indicated that the facility practices exceed the requirements of the NDS,

(b)(6), (b)(7)(C) February 18, 2010 AUDITOR'S SIGNATURE / DATE

CORRESPONDENCE AND OTHER MAIL

POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.

THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUI	DELINES CO	ONCERNI	NG CORRE	SPONDENCE AND OTHER MAIL.
COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	\boxtimes			
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	×			Rules for correspondence are posted in the housing units and are contained in the facility handbook which is provided in English and Spanish.
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	\boxtimes			Facility policy 16.1.5 requires that incoming mail be distributed within 24 hours after delivery to the facility, excluding weekends and holidays.
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	\boxtimes			Facility policy 16.1.5 requires that outgoing mail be posted within 24 hours after received from the detainee, 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.	\boxtimes			The facility staff opens and inspects detainee mail for contraband. This was authorized in writing by the AFOD on January 11, 2010.
Staff does not read incoming general correspondence without the Warden's prior written approval.	\boxtimes			
Staff does not inspect incoming special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	\bowtie			Special correspondence is opened and inspected in the detainee's presence.
Staff is prohibited from reading or copying incoming special correspondence.	\boxtimes			
Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	\boxtimes			
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	\boxtimes			
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	\boxtimes			
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	\boxtimes			
Staff maintains a written record of every item removed from detainee mail.	\boxtimes			
The Warden or equivalent monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	\boxtimes			
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.	\boxtimes			

CORRESPONDENCE AND OTHER MAIL							
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.							
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.				The facility mailroom staff stated that they immediately forward identity documents to ICE staff. ICE staff verified that this occurs.			
Staff provides the detainee a copy of his/her identity document(s) upon request.	\boxtimes						
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.	\boxtimes						
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.				Facility policy 15-1.5E allows indigent detainees to mail at least five pieces of special correspondence and three pieces of general correspondence per week. According to housing unit staff, detainees are provided with five stamped envelopes. If these envelopes are used, more may be requested, regardless of the time that has elapsed. This practice exceeds the requirements of the policy and the NDS.			
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.	\boxtimes						
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	\boxtimes						
△ ACCEPTABLE □ DEFICIENT □	AT-RISE	K		REPEAT FINDING			

The policies and practices at the facility meet the requirements of the NDS regarding Correspondence and Other Mail. It is the policy of the facility not to accept money for detainees through the mail or otherwise. Instead family and friends are directed to send funds to a central, shared service system in Atlanta. Detainee accounts are credited at this shared service.

(b)(6), (b)(7)(C) February 18, 2010 AUDITOR'S SIGNATURE / DATE

DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY.

COMPONENTS	Y	N	NA	REMARKS
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	\boxtimes			
The handbook is supplemented by the facility orientation video, where one is provided.	\boxtimes			
All staff members receive a handbook and training regarding the handbook contents.	\boxtimes			
				The handbook was revised on
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	\boxtimes			12-31-2009
There an annual review of the handbook by a designated committee or staff member.	\boxtimes			
The detainee handbook addresses the following issues: • Personal Items permitted to be retained by the detainee; and	\boxtimes			
 Initial issue of clothes, bedding and personal hygiene items. 				
The detainee handbook states in clear language the basic detainee	\boxtimes			
responsibilities. The handbook clearly outlines the methods for classification of				
detainees, explains each level, and explains the classification appeals	\boxtimes			
process.				
The handbook states when a medical examination will be conducted.	\boxtimes			
The handbook describes the facility, housing units, dayrooms, in-dorm				
activities, and special housing units.	\boxtimes			
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	\boxtimes			
washing and drying procedures, and expected personal hygiene				
practices.				
The handbook describe times and procedures for obtaining disposable				
razors, and allows that detainees attending court will be afforded the	\boxtimes			
opportunity to shave first.				
The handbook describes barber hours and hair cutting restrictions.	\boxtimes			
The handbook describes the telephone policy; debit card procedures;				
direct and free calls; locations of telephones; policy when telephone	\boxtimes			
demand is high; and policy and procedures for emergency phone calls.				
The handbook addresses religious programming.	\boxtimes			
The handbook states times and procedures for commissary or vending	\boxtimes			
machine usage, where available.				
The handbook describes the detainee voluntary work program.	\boxtimes			
The handbook describes the library location and hours of operation, and law library procedures and schedules.	\boxtimes			
The handbook describes attorney and regular visitation hours, policies,				
and procedures.	\boxtimes			
The handbook describes the facility contraband policy.	\boxtimes			
The handbook describes the facility visiting hours and schedule, and				
visiting rules and regulations.	\boxtimes			
The handbook describes the correspondence policy and procedures.	\boxtimes			
The handbook describes the detainee disciplinary policy and procedures,				
including:				
 Prohibited acts and severity scale sanctions; 	\bowtie			
 Time limits in the Disciplinary Process; and 				
 Summary of the Disciplinary Process. 				

DETAINEE HANDBOOK

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COMPONENTS	Y	N	NA	REMARKS
The grievance section of the handbook explains all steps in the grievance process – Including: • Informal (if used) and formal grievance procedures; • The appeals process; • In CDF facilities: procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security.	\boxtimes			
The detainee handbook describes the medical sick call procedures for general population and segregation.	\boxtimes			
The handbook describes the facility recreation policy including: Outdoor recreation hours. Indoor recreation hours.	\boxtimes			
The handbook describes the detainee dress code for daily living; and work assignments.	\boxtimes			
The handbook specifies the rights and responsibilities of all detainees.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

REMARKS:

In addition to the facility handbook, the inspector observed and reviewed postings in many areas of the facility of scheduled activities and services available.

(b)(6), (b)(7)(C) / February 18, 2010

AUDITOR'S SIGNATURE / DATE

FOOD SERVICE

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

THE HIGHEST SANITARY STANDARDS.				
COMPONENTS	Y	N	NA	REMARKS
The food service program is under the direct supervision of a <u>professionally trained</u> and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	\boxtimes			The FSA is a certified dietary manager.
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	\boxtimes			
The FSA provides food service employees with training that specifically addresses detainee-related issues. • In ICE Facilities this includes a review of the ICE "Food Service" standard	\boxtimes			
Knife cabinets close with an approved locking device, and the on-duty cook foreman maintains control of the key that locks the device.			\boxtimes	Knives are not used in the food service department.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitors the condition of knives and dining utensils.			\boxtimes	Since knives are not used in the food service department, an inventory is not maintained.
When necessary, special procedures govern the handling of food items that pose a security threat.	\boxtimes			A locked storage cabinet located inside the FSA's office is available if storage is needed.
Operating procedures include daily searches (shakedowns) of detainee work areas.	\boxtimes			
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	\boxtimes			
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	\boxtimes			
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	\boxtimes			
During orientation and training session(s), the CS explains and demonstrates: • Safe work practices and methods; • Safety features of individual products/pieces of equipment; and • Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work.	\boxtimes			
The Cook Supervisor documents all training in individual detainee detention files.	\boxtimes			
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.	\boxtimes			
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	\boxtimes			
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	\boxtimes			
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	\boxtimes			

FOOD SERVICE

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

THE HIGHEST SANITARY STANDARDS.				
COMPONENTS	Y	N	NA	REMARKS
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	\boxtimes			The majority of the detainee population is Hispanic. The cycle menu reflects the tastes of this ethnic group. Beans, rice, salsa, peppers, tacos, and fajitas are examples of foods included on the menu.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	\boxtimes			A Registered Dietitian, license number 841936, approves the cycle menus.
The FSA has established procedures to ensure that items on the master- cycle menu are prepared and presented according to approved recipes.	\boxtimes			
The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA	\boxtimes			
All staff and volunteers know and adhere to written "food preparation" procedures.	\boxtimes			
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	\boxtimes			
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week; The common-fare menus satisfy nutritional recommended daily allowances (RDAs); Staff routinely provide hot water for instant beverages and foods; Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items.				
A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	\boxtimes			
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.	\boxtimes			
 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. 	\boxtimes			
The food service program addresses medical diets.	\boxtimes			
Satellite-feeding programs follow guidelines for proper sanitation.	\boxtimes			

FOOD SERVICE						
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.						
COMPONENTS	Y	N	NA	REMARKS		
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.	\boxtimes					
All meals are provided in nutritionally adequate portions.	\boxtimes					
Food is not used to punish or reward detainees based upon behavior.	\boxtimes					
The food service staff instructs detainee volunteers on: • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment.	\boxtimes					
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes					
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?	\boxtimes			The FSA or his Assistant conducts the inspections.		
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?	\boxtimes			The most recent health inspection was conducted by the Pinal County Environmental Health Services on 12-23-09.		
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	\boxtimes					
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	\boxtimes					
Staff documents the results of every refrigerator/freezer temperature check.	\boxtimes					
The cleaning schedule for each food service area is conspicuously posted.	\boxtimes					
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes					
Storage areas are locked when not in use.	\boxtimes			All areas were secured during the review process.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

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FUNDS AND PERSONAL PROPERTY					
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY.					
STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.					
COMPONENTS	YES	No	NA	REMARKS	
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	\bowtie				
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	\boxtimes				
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). <u>For IGSAs and CDFs</u> , using a personal property inventory form that meets the ICE standard?					
Staff forwards an arriving detainee's medication to the medical staff.	\boxtimes				
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.	×			A review of log books during the inspection confirmed compliance with this requirement.	
b)(7)(E)officers are present during the processing of detainee funds and valuables during in-processing to the facility.(b)(7)(E)officers verify funds and valuables.	\boxtimes			(b)(7)(E) officers verify and confirm the transfer of funds and valuables.	
Staff searches arriving detainees and their personal property for contraband.	\boxtimes				
Staff procedures follow written policy for returning forgotten property to detainees.	\bowtie				
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes				
Staff follows written procedures when returning property to detainees.	\boxtimes				
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes				
The facility attempts to notify an out-processed detainee that he/she left property in the facility: • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.	\boxtimes				
The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	AT PICK			Dene at Emmaio	
△ ACCEPTABLE	AT-RISK			REPEAT FINDING	

The process used by the facility to verify funds and valuables of detainees provides checks and balances which exceed the requirements of the NDS.

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DETAINEE GRIEVANCE PROCEDURES

POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPS) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPS; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPS. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED.

COMPONENTS	Y	N	NA	REMARKS
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	\boxtimes			
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	\boxtimes			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	\boxtimes			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.		\boxtimes		No substantiated cases have occurred at this facility.
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed.	\boxtimes			
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RIS	SK		REPEAT FINDING

REMARKS:

The facility complies with the NDS regarding the Detainee Grievance Procedures. A review of the grievance process and records occurred. It was noted that each grievance is considered based on the merits.

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GROUP LEGAL RIGHTS PRESENTATIONS							
POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZED PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT.							
CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS. MARK STANDARD AS ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET.							
COMPONENTS	YES	No	NA	REMARKS			
The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	\boxtimes						
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.	\boxtimes						
The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	\boxtimes						
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	\boxtimes			Weekly schedules for group legal presentations are posted in each living unit.			
Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	\boxtimes						
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.	\boxtimes						
Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are documented.	\boxtimes						
Interpreters are admitted when necessary to assist attorneys and other legal representatives.	\boxtimes						
Presenters are afforded a minimum of one hour to make the presentation and to conduct a question-and-answer session.	\boxtimes						
Staff permits presenters to distribute ICE-approved materials.	\boxtimes						
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.	\boxtimes						
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.	\boxtimes						
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	\boxtimes						
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	\boxtimes						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

The Florence Project conducts Group Legal Presentations every Tuesday, Wednesday, and Thursday at the facility. Schedules for these presentations are posted in each living unit. Staff from the Florence Project also provides legal advice and counsel for detainees.

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION.

COMPONENTS	YES	No	NA	REMARKS
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.	\boxtimes			
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.	\boxtimes			Detainees are issued three pair of underwear and three pair of socks.
Additional clothing is available for changing weather conditions, or as seasonally appropriate.	\boxtimes			
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 the requirements of the job.	\boxtimes			
Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly.	\boxtimes			
Food service detainee volunteer workers are permitted to exchange outer garments daily.	\boxtimes			
Volunteer detainee workers are permitted to exchange outer garments more frequently.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISI	ζ		REPEAT FINDING

REMARKS:

Based on the items during intake, the facility exceeds the minimum requirements of this NDS. Laundry schedules are posted in housing units.

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MARRIAGE REQUESTS							
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.							
COMPONENTS	Y	N	NA	REMARKS			
The Field Office considers detainee marriage requests on a case-by-case basis.	\boxtimes						
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	\boxtimes						
It is standard practice to require a written request for permission to marry.	\boxtimes						
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	\boxtimes			During the inspection, the Chaplain was processing a written request of intent to marry which the inspector reviewed.			
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	\boxtimes						
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes						
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes						
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

REMARKS Marriage requests are forwarded to the ICE Field Office Director and considered on a case by case basis. There have been numerous marriages and baptisms at this facility.

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NON-MEDICAL EMERGENCY ESCORTED TRIPS

POLICY: THE IMMIGRATION AND CUSTOMS ENFORCEMENT (ICE) MAY PROVIDE DETAINEES WITH STAFF-ESCORTED TRIPS INTO THE COMMUNITY FOR THE PURPOSE OF VISITING CRITICALLY ILL MEMBERS OF THE DETAINEE'S IMMEDIATE FAMILY, OR FOR ATTENDING FUNERALS.

STANDARD N/A: CHECK THIS BOX IF ALL ICE NON-MEDICAL EMERGENCY ESCORTED TRIPS ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: • Funeral; or • Deathbed				
The facility recognizes mother, father, brother, sister, spouse, child, stepparent, and foster parent as "immediate family".				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.				
The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel; e.g., the kind of supervision required.				
Each escort includes at least)(7)(5)fficers.				
Escorting officers report unexpected situations to the originating facility as a matter of procedure, and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.				
Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written procedures and classification level of the detainee.				
Escort officers are precluded from accepting gifts/gratuities from a detainee, or detainee's relative or friend for any reason.				
Escort officers ensure that detainees: Conduct themselves in a manner that does not bring discredit to the ICE; Do not violate federal, state, or local laws; Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants; Make no unauthorized phone calls; and Know they are subject to search, urinalysis, Breathalyzer, or comparable test upon return. Standard procedure requires the immediate return to the facility of any				
detainee who violates trip rules.				
ACCEPTABLE DEFICIENT	AT-RISE	ζ.		REPEAT FINDING

REMARKS:

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RECREATION

POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.

COMPONENTS	Y	N	NA	REMARKS
The facility has a recreation program and facility.				
A recreational specialist (for facilities with more than 350 detainees) tailors				A recreation manager and (b)(7)e
the program activities and offerings to the detainee population.		l		recreation coordinators
	\boxtimes			supervise all recreational
				activities.
Regular maintenance keeps recreational facilities and equipment in good	_	l		At the time of the inspection, the
condition.	\boxtimes			recreation equipment was stored
				in good condition.
The recreational specialist or trained equivalent supervises detainee	\boxtimes			
recreation workers.				
The recreational specialist or trainee equivalent oversees recreation	\boxtimes			
programs for special housing units (SHU) and special-needs detainees.	\boxtimes			A society of course is espilable
Dayrooms offer sedentary activities, e.g., board games, cards, television. Outside activities are restricted to limited-contact sports.	X			A variety of games is available.
Each detainee has the opportunity to participate in daily recreation.				Each housing unit has a
Each detainee has the opportunity to participate in daily recreation.	\boxtimes			designated recreation time.
Detainees have access to recreation activities outside the housing units for				designated recreation time.
at least one hour daily, 5 days a week.	\boxtimes			
Staff checks all items for damage and condition when equipment is				
returned.	\boxtimes			
Staff conducts searches of recreation areas before and after use.	\boxtimes			
All recreation areas under constant staff supervision.	Ħ			
Supervising staff is equipped with radios.	Ħ			
The facility provides detainees in the SHU at least one hour of outdoor				
recreation time daily, five times per week.	\boxtimes			
Detainees in disciplinary/administrative segregation receive a written	\boxtimes			
explanation when a panel revokes his/her recreation privileges.	Ø			
Special programs or religious activities are available to detainees.				Schedules of activities are
	\boxtimes			posted in a variety of areas
				through the facility.
Volunteers are required to sign a waiver of liability before entering a secure				The volunteer agreement packet
portion of the facility where detainees are present.	\boxtimes			requires that a waiver of liability
Visitors, relatives or friends are not allowed to serve as volunteers.	\boxtimes			be signed.
				41
If outdoor recreation is offered, check this box. No further inform If the facility has no outside recreation, are detainees considered for	ation is	required	wnen ot	itaoor recreation is offered.
transfer after six months?		l		
If yes, written procedures ensure timely review of all eligible				
detainees.				
Case officers make written transfer recommendations about every six-				
month detainee to the OIC.				
The OIC documents all detainee-transfer decisions, whether yes or no.				
The detainee's written decision for or against an offered transfer				
documented in his/her A-file.				
Staff notifies the detainee's legal representative of his/her decision to				
accept/decline a transfer.				
If no recreation is available, the ICE Districts routinely review transfer				
eligibility for all detainees after 60 days.				
The A-file of every detainee who is held more than 60 days without access				
to recreation contains either a transfer-waiver signed by the detainee, or the				
OIC's written determination of the detainee's ineligibility for transfer.	l	1	ı	

RECREATION POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE.				
The detainee's legal representative is notified of the detainee's/OIC's decision.				
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING
REMARKS: At the time of the inspection, the recreation program provided at the facili Recreation. (b)(6), (b)(7)(C) / February 18, 2010	ty appear	red to exc	eed the r	equirements of the NDS regarding

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RELIGIOUS PRACTICES							
POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH RE	ASONABLE	AND EQU	ITABLE OF	PPORTUNITIES TO PARTICIPATE IN THE			
PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFE							
BUDGETARY CONSIDERATIONS.							
COMPONENTS	Y	N	NA	REMARKS			
Detainees are allowed to engage in religious services.	\boxtimes						
Space is available for detainees to conduct religious services.	\boxtimes						
The facility allows detainees to observe the major "holy days" of their							
religious faith.	\boxtimes						
List any exceptions.							
The facility accommodates recognized holy-day observances by:							
 Providing special meals, consistent with dietary restrictions; 							
Honoring fasting requirements;	\boxtimes						
 Facilitating religious services; and 							
Allowing activity restrictions.							
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes						
Volunteer's credentials are checked and verified before allowing				The volunteer agreement packet			
participation in detainee programs.	\boxtimes			requires that volunteers be			
				screened.			
Members of faiths not represented by clergy may conduct their own	\bowtie						
services within security allowances.							
Detainees in the Special Management Unit are allowed to participate in							
religious practices unless otherwise documented for the safety and	\boxtimes						
security of the facility.							
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING			
REMARKS:							

Detainees are allowed to practice the religion of their choice if it does not interfere with the safe and secure operation of the facility.

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DETAINEE TELEPHONE ACCESS POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. Y Ν NA COMPONENTS REMARKS Detainees are allowed access to telephones from the time the count is cleared in the morning, Detainees are allowed access to telephones during established facility \times approximately 7:00 a m. until waking hours. the evening count occurs at approximately 9:30 p.m. The telephone policy is explained during orientation and is included in the facility Upon admittance, detainees are made aware of the facility's telephone \times access policy. handbook. The telephone policy is also posted in the housing units. Access rules are posted in housing units. The facility makes a reasonable effort to provide key information to All information is provided in detainees in languages spoken by any significant portion of the facility's \times English and Spanish. Telephones are provided at a minimum ratio of one telephone per 25 There is one telephone for every \times detainees in the facility population. 12.5 detainees. Telephones are inspected regularly by facility staff to ensure that they Housing unit staff checks each \times are in good working order. telephone once per week. The facility administration promptly reports out-of-order telephones to \times the facility's telephone service provider. The facility administration monitors repair progress and takes A designated staff member appropriate measures to ensure that required repairs are begun and \times coordinates repairs with the completed timely. service provider. Detainees are afforded a reasonable degree of privacy for legal phone X Housing unit staff allows a A procedure exists to assist a detainee who is having trouble placing a \times detainee to use a private phone confidential call. to make a confidential call. The facility provides the detainees with the ability to make non-collect \times (special access) calls. X Special Access calls are at no charge to the detainees. The OIG phone number was tested by the LCI during this review. The LCI was able to The OIG phone number for reporting abuse is programmed into the speak to a Communications \times detainee phone system and the phone number was checked by the Specialist after about ten inspector during the review. minutes. Confirmation provided was #(b)(6), (b)(7)(C) unique ID (6), (b)(7)(C) In facilities unable to fully meet this requirement initially because of The facility meets the above limitations of its telephone service, ICE makes alternate arrangements to X requirement. provide required access within 24 hours of a request by a detainee. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal \times Services List". Special arrangements are made to allow detainees to speak by telephone With the approval of ICE staff,

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X

with an immediate family member detained in another Facility.

Any telephone restrictions are documented.

arrangements are made.

DETAINEE TELEPHONE ACCESS						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.						
COMPONENTS	Y	N	NA	REMARKS		
The facility has a system for taking and delivering emergency detainee telephone messages.	\boxtimes					
Emergency phone call messages are immediately given to detainees.	\boxtimes					
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes					
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	\boxtimes					
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes			Procedures for calling consulate and embassy officials are posted in the housing units. The phone numbers for the consulate and embassy offices are also posted. Detainees are allowed to call these numbers any time during waking hours.		
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	\boxtimes					
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	\boxtimes					
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	\boxtimes					
Acceptable Deficient	AT-RIS	sk		REPEAT FINDING		

ICE staff inspects the phones each week to insure that they are working properly. Five different consulates and embassies were called at random to test the system.

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VISITATION

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

MEDIA.				
COMPONENTS	Y	N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	\boxtimes			
The visitation hours tailored to the detainee population and the demand for visitation.	\boxtimes			
The visitation schedule and rules are available to the public.	\boxtimes			The visitation schedule and rules are posted in the entry lobby of the facility.
The hours for all categories of visitation are posted in the visitation waiting area.	\boxtimes			
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	\boxtimes			Copies of the visiting rules are available in the entry lobby of the facility.
A general visitation log is maintained.	\boxtimes			
The detainees are permitted to retain personal property items specified in the standard.	\boxtimes			
A visitor dress code is available to the public.	\boxtimes			
Visitors are searched and identified according to standard requirements.	\boxtimes			
The requirement on visitation by minors is complied with.	\boxtimes			
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	\boxtimes			Minors are allowed to visit. Children under 16 must be accompanied by an adult with proper identification.
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.			\boxtimes	Minors are allowed to visit.
Detainees in special housing are afforded visitation.	\boxtimes			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	\boxtimes			
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	\boxtimes			If a legal visit continues through a scheduled meal, the facility provides the detainee a boxed meal at the conclusion of the visit.
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	\boxtimes			All attorney meetings are held in private rooms. There is no separation between the attorney and the detainee.
There are written procedures governing detainee searches.	\boxtimes			
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	\boxtimes			Strip searches are not conducted unless there is reasonable suspicion that the detainee may be concealing weapons or contraband. Strip searches must be authorized by the shift supervisor.
Prior to each visit, legal service providers and assistants are identified per the standard.	\boxtimes			All legal service providers and assistants must properly identify themselves before they are allowed to visit with a detainee.

VISITATION				
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.				
The current list of $pro\ bono$ legal organizations is posted in the detainee housing areas and other appropriate areas.	\boxtimes			
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	\boxtimes			
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	\boxtimes			
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	\boxtimes			
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	\boxtimes			
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			All requests to visit by independent medical service providers and experts are referred to ICE staff.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING				REPEAT FINDING

Facility policy 16-2 covers visitation. The rules for visitation are included in the facility handbook which is provided to each detainee. Visitation rules are posted in the housing units. All visits are contact visits. Visitors are searched prior to the visit. Detainees are pat searched prior to and after each visit. General visitation is held on weekends and holidays only.

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VOLUNTARY WORK	PROGR	AM		
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, IC MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS ADMINISTRATION (OSHA) PROTECTIONS.				
☐ CHECK HERE IF ICE DETAINEES ARE NOT AUTHORIZED TO WORK A AND MOVE TO NEXT SECTION.	T THE IGS	SA FACIL	ІТҮ. МА	RK NA ON FORM G-324A, PAGE 3
COMPONENTS	Y	N	NA	REMARKS
Does the facility have a voluntary work program? • Do ICE detainees participate?	\boxtimes			
Detainee housekeeping meets neatness and cleanliness standards.	\boxtimes			
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	\boxtimes			
Written procedures govern selection of detainees for the Voluntary Work Program.	\boxtimes			
Where possible, physically and mentally challenged detainees participate in the program.	\boxtimes			
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.	\bowtie			
Detainee volunteers generally work according to fixed schedule.	X			
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	\boxtimes			
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	\boxtimes			
The voluntary work program meets: OSHA, NFPA, ACA standards	\boxtimes			
Medical staff screen and formally certify detainee food service volunteers. • Before the assignment begins; and • As a matter of written procedure	\boxtimes			
Detainees receive safety equipment/training sufficient for the assignment.	\boxtimes			
Proper procedure is followed when an ICE detainee is injured on the job.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING
REMARKS All ICE detainees are offered the opportunity to participate in the volunta	ary work p	orogram.	Compens	sation is one dollar per day.
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SECTION II HEALTH SERVICES STANDARDS

HUNGER STRIKES

POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.

COMPONENTS	Y	N	NA	REMARKS
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	\boxtimes			Medical staff is notified when a detainee refuses food on or before a 72 hour period. The facility practice is to notify medical staff after a detainee misses meals for one day.
CDFs and IGSAs immediately report a hunger strike to the ICE.	\boxtimes			The medical staff will concurrently notify the officer in charge of the facility and ICE staff.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	\boxtimes			There are policies to ensure that staff effectively responds to a detainee on a hunger strike.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?	\boxtimes			Detainees who are on a hunger strike are placed in an observation cell in segregation.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	\boxtimes			Placement of a detainee on a hunger strike in an observation room is a joint decision between medical staff and security staff.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	\boxtimes			The medical staff records the weight and vital signs once every 24 hours.
The OIC of the facility obtains a hunger striker's consent before medical treatment.	\boxtimes			Consent is always obtained before medical treatment is rendered.
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	\boxtimes			A signed Refusal of Treatment form is obtained when a detainee rejects medical evaluation or treatment.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	\boxtimes			Three meals continue to be provided to the detainee on a hunger strike.
Staff maintains the hunger striker's supply of drinking water/other beverages.	\boxtimes			A detainee on a hunger strike continues to have access to milk or juice which is available with the three daily meals that are provided. In addition, a pitcher of ice water is placed in the observation cell.
During a hunger strike, staff removes all food items from the hunger striker's living area.	\boxtimes			Food items are removed from a hunger striker's cell.
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	\boxtimes			Vital signs, fluid, and food intake are recorded in the medical record.
The medical staff has written procedures for treating hunger strikers.	\boxtimes			Policies exist for the provision of services to hunger strikers.

HUNGER STRIKES				
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.				
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	\boxtimes			Medical staff documents all treatment and information provided to the detainee concerning the adverse risks and impact that a continued hunger strike will have on the detainee's health status.
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.	\boxtimes			Security staff receives training to identify a hunger striker during the basic training. Medical staff is knowledgeable in the treatment of a hunger striker consistent with their professional training. In addition, security and medical staff participate in annual continuing education courses.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING				

In accordance with facility policy, the medical management for hunger strikes is accomplished via a joint relationship between medical and security staff.

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ACCESS TO MEDICAL CARE

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.

COMPONENTS	Y	N	NA	REMARKS
<u>Facilities</u> operate a health care facility in compliance with state and local laws and guidelines.	\boxtimes			The facility's medical program is accredited by the American Correctional Association (ACA). This accreditation included 100% compliance with ACA policies and procedures. The provision of medical services is also in compliance with state and local guidelines.
The facility's in-processing procedures for arriving detainees include medical screening.	\boxtimes			All ICE detainees receive a comprehensive medical screening upon arrival.
All detainees have access to and receive medical care.	\boxtimes			All detainees have access to and receive comprehensive medical and mental health services.
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	\boxtimes			The medical services are provided by and staffed by the DIHS which affords access to the PHS/DIHS Health Care Coordinator.
The medical staff is large enough to provide, examine, and treat the facility's detainee population.	\boxtimes			There is sufficient medical and mental health staff to ensure that detainees receive medical and/or mental health examinations and any requisite counseling or medical treatments.
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	\boxtimes			The medical area has treatment rooms that provide sufficient privacy and confidentiality for medical examinations and treatments. There is medical equipment in the treatment room to support the services provided.
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	\boxtimes			The medical area has its own restricted access area and is within the secure perimeter of the facility.
The medical facility entrance includes a holding/waiting room.	\boxtimes			There is a holding room/ waiting area within the medical area.
The medical facility's holding/waiting room is under the direct supervision of custodial staff.	\boxtimes			The medical area is under constant supervision by security staff via the use of camera surveillance. A security officer is assigned to the medical area.
Detainees in the holding/waiting room have access to a drinking fountain.	\boxtimes			The medical waiting area does not have a drinking fountain. Drinking water is made available upon request.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. Medical records are kept apart from other files. They are: Medical Records are Secured in a locked area within the medical unit; maintained in a locked room \boxtimes within the medical With physical access restricted to authorized medical staff; and administrative office. Access is Procedurally, no copies made and placed in detainee files. restricted to the medical staff. Pharmaceuticals are stored in a secure area. Pharmaceuticals are stored in a locked pharmacy room, within the medical administrative office. Access is restricted to \bowtie medical staff. A licensed pharmacist and pharmacy technicians manage the pharmacy. Medical screening includes a Tuberculosis (TB) test. All detainees are given a chest x-ray upon their arrival at the Every arriving detainee receives a TB test during the admission facility. The chest x-ray is provided via a Tele-Radiology Detainee's TB-screening does not occur more than one business \boxtimes Service contract agreement with day after his/her arrival at the facility; and Dian Associates and the Detainees not screened are housed separate from the general University of Maryland. Results population. of the chest x-rays are available within 1 - 2 hours. All detainees receive a mental-health screening upon arrival. It is Mental health screening is a conducted: component of the intake assessment process. Staff is By a health care provider or specially trained officer; and \boxtimes trained to make the initial Before a detainee's assignment to a housing unit. assessment and refer the detainee to a mental health professional, as warranted. The medical staff identifies The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention. \bowtie detainees requiring additional medical services. The health care provider physically examines/assesses arriving detainees Detainees receive physical \times within 14 days of admission/arrival at the facility. examinations within 7 - 11 days of arrival. Detainees in the Special Management Unit have access to health care Detainees housed in an SMU services. have access to health care. XNursing staff visit the SMU daily and have face-to-face contact with the detainees. Staff provides detainees with health services (sick call) request slips daily, upon request. Sick call slips are available in Request slips are available in languages other than English, both English and Spanish. including every language spoken by a sizeable number of the \times Nursing staff collect the sick facility's detainee population. call slips daily at noon for the next day's sick call session. Service-request slips are delivered in a timely fashion to the health care provider. Care available once a week. The facility has a written plan for the delivery of 24-hour emergency There is a policy for the health care when no medical personnel are on duty at the facility, or when provision of 24-hour emergency Ximmediate outside medical attention is required. medical services. The 911 emergency call system is also used, as required.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.					
The plan includes an on-call provider.	\boxtimes			There is a plan for on-call medical staff. On-call contact telephone numbers are maintained in the medical office.	
The plan includes a list of telephone numbers for local ambulance and hospital services.	\boxtimes			Emergency contact telephone numbers for Emergency Transport and the local Hospital Emergency Room are on file within central control and the medical office.	
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	\boxtimes			The emergency health care is in accord with security and medical standard operating procedures.	
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.	\boxtimes			Security and health care staff can respond to health related emergencies within three and one half minutes.	
Where staff is used to distribute medication, a health care provider properly trains these officers.			\boxtimes	Only medical staff distributes medications.	
The medical unit keeps written records of medication that is distributed.	\boxtimes			Medication Administration Records (MARs) are maintained for each detainee.	
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.	\boxtimes			The medical staff notifies the classification officer of the facility if a detainee has special medical requirements.	
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	\boxtimes			A consent form is obtained from a detainee prior to receiving medical treatments.	
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	\boxtimes			Detainees sign a form authorizing the release of medical records to external sources.	
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	\boxtimes			Sufficient advanced notification is provided to medical staff concerning the release of a detainee.	
Detainee's medical records or a copy thereof, are available and transferred with the detainee.	\boxtimes			The detainee's medical record is available for transfer with a 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			The detainee's medical record is transferred in a sealed envelope, marked as "Medical Confidential", with the detainee's name and A-Number.	
ACCEPTABLE DEFICIENT	AT-RISK	7	□ I	REPEAT FINDING	

REMARKS:

The medical services at this facility are ACA accredited.

The medical services are provided and staffed by the DIHS.

A review of 25 randomly selected detainee medical records reflected that a chest x-ray was provided upon intake, results of the x-ray were reported within 1 - 2 hours. A consent form for the provision of medical services was signed by the detainee upon intake. A comprehensive medical history and physical were completed within a 7 - 11 day period after arrival.

All detainees have access to comprehensive medical and mental health services. The medical services consist of daily sick call, medical & psychiatric services, chronic care clinics, and pharmaceuticals, as warranted.

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SUICIDE PREVENTION AND INTERVENTION POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT. \mathbf{Y} NA REMARKS COMPONENTS Every new staff member receives suicide-prevention training. Suicide-Every staff member is provided Suicide Prevention and prevention training occurs during the employee orientation program. Intervention Training as a component of basic training and orientation. On-going staff \bowtie development courses are scheduled throughout the year to maintain and enhance the knowledge and skills of both security and medical staffs. Training prepares staff to: Staff is trained to recognize Recognize potentially suicidal behavior; potentially suicidal behavior and \boxtimes Refer potentially suicidal detainees, following facility techniques to prevent suicide procedures; and attempts. Understand and apply suicide-prevention techniques. A health-care provider or specially trained officer screens all detainees for Every individual admitted to this suicide potential as part of the admission process. facility receives a Screening does not occur later than one working day after the comprehensive medical and \boxtimes mental health assessment. A detainee's arrival. detainee at risk is immediately referred to medical staff for further observation. Written procedures are Written procedures cover when and how to refer at-risk detainees to \boxtimes medical staff and procedures are followed. established to refer at-risk detainees to medical staff. The facility has a designated isolation room for evaluation and treatment. There are six designated \boxtimes isolation rooms that are used for evaluation and treatment. The designated isolation room does not contain any structures or smaller The designated isolation rooms items that could be used in a suicide attempt. contain no objects that could be \times used to facilitate a suicide attempt.

REMARKS:

Security and medical staff are trained to recognize potential suicidal behavior and access medical and mental health services staff for professional intervention. During the year preceding this inspection, there were four unsuccessful suicide attempts. Two of the attempts were made by the same individual. In each of the reported attempted suicides, the medical and psychiatric professionals immediately responded. The detainee was provided with the requisite medical and psychiatric therapeutic intervention services.

DEFICIENT

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least once every 15 minutes.

Medical staff has approved the room for this purpose.

ACCEPTABLE

Staff observes and documents the status of a suicide-watch detainee at

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 \boxtimes

 \bowtie

AT-RISK

G-324A Detention Inspection Form Worksheet for IGSAs - Rev: 07/09/07

The suicide isolation room has

Staff observes and documents all suicide watches. The

facility's suicide watch policy

been approved for use.

requires one-on-one

observation.

REPEAT FINDING

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH						
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT. CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.						
COMPONENTS	Y	N	NA	REMARKS		
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	\boxtimes			The facility does not have a medical infirmary. Detainees who are chronically ill upon intake may not be admitted to the facility. Detainees who become chronically or terminally ill while in custody are transferred to a local hospital or to an ICE facility with an infirmary.		
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: • The detainee's location; and • The limitations placed on visiting.	\boxtimes			Facility staff notifies ICE staff regarding the medical condition of the detainee. ICE staff notifies the next of kin.		
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.	\boxtimes			If requested, this option is made available to detainees.		
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.	\boxtimes			Detainees have access to Public Defenders and lawyers who offer Pro Bono Legal Services to prepare legal documents. A request for a private attorney may be approved by ICE staff. The expense for the private attorney is the responsibility of the detainee.		
There is a policy addressing "Do Not Resuscitate Orders"	\boxtimes			There is an established policy for "Do Not Resuscitate Orders". The medical provider has a policy that addresses "Do Not Resuscitate Orders" consistent with community and American Correctional Association standards for health care services.		
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?	\boxtimes			A "Do Not Resuscitate" request will be honored. Consistent with the physician's orders, medical staff ensure comfort levels by minimizing severe pain and suffering through the use of pharmaceuticals.		

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH							
POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.							
	$\begin{tabular}{ll} \hline Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the control of the c$						
THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALW	AYS CO	MPLETE A	LL REFE	RENCES TO DETAINEE DEATH AND			
RELATED NOTIFICATIONS. COMPONENTS	Y	N	NA	REMARKS			
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.				The facility's medical administrator notifies the Officer in Charge of the facility and ICE staff of a detainee's request to execute a "Do Not Resuscitate" order.			
The facility has written procedures to address the issues of organ donation by detainees.	\boxtimes			A detainee is generally not housed at this facility long enough to warrant contacting ICE concerning requests for organ donations. If the detainee's medical condition deteriorates, discussion with the facility's medical director, and ICE staff will assess the requirement, eligibility and availability for an organ transplant.			
The facility has written procedures to notify ICE officials, deceased	\boxtimes	П		The facility will notify ICE staff			
family members and consulates, when a detainee dies while in Service.				concerning a detainee's death.			
The facility has a policy and procedure to address the death of a detainee	\boxtimes			The facility will notify ICE staff			
while in transport.				concerning a detainee's death.			
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	\boxtimes			The facility will notify ICE staff concerning a detainee's death. ICE is responsible for the disposition of the body.			
 In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified? 	\boxtimes			The ICE Field Office schedules the detainee's burial in accordance with established ICE Policies.			
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	\boxtimes			This is the responsibility of ICE staff.			
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body.	\boxtimes			If a detainee dies while in custody, ICE staff is notified. The local Medical Examiner will perform an autopsy and issue the Death Certificate.			
ICE staff follows established procedures to properly close the case of a deceased detainee.	\boxtimes			This is the responsibility of ICE staff.			
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RIS	K		REPEAT FINDING			

REMARKS:

Facility policy and ICE Procedures are followed pertaining to the detainees medical services associated with Terminal Illness, Advance Directives, and Death. At the time of the inspection, there was excellent coordination with the on-site ICE staff.

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SECURITY AND CONTROL STANDARDS

CONTRABAND POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED. COMPONENTS N NA REMARKS The facility follows a written procedure for handling illegal contraband. Facility policy 9-6, Contraband Staff inventory, hold, and report it when necessary to the proper authority Control, outlines the facility's Xfor action/possible seizure. procedure for the handling of all contraband. Contraband that is government property is retained as evidence for \boxtimes potential disciplinary action or criminal prosecution. Staff returns property not needed as evidence to the proper authority. \bowtie Written procedures cover the return of such property. Altered property is destroyed following documentation and using \times established procedures. Before confiscating religious items, the OIC or designated investigator The facility chaplain indicated contacts a religious authority. that all items of a religious \boxtimes nature are brought to him for approval or denial prior to being confiscated. Staff follows written procedures when destroying hard contraband that is \boxtimes illegal. Hard contraband that is illegal (under criminal statutes) may be retained and used for official use, e.g. training purposes. \boxtimes If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The facility complies with the NDS regarding Contraband.

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DETENTION FILES POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC. COMPONENTS \mathbf{Y} NA REMARKS A detention file is created for every new arrival whose stay will exceed X The detainee detention file contains either originals or copies of \boxtimes documentation and forms generated during the admissions process. Special requests X Any G-589s and/or I-77s closed-out during the detainee's stay Disciplinary forms/Segregation forms

The detainee's detention file also contains documents generated during the detainee's custody. Grievances, complaints, and the disposition(s) of same The detention files are located and maintained in a secure area. If not, the Detainee files are located and cabinets are lockable and distribution of the keys is limited to supervisors. maintained in a locked room \boxtimes accessible only by designated staff. The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed Xrelease documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation. The officer closing the detention file makes a notation that the file is \boxtimes complete and ready to be archived. Staff makes copies and sends documents from the file when properly \bowtie requested by supervisory personnel at the receiving facility or office. Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is \bowtie properly logged out and in by a representative of the responsible department. AT-RISK **ACCEPTABLE** DEFICIENT REPEAT FINDING

REMARKS:

A review of five files occurred. Each contained all forms generated during the admissions process. The files also contained additional documents generated during a detainee's stay at the facility. These included grievances, classification forms, work records, property received, as well as other forms. Review of a log documenting access by staff other than those directly responsible for the files also occurred. The log contained information such as staff name, reasons for accessing the file(s) and dates of occurrence.

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DISCIPLINARY POLICY

POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.

COMPLIANCE WITH FACILITY RULES AND REGULATIONS.				
COMPONENTS	Y	N	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.	\boxtimes			Facility policy 15-100, Disciplinary Procedures, outlines the disciplinary system which uses progressive levels of discipline and appeals.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	\boxtimes			
Written rules prohibit staff from imposing or permitting the following sanctions:	\boxtimes			
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	\boxtimes			The rules of conduct, sanctions and procedures for violations are communicated in the facility handbook and in the facility orientation video.
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions	\boxtimes			
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	\boxtimes			
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	\boxtimes			
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	\boxtimes			
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes			
 A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC; Considers written reports, statements, physical evidence, and oral testimony; Hears pleadings by detainees and staff representatives; Bases its findings on the preponderance of evidence; and Imposes only authorized sanctions 	\boxtimes			The facility hearing officer and a review of hearing reports indicated that the disciplinary panel adheres to these requirements.
A staff representative is available if requested for a detainee facing a disciplinary hearing.	\boxtimes			
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	\boxtimes			All postponements or continuances are documented on the forms used by the disciplinary panel.

DISCIPLINARY POLICY					
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COMPLIANCE WITH FACILITY RULES AND REGULATIONS.					
COMPONENTS	Y	N	NA	REMARKS	
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	\boxtimes				
Written procedures govern the handling of confidential-informant information. Standards include criteria for recognizing "substantial evidence"	\boxtimes				
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	\boxtimes				
ACCEPTABLE DEFICIENT	AT-RISE	ζ		REPEAT FINDING	

REMARKS:

The facility complies with the NDS regarding Disciplinary Policy. Disciplinary hearing logs as well as facility policy 15-100, Disciplinary Procedures, were reviewed. An interview was conducted with the Disciplinary Panel Chairperson. The facility disciplinary process is well documented.

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EMERGENCY (CONTINGENCY) PLANS POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT. VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY. **COMPONENTS** NAREMARKS Policy precludes detainees or detainee groups from exercising control or \times authority over other detainees. Detainees are protected from: Personal abuse Corporal punishment Personal injury \times Disease Property damage Harassment from other detainees Staff is trained to identify signs of detainee unrest. Initial training entitled "Crisis What type of training and how often? Communication" is provided Xduring initial security training. Annual training occurs thereafter. Staff effectively disseminates information on facility climate, detainee \boxtimes attitudes, and moods to the Officer In Charge (OIC) There is a designated person or persons responsible for emergency plans The Chief of Security and the and their implementation. Sufficient time is allotted to the person or group Assistant Chief of Security are \times responsible for emergency for development and implementation of the plans. plans and their implementation. The plans address the following issues: Confidentiality The facility's emergency plans Accountability (copies and storage locations) Xwere reviewed and updated on Annual review procedures and schedule May 1, 2009. Revisions Contingency plans include a comprehensive general section with \times procedures applicable to most emergency situations. The facility has cooperative contingency plans with applicable: The facility has Memoranda of Local law enforcement agencies Understanding with the National Guard, Central State agencies Arizona Detention Center. Federal agencies \times Florence Correctional Center, the Eloy Fire District, the Eloy Police Department and the Pinal County Sheriff's Office. All staff receives copies of Hostage Situation Management policy and \times procedures. Staff is trained (b)(7)eWithin 24 hours after release, hostages are screened for medical and \times psychological effects. Emergency plans include emergency medical treatment for staff and \times detainees during and after an incident. Food service maintains at least 3 days' worth of emergency meals for staff The food service department and detainees. maintains a minimum of two \boxtimes weeks supply of meals for staff and detainees. Written plans identify locations of shut-off valves and switches for all \times utilities (water, gas, electric).

EMERGENCY (CONTING	EMERGENCY (CONTINGENCY) PLANS				
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGE	NCIES WITH	A PREDE	TERMINE	O STANDARDIZED PLAN TO MINIMIZE	
THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECORD TO THE DESTRUCTION OF PROPERTY OF THE				,	
MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND S	TATE AGE	NCIES TO	ASSIST IN	TIMES OF EMERGENCY.	
COMPONENTS	Y	N	NA	REMARKS	
Written procedures cover:					
Work/Food Strike					
 Disturbances 					
 Escapes 					
Bomb Threats					
Adverse Weather	\boxtimes				
 Internal Searches 					
Facility Evacuation					
 Detainee Transportation System Plan 					
Internal Hostages					
Civil Disturbances					
	AT-RISK			EPEAT FINDING	

REMARKS:

The facility complies with the NDS regarding Emergency Plans. At the time of the inspection, it was noted that the emergency plans are well written and contain all the elements necessary to safely manage all emergencies.

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ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	Y	N	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	\boxtimes			Perpetual inventories of hazardous materials along with proper issuing and accountability measures were observed during review.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	\boxtimes			
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. • The files list all storage areas, and include a plant diagram and legend. • The MSDSs and other information in the files are available to personnel managing the facility's safety program.	\boxtimes			
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.	\boxtimes			All required protective equipment was found to be readily available and reporting requirements are being met.
The MSDSs are readily accessible to staff and detainees in work areas.	\boxtimes			
Hazardous materials are always issued under proper supervision. • Quantities are limited; and • Staff always supervises detainees using these substances.	\boxtimes			During inspection, proper dispensing and accountability measures were observed and supported by written documentation.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	\boxtimes			Perpetual inventories are maintained in an approved storage cabinet.
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	\boxtimes			
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	\boxtimes			
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	\boxtimes			
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	\boxtimes			
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	\boxtimes			Records were reviewed support compliance with this requirement.
All toxic and caustic materials are stored in their original containers in a secure area.	\boxtimes			
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	\boxtimes			
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	\boxtimes			
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	\boxtimes			

ENVIRONMENTAL HEALTH AND SAFETY

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

SAFE-HANDLING PROCEDURES				
COMPONENTS	Y	N	NA	REMARKS
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).	\boxtimes			
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			
The Safety Office (or officer) maintains files of inspection reports.	X			
The facility has an approved fire prevention, control, and evacuation plan.	X			
The plan requires: • Monthly fire inspections; • Fire protection equipment strategically located throughout the facility; • Public posting of emergency plans with accessible building/room floor plans; • Exit signs and directional arrows; and • An area-specific exit diagram conspicuously posted in the diagrammed area.				Written documentation supported that each of these required components was met.
Fire drills are conducted and documented monthly.	\boxtimes			Fire drills occur on all shifts.
A sanitation program covers barbering operations.	\boxtimes			
The barber shop has the facilities and equipment necessary to meet sanitation requirements.	\boxtimes			
The sanitation standards are conspicuously posted in the barbershop.	\boxtimes			
Written procedures regulate the handling and disposal of used needles				
and other sharp objects.	\boxtimes		Ш	
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	\bowtie			
Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections. •				
The facility follows standard cleaning procedures.	\boxtimes			
Spill kits are readily available.	\boxtimes			
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	\boxtimes			The Stericycle company has a contract to dispose of waste. Permit (b)(6), (b)(7)c is current.
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes			
Do the methods for handling/disposing of refuse meet all regulatory requirements?	\boxtimes			
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.	\boxtimes			The Johnny Reeves Termite and Pest Control company of Coolidge, Arizona performs these functions.

ENVIRONMENTAL HEALTH AND SAFETY POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES COMPONENTS NA REMARKS Drinking water and wastewater is routinely tested according to a fixed Documentation supports routine \bowtie schedule. testing of wastewater as well as drinking water. Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least Current testing exceeds the \boxtimes minimum requirements. Testing is followed-up with timely corrective actions (repairs and replacements). **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The facility complies with all the NDS regarding Environmental Health and Safety. Concerns noted in the February 2009 inspection have been corrected. A variety of records were reviewed to support compliance with this NDS. A new wastewater treatment facility was recently activated, and the option of further expansion is possible.

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HOLD ROOMS IN DETENTION FACILITIES POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY. NA REMARKS COMPONENTS The hold rooms are situated within the secure perimeter. This facility has four hold rooms \times in the reception and discharge The hold rooms are well ventilated well lighted, and all activating \times switches are located outside the room. The hold rooms contain sufficient seating for the number of detainees \times Bunks, cots, beds, or other related make-shift sleeping apparatus are There are no bunks, beds, or \times precluded from use inside hold rooms. cots inside hold rooms. X The walls and ceilings of the hold rooms are tamper and escape proof. Individuals are not held in hold rooms for more than 12 hours. Facility policy, 17-100, Admission Procedures, prohibits \times detainees from being held in hold rooms for more than 12 hours. Male and females are segregated from each other. Detainees under the age of 18 are not held with adult detainees. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and \times wipes. In older facilities, officers are within visual or audible range to allow Hold rooms in the facility are \times detainees access to toilet facilities on a regular basis. within visual and audible range of officers at all times. All detainees are given a pat down search for weapons or contraband \times before being placed in the room. Officers closely supervise the detention hold rooms using direct 15-minute checks are made and supervision (Irregular visual monitoring.). \times documented in the Detention Hold rooms are irregularly monitored every 15 minutes. Log. Unusual behavior or complaints are noted. When the last detainee has been removed from the hold room, it is given Hold rooms are searched and \times cleaned after each use. a thorough inspection. There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building \boxtimes evacuation.

REMARKS:

The hold rooms at the facility are clean, well ventilated, well lit and are used appropriately.

DEFICIENT

An appropriate emergency service is called immediately upon a

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determination that a medical emergency may exist.

ACCEPTABLE DEF

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

 \times

AT-RISK

REPEAT FINDING

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	Y	N	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	\boxtimes			The Key Control Officer attended the Arizona Institute of Locksmithing in October 2009.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	\boxtimes			
The security officer, or equivalent in IGSAs, provides training to employees in key control.	\boxtimes			
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.				At the time of the inspection, the Key Control Officer did not have an inventory of the padlocks in the facility. An inventory was developed during the inspection. It was reported that there are(b)(7) padlocks being used throughout the facility.
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	\boxtimes			The Key Control Officer performs preventative maintenance quarterly and documents the actions taken.
Facility policies and procedures address the issue of compromised keys and locks.	\boxtimes			
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	\boxtimes			
Only dead bolt or dead lock functions are used in detainee accessible areas.	\boxtimes			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	\boxtimes			
Grand master keying systems are prohibited.	\boxtimes			
All worn or discarded keys and locks are cut up and properly disposed of.	\boxtimes			All worn out keys and locks are disposed of in a (b)(7)e (b)(7)e which is outside the secure perimeter of the facility.
Padlocks and/or chains are prohibited from use on cell doors.	\boxtimes			
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101.	\boxtimes			
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	\boxtimes			The operational key board is located in the (b)(7)e which is a secure area.
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.	×			
Emergency keys are available for all areas of the facility.	\boxtimes			
The facilities use a key accountability system.	\boxtimes			

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	Y	N	NA	REMARKS	
Authorization is necessary to issue any restricted key.				The shift supervisor or above must grant authorization to issue restricted keys.	
 Individual gun lockers are provided. They are located in an area that permits constant officer observation. In an area that does not allow detainee or public access. 	\boxtimes				
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			Keys are counted once per shift.	
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 	\boxtimes				
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

At the time of the inspection, there was not an inventory of padlocks used throughout the facility. Once identified, an inventory was initiated and completed prior to the end of the inspection. The facility complies with all other requirements of the NDS regarding Key and Lock Control based on a review of logs, policy, observation, and interviews with staff.

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POPULATION COUNTS					
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY					
CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION				~	
CONDUCTED AS NECESSARY.					
COMPONENTS	Y	N	NA	REMARKS	
Staff conduct a formal count at least once each shift.	\boxtimes			Formal Counts are conducted at midnight, 2:00 a.m., 4:00 a.m., 6:15 a.m., 10:15 a.m., 2:15 p.m., and 10:15 p.m. A standing face to face count is conducted at 6:15 p.m.	
Activities cease or are strictly controlled while a formal count is being conducted.	\boxtimes				
Certain operations cease during formal counts.	\boxtimes				
All movement ceases for the duration of a formal count.	\boxtimes				
Formal counts in all units take place simultaneously.	\boxtimes				
Detainee participation in counts is prohibited.	\boxtimes				
A face-to-photo count follows each unsuccessful recount.	\boxtimes				
Officers positively identify each detainee before counting him/her as present.	\boxtimes			Officers must verify that a live body is present during each formal count.	
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.	\boxtimes				
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.	\boxtimes			Out-counts are maintained by the Receiving and Discharge unit of this facility.	
This training is documented in each officer's training folder.	\boxtimes				
ACCEPTABLE DEFICIENT	AT-RIS	ŝK	I	REPEAT FINDING	

REMARKS:

This facility has a well organized and efficient counting procedure. The 2:15 p m. count was observed by members of the inspection team. Movement ceased and all areas observed were simultaneously and efficiently counted. The population count was 1431 detainees.

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POST ORDERS					
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYIN					
ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY					
COMPONENTS	Y	N	NA	REMARKS	
Every fixed post has a set of post orders.	\boxtimes			There are 24 written post orders for this facility.	
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	\boxtimes				
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	\boxtimes			The Assistant Chief of Security is responsible for keeping all post orders current.	
The IGSA maintains a complete set (central file) of post orders.	\boxtimes				
The central file is accessible to all staff.	X				
The OIC or Contract / IGSA equivalent initiates/authorizes all post-order changes.	\boxtimes				
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	\boxtimes				
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	\boxtimes			The last review of post orders occurred on August 3, 2009.	
Procedures keep post orders and logbooks secure from detainees at all times.	\boxtimes				
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	\boxtimes				
Armed-post post orders provide instructions for escape attempts.	\boxtimes			There are (b)(7)e armed posts at this facility. All post orders provide instructions for escape attempts.	
The post orders for housing units track the event schedule.	\boxtimes				
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	\boxtimes				
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

The facility has 24 posts and all had post orders containing the necessary information.

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SECURITY INSPECTIONS

POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROLIGH GROUNDING IN FACILITY OPERATIONS

RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING				
COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The policy specifies:				
Posts to be inspected;				
Required inspection forms;	\bowtie			
Frequency of inspections;				
 Guidelines for checking security features; and 				
 Procedures for reporting weak spots, inconsistencies, and other 				
areas needing improvement				
Every officer is required to conduct a security check of his/her assigned	\boxtimes			
area. The results are documented.				
Documentation of security inspections is kept on file.				Documentation of security
	\boxtimes			inspections is retained for three
				years.
Procedures ensure that recurring problems and a failure to take corrective	\boxtimes			
action are reported to the appropriate manager.				
The front-entrance officer checks the ID of everyone entering or exiting				
the facility.	\boxtimes			
All visits are officially recorded in a visitor logbook or electronically				
recorded.	\boxtimes			
The facility has a secure visitor pass system.	\boxtimes			
	X			
Every Control Center officer receives specialized training.				
The Control Center is staffed around the clock.				
Policy restricts staff access to the Control Center.				Access to the control center
	\boxtimes			must be authorized by the shift
				supervisor for staff not assigned
				to that post.
Detainees are restricted from access to the Control Center.	\boxtimes			
Communications are centralized in the Control Center.	\boxtimes			
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			
The facility maintains a log of all incoming and departing vehicles to				
sensitive areas of the facility. Each entry contains:				
The driver's name;				
Company represented;				
Vehicle contents;	\bowtie			
Delivery date and time;				
Date and time out;				
 Vehicle license number; and 				
 Name of employee responsible for the vehicle during the visit 				
Officers thoroughly search each vehicle entering and leaving the facility.	\boxtimes			
The facility has a written policy and procedures to prevent the	\boxtimes			
introduction of contraband into the facility or any of its components.				
Tools being taken into the secure area of the facility are inventoried	\boxtimes			
before entering and prior to departure.				
The SMU entrance has a sally port.				The facility has two special
	\boxtimes			management units and both have
				a sally port.
Written procedures govern searches of detainee housing units and	\bowtie			
personal areas.				
Housing area searches occur at irregular times.	\boxtimes			

SECURITY INSPECTIONS POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING IN FACILITY OPERATIONS. COMPONENTS YES No NA REMARKS Every search of the SMU and other housing units is documented. All searches are documented in \bowtie housing unit log books. Storage and supply rooms, walls, light and plumbing fixtures, accesses, \boxtimes and drains, etc., undergo frequent, irregular searches. These searches are documented. Walls, fences, and exits, including exterior windows, are inspected for \boxtimes defects once each shift. Daily procedures include: Perimeter alarm system tests; \bowtie Physical checks of the perimeter fence; and Documenting the results. Visitation areas receive frequent, irregular inspections. \boxtimes **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The facility complies with the NDS regarding Security Inspections.

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SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).

COMPONENTS	Y	N	NA	REMARKS
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	\boxtimes			
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.	\boxtimes			
The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).	\boxtimes			Shift supervisors conduct reviews of detainees placed in administrative segregation.
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?	\boxtimes			The facility conducts a review of detainees placed in administrative segregation every seven days for the first two months, and every 30 days thereafter. All reviews include an interview with the detainee.
The detainee is given a copy of the decision and justification for each review. • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.	\boxtimes			
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	\boxtimes			
The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. • A written record is made of the decision and the justification. • The detainee receives a copy of this record.	\boxtimes			
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.	\boxtimes			
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	\boxtimes			
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.	\boxtimes			
All cells are equipped with beds. • Every bed is securely fastened to the floor or wall.	\boxtimes			

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINEES ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINEES BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT [DISCIPLINARY SEGREGATION]" STANDARD).

COMPONENTS	Y	N	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy limit. • When occupancy exceeds recommended capacity, do basic living standards decline? • Do criteria for objectively assessing living standards exist? • If yes, are the criteria included in the written procedures?	\boxtimes			The number of detainees has not exceeded the occupancy limit within the last review period.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	\boxtimes			
Detainees receive three nutritious meals per day, from the general population's menu of the day. • Do detainees eat only with disposable utensils? • Is food ever used as punishment?	\boxtimes			
 Each detainee maintains a normal level of personal hygiene in the SMU. The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	\boxtimes			Detainees have the opportunity to shower and shave daily.
The detainees are provided: • Barbering services; • Recreation privileges in accordance with the "Detainee Recreation" standard; • Non-legal reading material; • Religious material; • The same correspondence privileges as detainees in the general population; • Telephone access similar to that of the general population; and • Personal legal material.	\boxtimes			
A health care professional visits every detainee at least three times a week. • The shift supervisor visits each detainee daily. • Weekends and holidays.	\boxtimes			Health Care professionals visit every detainee daily.
 Procedures comply with the "Visitation" standard. The detainee retains visiting privileges; and The visiting room is available during normal visiting hours. 	\boxtimes			
Visits from clergy are allowed.	\boxtimes			
 Detainees have the same law-library access as the general population. Are they required to use the law library ∑Separately, or ∑As a group? Are legal materials brought to them? 	\boxtimes			Lexis Nexis is located in each of the two special management units. If requested, detainees may have daily access.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	\boxtimes			Detainee activities are logged in the Segregation Activity Record.
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent).	\boxtimes			This facility uses a form, the Segregation Confinement Report, to comply with this requirement.

SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

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[DISCIPLINARY SEGREGATION] STANDARD).				
COMPONENTS	Y	N	NA	REMARKS
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.	\boxtimes			
A new record is created for each week the detainee is in Administrative Segregation. • The weekly records are retained in the SMU until the detainee's return to the general population.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

REMARKS:

At the time of the inspection, the administrative segregation unit was clean, quiet, and well managed. All supporting documentation was complete.

(b)(6), (b)(7)(C) / February 18, 2010

SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

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

COMPONENTS	Y	N	NA	REMARKS
Officers placing detainees in disciplinary segregation follow	\boxtimes			
written procedures.				
The sanctions for violations committed during one incident are	\boxtimes			
limited to 60 days.				
A completed Disciplinary Segregation Order accompanies the				
detainee into the SMU.	\boxtimes			
The detainee receives a copy of the order within 24 house of also word in discipling a consection.				
hours of placement in disciplinary segregation.				Ai
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals.				A review of detainee placement in disciplinary segregation occurs every seven
After each formal review, the detainee receives a	\boxtimes			days for the first month, and every 30 days
written copy of the decision and supporting reasons.				thereafter.
The conditions of confinement in the SMU are proportional to				
the amount of control necessary to protect detainees and staff.	\boxtimes			
Detainees in disciplinary segregation have fewer privileges				
than those housed in administrative segregation.	\boxtimes			
Living conditions in disciplinary SMUs remain the same				
regardless of behavior.				
 If no, does staff prepare written documentation for 	\boxtimes			
this action?				
 Does the OIC sign to indicate approval. 				
Every detainee in disciplinary segregation receives the same	\bowtie			
humane treatment, regardless of offense.				
The quarters used for segregation are:				
Well-ventilated.				
Adequately lighted.	\boxtimes			
Appropriately heated.				
Maintained in a sanitary condition.				
All cells are equipped with beds that are securely fastened to	\boxtimes			
the floor or wall of the cell.				
The number of detainees confined to each cell or room is				This facility has not had excess occupancy in
limited to the number for which the space was designate.	\bowtie			the disciplinary segregation unit within the
Does the OIC approve excess occupancy on a temporary basis?				last reporting period.
temporary basis? 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	\bowtie			
soon as it is safe.				
Detainees in the SMU have the same opportunities to exchange				
clothing, bedding, etc., as other detainees.	\boxtimes			
Detainees in the SMU receive three nutritious meals per day,				
selected from the Food Service's menu of the day.	\bowtie			
 Food is not used as punishment. 				
Detainees are allowed to maintain a normal level of personal	_			Detainees are allowed to shower and shave
hygiene, including the opportunity to shower and shave at least	\boxtimes			daily.
three times/week.				,

SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

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COMPONENTS	Y	N	NA	REMARKS	
Detainees receive, unless documented as a threat to security:					
Barbering services;					
Recreation privileges;					
Other-than-legal reading material;			l		
Religious material;	\boxtimes				
The same correspondence privileges as other					
detainees; and					
Personal legal material.					
When phone access is limited by number or type of calls, the					
following areas are exempt:					
Calls about the detainee's immigration case or other					
legal matters;	\boxtimes				
Calls to consular/embassy officials; and					
Calls during family emergencies (as determined by					
the OIC/Warden).					
A health care professional visits every detainee in disciplinary					
segregation every week day.					
The shift supervisor visits each segregated detainee	\boxtimes				
daily					
Weekends and holidays.					
SMU detainees are allowed visitors, in accordance with the				SMU detainees are allowed visitation unless	
"Visitation" standard.	\boxtimes			they abuse the privilege.	
SMU detainees receive legal visits, as provided in the				,, pg	
"Visitation" standard.			l		
Legal service providers are notified of security	\boxtimes				
concerns arising before a visit.					
Visits from clergy are allowed.					
The clergy member is given the option of visiting/not					
visiting the segregated detainee.			l		
Violent/uncooperative detainees are denied access to	\boxtimes				
religious services when safety and security would					
otherwise be affected.					
SMU detainees have law library access.					
Violent/uncooperative detainees retain access to the					
law library unless adjudicated a security threat in					
writing.				Both SMU's at this facility have Lexis Nexis	
Legal material brought to individuals in the SMU on a	\boxtimes			located within the SMU. If requested,	
case-by-case basis.				detainees may have daily access.	
Staff documents every incident of denied access to the					
law library.					
All detainee-related activities are documented, e.g. meals					
served, recreation activities, visitors, etc.	\boxtimes				
The SPC's, the Special Management Housing Unit Record (I-					
888or equivalent), is prepared as soon as the detainee is placed					
in the SMU.					This facility uses a Segregation Confinement
 All I-888s are filled out by the end of each shift. 	\boxtimes			Record to comply with the requirement.	
The <u>CDF/IGSA</u> facility use Form.				<u> </u>	
I-888 (or equivalent local form).					

SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

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

COMPONENTS	Y	N	NA	REMARKS
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 	\boxtimes			
ACCEPTABLE DEFICIENT		AT-R	ISK	REPEAT FINDING

REMARKS:

At the time of the inspection, the disciplinary segregation unit this facility was clean, quiet, and well managed. All supporting documentation was complete.

(b)(6), (b)(7)(C) <u>February 18, 2010</u>

TOOL CONTROL

POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL BE RESPONSIBLE FOR COMPLYING WITH THE TOOL CONTROL POLICY. THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERATED OR TYPEWRITTEN MASTER INVENTORY LIST OF TOOLS AND EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVENTORIES SHALL BE CURRENT, FILED AND READILY AVAILABLE FOR TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.

COMPONENTS	Y	N	NA	REMARKS
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	\boxtimes			This facility has designated a Tool Control Officer to develop and implement a tool control procedure and an inspection system to ensure accountability.
Department heads are responsible for implementing this standard in their departments.	\boxtimes			
Tool inventories are required for the: • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory.	×			This facility does not have an electronics shop. Tool inventories are required for the Voc-Tech department.
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	\boxtimes			The facility policy requires daily, weekly, and monthly tool inventories.
The facility has a tool classification system. Tools are classified according to: • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous).	\boxtimes			
Department heads are responsible for implementing tool-control procedures.	\boxtimes			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	\boxtimes			
The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.	\boxtimes			
Each facility has procedures for the issuance of tools to staff and detainees.	\boxtimes			
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools.	\boxtimes			
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes			Broken and worn out tools are disposed of in a (b)(7)e (b)(7)e putside the secure perimeter of the facility.
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.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISE	ζ		REPEAT FINDING

REMARKS:

The facility has a comprehensive tool control policy that complies with all requirements of the NDS regarding Tool Control. Based on the observation of practices, review of tool logs, facility policy, and interviews with staff, the tool control system appears to exceed the requirements of the NDS.

(b)(6), (b)(7)(C) / February 18, 2010

TRANSPORTATION LAND TRANSPORTATION

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL. STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES No NA REMARKS Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of \bowtie Every transporting officer required to drive a commercial size bus has a This facility does not use \times valid Commercial Driver's License (CDL) issued by the state of commercial size buses. employment. Supervisors maintain records for each vehicle operator. X Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and \boxtimes 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; \boxtimes 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)eofficers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are (b)(7)e This facility does not use buses X qualified officers per vehicle. for transportation. may transport an empty vehicle. (b)(7)eBefore the start of each detail, the vehicle is thoroughly searched. X Positive identification of all detainees being transported is confirmed. Picture I.D.'s are used to make a \boxtimes positive identification. All detainees are searched immediately prior to boarding the vehicle by \boxtimes staff controlling the bus or vehicle. The facility ensures that the number of detainees transported does not X exceed the vehicles manufacturer's occupancy level. are provided to all transporting officers. \boxtimes The vehicle crew conducts a visual count once all passengers are on board and seated. \times 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 \bowtie equipment on transportation vehicles. Officers ensure that no one contacts the detainees.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

X

 \bowtie

• (b)(7)(E) fficer remains in the vehicle at all times when detainees

The meals meet the minimum dietary standards, as identified by

are present.

Meals are provided during long distance transfers.

dieticians utilized by ICE.

TRANSPORTATION LAND TRANSPORTATION POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL. STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. COMPONENTS YES REMARKS No NA The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). Before accepting the meals, the vehicle crew raises and resolves \boxtimes questions, concerns, or discrepancies with the Food Service representative; Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule. Vehicles have: X (b)(7)eX The vehicles are clean and sanitary at all times. This facility does not transport Personal property of a detainee transferring to another facility is: Inventoried: detainees to other facilities. \times Transportation of detainees to Inspected; and other facilities is done only by Accompanies the detainee. ICE staff. The following contingencies are included in the written procedures for vehicle crews: Attack Escape Hostage-taking Detainee sickness Detainee death \boxtimes Vehicle fire Traffic accident Mechanical problems Natural disasters Severe weather

REMARKS:

The only transportation performed by this facility is for doctor appointments and to local hospitals. All other transportation is done by ICE staff. The facility complies with the NDS regarding Transportation.

AT-RISK

DEFICIENT

(b)(6), (b)(7)(C) / February 18, 20

Passenger list includes women or minors

ACCEPTABLE

AUDITOR'S SIGNATURE / DATE

REPEAT FINDING

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

COMPONENTS	YES	No	NA	REMARKS
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	\boxtimes			The facility policy 9-1, Use of Force allows for immediate use-of-force.
When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, officers must try to resolve the situation without resorting to force.	\boxtimes			
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	\boxtimes			
The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	\boxtimes			
When a detainee must be forcibly moved and/or restrained, and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. • Under staff supervision.	\boxtimes			
Staff members are trained in the performance of the Use-of-Force Team Technique.	\boxtimes			All security staff receives 12 hours of initial training in use of force and four hours of annual training.
All use-of-force incidents are documented and reviewed.	\boxtimes			
Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and Use restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.	\boxtimes			
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	\boxtimes			
Use-of-Force Team follows written procedures that attempt to prevent injury and exposure to communicable disease(s).	\boxtimes			
Standard procedures associated with using four-point restraints include: Soft restraints (e.g., vinyl); Dressing the detainee appropriately for the temperature; A bed, mattress, and blanket/sheet; Checking the detainee at least every 15 minutes; Logging each check; Turning the bed-restrained detainee often enough to prevent soreness or stiffness; Medical evaluation of the restrained detainee twice per eight-hour shift; and When qualified medical staff is not immediately available, staff position the detainee "face-up".				

USE OF FORCE

POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:	Man	No	TAT A	Dragange
COMPONENTS	YES	No	NA	REMARKS
The shift supervisor monitors the detainee's position/condition every two hours. • He/she allows the detainee to use the rest room at these times under safeguards.				This facility summons medical staff after one hour to monitor the detainee's position/condition, and to advise on a course of action until the situation is resolved.
All detainee checks are logged.	\boxtimes			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes			
When the OIC authorizes use of non-lethal weapons: • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.	\boxtimes			
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	\boxtimes			
Protective gear is worn when restraining detainees with open cuts or wounds.	\boxtimes			
Staff documents every use of force and/or non-routine application of restraints.	\boxtimes			All uses of force are documented on incident reports, facility form 5-1.
It is standard practice to review any use of force and the non-routine application of restraints.	\boxtimes			
All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. • Specialized training is given and Officers are certified in all devices they use.	\boxtimes			
In SPCs, is the Use of Force form is used? In other facilities (IGSAs / CDFs) is this form or its equivalent used?	\boxtimes			
	AT-RISI	ζ.		REPEAT FINDING

REMARKS:

A review of use of force incident reports, interviews with staff, and the facility's policy indicate this facility is using force as a last resort, and only to the extent needed to control the detainee in a safe manner for all involved. Documentation requirements are complete. This facility does not use (b)(7)e nor does it use canines inside the facility.

(b)(6), (b)(7)(C) / February 18, 2010 AUDITOR'S SIGNATURE / DATE

STAFF DETAINEE COMMUNICATIONS

POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME.

COMPONENTS	Y	N	NA	REMARKS
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	\boxtimes			The AFOD has issued a written policy requiring deportation officers to make scheduled visits twice weekly to housing units. The policy also requires supervisors to make unscheduled visits each week to housing units, the food service area, recreation areas, and the special management units.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	\boxtimes			The AFOD has issued a written policy requiring deportation officers to be available to detainees to answer questions, listen to concerns, and monitor living conditions.
Scheduled visits are posted in ICE detainee areas.	\boxtimes			The schedule issued by the AFOD is posted in the housing units.
Visiting staff observe and note current climate and conditions of confinement at each IGSA.	\boxtimes			The written policy issued by the AFOD requires deportation officers to monitor conditions in all parts of the facility
ICE information request Forms are available at the IGSA for use by ICE detainees.	\boxtimes			
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	\boxtimes			Facility policy 16-1 requires that correspondence to ICE officials be treated as privileged.
ICE staff responds to a detainee request from an IGSA within 72 hours.	\boxtimes			A review of the log of requests for January and February 2010 indicates that almost every request was responded to on the day it was received. More than 1000 requests were logged. Only one request was not responded to within 72 hours.
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.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISI	ĸ		REPEAT FINDING

REMARKS:

The AFOD has issued a written policy designed to insure that detainees are able to directly communicate with ICE staff on a regular basis. This policy supports a positive presence at the facility by ICE staff. At the time of the inspection, ICE staff appeared to have a healthy working relationship with facility. The practices in place at this facility appear to exceed the standard.

(b)(6), (b)(7)(C) February 18, 2010 AUDITOR'S SIGNATURE / DATE

DETAINEE TRANSFER STANDARD

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE

TAKING FLACE.				
COMPONENTS	Y	N	NA	REMARKS
When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS	\boxtimes			
Notification includes the reason for the transfer and the location of the new facility.	\boxtimes			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	\boxtimes			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	\boxtimes			
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	\boxtimes			
The detainee is provided with a completed Detainee Transfer Notification Form.	\boxtimes			
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			
For medical transfers: • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee.	\boxtimes			
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.	\boxtimes			
For medical transfers, transporting officers receive instructions regarding medical issues.	\boxtimes			
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	\boxtimes			
Transfer and documentary procedures outlined in Section C and D are followed.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.	\boxtimes			
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	\boxtimes			
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	\boxtimes			

REMARKS:

The process for releasing detainees from the facility for deportation, transfer or other reasons, is efficient and well coordinated between ICE and the facility staff.

(b)(6), (b)(7)(C) February 18, 2010 AUDITOR'S SIGNATURE / DATE

A. Type of Facility Reviewed	Estimated Man-days	Per Year:		
ICE Service Processing Center	534,725			
ICE Contract Detention Facility				
☐ ICE Intergovernmental Service Agreement	G. Accreditation C	Certificates		
<u> </u>	List all State or Nati		ation[s] receiv	red:
B. Current Inspection	American Correction			
Type of Inspection	Check box if fac			
Field Office HQ Inspection	Check box if fac	inty has no a	ecreditation[3]	
Date[s] of Facility Review	H. Problems / Com	inlaints (Coi	nies must be a	ttached)
February 16-18, 2010	The Facility is under			
1 to	Court Order		ss Action Ord	_
C. Previous/Most Recent Facility Review	The Facility has Sign			CI
Date[s] of Last Facility Review	Major Litigation		e/Safety Issues	
February 17-19, 2009	Check if None.		crisarcty issues	•
Previous Rating	Check if None.			
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk	T - F			
	I. Facility History Date Built	<u>y</u>		
D. Name and Location of Facility				
Name	1994	1 77 1	1	
Eloy Detention Center	Date Last Remodele	d or Upgrade	d	
Address (Street and Name)	2007			
1705 E. Hanna Road	Date New Construction / Bed space Added			
City, State and Zip Code	N/A			
Eloy, AZ 85131	Future Construction			
County	Yes No Date:			
Pinal	Current Bed space Future Bed space (# New Beds			
Name and Title of Chief Executive Officer (Warden/OIC/Supt.)	1596	Number: 1	N/A Date: N/A	A
(b)(6), (b)(7)(C) Warden	•			
Telephone # (Include Area Code)	J. Total Facility I	Population		
(520) 4666), (b)(7)(C)	Total Facility Intake		12 months	
Field Office / Sub-Office (List Office with oversight responsibilities)	10,410	•		
Phoenix, AZ	Total ICE Man-days	for Previous	12 months	
Distance from Field Office	550,605			
60 miles	,			
	K. Classification I	evel (ICE S	PCs and CDF	s Only)
E. ICE Information		L-1	L-2	L-3
Name of LCI (Last Name, Title and Duty Station)	Adult Male	N/A	N/A	N/A
b)(6), (b)(7)(C)Lead Compliance Inspector / MGT of America	Adult Female	N/A	N/A	N/A
Name of Team Member / Title / Duty Location	Addit Felliale	IN/AL	IV/A	IN/A
(b)(6), (b)(7)(C) / CI - Security / MGT of America				
Name of Team Member / Title / Duty Location	T T 111 6 11			
Traine of Team Memoer / Thie / Duty Location	L. Facility Capacit	y		

F. CDF/IGSA Information On	ıly
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Health & Safety / MGT of America

(b)(6), (b)(7)(C) CI - Medical / MGT of America

Name of Team Member / Title / Duty Location

Name of Team Member / Title / Duty Location

(b)(6), (b)(7)(C) / CI - Food Service and Environmental

Contract Number	Date of Contract or IGSA			
DROIGSA 06-0002	May 14, 2007			
Basic Rates per Man-Day				
\$69.59				
Other Charges: (If None, Indicate N/A)				
N/A				

M. Average Daily Population

Adult Male

Adult Female

	ICE	USMS	Other
Adult Male	1417	0	0
Adult Female	93	0	0

☐ Facility holds Juveniles Offenders 16 and older as Adults

Rated

1350

246

N. Facility Staffing Level

11. Tuchity Starting Devel	
Security:	Support:
(b)(7)(E)	(b)(7)(E)

Operational

1250

246

Emergency

1350

246

Significant Incident Summary Worksheet

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

Incidents	Description	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	19	15	15	17
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	9	5	1	3
Number of Forced Moves, incl. Forced Cell moves ³		9	8	8	9
Disturbances ⁴		0	0	0	1
Number of Times Chemical Agents Used		4	1	1	2
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		3	1	3	0
Escapes	Attempted	0	1	0	0
	Actual	0	0	0	0
Grievances:	# Received	70	85	65	133
	# Resolved in favor of Offender/Detainee	7	7	11	22
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	A	N/A	A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	326	351	632	743
	# Psychiatric Cases referred for Outside Care	1	0	0	0

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

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

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

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

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

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

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)(¢)					
Title & Duty Location	Date				
Lead Compliance Inspector, MGT of America	February 18, 2010				
Теам	MEMBERS				
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location				
(b)(6), (b)(7)(C) Compliance Inspector - Security MGT of America	(b)(6), (b)(7)(C)Compliance Inspector - Medical Care MGT of America				
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location				
(b)(6), (b)(7)(C) Compliance Inspector - Food Services and Environmental Health & Safety, MGT of America					
Recommended Rating: Superior Good Acceptable Deficient At-Risk					

Comments:

A. There was four attempted suicides in the previous year. These incidents were:

- 1. A detainee who arrived at the facility on February 28, 2009, was placed in a holding cell in the Receiving and Discharge Unit on July 8, 2009, in preparation for deportation. Saying that he would be killed if returned to his country of origin, the detainee swallowed liquid soap. A correctional officer directly observed this, and the soap was removed from the detainee. He was immediately taken to the medical unit, where he was examined. It was found that he did not suffer from any ill effects. He was then returned to the Special Housing Unit and placed on a constant watch.
- 2. A detainee who arrived at the facility on September 20, 2007, was seen by a correctional officer with strips of bed linen fashioned into a noose and placed around his neck. This occurred in the mental health observation area, approximately 11 hours after talking to a psychiatrist. Correctional staff immediately responded, and the detainee was placed on suicide watch.
- 3. On March 20, 2009, a detainee was seen hanging from a vent with a sheet. Correctional staff responded immediately, cutting the sheet with a suicide knife. He was examined by medical staff who found that his blood pressure and oxygen levels were within normal levels. He was taken to the Maricopa Medical Center, where it was determined that the detainee had suffered from no injuries. The detainee later said that he wanted to return to Guatemala, but the government did not want him returned. The detainee was eventually released from custody on March 31, 2009.

4. On March 25, 2009, the same detained mentioned in #3 above was again found with one end of a mattress cover tied around his neck. The other end was attached to a sprinkler head in his cell. Correctional staff responded, removing the mattress cover from the sprinkler head. The medical examination that followed concluded that the detained suffered from no injuries.

B. The facility does not us	(b)(7)e	
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C. The number of grievances during the months of October - December, 2009 increased by 68. A thorough review of the grievances and discussions with staff occurred during the inspection to gain an understanding of the reason for the increase. It was noted that the increase in grievances related to medical concerns. No specific reasons for the increase could be identified. It was confirmed that the for the most part, grievances were resolved in the early stages after being filed.