

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



U.S. Immigration  
and Customs  
Enforcement

MEMORANDUM FOR: Katrina S. Kane  
Field Office Director  
Phoenix Field Office

FROM: Gary E. Mead  
Assistant Director for Detention Management

SUBJECT: Florence Correctional Center Annual Review

The annual review of the Florence Correctional Center conducted on October 12-14, 2010, in Florence, Arizona has been received. A final rating of **Meets Standards** has been assigned. No further action is required and this review is closed.

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

- 1) The Field Office Director, Enforcement and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before October 14, 2011.

Should you or your staff have any questions regarding this matter, please contact

(b)(6), (b)(7)(C) (Acting) Deputy Assistant Director, Detention Division at (202) 732- (b)(6), (b)(7)(C)

cc: Official File

ICE:HQERO: (b)(6), (b)(7)(C) 11/04/2010

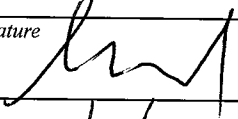
(b)(7)e

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## HEADQUARTERS EXECUTIVE REVIEW

### Review Authority

The signature below constitutes review of this report and acceptance by the Review Authority. OIC/CEO will have 30 days from receipt of this report to respond to all findings and recommendations.

HQDRO EXECUTIVE REVIEW: (Please Print Name)	Signature
Gary E. Mead	
Title	Date
Assistant Director for Detention Management	12/8/10

Final Rating: ☒ Meets the Standards  
☐ Does not Meet the Standards

Comments: The Review Authority concurs with the recommended rating of "Meets Standards" for Florence Correctional Center. No plan of action is required and this review is closed.

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Form G-324A

**Condition of Confinement Inspection Worksheet**  
(This document must be attached to each G-324A Detention Review Form)  
***This Form is to be used for Inspections of Facilities used over 72 Hours***

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

5-11-09 update

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

<b>Name</b> <b><i>Florence Correctional Center</i></b>
<b>Address (Street and Name)</b> <b><i>1100 Bowling Road</i></b>
<b>City, State and Zip Code</b> <b><i>Florence, Arizona 85132</i></b>
<b>County</b> <b><i>Pinal</i></b>
<b>Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator)</b> (b)(6), (b)(7)(C) <b><i>Warden</i></b>
<b>Name and Title of Lead Compliance Inspector</b> (b)(6), (b)(7)(C) <b><i>Lead Compliance Inspector</i></b>
<b>Date[s] of Review</b> From <b><i>10/15/2010</i></b> to
<b>Type of Review</b> <input checked="" type="checkbox"/> <b><i>Headquarters</i></b> <input type="checkbox"/> <b><i>Operational</i></b> <input type="checkbox"/> <b><i>Special Assessment</i></b> <input type="checkbox"/> <b><i>Other</i></b>

## Introduction and Overview to the G324A over 72 hour Facility Detention Inspection Worksheets

### What is “Performance-Based”?

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

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

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

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

### Worksheet Overview

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

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

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



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

### **Worksheet Completion**

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

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

### **Outcome Measures Completion**

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

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

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# **Section I SAFETY**

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

# **PART 1 – 1. EMERGENCY PLANS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff here do not allow any detainee or groups to exercise control over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> <li>Personal abuse</li> <li>Corporal punishment</li> <li>Personal injury</li> <li>Disease</li> <li>Property damage</li> <li>Harassment from other detainees</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees here are protected from those behaviors listed to the left.
3. Staff are trained to identify signs of detainee unrest. <ul style="list-style-type: none"> <li>What type of training and how often?</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pre-employment and annual training provide guidance to recognize signs of detainee unrest.
4. Staff effectively disseminate information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a telephone briefing system to keep all staff advised and updated on internal / local issues. All staff may access this phone system.
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is responsible for these plans and their implementation, with sufficient time available.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual emergency plans are contained in specifically numbered / tracked large binders, strategically located in and outside the facility (company headquarters' sister facility). Binders are controlled and there is restricted access.
7. All staff receive training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The plans do not offer an alternate route to the facility should the main route be impassable.
9. The plans address the following issues: <ul style="list-style-type: none"> <li>Confidentiality</li> <li>Accountability (copies and storage locations)</li> <li>Annual review procedures and schedule</li> <li>Revisions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The plans are restricted/confidential documents. There is strict accountability and they are strategically located. They are reviewed / revised annually as needed. The plans contain all items listed to the left.

## PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Each plan has a general section but fails to describe handling of detainees with special needs.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; there is no such procedure in place at this facility.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> <li>Local law enforcement agencies</li> <li>State agencies</li> <li>Federal agencies</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; there are such plans in place here and they are current.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility fully complies with all aspects of this component.
14. All staff receive copies of the Facility Hostage policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; local compliance is noted.
15. Staff are trained (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility is fully compliant with this component.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; full compliance is noted for this facility.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility is fully compliant with this requirement.
18. The Food Service Department maintains at least 3- days' worth of emergency meals for staff and detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this criteria.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this component.
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 1 – 1. EMERGENCY PLANS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> <li>• Work/Food Strike</li> <li>• Fire</li> <li>• Environmental Hazard</li> <li>• Detainee Transportation System Emergency</li> <li>• ICE-wide Lockdown</li> <li>• Staff Work Stoppage</li> <li>• Disturbances</li> <li>• Escapes</li> <li>• Bomb Threats</li> <li>• Adverse Weather</li> <li>• Internal Searches</li> <li>• Facility Evacuation</li> <li>• Detainee Transportation System Plan</li> <li>• Hostages (Internal)</li> <li>• Civil Disturbances</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's written emergency plans addresses all of the specific plans mandated in this component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 1 – 1. EMERGENCY PLANS

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

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

The majority of the components of the standard for Emergency Plans are being met by the FCC with the two exceptions detailed above.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 8-5, effective October 1, 2006, sufficiently addresses this issue.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories in the three facility storage areas, i.e., food service, safety office and maintenance shop confirmed compliance.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An MSDS file is maintained by the Safety Manager and the Health Services Administrator, compliant with this requirement.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> <li>Wear personal protective equipment.</li> <li>Report hazards and spills to the designated official.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>Quantities are limited.</li> <li>Detainees are trained.</li> <li>Staff always supervise detainees using these substances.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not authorized to handle hazardous materials.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not store flammable materials in quantities requiring explosion proof equipment and wiring.
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff receive a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No products containing methyl alcohol were observed during the inspection.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employees and detainees receive MSDS training consistent with this component.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility fire sprinkler and fire alarm systems are inspected and maintained as required by NFPA. In addition the facility inspection met OSHA standards.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager conducts the inspections.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The plan (Policy 8-7) is reviewed annually by the local Fire Chief and approved by the Warden.
17. The plan requires: <ul style="list-style-type: none"> <li>Monthly fire inspections.</li> <li>Fire protection equipment strategically located throughout the facility.</li> <li>Public posting of emergency plan with accessible building/room floor plans.</li> <li>Exit signs and directional arrows.</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee barbers receive documented training concerning proper sanitation procedures.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The area within the housing unit, used as a barber shop, is equipped with hot and cold running water and a sink dedicated for use by barbers. Disposable neck strips are used and clippers and combs are sanitized after each use.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 14-1, effective March 13, 2006, establishes procedures for the handling and disposal of used needles and other sharps.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Standard cleaning practices include: <ul style="list-style-type: none"> <li>Using specified equipment; cleansers; disinfectants and detergents.</li> <li>An established schedule of cleaning and follow-up inspections.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stericycle, Inc. performs contractual disposal of infectious/bio-hazardous waste.
27. Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive initial and annual training.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> <li>At least monthly.</li> <li>The pest-control program includes preventive spraying for indigenous insects.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Johnny Reeves Pest Control performs monthly inspections and preventive spraying.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The local municipality performs the tests.
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> <li>Other emergency systems and equipment receive testing at least quarterly.</li> <li>Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As required in Policy 12-100, the medical-facility has developed and implemented a daily housekeeping plan.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY				
This Detention Standard protects detainees, staff, volunteers, and contractors from injury and illness by maintaining high facility standards of cleanliness and sanitation, safe work practices, and control of hazardous substances and equipment.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The HSA does not conduct and document daily inspections. Daily inspections are performed by correctional staff who document findings per details of the component.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager is the assigned staff member at the facility.
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> <li>American Correctional Association,</li> <li>Occupational Safety and Health Administration,</li> <li>Environmental Protection Agency,</li> <li>Food and Drug Administration,</li> <li>National Fire Protection Association's Life Safety Code, and</li> <li>National Center for Disease Control and Prevention.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

The HSA does not conduct daily medical-facility inspections as required by the standard. Otherwise, the facility complies with the standard.

(b)(6), (b)(7)(C)/ October 14, 2010

Reviewer's Signature / Date

**PART 1 – 3. TRANSPORTATION (BY LAND)**

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

☒ **Standard NA: Check this box if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

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

**PART 1 – 3. TRANSPORTATION (BY LAND)**

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

☒ **Standard NA: Check this box if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. All uniformed officers (b)(7)e in accordance with the (b)(7)e and/or applicable contract policy when transporting detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Officers ensure that no one contacts the detainees. • (b)(7)e officer remains in the vehicle at all times when detainees are present.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. • Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Vehicles have: • (b)(7)e • • •	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The vehicles are clean and sanitary at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 1 – 3. TRANSPORTATION (BY LAND)**

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

☒ **Standard NA: Check this box if all ICE Transportation is handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

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

**PART 1 – 3. TRANSPORTATION (BY LAND)**

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

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

At this facility, ICE provides all land transportation of ICE detainees.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## **Performance-Based National Detention Standards**

# **Section II SECURITY**

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



## PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility is only required to have orientation; component details are for SPCs/CDFs only. Here, there is a viable orientation program which includes all specifics required to the left. Each new arrival is issued an FCC Inmate Handbook and an ICE National Detainee Handbook which contain the same information as the local orientation program.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff conduct screenings.
3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The second part of the component is specific to SPCs/CDFs. ICE classifies all detainees assigned to FCC; they are all level I or II and can be housed together. Local policy reflects detainees be segregated pending classification. Orientation, to include distribution of the handbooks, occurs in the housing units.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy 9-5 and 17-100 addresses this issue.
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Strip search documentation does not apply to this facility as an IGSA. Here, detainees are strip searched only when the reasonable suspicion criteria is met. All strip searches are documented and supervisory approval is required.
6. The "Contraband" standard governs all personal property searches. IGSA's and CDFs use or have a similar contraband standard. Staff prepare a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 9-6, Contraband Control, addresses this issue.

## PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. Staff complete Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With few exceptions, such as excess legal materials, detainees have limited amounts of personal property at the FCC. Most personal property is maintained at the FDC. Local policy requires a missing property claim be initiated if property is lost or missing.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs; the staff coordinate releases with ICE.
10. Staff complete paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. ICE staff enter all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs; ICE handles this process.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Both the local the ICE National Detainee handbooks are provided in English and Spanish.

## PART 2 – 4. ADMISSION AND RELEASE

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

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

Based on policy review, staff interviews, and direct observations, the facility meets NDS for this area. Handbooks are provided to detainees in either English or Spanish. Classification for detainees occurs at the FDC. Strip search standards are met.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The first sentence does not apply locally. This facility uses an objective classification system and has policy that sufficiently guides staff. ICE detainees are classified at the FDC before arrival at the FCC.
2. The facility classification system includes: <ul style="list-style-type: none"> <li>Classifying detainees upon arrival.</li> <li>Separating individuals who cannot be classified upon arrival from the general population.</li> <li>The first-line supervisor or designated classification specialist reviews every classification decision.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are classified at the FDC. All detainees assigned to FCC are Level I or Level II and may be housed together. Classification and unit staff use ICE classification levels as a guide for housing.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The intake officer at the FCC reviews the records forwarded to them from the Florence FDC.
4. Staff use only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC Classification staff review the information from the FDC to assess housing needs. All ICE detainees at FCC (Level I or II) may be housed together.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees share housing and recreation facilities/times, as they are similarly classified.
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees only work within their designated housing areas.
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The reassessment required timeline is specific to SPCs/CDFs. The facility complies with all aspects of this component.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The second sentence is not applicable to this IGSA. As the classifying agent, ICE handles all appeals.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appeals need not be resolved in 5 business days at this IGSA. ICE staff handle classification appeals in the specified time periods.

**PART 2 – 5. CLASSIFICATION SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs; ICE handles this process.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The FCC handbook does not explain the conditions and restrictions associated with each classification level.
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	At this IGSA, detainees are not required to wear color-coded uniforms and classification level IDs. There is no such system in place here; both Level I and II detainees enjoy virtually the same privileges.

**PART 2 – 5. CLASSIFICATION SYSTEM**

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

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

All detainee classification occurs at the FDC prior to commitment to the FCC. ICE retains appeal jurisdiction over classification matters. Detainees at FCC are either Level I or II and share housing and program opportunities, but separated from non-ICE detainees. SMU housing presents circumstances which require case-by-case consideration.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

PART 2 – 6. CONTRABAND				
This Detention Standard protects detainees and staff and enhances facility security and good order by identifying, detecting, controlling, and properly disposing of contraband.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are not required to inventory/hold/report contraband to the proper authority for action/seizure. Locally, contraband policy requires staff to adhere to this process.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, procedures fully meet this process.
3. Staff return property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, policy mandates the return of property which has no evidentiary value.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Altered property is destroyed per procedures in the contraband policy.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, religious items may be retained pending approval of the Chief of Security after consultation with a religious authority.
6. Staff follow written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> <li>If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.</li> <li>Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In this IGSA, hard contraband is not required to be held and properly secured. Locally, the facility meets both hard and soft contraband requirements of this component via (b)(7)e or mail return.
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This direction is provided in the detainee handbook.
9. Facilities with Canine Units only use them for contraband detection.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses Canine Units but only for the detection of contraband. Canines are not used in the presence of ICE detainees.
PART 2 – 6. CONTRABAND				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				



Remarks: *(Record significant facts, observations, other sources used, etc.)*  
The facility procedures and practices meet the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010  
Reviewer's Signature / Date

**PART 2 – 7. FACILITY SECURITY AND CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden and other senior staff make weekly tours of the detainee living quarters and activity areas.
2. At least one male and one female staff are on duty where both males and females are housed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility conducts an annual staffing study.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers assigned to central control receive specialized training.
6. Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; staff access is restricted at this facility.
7. Detainees do not have access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; detainees have no access to this area.
8. Communications are centralized in the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, communications are centralized in central control.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility central control is secure, well equipped, and manned continuously.
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, employee data cards are maintained in central control.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; at this facility staff recall lists are retained in central control staff numbers are current.
12. Staff make watch calls (b)(7)e between 6 PM and 6 AM.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, watch calls are made consistent with this component.
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logs are kept in all housing units and by the shift supervisor and record all pertinent information.
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The front entrance officer was observed performing this task routinely.



**PART 2 – 7. FACILITY SECURITY AND CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visitors are recorded in a visitor log book.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a color-coded visitor pass system.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All vehicular traffic entering and leaving the facility is monitored by staff.
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> <li>The driver's name</li> <li>Company represented</li> <li>Vehicle contents</li> <li>Delivery date and time</li> <li>Date and time out</li> <li>Vehicle license number</li> <li>Name of employee responsible for the vehicle during the facility visit</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicles gain access into the facility via a single vehicle sally port. Staff assigned to the sally port record all the information mandated by this component in a log. Review of the log disclosed sufficient, current detailing.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, all vehicles entering and leaving the facility are thoroughly searched.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility perimeter fence is sufficient to prevent escapes/unauthorized intrusions.
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Housing area searches occur at irregular times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, searches of the housing areas are conducted at irregular times.
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security posts are located in close proximity to detainee living areas. Staff interaction with detainees is encouraged and observed as satisfactory.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders exist for every security post.

**PART 2 – 7. FACILITY SECURITY AND CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee movement throughout the facility is closely controlled by staff.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All searches are recorded in unit log books.
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the SMU here has a sally port.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SMU staff inspect all tools and the tool inventories of all tools entering the SMU.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> <li>• Posts to be inspected</li> <li>• Required inspection forms</li> <li>• Frequency of inspections</li> <li>• Guidelines for checking security features</li> <li>• Procedures for reporting weak spots, in-consistencies, and other areas needing improvement</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSAs, the security inspection policy need not include specifics listed to the left. At this facility, all of the requirements noted are included in local policy.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; all security staff here must conduct security checks of their assigned areas.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security inspections are documented in the unit logs, central control log, or the supervisor's log.
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, recurring problems are reported to the shift supervisor and up the chain of command to the Chief of Security.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools taken into the facility are inspected and inventoried entering and leaving the facility.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the areas in this component are searched once each shift.

**PART 2 – 7. FACILITY SECURITY AND CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
39. Daily procedures include: <ul style="list-style-type: none"> <li>Perimeter alarm system tests.</li> <li>Physical checks of the perimeter fence.</li> <li>Documenting the results.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The (b)(7)e and physical check of the perimeter fence is conducted each day on day watch.
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation is searched at the start and end of each visiting day.
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor is responsible to ensure the inspection process covers all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Only the Chief of Security conducts monthly fence checks.
<b>FACILITY SECURITY AND CONTROL</b>				
<input checked="" type="checkbox"/> <b>Meets Standard</b> <input type="checkbox"/> <b>Does Not Meet Standard</b> <input type="checkbox"/> <b>N/A</b> <input type="checkbox"/> <b>Repeat Finding</b>				

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

There is significant compliance with this security area as demonstrated through policy review, staff interview, and direct observations.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer's Signature / Date

**PART 2 - 8. FUNDS AND PERSONAL PROPERTY**

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

☐ **Standard NA: (IGSA ONLY)** Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility processes detainee funds; valuables and personal property are stored at the FDC.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FDC Florence stores and maintains large valuables.
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff count detainee funds in the presence of the detainee. (b)(7)(E) staff and the detainee sign a fund verification form.
4. (b)(7)(E) officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)(E) officers verify funds and valuables.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component, however this facility does so; detainee valuables are stored and maintained by FDC Florence.
5. <u>For IGSA's and CDFs</u> , Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff give the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. Locally, the detainee receives a copy of the fund verification. The original is filed in his/her facility detention file.
7. Staff forward an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff search arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Arriving detainees are pat searched.
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not store or otherwise handle detainee property. Property is stored at the FDC.
10. Staff follow written procedures when returning property to detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is not stored at the facility. Detainee property is stored at the FDC.
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is not stored or handled at the facility.

**PART 2 - 8. FUNDS AND PERSONAL PROPERTY**

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

☐ **Standard NA: (IGSA ONLY) Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.**

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> <li>By sending written notice to the detainee's last known address; via certified mail;</li> <li>The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is stored and handled by FDC Florence.
13. Staff obtain a forwarding address from each detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FDC Florence obtains a forwarding address for each detainee.
14. It is standard procedure for (b)(7)(F) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component, but this facility is compliant.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FDC Florence stores and handles detainee property.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is stored and handled by FDC Florence.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is not stored or handled by the facility.
18. Staff tag large valuables with both a G-589 and an I-77.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not store large valuables.
19. The supervisor verifies the accuracy of every G-589.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is not stored at the facility.
20. The supervisor ensures that: <ul style="list-style-type: none"> <li>Detainee funds are, without exception, deposited into the cash box;</li> <li>Every property envelope is sealed.</li> <li>All sealed property envelopes are placed in the safe.</li> <li>Large, valuable property is kept in the secured locked area.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. At this facility, (b)(7)(F) officers place detainee funds into sealed envelopes and deposit each envelope into a secure drop box and a strict chain of custody and oversight is in place. Property is handled by the FDC.
21. Staff tag every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not store detainee property.
22. Staff secure every container used to store property with a tamper-proof numbered strap.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component; property is not stored here.
23. A logbook records detainee name, A- number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component; property is not stored here.



**PART 2 - 8. FUNDS AND PERSONAL PROPERTY**

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

☐ **Standard NA: (IGSA ONLY)** Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is an IGSA facility.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee baggage and non-valuable property are not stored at this facility.
26. The facility positively identifies every detainee being released or transferred.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component but they do.
27. Staff routinely inform supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not store or handle detainee property.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainee property is not stored or handled at this facility.

**PART 2 - 8. FUNDS AND PERSONAL PROPERTY**

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

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

The facility complies with this standard as it pertains to the processing of detainee funds. FDC Florence manages detainee property and valuables making many steps non-applicable.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; this facility is compliant.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSA's hold rooms need only be clean and in good repair, as they are here. Other specifics are also met.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies. Three of four holding rooms contained sufficient seating.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, no sleeping material is permitted inside the hold rooms. None was observed.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the hold rooms provide enough physical plant security to preclude an escape.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not held in hold rooms for longer than 12 hours.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Male and female detainees are segregated; no female ICE detainees are held at the FCC.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The two small hold rooms include toilets. The two larger hold rooms have no toilets; staff are posted within visual and audible range of the rooms.
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a pat search upon arriving in processing.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> <li>Cleaning.</li> <li>Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All hold rooms are inspected for tampering and are cleaned once detainees are removed.



**PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. <b>(MANDATORY)</b> There is a written evacuation plan. <ul style="list-style-type: none"> <li>There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSA's, there need only be a written evacuation plan. Locally, a staff member is designated responsible for evacuation and a written plan is in place.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> <li>If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs. At this facility, the two small hold rooms are rated to hold 20 detainees. The square footage for these hold rooms (147 Sq. ft.) does not meet the standard. The facility rates the two larger hold rooms to hold 49 detainees each. The square footage for these rooms is 240 and 221 sq. ft. respectively. The square footage of the two larger hold rooms also does not meet the standard.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> <li>Compliant with the American Disabilities Act.</li> <li>Small hold rooms (1 to 14 detainees) have at least one combi-unit.</li> <li>Large hold rooms (15 to 49 detainees) are provided with at least two combi-units.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs. At this facility, the two smaller hold rooms contain a single toilet and separate sink. The larger hold rooms contain no toilet or sink. The smaller hold rooms are ADA compliant.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs. At this facility, the two small hold rooms have floor drains. The two larger hold rooms have no floor drain.
17. <u>In SPCs designed after 1998</u> , the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs. At this facility, the doors of the two smaller hold rooms swing outward. The doors to the two large hold rooms swing inward.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Female ICE detainees and juvenile detainees are not held here. Detainees age 70 and older are not automatically excluded from being placed in the hold rooms. Detainees who cannot be placed in a hold room are held in medical or another location.

**PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors under the age of 18 are not held at this facility.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> <li>The log includes the required information specified in the standard.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSAs, only a log must be kept for those placed in a hold cell; specifics listed in the standard need not be logged. Locally, an electronic detention log is maintained on each detainee placed in a holding cell; the log does not contain the specifics listed in the standard.
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> <li>Juveniles, babies and pregnant women have access to snacks, milk or juice.</li> <li>Meal are served to juveniles regardless of time in custody</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals are provided to all detainees held longer than 6 hours. Juveniles and female ICE detainees are not held at the facility.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with disabilities are evaluated and housed accordingly at a location other than the hold rooms in processing.
23. The maximum occupancy for the hold room will be posted.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The maximum occupancy for the hold rooms was not posted.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are alert during in-processing to watch for obvious mental or physical problems.
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is a tobacco free facility.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> <li>Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and</li> <li>Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments."</li> <li>Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff in this work area monitor hold rooms closely, logging 15-minute checks and noting any reportable/unusual behaviors. Logs are signed by the observer.

**PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES**

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

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

Based on policy review, staff interview, and direct observations, the facility generally meets the intent of standard for this security area, with exceptions noted above.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 2 – 10. KEY AND LOCK CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Armory Officer has attended an approved locksmith school.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key and lock training is provided by the Armory officer.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Armory officer maintains inventories of all keys, locks and locking devices. The inventories were reviewed and found to be current.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility key control procedure contains specific instructions relating to the integrity of safe combinations.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-authorized locks are not used in detainee accessible areas.
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not use a grand master keying system.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility key control procedure requires worn/discarded keys and locks are cut up and disposed of.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility procedures do not allow padlocks or chains to be used on cell doors and none were observed.
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> <li>Occupational Safety and Environmental Health Manual, Chapter 3</li> <li>National Fire Protection Association Life Safety Code 101.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The operational key board sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The operational key board in central control is sufficient to accommodate the facility key rings.

**PART 2 – 10. KEY AND LOCK CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> <li>Identifiable</li> <li>Numbers of keys on the ring are cited?</li> <li>Keys cannot be removed from issued key rings</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency keys are kept in the (b)(7)e
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility central control staff at the start of each shift reconcile all key rings and count the individual keys. The results are logged in the central control log.
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gun lockers are located in the vehicle (b)(7)(E) and are not accessible to detainees or the public.
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSA's, keys need not be physically counted daily. Locally, all keys are counted and logged at the start and end of each 8 hour shift. Central control uses a chit and log system to check out individual key rings.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> <li>Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>Detainees are not permitted to handle keys assigned to staff.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSA's, staff only need be trained to handle keys properly. Staff here are required to return to the facility any key or ring taken home. Keys unable to be located are immediately reported and detainees may not handle keys here.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Armory Officer continually inspects, maintains, and inventories all locks and locking devices.
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Armory Officer is the designee.
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, the Armory Officer is the only staff member authorized to add / remove keys from a key ring.

PART 2 – 10. KEY AND LOCK CONTROL				
This Detention Standard maintains facility safety and security by requiring that keys and locks be properly controlled and maintained.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The splitting of key rings into separate rings is not authorized.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs. At this facility, the splitting of key rings is not allowed.
PART 2 – 10. KEY AND LOCK CONTROL				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

The facility procedures and practices adequately meet the requirements of this standard.

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**PART 2 – 11. POPULATION COUNTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conduct a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Counts at the facility take place at 0200, 0300, 0515, 1100, 1600, 2000 and 2300 hours, with a face to photo count at 2000 hours daily, per written policy.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, activities stop during formal counts.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, a comprehensive system for counting all detainees is in place.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, all counts take place simultaneously.
5. Officers do not allow detainee participation in the count.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, detainee participation is not allowed.
6. A face-to-photo count follows each unsuccessful recount.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this measure.
7. Officers positively identify each detainee before counting him/her as present.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with a "living, breathing flesh" standard for counting a detainee.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility out-count record is maintained by staff in Receiving and Discharge.
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff receive pre-employment and annual refresher training in count procedures.

**PART 2 – 11. POPULATION COUNTS**

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

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

The facilities procedures and practices adequately meet the requirements of this standard.

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**PART 2 – 12. POST ORDERS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this specification.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Chief of Security is responsible for keeping post orders current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility administrator signs the first page of all post orders.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders for the posts were found on posts and secured from detainees.
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; local protocols require an officer to read / sign / date the post orders each time a new post is assumed, and at least quarterly if working the same post.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has (b)(7)e armed post and staff assigned to the post must qualify with the post weapon(s) before assuming the post.
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> <li>Any staff member who is taken hostage is considered to be under duress, and</li> <li>Any order issued by such a person, regardless of his or her position of authority, is to be disregarded.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 2 – 12. POST ORDERS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. The Post Orders for housing units track the daily event schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; this facility complies.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; local procedures are compliant with this component.

**PART 2 – 12. POST ORDERS**

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

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

The facility procedures and practices adequately meet the requirements of this standard.

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**PART 2 – 13. SEARCHES OF DETAINEES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy addresses searches.
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 9-5.
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirements of this component are found in FCC policy 9-5.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 9-5 requires that body cavity searches be approved by the Vice President for Operations for the Correctional Corporation of America.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	"Dry cells" are addressed in FCC policies 9-5 and 9-104, Dry Cell Watches.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 9-11, Detection Canine Program, precludes the use of canines in the presence of detainees.

**PART 2 – 13. SEARCHES OF DETAINEES**

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

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

The Florence Correctional Center has a well developed and comprehensive policy regarding searches of detainees. Strip searches are only conducted when cause and/or reasonable suspicion has been established. Facility policy also prohibits the use of canines in the presence of detainees.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-2, Sexual Violence Prevention and Response, establishes this program.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility forwarded their document to the Field Office Director for approval.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility maintains an electronic reporting/tracking system that the inspector reviewed.
4. All staff are trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 14-2, and as verified via staff training records, all staff receive training on prevention and intervention in sexual abuse and assault during new employee orientation. Refresher training is provided annually thereafter.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the facility investigator, and in accordance with policy 14-2, information on this program is provided during detainee orientation and is broadcast on the closed circuit television information channel for 24 hour twice each week. Information about the program is also included in the local handbook (English and Spanish).
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Sexual Assault Awareness Notice was posted in the detainee housing units.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; facility staff distribute this brochure (English or Spanish) to all new detainees upon arrival.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 14-2 and validated via detainee medical records, screening for these risk situations are part of medical staff interviews during the intake process. Per the mental health social worker, counseling is promptly provided to any detainee identified as high risk. Any detainee identified as high risk for assaultive behavior is assigned to segregated housing pending further evaluation.
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the facility investigator, all incidents of sexual abuse or assault by a detainee on a detainee are documented. Three detainees made allegations of abuse/assault by another detainee. Two allegations were not substantiated. The perpetrator in the third alleged incident, which occurred at another facility, could not be identified.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the facility investigator, all incidents of sexual abuse or assault by staff on a detainee are documented. Two detainees made unsubstantiated allegations of staff on detainee abuse or assault.
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policies 14-2 and 13-79, Sexual Assault, any detainee alleging sexual abuse or assault is evaluated by medical staff and, if indicated, transported to Maricopa Medical Center for a sexual assault examination / evidence collection. The detainee is also referred to mental health staff. In accordance with policy 14-2 and as confirmed per the chief of unit management, chain-of-command reporting and notification to ICE is part of the process.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 14-2, and as confirmed by the facility investigator and per a review of applicable Incident Investigation Reports, the facility conducts a thorough investigation into any alleged sexual assault. The Florence Police Department (FPD) is notified of any substantiated allegations. Immediate notification is made if detainee behavior, witness reports, or physical evidence give credence to the allegation. In such cases, the facility preserves the alleged crime scene/evidence and defers to the FPD for further investigation.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 14-2, and as confirmed per a review of applicable Incident Investigation Reports, prompt notification of alleged sexual assaults is made to ICE and the FPD.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 13-79, and as confirmed per a review of Incident Investigation Reports, victims of sexual abuse or assault are transported to Maricopa Medical Center for treatment and evidence gathering.
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records of allegations of sexual abuse or assault are logged into the electronic Incident Report Database and tracked by the facility investigator.

**SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION**☒ Meets Standard☐ Does Not Meet Standard☐ N/A☐ Repeat Finding

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

Through policy review, staff interviews, and direct observations, the facility maintains a comprehensive sexual abuse and assault prevention and intervention program.

In the past 12 months, one ICE detainee and two non-ICE detainees alleged sexual abuse or assault by another detainee. The ICE detainee alleged non-contact sexual misconduct by another ICE detainee. ICE was notified. One of the non-ICE detainees alleged inappropriate touching by another non-ICE detainee. The detainees in each case were separated pending completion of investigations. Neither of the allegations was substantiated. Evidence of sexual activity causing physical injury in a second non-ICE detainee was found by the physician during the detainee's initial physical exam. The FPD and the agency with jurisdiction over the detainee were notified, and the detainee was transported to Maricopa Medical Center for further evaluation. Per a summary of the follow up investigation, the detainee reported having been raped at his previous facility. He indicated he did not report the attack at that time for fear that his family would be harmed in retaliation. He cooperated with this facility's investigator, but was unable to identify his attacker. No physical evidence was found in his property. FPD was briefed on the results of the investigation and the case was referred to the investigator at the detainee's previous facility for further investigation. Chain of command notification within the facility was provided in each case.

Two detainees made allegations of sexual abuse/assault by staff in the past 12 months. An ICE detainee alleged sexual misconduct by a female employee at his previous facility. Chain of command reporting was initiated, ICE was notified, and the allegation was forwarded for further investigation to appropriate staff at the detainee's previous facility. The allegation was not substantiated by that investigation. A non-ICE detainee alleged non-consensual sexual contact with a female work supervisor. Appropriate notifications were made and the detainee was removed from the work environment. The follow up investigation did not substantiate the allegations.

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**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a written Segregation Management procedure which governs the placement of detainees in SMU.
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee placements in Administrative Segregation are documented.
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees here are placed in Disciplinary segregation only as the result of a hearing by the disciplinary hearing panel and being found guilty of the appropriate level offense.
4. <b>(MANDATORY)</b> Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prior to placing any detainee in SMU they receive a pre-SMU medical placement screening and evaluation by a health care professional to insure they are medically able to be housed in SMU.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The number of detainees confined to each cell does not exceed the design capacity. During the review most cells contained only one detainee.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU was extremely clean. The cells and rooms are well vented, adequately lit, and sanitary.
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU staff maintain numerous logs recording all the data required by this component.



**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.).</p> <p>In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirements specified in the second sentence of this component are not applicable to an IGSA. FCC staff create a permanent log for all detainees, documenting daily activities to include all of the specifications in this component.
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> <li>The time and date of the visit, and</li> <li>Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility fully complies with this component.
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> <li>In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU.</li> <li>In CDFs and IGSA facilities form I-888 or a comparable form is used.</li> </ul> <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> <li>By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> <li>Whether the detainee ate, showered, exercised, and took any medication, and</li> <li>Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc.</li> </ul> </li> <li>When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility an SMU record is maintained for each detainee in SMU. Although not required in IGSA's, this record records the daily activities of the detainees, and any special notes regarding a detainee's medical condition or abnormal behavior. Medical staff who visit the SMU detainee initial the record and staff record in the SMU log whenever medical visits occur.
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; there is total compliance with this component.
<p>13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Segregation Management procedure specifies what property detainees may retain in SMU.



**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Segregation Management procedure specifies the privileges detainees retain while in SMU. Administrative Segregation detainees generally retain the same privileges as general population detainees.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation status are allowed one hour of recreation five days per week. The SMU design and operation and different types of detainees held in the SMU do not allow for additional out of cell time for socializing or other activities.
16. Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted for some cases (violent, mentally disordered, bizarre behavior, suicidal).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, 30 minute irregular checks are made of all detainees in SMU.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shift supervisors visit the SMU a minimum of once each shift.
18. The facility administrator (or designee) visits each SMU daily.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility Warden or designee does not visit the unit daily. The Warden and other senior staff visit the SMU weekly.
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them.  In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSAs, medical professionals need only visit SMU three times weekly. At this facility, medical staff including mental health services staff visit each detainee in SMU on a daily basis. Medical visits and medication deliveries are conducted/logged each shift.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility procedures specify that showers and shaves be afforded at least three times a week. Other services are provided on the same basis as the general population.

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a detainee's behavior was such that clothing and bedding had to be taken away, medical staff would be notified and take the appropriate medical action.
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any restriction of visiting would be the result of violating the visiting rules and would be documented in an Incident Report.
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any act which resulted in suspension of visiting privileges would be documented in an incident report.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SMU detainees do not receive visits in the general open visiting room. All visits for SMU detainees are non-contact and the detainees are in restraints during the visits.
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; local procedure calls for all detainees to use the non-contact visiting room during the normal scheduled hours of operation.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; this facility fully complies with this component.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	There is no written policy which specifically covers the situation where special security precautions have to be implemented for legal visitation. In practice, the facility would contact the legal service providers prior to the visit.
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visits by clergy are allowed when requested by the detainee.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU have access to reading materials, including religious materials.
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard.  Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in SMU who request law library access are removed from the SMU and escorted to the law library in Delta Unit. They are provided access to legal material in their personal property as soon as possible or within 24 hours.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation have the same law library access as general population. Exceptions for security reasons are documented.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, legal material is brought to detainees in SMU when necessary.
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> <li>Supported by compelling security concerns,</li> <li>For the shortest period required for security, and</li> <li>Fully documented in the SMU housing logbook.</li> <li>ICE/DRO is notified every time law library access is denied.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, any denial of law library access would be fully documented and recorded in the SMU log. Such a suspension would be for the shortest time necessary. The SMU unit manager would advise ICE of the suspension on a weekly basis.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU has 13 individual recreation yards for use by SMU detainees only.

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility does not have a written procedure which details the steps needed to be taken to ensure that detainees who must be kept apart never participate in activities together. In practice, the staff operate the SMU and the recreation yards in a way that minimizes or eliminates such incidents. Detainees recreate alone or with a cell partner. Multiple detainees are never allowed out of their cells, unescorted, at the same time.
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees in SMU receive one hour of recreation five days per week.
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.  Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.  When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Denial of recreation privileges is only done in extreme cases. Such a suspension requires an incident report and review by the facility Warden or designee. The shift supervisor could suspend visiting if there was an immediate threat to the safety and security of the facility.
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A denial of recreation privileges would be reviewed on a daily basis and the privilege restored as soon as possible. The unit manager reported that there is no blanket denial of recreation privileges. The design of the 13 individual recreation yards allows for detainees to be given recreation time under almost any circumstances.



**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In the event recreation privileges were denied for 15 days, the facility Warden and health care staff would have to concur. SMU staff could not think of a circumstance where such a denial would occur or can they recall such a suspension. ICE is notified on a weekly basis of the status of all detainees in SMU.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU.</p> <p>Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU uses two portable telephones which allows for adequate phone access for SMU detainees. Telephone access can be restricted as part of the discipline process but detainees are allowed to make free or legal calls as described in the detention standards.
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility a written order is completed and approved by a supervisor before a detainee is actually placed in SMU. A copy of the order is given to the detainee within 24 hours. In the case of protective custody placements the order would specify if the detainee requested placement. The placement order would remain in SMU until the detainee is released and then would be placed in the detainee's detention file.

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility has written procedures for the review of detainees in Administrative Segregation. A supervisor conducts a review in 72 hours and includes an interview with the detainee and records all pertinent information. If the detainee does not request SMU placement but is retained for safety reasons the Warden or designee authorizes the retention. All detainees are reviewed each 7 days for the first 60 days in SMU. The facility Warden, Assistant Warden, or the Chief of Security must approve a detainee's release from this SMU status.</p>
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainees receive a copy of the decision and justification of each review if they request one. The detainee may appeal the decision to a higher authority.</p>
<p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All detainees can appeal the reasons for their retention in Administrative Segregation.</p>
<p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>If a detainee is in Administrative Segregation for 30 days and objects to this status the facility Warden reviews the case. A written record of the review is made of the decision and justification. Similar reviews are done every 30 days.</p>



**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff are notified by the SMU unit manager on a weekly basis of all detainees held in SMU. ICE staff report that they provide notice through their chain of command.
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff report that they automatically prepare the 60 day reports to the FOD.
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act.  The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The disciplinary panel places detainees in Disciplinary Segregation only after a hearing and guilty finding. The maximum sanction per individual violation is 60 days.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility staff send written notification to ICE staff on a weekly basis of all detainees housed in Disciplinary Detention.
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility).  The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation.  When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A written order is completed by the IDP documenting the reasons for placement in Disciplinary Segregation. Detainees receive a copy of the document within 24 hours of placement in Disciplinary Segregation. Upon release from SMU the releasing officer notes the date and time of release and the document is placed in the detainee's detention file.

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility has written procedure for the regular review of detainees in Disciplinary Detention. A supervisor reviews the detainee's status each seven days and records findings. Upon request, the detainee is provided a copy of the reviewing officer's decision and basis for the findings. The reviewer may recommend the detainee's early release; an early release requires the Warden's approval. All review documents are placed in the detainee's detention file.</p>

**PART 2 – 15. SPECIAL MANAGEMENT UNITS**

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

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

Through comprehensive policy review, staff interviews, and direct observations, it is apparent the facility substantially complies with this NDS. There are component areas above that reflect facility deviations which should be reviewed and that may inspire facility managers to tweak existing protocols toward full NDS compliance.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 2 – 16. STAFF-DETAINEE COMMUNICATION**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE Deportation Officers are scheduled to visit the facility twice each week.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Weekly visits with detainees by the Detention Staff and Deportation Staff are documented.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The schedule is posted on the bulletin boards in the two designated ICE housing areas.
4. Visiting ICE staff observe and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in policy 16-1, Correspondence Procedures.
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The box is located in each of two designated ICE housing areas.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff have the key to the box.
9. ICE/DRO staff respond to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff track the requests and responses.
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is addressed in the local and national handbooks, which each ICE detainee receives upon arrival.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 2 – 16. STAFF-DETAINEE COMMUNICATION**

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

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

This checklist was completed with the assistance of ICE Immigration and Enforcement Agent, Compliance Team Member (b)(6), (b)(7)(C).  
(b)(6), (b)(7)(C) ICE staff visit the facility at least twice each week. By personal observation, it was obvious the ICE staff on-site during the review were well acquainted with facility staff, the physical plant, and the detainees.

(b)(6), (b)(7)(C) October 14, 2010

Reviewer's Signature / Date

**PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is responsible for then tool control policy and inspection system.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries.  If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, tools enter into the main facility only when the tool control officer directly handles them either at the time of delivery or when he retrieves them for a storage area next to the vehicle sally port. Tools are then secured for further processing.
3. <b>(MANDATORY)</b> The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The use of tools, keys, medical equipment and culinary equipment is strictly controlled. In all of these areas inventories were in place and a chit system is used for accountability.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; this facility fully complies with this component.
5. Tool inventories are required for: <ul style="list-style-type: none"> <li>• Facility Maintenance Department</li> <li>• Medical Department</li> <li>• Food Service Department</li> <li>• Electronics Shop</li> <li>• Recreation Department</li> <li>• Armory</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tool inventories are in place for each of the areas specified in the component. The inventories were reviewed and were current.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this component.
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> <li>• The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>• ICE facilities use AMIS bar code labels when required.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility tool control procedure requires the regular inventory of all tools. Minimum time frames for the inventories are set in the procedure and require that all inventories be documented.
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> <li>• Restricted (dangerous/hazardous)</li> <li>• Non Restricted (non-hazardous).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSAs, a tool classification system is all this is required. Here, tools are classified as Class A (restricted) and class B (non-restricted).



**PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The tool control procedure requires that all tools be marked and readily identifiable, as was the case.
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> <li>The system ensures that all stored tools are accountable.</li> <li>Tools are stored on shadow boards in which the shadows resemble the tool.</li> <li>Shadow boards have a white background.</li> <li>Restricted tools are shadowed in red.</li> <li>Non-restricted tools are shadowed in black.</li> <li>Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In IGSA's, an approved tool storage system that ensures tool accountability is all that is required. At this facility, the tool control policy and actual practice fully meet this component's specifications.
12. Tools removed from service have their shadows removed from shadow boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility is compliant.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility fully complies.
14. Sterile packs are stored under lock and key.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility is compliant.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> <li>Verbal and written notification.</li> <li>Procedures for detainee access.</li> <li>Necessary documentation/review for all incidents of lost tools.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility tool control procedure addresses the issue of lost tools, both notifications, detainee access, and documentation and review of lost tool incidents.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Broken or worn out tools are disposed of by the tool control officer.
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All private contractors must fill out an "Outside Service Provider Tool Inventory" form prior to entering and before leaving the facility.



**PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Hoses longer than three feet in length are classified as a restricted tool.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, hoses in excess of three feet not classified restricted tools.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, scissors are not used for in-processing.

**PART 2-17. TOOL CONTROL**☒ **Meets Standard**☐ **Does Not Meet Standard**☐ **N/A**☐ **Repeat Finding**

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

The facility procedures and practices meet the requirement of this standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 2 – 18. USE OF FORCE AND RESTRAINTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FCC use of force policy authorizes staff to use immediate use of force to resolve a situation and restore order.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The use of force policy calls for exhausting all verbal means prior to resorting to the use of force.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility use of force policy does not contain the statement that calculated rather than immediate use of force is feasible in most cases.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility subscribes to confrontation avoidance procedures. Ranking security staff, health care professionals, and others confer before every calculated use of force.
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff use the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In calculated use of force incidents staff use the team technique under staff supervision.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility (b)(7)e (b)(7)e are trained in the team technique.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All use of force incidents at the facility are documented and reviewed.
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All use of force incidents are documented and forwarded for review. The documentation includes the medical examination through the conclusion of the incident. All use of force incidents are audio visually recorded. Any breaks in the recording are explained on the video.

**PART 2 – 18. USE OF FORCE AND RESTRAINTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Staff:</p> <ul style="list-style-type: none"> <li>Does not use force as punishment.</li> <li>Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>Uses only as much force as necessary to control the detainee.</li> <li>Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy includes all these specifications.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not use medication for restraint purposes.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility procedure for (b)(7)e requires that teams follow procedures which attempt to prevent injury and exposure to communicable diseases. The use of force teams wear the appropriate protective equipment to reduce the risk of injury and exposure to communicable diseases.
<p>13. Standard procedures associated with using four/five point restraints include:</p> <ul style="list-style-type: none"> <li>Soft (nylon/leather) restraints.</li> <li>Dressing the detainee appropriately for the temperature.</li> <li>A bed, mattress, and blanket/sheet.</li> <li>Checking the detainee at least every 15 minutes.</li> <li>Logging each check.</li> <li>Repositioning detainee often enough to prevent soreness or stiffness.</li> <li>Medical evaluation of the restrained detainee twice per eight-hour shift.</li> <li>When qualified medical staff are not immediately available, staff position the detainee "face-up."</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
<p>14. The shift supervisor monitors the detainee's position/condition every two hours.</p> <p>He/she allows the detainee to use the restroom at these times under safeguards.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Personal Restraint Procedure identifies key medical staff who monitor the detainee's position/condition every 15 minutes and allow the detainee to use the restroom every two hours.

**PART 2 – 18. USE OF FORCE AND RESTRAINTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. All detainee checks are logged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical procedure requires that all detainee checks are logged.
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> <li>Medical staff are consulted before staff use (b)(7)e non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The use of force procedure requires that medical staff be consulted before staff use non-lethal weapons and that medical staff reviews the detainee's medical file prior to the use of non-lethal weapons.
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not store any intermediate force weapons in the SMU.
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> <li>Medical personnel are consulted</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical personnel are consulted prior to restraining pregnant females. In many instances policy precludes restraining pregnant females. No ICE female detainees are housed here.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff document every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility procedures require that all use of force incidents be fully documented including the type of restraints used.
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility procedures require that all use of force incidents and non-routine application of restraints incidents be reviewed.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> <li>Specialized training is given to officers ensuring they are certified in all devices approved for use.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 2 – 18. USE OF FORCE AND RESTRAINTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. The use of canines is restricted to contraband detection purposes only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses canines only to detect contraband; canines are not used in the presence of detainees.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers are trained in the use of soft and hard restraints.
28. <u>In SPCs</u> , the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to use the Use of Force Form is not applicable to an IGSA. The FCC uses a Use of Force form to document all uses of force.

**PART 2 – 18. USE OF FORCE AND RESTRAINTS**

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

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

The FCC has comprehensive Use of Force written procedures and meets the majority of the components required by the Use of Force and Restraints standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## Performance-Based National Detention Standards

# **Section III ORDER**

## **19 Disciplinary System**



### PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a written disciplinary system using progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of legal access and legal materials</li> <li>• deprivation of physical exercise</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written procedures prohibit staff from imposing as sanctions all of the individual punishments noted in this component.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The rules of conduct, sanctions, and procedures are defined in writing and communicated to detainees verbally in orientation and in writing in the detainee handbook.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> <li>• Rights and Responsibilities</li> <li>• Prohibited Acts</li> <li>• Disciplinary Severity Scale</li> <li>• Sanctions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The items listed in this component are posted in English and Spanish in the living units.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility discipline procedure encourages informal resolution of minor rule violations.
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; the facility complies with this component.
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All incident reports are referred for investigation within 24 hours of the incident.

### PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses an intermediate disciplinary process to adjudicate minor rule violations.
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> <li>Conducts hearings on all charges and allegations referred by the UDC</li> <li>Considers written reports, statements, physical evidence, and oral testimony</li> <li>Hears pleadings by detainee and staff representative</li> <li>Bases its findings on the preponderance of evidence</li> <li>Imposes only authorized sanctions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility disciplinary panel behaves in a manner that conforms to all specifications of this component.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A staff representative is appointed when requested by the detainee and approved by the disciplinary board/hearing officer.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The duration of punishment does not exceed established sanctions and the maximum time in disciplinary segregation cannot exceed 60 days for a single offense.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility procedures contain instructions for the handling of confidential sources and the criteria for recognizing substantial evidence.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All forms relevant to the investigation are completed and distributed.

### PART 3 – 19. DISCIPLINARY SYSTEM

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

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

The facility procedures and practice adequately meet the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## **Performance-Based National Detention Standards**

# **Section IV CARE**

**20 Food Service**

**21 Hunger Strikes**

**22 Medical Care**

**23 Personal Hygiene**

**24 Suicide Prevention and Intervention**

**25 Terminal Illness, Advance Directives, and Death**

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service department is operated under contract by Canteen Corporation. The FSA is ServSafe certified and has completed a corporate training program.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each food service staff receives initial orientation that includes detainee-related issues. Staff also review the ICE Food Service Standard.
4. <b>(MANDATORY)</b> Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Knives are not used or stored at this facility.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Staff monitor the condition of dining utensils; however, knives are not used or stored at this facility.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not handle or store items that pose a security threat.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff are trained in count procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food service staff are contracted. Consequently, the facility population counts are conducted by correctional staff assigned to the food service department. Correctional supervisors monitor the implementation of the population counts.
9. <b>(MANDATORY)</b> There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not authorized to work in food service. Each non-detainee worker and staff person is medically cleared by the facility medical service department. Prior to each work shift, a cook foreman inspects each non-detainee worker for health and cleanliness. The inspections are recorded on a Daily Health and Hygiene Sheet.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although ICE detainees do not work in food service, the training records of other detainees working in food service are in the Inmate/Resident Training Record.
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> <li>• Safe work practices and methods.</li> <li>• Safety features of individual products/ pieces of equipment.</li> <li>• Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainees are not authorized to work in food service.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Breakfast is served at 6:30 am, lunch at 11:45, and dinner at 5:00 pm.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not operate a cafeteria.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to have a 35-day menu cycle is not applicable to an IGSA. The FCC has a 35-day menu cycle.
18. <b>(MANDATORY)</b> A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A nutritional analysis is conducted by a corporate registered dietitian.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures include strict adherence to recipes and production sheets.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> <li>• If yes, documenting each substitution, along with its justification, with copy to the FSA</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Changes are recorded on the Menu Substitution Log. The Associate Warden is advised of each change.



**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> <li>• Changes to the planned Common Fare menu can be made at the facility level.</li> <li>• Hot entrees are offered three times a week.</li> <li>• The Common Fare menus satisfy nutritional recommended daily allowances (RDAs).</li> <li>• Staff routinely provide hot water for instant beverages and foods.                             <ul style="list-style-type: none"> <li>○ Common Fare meals are served with:</li> <li>○ Disposable plates and utensils.</li> <li>○ Reusable plates and utensils.</li> </ul> </li> <li>• Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The common fare menu was incorporated into the 35 day menu cycle. All requirements of this component are being met.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chaplain provides a list of detainees requiring religious diets.
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> <li>• Muslims fasting during Ramadan receive their meals after sundown.</li> <li>• 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.</li> <li>• Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information concerning detainee medical diet requirements is provided by the medical services department.
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> <li>Personal cleanliness and hygiene;</li> <li>Sanitary techniques for preparing, storing, and serving food, and;</li> <li>The sanitary operation, care, and maintenance of equipment.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-detainee workers receive proper instruction.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. <b>(MANDATORY)</b> The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager, Maintenance Supervisor, and FSA conduct weekly inspections.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FSA, Safety Manager, and Maintenance Supervisor meet weekly to review the status of corrective actions.
36. <b>(MANDATORY)</b> Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperatures are recorded and maintained in a work station log.
37. <b>(MANDATORY)</b> Staff document the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperatures are recorded and maintained in a log located at each freezer and refrigerator.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning schedules are posted at each work station.
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs. The FCC does not operate a dining room. All feeding is conducted in the housing areas.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs. Food service is contracted.

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food preparation, storage, and serving areas are not equipped with doors that open to the outside.
47. Staff comply with the ICE requirements for "food receipt and storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Staff comply with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are fed in their housing units.
51. <b>(MANDATORY)</b> An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Pinal County Health Department conducted an inspection on 11-22-09. The food service department received an excellent rating.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. <b>(MANDATORY)</b> The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pest control services are provided monthly or as needed by Johnny Reeves Pest Control. No signs of pest or vermin infestations were observed during the inspection.

**FOOD SERVICE**

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

The facility complies with the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 4 – 21. HUNGER STRIKES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy review, clinical supervisor interview, and a review of detainee medical records verify that any detainee declaring a hunger strike or refusing nine consecutive meals is referred to medical staff.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 13-46, and as confirmed by the clinical supervisor and the AFOD, the designated supervisor/administrator immediately notifies ICE of any ICE detainee hunger strikes.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 establishes procedures for immediate response to a hunger strike that include a medical evaluation, a mental health referral, and isolation of the hunger striker.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires the isolation of hunger strikers.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, a hunger striking detainee is placed in a medical observation room on a physician's order; a record review confirmed such placement.
6. Medical staff record the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Various forms of evidence confirm a hunger striker's weight and vital signs are measured and documented in the medical record at least once every 24 hours. Lab tests are also done.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per a record review, a general consent for medical treatment is signed by each detainee the day he arrives at this facility. Per policy, a procedure-specific consent would be obtained for any needed invasive medical treatment.



**PART 4 – 21. HUNGER STRIKES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to policy and through a record review, Refusal to Accept Medical Treatment forms (English and Spanish) are signed by detainees who refuse medical evaluation or treatment. If the detainee refuses to sign the form, the refusal is witnessed and co-signed by two staff members.
9. Unless otherwise directed by the medical authority, staff deliver three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence reflects the offering and acceptance or refusal of 3 meals/day is documented by detention staff on detainee-specific Monitoring Forms.
10. Staff maintain the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff provide the hunger striker's supply of drinking water/other beverages and document the volume of fluid consumed.
11. During a hunger strike, staff remove all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence indicates hunger strikers are not permitted to retain possession of commissary food items when moved to a medical observation room.
12. Staff are directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per policy, staff are directed to record a hunger striker's fluid intake and food consumption on a facility Monitoring Form.
13. The medical staff have written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 establishes procedures for the clinical evaluation and treatment of hunger strikers.
14. Staff document all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence reflects all treatment attempts are documented in the detainee's medical record.
15. All staff receive orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment.  Medical staff receive training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence reveals all staff are trained to recognize signs of a hunger strike and procedures for referral for medical assessment during new employee orientation. Refresher training is provided annually thereafter. Medical staff receive annual training on the evaluation and treatment of hunger strikers.

**PART 4 – 21. HUNGER STRIKES**

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

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

Per the facility clinical supervisor, two ICE detainees declared hunger strikes in the past 12 months. One declared a hunger strike upon admission to the facility on July 8, 2010, stating he was protesting his failure to be released. His medical file revealed he was promptly admitted to a medical observation room. Meals and activities were monitored and logged, vital signs and weights were checked and lab work was completed. Following discussions with staff, the detainee began eating the following day. A second ICE detainee declared a hunger strike on July 12, 2010, claiming someone had taken papers he needed for his legal case. Hunger strike policy was followed as the record reflects. ICE was notified and the detainee was transferred out of the facility on July 15, 2010.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Non-Resident Pharmacy license is posted in the medical pharmacy room. The medical unit works closely with the county public health department and complies with applicable regulations and recommendations. The active status of staff licenses was confirmed per a review of staff credentialing files.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nursing staff conduct a medical screening on all detainees during facility in-processing. A review of 20 detainee medical records confirmed 100% compliance with this requirement.
3. <b>(MANDATORY)</b> The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation revealed the facility's medical staffing plan is reviewed / revised at least annually by the facility and Corrections Corporation of America (CCA) health authorities. In addition to (b)(7)(e) medical administrative staff, positions in the current plan include (b)(7)(e) physicians, (b)(7)(e) mid-level providers, (b)(7)(e) registered nurses (RNs), (b)(7)(e) licensed practical nurses (LPNs), (b)(7)(e) medical records clerks, (b)(7)(e) certified medical assistant, (b)(7)(e) administrative clerks, a dentist, dental hygienist and dental assistant, and a part time x-ray tech. Authorized mental health staff include a psychologist, a licensed clinical social worker and a part time (20 hours/week) psychiatrist. Short-term contractors have been used to cover vacancies in the mid-level provider positions. The (b)(7)(E) RN vacancy has been covered as needed by contingency nurses. A physician is on duty 7 days/week. On-site nursing coverage is provided 24 hours/day 7 days/week, with (b)(7)(E) RNs and (b)(7)(E) LPNs on duty during the day and (b)(7)(E) RNs and (b)(7)(E) LPNs on duty at night.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
4. <b>(MANDATORY)</b> Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Directions for accessing medical care are provided to all detainees during the medical intake screening process. Written directions are provided in English and Spanish. A telephone-based interpretation service is available for communicating with detainees unable to speak English or Spanish. Directions for accessing health services are also included in the facility detainee handbook distributed to each detainee.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nursing staff are on duty 24 hours/day 7 days per week to provide on-site emergency care. Emergency medical equipment is available for use in the medical unit and elsewhere within the facility. On call providers include a physician, psychiatrist and dentist. Southwest Ambulance, a contract emergency medical response service, is available to provide on-site response and emergency transport. Hospital-based emergency treatment is available through Casa Grande Regional Medical Center or Mountain Vista Medical Center. A review of detainee medical records and logs maintained in the medical unit confirmed the provision of such care.
6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per review of employee-specific Human Resources (HR) medical records, all staff not previously testing as positive are given a TB test prior to their job assignment and annually thereafter. Evidence indicates, Hepatitis B immunizations are offered to all new staff and are available later in their employment upon request.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of medical staff credentialing files confirmed the active status of staff clinical licenses and physician DEA licenses. Job descriptions for health care staff were observed on file in applicable employee-specific HR records.
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility detainee handbooks (English or Spanish) are distributed to detainees upon unit assignment and include procedures for accessing health care services.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; facility procedure is consistent with this component. Per the clinical supervisor, the facility is anticipating an initial NCCHC audit in 2011.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none"><li>When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence reflects nursing staff conduct an initial medical, dental, and mental health screening on all detainees within 12 hours of arrival. A review of 20 detainee medical records confirmed 100% compliance with this requirement.
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As witnessed, bilingual staff are available to communicate with Spanish-speaking detainees. A telephone-based interpretation service is available when another language barrier presents.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit includes three appropriately equipped examination rooms. Four appropriately equipped satellite medical rooms are also available adjacent to the housing units and are used for medical triage and sick call. As observed, detainees are seen individually to ensure privacy. Detention staff provide security, but are not present in the examination rooms during medical encounters.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access to the medical unit, located near the front of the facility within the secure perimeter, is restricted and electronically controlled by detention officers in Central Control.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A waiting room is located near the entrance to the medical unit.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed, a detention officer is posted within the medical unit and maintains supervision of the detainees.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have independent access to a toilet adjacent to the waiting room. A water cooler and disposable cups are also available.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> <li>Secured in a locked area within the medical unit.</li> <li>With physical access restricted to authorized medical staff.</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic medical records are in use at this facility. Any paper medical documents generated or received by the facility are scanned into the applicable medical record. Computer access is password protected and limited to authorized medical staff.
18. <b>(MANDATORY)</b> A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A record review confirmed a general consent for medical treatment is signed by each detainee upon his transfer to this facility. Various indicators confirm that a procedure-specific consent is obtained for any needed invasive or potentially higher risk medical treatment.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An Authorization for Release of Protected Health Information form, available in both English and Spanish, is used by detainees to authorize the release of confidential medical records to outside sources.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, advanced notification of several hours to several days is provided prior to a detainee's transfer from the facility. Detainees are not removed from the facility until a medical transfer summary and any needed medications are available for transfer with the detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, a medical summary noting TB clearance status, prescribed medications and any significant medical problems is transferred with each detainee. The electronic medical records are retained by the facility.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per discussions with the clinical supervisor, medical records transported with a detainee are placed in a sealed and appropriately labeled envelope.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unless a detainee arrives with documentation of a previous positive PPD test response, nursing staff administer a TB skin test during the medical intake screening process. A review of 20 detainee medical records confirmed 16 detainees were tested upon arrival. Chest x-rays were used to confirm the absence of active disease in the remaining 4 detainees arriving with a history of positive TB skin tests.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> <li>• By a health care provider or specially trained officer;</li> <li>• Before a detainee's assignment to a housing unit.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records reflect mental health screening is included in the health screening completed by nursing staff during in-processing. The screening is completed before a detainee's assignment to a housing unit.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All intake medical screening is completed by nursing staff. Detainees identified during the screening process as having current medical needs are promptly referred to a physician for evaluation. Completed screening forms for those with no current concerns are reviewed during the detainee's initial physical examination/assessment health encounters.
26. <b>(MANDATORY)</b> Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A physician conducts a health appraisal and physical examination on all detainees within 14 days. A review of 20 detainee medical records revealed appraisals/physical exams were completed on all detainees in the facility for more than 8 days; all appraisals/exams were completed within 10 days of the detainee's arrival.
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU have access to health care through the submission of sick call requests and per direct request to staff for more urgent concerns. Per SMU watch logs, nursing staff make daily rounds on each detainee in the unit and collect any completed sick call requests. Nursing staff also distribute medication in the unit three times/day. Detainees are escorted to the medical unit for any needed clinical evaluation/treatment.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>28. Staff provide detainees with health- services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> <li>Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Sick Call Request slips (English or Spanish) are available in the housing units. Detainees in Segregation give completed requests directly to nursing staff. As observed, detainees in general population place completed requests in designated drop boxes within the units. These requests are collected and triaged daily by nursing staff. A review of 16 completed requests located in detainee medical records disclosed responses and sick call encounters where indicated were provided for 15 of the requests within 24 hours. Response to the one other request was provided within 48 hours.</p>
<p>29. <b>(MANDATORY)</b> The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medical staff are on duty 24 hours/day 7 days/week. Policy 13-34, Medical Emergency Response, establishes a plan for the delivery of 24-hour emergency health care when immediate outside medical attention is required. First responder emergency care is provided anywhere in the facility. Community emergency medical services are available through Southwest Ambulance.</p>
<p>30. The plan includes an on-call provider.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A physician, dentist, and psychiatrist are on call for medical emergencies.</p>
<p>31. The plan includes a list of telephone numbers for local ambulances and hospital services.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Phone numbers for on-call providers and local hospitals are posted in the medical unit. Southwest Ambulance responders are summoned by detention officers in Central Control per request by medical staff. The phone number for Southwest Ambulance is posted in Central Control.</p>
<p>32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Policy 13-34 includes procedures to support a coordinated medical and security response to medical emergencies, consistent with security and safety concerns.</p>

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Evidence revealed all staff are trained on the provision of first aid and the use of first aid kits and are certified in CPR during new employee orientation and annually thereafter. Health care personnel are CPR/AED certified annually. Facility registered nurses are further certified in Advanced Cardiac Life Support.
34. Where staff are used to distribute medication, a health care provider properly trains these officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All medication at this facility is distributed by medical staff.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medications are provided through a contract with Diamond Pharmacy. The facility is licensed to operate a non-resident pharmacy. The responsible pharmacist inspects the pharmacy on a quarterly basis to ensure compliance with applicable standards and laws. With the exception of limited supplies of medications approved for a detainee to keep on his person, all prescription medications are secured in carts and cabinets within the medical unit pharmacy and administered pursuant to a doctor's order. Over-the-counter medications are secured in the pharmacy or in one of the four satellite medical rooms and are distributed in accordance with physician-approved sick call protocols.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>36. <b>(MANDATORY)</b> Each facility has written policy and procedures for the management of pharmaceuticals that include:</p> <ul style="list-style-type: none"> <li>• A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources.</li> <li>• A method for obtaining medicines not on the formulary.</li> <li>• Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed.</li> <li>• Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications.</li> <li>• Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy 13-70, Pharmaceuticals, establishes procedures for the medication management and includes the components required by this standard. A review of documentation in the medical unit confirmed use of an approved formulary and a process for obtaining approval for off-formulary medications when clinically indicated. Controlled substances are secured in locked compartments in medication carts within the secure medical unit pharmacy room. Perpetual inventories are maintained on all DEA schedule controlled substances. Verification counts are conducted at each shift change. A spot check of inventory documentation confirmed accuracy.</p>
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> <li>• A secure perimeter;</li> <li>• Access limited to authorized medical staff (never detainees);</li> <li>• Solid walls from floor to ceiling and a solid ceiling;</li> <li>• A solid core entrance door with a high security lock (with no other access); and</li> <li>• A secure medication storage area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Pharmaceuticals are stored in locked cabinets and carts within an appropriately secure pharmacy room in the restricted access medical unit. Access to the pharmacy is limited to authorized medical staff. DEA schedule controlled medications are further secured in a locked compartment within a medication cart. Limited supplies of over-the-counter medications are also secured in cabinets in the restricted access satellite medical rooms adjacent to the housing units.</p>

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> <li>Administration and management in accordance with state and federal law.</li> <li>Supervision by properly licensed personnel.</li> <li>Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent.</li> <li>Accountability for administering or distributing medications in a timely manner and according to physician orders.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Although IGSAAs are not required to have a locking pass-through pharmacy window, several are available here and are secured when not in use. The pharmacy is licensed as a non-resident pharmacy and is inspected quarterly by the responsible pharmacist. Medications are administered by nursing staff under the supervision of the clinical supervisor, in accordance with procedures established in policy and procedure.</p>
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Per direct observation, medication is distributed in accordance with procedures established in policy 13-70. This policy was approved by the CCA Chief Medical Officer. The distribution and administration of medications are documented in detainee-specific electronic medical records.</p>
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> <li>In facilities that are medically staffed 24 hours a day, the health care provider distributes medication.</li> <li>In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff are not on duty.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medical staff are on duty 24 hours/day 7 days/week and distribute all medication. Limited supplies of medication approved for detainees to self-administer are distributed by medical staff as keep on person medications.</p>
<p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Non-medical staff do not distribute medication in this facility.</p>
<p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Per the clinical supervisor, a Health Service Form is used to provide notification of detainee special medical needs. Prompt electronic or telephone notification is provided when indicated for significant concerns.</p>

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-77, Scope of Services, establishes procedures for examinations by independent medical providers. The detainee or his legal representative must submit a written request for such an exam to ICE for approval. If approved, the facility will provide a location for the exam consistent with security concerns. The detainee must assume responsibility for the cost of the exam. Per the clinical supervisor, no requests for examinations by independent medical providers have been received.
44. <b>(MANDATORY)</b> Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> <li>• Coordination with public health authorities;</li> <li>• Ongoing education for staff and detainees;</li> <li>• Control, treatment, and prevention strategies;</li> <li>• Protection of individual confidentiality;</li> <li>• Media relations;</li> <li>• Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and</li> <li>• Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policies establish a comprehensive written plan for the management of infectious and communicable diseases. The facility follows NCCHC and Centers for Disease Control and Prevention infectious disease management guidelines and, per the clinical supervisor, works closely with the Pinal County Public Health Department on the management of communicable and infectious diseases. Training records reveal all staff receive annual training on communicable diseases. Detainees are given written information on TB, hepatitis, and HIV during the initial medical intake screening. Per facility administrative staff, all media concerns are referred to ICE. Per the clinical supervisor, immunization for influenza and Hepatitis B is provided to detainees per their request. Tetanus and Varicella immunizations are provided when determined necessary by the physician.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed, potentially infectious detainees are isolated in accordance with facility policy and physician orders. The facility consults with the Pinal County Public Health Department as needed for guidance on communicable disease concerns. Two negative airflow respiratory isolation rooms are available for use in the medical unit. The facility experienced three small outbreaks of chicken pox in recent months. One detainee was in medical isolation for this disease during the inspection, and several others had been segregated from the general population until confirmed non-infectious.
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TB screening using the PPD skin test is completed on all detainees during the intake medical screening process except for those with documentation of a previous positive reaction. Screening for the symptoms of active TB disease and a chest x-ray are used to confirm the absence of active disease in those detainees with a positive PPD history. A review of 20 medical records confirmed 100% compliance with this component of the standard.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical unit in this facility includes 2 negative airflow respiratory isolation rooms. Any detainee demonstrating signs or symptoms of potentially active TB disease would be housed in one of these respiratory isolation rooms pending confirmation of non-infectious status.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency medical transport is available through a contract with Southwest Ambulance. Per the clinical supervisor, transportation of a detainee to a local specialty care provider is arranged when medically necessary.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
49. Detainee who requires close, chronic, or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of detainee medical records, medical staff treat detainees who require close medical supervision in accordance with a plan of care developed by the physician, psychiatrist or dentist, as applicable.
50. <b>(MANDATORY)</b> Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house female ICE detainees.
51. <b>(MANDATORY)</b> Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As records reflect, detainees with chronic conditions are identified, evaluated, and scheduled for periodic follow up as determined appropriate by the physician. Lab and other medical testing are completed as ordered by the physician. Lab, x-ray and EKG results were observed in detainee medical records.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, a Health Service Form is used to notify applicable facility staff of any special health care needs requiring consideration in housing or transportation. Special needs requiring consideration on transfer are documented on the detainee-specific medical transfer summary.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed, routine dental care is provided on site by or under the direction and supervision of a licensed dentist. Emergency treatment and oral surgery when needed is available through community medical providers. As reported, no ICE detainees have needed off-site dental care in the past 12 months.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
54. <b>(MANDATORY)</b> Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As records reflect, detainees identified during intake or while housed within the facility as needing mental health services are referred to mental health staff. Per the medical record review, two detainees identified with serious concerns were seen and evaluated the day the referral was made. A third was evaluated by mental health staff within 3 days.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A full time psychologist and a licensed clinical social worker are available 7 days/week to provide immediate crisis intervention. Nursing staff are available 24 hours/day 7 days/week to respond to after-hours crises and have immediate access to the on-call psychiatrist in the event of a mental health emergency. Three rooms are available in the medical unit for detainees in crisis needing close observation.
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observations in the medical unit and satellite medical rooms, privacy is maintained during medical and mental health detainee encounters. The facility does not house female ICE detainees.
57. <b>(MANDATORY)</b> Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records reflect detainees referred to mental health received a comprehensive mental health evaluation within 72 hours. Documentation (20 files) indicated all new detainees are given a comprehensive mental health evaluation within 14 days.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>58. <b>(MANDATORY)</b> Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify:</p> <ul style="list-style-type: none"> <li>• The conditions under which restraints may be applied;</li> <li>• The types of restraints to be used;</li> <li>• How a detainee in restraints is to be monitored;</li> <li>• The length of time restraints are to be applied;</li> <li>• Requirements for documentation, including efforts to use less restrictive alternatives; and</li> <li>• After-incident review.</li> <li>• The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy 13-69, Personal Restraints and Seclusion, establishes procedures consistent with all required components. An Order for Discontinuation of Restraint or Seclusion form is used in lieu of the listed DIHS-867 form. Per the clinical supervisor, restraints for medical or mental health purposes have not been used at this facility in the past 12 months.</p>
<p>59. <b>(MANDATORY)</b> Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> <li>• Specify the duration of therapy;</li> <li>• Obtain an order authorizing the administration of the drug from a Federal District Court.</li> <li>• Document that less restrictive intervention options have been exercised without success;</li> <li>• Detail how the medication is to be administered;</li> <li>• Monitor the detainee for adverse reactions and side effects; and</li> <li>• Prepare treatment plans for less restrictive alternatives as soon as possible.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy 13-9, Compulsory (Involuntary) Medication of Mentally Ill Inmates/Detainees, establishes an objective due process procedure for the involuntary administration of psychotropic medications, consistent with all required components. ICE would be notified if the psychiatrist determined involuntary psychotropic medication administration should be considered. Per the clinical supervisor, involuntary psychotropic medications are not administered at this facility.</p>
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Records reflect an initial dental screening is included in the intake medical screening process. Per the clinical supervisor, nursing staff completing the screening were trained to do so by a licensed dentist. Evidence (20 files) revealed dental staff complete a follow up dental evaluation on all detainees within 14 days of their admission to the facility.</p>

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility medical and administrative staff determined the contents and placement of first aid kits within the facility. Kits are located in the housing units, work and program areas, officer posts and facility vehicles. Nursing staff conduct monthly inspections to confirm the kits are present and sealed. Open kits returned to the medical unit for restocking and resealing.
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As observed, an AED is stored in the medical area for use by medical staff there or when responding to a medical emergency elsewhere within the facility.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, no ICE detainees in urgent need of medical care have refused treatment. ICE would be notified immediately of any such occurrence.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; at this facility, quarterly meetings include the warden, assistant warden, the HSA and/or clinical supervisor.
65. <b>(MANDATORY)</b> Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Puncture-resistant sharps containers are available in the medical unit and satellite medical rooms for the disposal of used needles and other contaminated disposable equipment. Biohazard waste is picked up twice each month by Stericycle. Dental instruments are cleaned and autoclaved after each use. The effectiveness of the autoclave sterilization process is tested weekly. A review of the test results confirmed its effective operation.

PART 4 – 22. MEDICAL CARE				
This Detention Standard ensures that detainees have access to a continuum of health care services, including prevention and health education, so that their health care needs are met in a timely and efficient manner.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of facility Continuous Quality Improvement records, the medical unit operates a comprehensive internal review and quality assurance program complete with monitoring, evaluating, planning, implementation of plans of action and follow up evaluations.
PART 4 – 22. MEDICAL CARE				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

Per staff and detainee interviews, direct observations in the medical and housing units and a review of 20 detainee medical records and other medical documentation, medical staff are responsive to detainee healthcare needs. No significant unresolved detainee complaints were identified. Medical documentation is appropriate and thorough. Identified concerns are addressed through the use of facility and off-site medical resources. The facility does not have an inpatient unit for the provision of skilled nursing care. Five beds are available in the medical unit for detainees in need of medical isolation or close medical or mental health observation. Placement in one of these rooms is pursuant to a physician's order. The facility is pursuing accreditation by the National Commission on Correctional Health Care.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

PART 4 – 23. PERSONAL HYGIENE				
This Detention Standard ensures that each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.  The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 23. PERSONAL HYGIENE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum:</p> <ul style="list-style-type: none"> <li>One uniform shirt and one pair of uniform pants or one jumpsuit.</li> <li>One pair of socks.</li> <li>One pair of underwear (daily change).</li> <li>One pair of facility-issued footwear.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although IGSA's are only required to provide clean, weather-appropriate, presentable clothing upon the detainee's admission, this facility meets or exceeds the specifications of this component.
<p>3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; this facility issues jackets when the weather is cool.
<p>4. New detainees are issued clean bedding, linens and towels, at a minimum:</p> <ul style="list-style-type: none"> <li>One mattress</li> <li>One blanket</li> <li>Two sheets</li> <li>One pillow</li> <li>One pillowcase</li> <li>One towel</li> <li>Additional blankets, based on local weather conditions.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although IGSA's are only required to provide clean linens/towels; this facility meets all the specified quantities listed to the left, by way of its own local policy.
<p>5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 17-100, each new detainee is given personal hygiene items that are replenished weekly at no cost to the detainees. Replacement toothbrushes and razors are issued on an exchange basis only. The facility does not house female ICE detainees.
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> <li>Clean</li> <li>Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas.</li> </ul> <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observations in the detainee housing units, toilet facilities are clean and in working order. The ratio of toilets to detainees housed in Mobile Unit is 1 to 14. The ratio for detainees housed in Delta Unit is one to 3. Detainees in both units have independent access to these facilities 24 hours/day while confined within the unit.



**PART 4 – 23. PERSONAL HYGIENE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> <li>Clean</li> <li>Operable with temperatures between 100 and 120 degrees Fahrenheit.</li> </ul> <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per direct observations in the detainee housing units, bathing facilities are clean and in working order. Water temperature is controlled, and per reports provided by facility staff, measured 114 degrees. The ratio of basins to detainees housed in Mobile Unit is 1 to 14. The ratio for detainees housed in Delta Unit is one to 3. The ratio of showers to detainees is 1 to 17.5 in both units housing ICE detainees. The higher ratios are mitigated in that detainees have independent access to these facilities throughout the day while confined within the units.
8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Although the facility has four handicapped accessible cells in each housing unit, an ICE agent indicated no special needs / disabled detainee would be transferred to this facility.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> <li>Socks and undergarments - daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Laundry facilities are located within each housing unit. Detainees are permitted to submit clothing, linen, towels/wash clothes and bedding for laundering daily.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; here, ICE detainees work only in their housing units. All detainees, however, have access to daily laundry services.
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs/CDFs; locally, all detainees have access to daily laundry services.

**PART 4 – 23. PERSONAL HYGIENE**

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

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

Per observations in the detainee housing units, bathing and toilet facilities were clean and in good working order. No detainees were observed having to wait to use the facilities. Detainees were clean and appropriately dressed. No complaints regarding

bathing and toilet facilities, clothing, bedding or personal hygiene supplies were voiced by detainees.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies 13-84, Suicide Management, and 9-19, Suicide Prevention/Risk Reduction, establish a written suicide prevention and intervention program. The suicide prevention and intervention program as defined in Policy 13-84 is reviewed annually and approved by the CCA Chief Medical Officer and Chief Corrections Officer.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> <li>• Intake screening and referral requirements;</li> <li>• The identification and supervision of suicide-prone detainees;</li> <li>• Staff training requirements;</li> <li>• The management and reporting of suicidal incidents, suicide watches, and deaths;</li> <li>• Provision of safe housing for suicidal detainees;</li> <li>• Debriefing of any suicides and suicide attempts by administrative, security, and health services staff;</li> <li>• Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.;</li> <li>• Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and</li> </ul> Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policies 13-84 and 9-19 establish procedures addressing all required components. Record reviews verified implementation of the applicable procedures in the management of potentially suicidal detainees. A review of staff training documentation confirmed the provision of required suicide prevention and intervention training.
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training records revealed all staff receive suicide prevention training during orientation and annually thereafter.

**PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> <li>Effective methods for identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>Responding to suicidal and depressed detainees,</li> <li>Effective communication between correctional and health care personnel,</li> <li>Necessary referral procedures,</li> <li>Housing observation and suicide-watch level procedures,</li> <li>Follow-up monitoring of detainees who have already attempted suicide, and</li> <li>Reporting and written documentation procedures.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 9-19, and as confirmed per a review of the lesson plan and PowerPoint presentation used in the provision of suicide prevention training, all required components are included in the facility suicide prevention training program.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> <li>Screening does not occur later than one working day after the detainee's arrival.</li> <li>Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Screening for suicide potential is included in the intake medical screening completed by nursing staff within 12 hours of a detainee's arrival.
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-19 establishes procedures for the referral of at-risk detainees to medical staff. A review of detainee medical records confirmed the referral to medical and mental health staff of detainees identified as potentially suicidal during their initial intake screening or while already housed within the facility.
<p>7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only the psychiatrist and psychologist are authorized to release a previously suicidal detainee from suicide watch. A review of detainee medical records confirmed authorization for release from suicide watch was given by one of the authorized mental health providers.
<p>8. The facility has a designated isolation room for evaluation and treatment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Room #157 in the medical unit is designated for the evaluation and treatment of detainees at risk for suicide.

**PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, when the designated room is used for a suicide watch, the metal bed and mattress observed in the room are removed. Room #157 then contains no structures or smaller items that could be used in a suicide attempt. When placed on suicide watch, the detainee is permitted to have only two tear-resistant blankets for bedding and one tear-resistant gown.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, the psychiatrist approved the use of the designated room for suicide watches.
11. Staff observe and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, a detention officer is posted immediately in front of the designated room and maintains constant observation of the detainee. A review of documentation in detainee medical records confirmed use of a Monitoring Form to document observations of the detainee's behavior/status at least once every 15 minutes.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As confirmed per a review of detainee medical records, detention staff document the status of a detainee on suicide watch at least once every 15 minutes. Policy and staff testimony reveal medical and mental health staff document the status of a detainee on suicide watch at least once each day. Policy 13-63 was approved by the CCA Chief Medical Officer.



**PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff are on duty 24 hours/day 7 days/week. Mental health staff are on site 7 days/week and available to evaluate potentially suicidal detainees. The psychiatrist is on call when not on site to respond to psychiatric emergencies. ICE is notified whenever an ICE detainee is placed on suicide watch.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor, there were no successful suicides at this facility in the past 12 months. Should one occur, a mortality review would be completed and a critical incident debriefing would be provided in accordance with procedures established in policy 13-84.

**PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION**

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

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

Evidence reflects there were no successful suicides or ICE detainee suicide attempts at this facility in the past 12 months. One ICE detainee threatened suicide when his deportation took longer than he expected. He was placed on suicide watch, assessed daily by mental health staff, and released after two days. A second ICE detainee threatened suicide and was placed on suicide watch for one day. The psychiatrist determined that neither detainee was suicidal or mentally ill. A third ICE detainee diagnosed as mentally ill, threatened suicide and was transferred out of the facility by ICE after three weeks on watch status. Mental health assessments on these detainees were documented in the medical record. A review of detainee medical records confirmed documentation of the detainee's status on Monitoring Forms at least every 15 minutes. None of the detainees caused self-harm. In August of 2010, a non-ICE detainee with a history of depression attempted suicide by cutting his arms after receiving bad news. He was evaluated by medical staff and transported to the local hospital for sutures. Upon his return to the facility, he was placed on watch status and evaluated by mental health staff. He was released from watch, but continues to be monitored by mental health staff.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

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

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

☒ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the clinical supervisor and the AFOD, terminally or severely ill detainees are not transferred to this facility. Should the medical condition of a detainee already housed in the facility deteriorate to the extent that more intensive medical treatment is needed, the detainee would be transported to the Casa Grande Regional Medical Center or the Mountain Vista Medical Center pending release or transfer to a more appropriate detention facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> <li>The detainee's location.</li> <li>The visiting hours and rules at that location.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy 13-62, Notification of Next of Kin/Others, and as confirmed by the clinical supervisor and the AFOD, the facility would notify ICE of any significant change in a detainee's medical condition. ICE would make other notifications as applicable.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> <li>These guidelines include instructions for detainees who wish to have a living will.</li> <li>These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although the facility does not accept severely or terminally ill detainees, facility policy 13-3, Advanced Directives: Living Will/Durable Power of Attorney for Health Care, establishes procedures for providing Arizona Advanced Directives forms and for allowing a detainee the opportunity to have a private attorney prepare the documents. Information on the availability of advanced directives is provided to detainees during the medical intake screening process.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although the facility does not accept severely or terminally ill detainees, policy 13-3 establishes procedures addressing Do Not Resuscitate (DNR) orders.

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

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

☒ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-3 establishes procedures for the provision of palliative and hospice care to detainees with authorized DNR orders.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-3 requires that ICE be notified of any ICE detainee DNR order.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 13-77, Scope of Services, establishes written procedures addressing organ donation by detainees. Per policy, donation is permitted only when the recipient is an immediate family member, the detainee submits a written request to ICE to make a donation and includes language indicating the decision was made without coercion or duress, and all associated costs are the responsibility of the detainee.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-62 establishes procedures requiring notification of ICE in the event of a detainee death. Per the AFOD, ICE would make all other needed notifications.
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	As confirmed per an ICE Agent, the facility does not transport ICE detainees except for short transports to the Florence Federal Detention Center, located within a few miles of this facility.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the AFOD, ICE would ensure disposal of a detainee's remains in accordance with the provisions of this standard.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the AFOD, ICE would schedule the burial of unclaimed detainee remains in accordance with the provisions of this standard.

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

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

☒ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the AFOD, ICE would place a copy of a deceased detainee's death certificate in the applicable A-File.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none"><li>• Performance of an autopsy.</li><li>• Person(s) to perform the autopsy.</li><li>• Obtaining State approved death certificates.</li><li>• Local transportation of the body.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-62 establishes procedures for notification of the local coroner in the event of a detainee death. Per the clinical supervisor, the coroner must give approval for movement of the body of any detainee who dies while at the facility.
14. ICE staff follow established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per the AFOD, ICE would close the case of a deceased detainee.

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

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

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

Per the Significant Incident Summary and as confirmed by ICE and by facility medical and administrative staff, there were no detainee deaths at this facility in the past 12 months.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## **Section V ACTIVITIES**

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



**PART 5 – 26. CORRESPONDENCE AND OTHER MAIL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correspondence and other mail rules need not be posted in each housing or common area in this IGSA. This facility conforms to all aspects of this component.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-1, Correspondence Procedures.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintain a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The requirement applies to only SPCs and CDFs. The FCC maintains a logbook which records acceptance of this type of mail.
6. Staff do not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Facility Administrator or equivalent for prevailing security reasons.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs. The FCC opens and inspects incoming general correspondence and other mail (including packages and publications) in the presence of the detainee.
7. Staff do not read incoming general correspondence without the Facility Administrator's prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs. Staff do not read incoming general correspondence without the Warden's prior approval.
8. Staff do not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incoming Special Correspondence is opened and inspected for physical contraband in the presence of the detainee.
9. Staff are prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 26. CORRESPONDENCE AND OTHER MAIL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff are only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The requirement that a detainee must be present for staff to inspect outgoing correspondence or other mail is not applicable to an IGSA. At the FCC, all outgoing general correspondence is subject to inspection prior to delivery to the post office. Special outgoing correspondence is subject to inspection only for the reasons stated in the component.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement that the sender of rejected correspondence be notified by facility staff is not applicable to an IGSA. The FCC staff sends notice to the sender and the addressee anytime incoming mail is rejected.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintain a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An electronic and hard copy log of items removed from detainee mail is maintained.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detailed procedures are found in FCC policy 16-1 and
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-1.
18. Staff provide the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE handles requests for copies of detainee identity documents.
19. Staff dispose of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 26. CORRESPONDENCE AND OTHER MAIL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-1.
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 26. CORRESPONDENCE AND OTHER MAIL**

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

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

Policy and procedure sufficiently meet ICE standards for this service area.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

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

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

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

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

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

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

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

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

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

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

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

ICE staff provide the escort for all non-medical emergency trips for ICE detainees.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer's Signature / Date



**PART 5 – 28. MARRIAGE REQUESTS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Marriage request determinations are made by the Field Office Director (FOD).
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Policy 14-7, effective August 16, 2010, defers matters concerning marriage approvals/disapprovals to the ICE Field Office.
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are required to submit a marriage request form 14-7A to the Warden. The Warden sends the completed form to the FOD for review and final disposition.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FOD provides a written copy of his or her decision to the detainee and his or her legal representative.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FOD provides the required information.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE National Detainee Handbook, issued to each detainee, explains the marriage request process.
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This is an IGSA facility. Marriages are approved or disapproved by the FOD.

**PART 5 – 28. MARRIAGE REQUESTS**

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

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

The facility complies with the requirements of this standard. Decisions regarding marriage requests are deferred to the ICE Field Office Director.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 5 - 29. RECREATION**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> <li>An indoor recreation program.</li> <li>An outdoor recreation program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 20-101, effective 02/01/05, establishes an indoor and outdoor recreation program.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. This facility has a full time Recreation Supervisor responsible for implementing and maintaining a comprehensive indoor and outdoor recreation program. Arts and crafts are also included in the program.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board games, cards and televisions are available in each dayroom.
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee is offered 90 minutes of daily outside recreation.
10. Staff check all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conduct searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 - 29. RECREATION**

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

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

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

**PART 5 - 29. RECREATION**

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

Remarks: (Record significant facts, observations, other sources used, etc.)  
The facility complies with the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date



**PART 5 – 30. RELIGIOUS PRACTICES**

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may participate in religious services, normally conducted in English and Spanish.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The chapel and other rooms such as the attorney/client room are available for religious services.
3. The facility allows detainees to observe the major “holy days” of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No exceptions were noted during the inspection.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. However, this facility fully complies.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Volunteer’s credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>RELIGIOUS PRACTICES</b>				
<input checked="" type="checkbox"/> <b>Meets Standard</b> <input type="checkbox"/> <b>Does Not Meet Standard</b> <input type="checkbox"/> <b>N/A</b> <input type="checkbox"/> <b>Repeat Finding</b>				

Remarks: *(Record significant facts, observations, other sources used, etc.)*  
 The facility complies with the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer’s Signature / Date



**PART 5 – 31. TELEPHONE ACCESS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed access to telephones during facility waking hours. A TTY device is available upon request at the facility and is stored in the medical department.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's telephone access policy is contained in the local handbook.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The postings required by this component were observed in the designated ICE housing areas.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two designated housing areas for ICE detainees at FCC. One housing area has 8 telephones and a capacity of 160 for a ratio of 1:20. The other housing area has 4 telephones and a capacity of 40 for a ration of 1:10.
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-100, Access to Telephones, and the telephone placement was observed.
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a person on the FCC staff who is responsible for contacting the vendor regarding telephone issues and tracking corrective action.
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-100.
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 31. TELEPHONE ACCESS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The detainee telephones at the FCC are programmed with the ICE special access speed dial numbers.
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-100. Special arrangement calls are coordinated through ICE.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The procedures for taking and delivering emergency detainee telephone messages are found in FCC policy 16-100.
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is addressed in FCC policy 10-100, Segregation Management.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with staff confirmed that detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population. The current FCC policy contradicts this practice; however, the policy is being submitted for revision.
26. When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed notification posted on the wall in the housing areas and on the telephones. Additionally, an audio notification is provided when making a call.

**PART 5 – 31. TELEPHONE ACCESS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The LCI verified the OIG phone number for reporting abuse is programmed into the detainee phone system and is operable.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 31. TELEPHONE ACCESS**

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

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

Detainees have access to the telephones during waking hours at the facility. There are sufficient telephones to meet the ratio guidelines provided in the standard for Telephone Access. The telephones are programmed with the ICE special access telephone numbers. The OIG special access speed dial number was tested by this reviewer and found to be operable. All applicable components of the Standard are being met.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 5 – 32. VISITATION**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy 16-2, Visitation, addresses this component.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General visitation days are Fridays and Saturdays for ICE detainees and visits are limited to one hour unless permission is received for a special visit which may last for two hours.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitation rules are available in the lobby, in the visitation waiting area and on the website of the FCC.
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors in English, Spanish, and other major languages spoken in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The general visitation log is maintained in electronic and paper formats.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pursuant to FCC policy 16-2, minors are allowed to visit when accompanied by an approved adult.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pursuant to FCC policy 16-2, minors are allowed to visit when accompanied by an approved adult.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 16-2 provides that legal visits are allowed daily between the hours of 7am and 5pm.
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals are provided to detainees after a legal visit if the visit takes place during a scheduled meal.

PART 5 – 32. VISITATION				
This Detention Standard ensures that detainees will be able to maintain ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security, and good order.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 16-2 and policy 9-5, Searches of Inmates/Residents and Various Locations.
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is addressed in FCC policy 16-2.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The current list of pro bono legal organizations was observed posted in the ICE detainee housing areas.
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This requirement applies only to SPCs and CDFs. The FCC coordinates with ICE regarding any such request received.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Requests for NGO visitation would be forwarded to ICE for review and approval.
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Requests from law enforcement officials requesting to visit with a detainee are referred to ICE for review and approval.
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 5 – 32. VISITATION				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

The facility has written regulations pertaining to visitation procedures, schedules, and hours. The visitation rules are available to the public in the facility's lobby, visitation waiting room, and website. All applicable components of the Visitation Standard are being met.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer's Signature / Date



**PART 5 – 33. VOLUNTARY WORK PROGRAM**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter.  SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement that detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision is not applicable to an IGSA. Locally, ICE detainees work inside housing units.
4. Written procedures govern selection of detainees for the Voluntary Work Program. <ul style="list-style-type: none"> <li>The same procedures apply for replacement workers as for "new" workers.</li> <li>Staff follow written procedures.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 19-100, effective 06-18-07, establishes a voluntary work program.
5. Where possible, physically and mentally challenged detainees participate in the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no physically or mentally challenged detainees housed here.
6. The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> <li>Eight hours a day.</li> <li>Forty hours a week.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is specific to SPCs and CDFs. Detainees at this facility do not work more than eight hours per day and 40 hours per week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff place the written justification for the action in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The voluntary work program meets: <ul style="list-style-type: none"> <li>OSHA standards</li> <li>NFPA standards</li> <li>ACA standards</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. Locally, the facility voluntary work program for detainees meets all stated standards.
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> <li>Before the assignment begins</li> <li>As a matter of written procedure</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainees are not authorized to work in the food service department.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee receives initial orientation training.

**PART 5 – 33. VOLUNTARY WORK PROGRAM**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 5 – 33. VOLUNTARY WORK PROGRAM**

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

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

The facility complies with the requirements of this standard. Detainee participation in the volunteer work program is limited to work in the housing units.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

## **Section VI JUSTICE**

**34 Detainee Handbook**

**35 Grievance System**

**36 Law Libraries and Legal Material**

**37 Legal Rights Group Presentations**

### PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee receives a copy of the facility handbook, an addendum to the handbook, and the ICE National Detainee Handbook.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook and addendum are written in English and translated into Spanish.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As explained in the handbook introduction section, interpretive services are provided.
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The handbook supplements the facility orientation video where one is provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not use an orientation video.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook was revised on March 24, 2009. In addition, an addendum to the handbook, addressing ICE specific information, was implemented on March 31, 2010.
7. There is an annual review of the handbook by a designated committee or staff member.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> <li>Personal Items permitted to be retained by the detainee.</li> <li>Initial issue of clothes, bedding and personal hygiene items.</li> <li>How to access care.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The handbook fails to explain each classification level.
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook states that the medical examination is conducted during the intake process.
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

# **PART 6 - 34. DETAINEE HANDBOOK**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meal times are described in an addendum (effective March 31, 2010) to the handbook.
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As indicated in the handbook, commissary times and schedules are posted in the living units.
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The handbook does not describe the library location. The information is provided on the housing unit bulletin board.
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A list of pro bono legal organizations is available in the housing units. The facility does not provide group legal rights presentations.
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> <li>Prohibited acts and severity scale sanctions.</li> <li>Time limits in the Disciplinary Process.</li> <li>Summary of Disciplinary Process.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 6 - 34. DETAINEE HANDBOOK**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal (if used) and formal grievance procedures;</li> <li>• The appeals process;</li> <li>• In CDFs procedures for filing an appeal of a grievance with ICE.</li> <li>• Staff/detainee availability to help during the grievance process.</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are not required to offer guidance in the handbook for filing an appeal of a grievance with ICE. Locally, the Warden receives grievance appeals. The National Detainee Handbook provides information concerning staff/detainee availability to assist during the grievance process. Additionally, information is provided in the handbook regarding how to contact ICE. ICE staff are also at the facility twice per week.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in general population and segregation must submit a Sick Call Request form.
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> <li>• Outdoor recreation hours.</li> <li>• Indoor recreation hours.</li> <li>• In dorm leisure activities.</li> <li>• Rules for television viewing.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility does not use a color coded uniform system so that handbook does not describe the meaning of color-coded uniforms.
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility orientation is presented orally in English and Spanish. Translation services are available for detainees who speak other languages.

**PART 6 - 34. DETAINEE HANDBOOK**

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

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

The facility sufficiently meets the requirements of this standard.

(b)(6), (b)(7)(C) October 14, 2010

Reviewer's Signature / Date

**PART 6 – 35. GRIEVANCE SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information concerning the facility's informal and formal grievance systems is provided in the facility handbook.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal and formal grievance procedures;</li> <li>• The appeals process and step-by-step procedures;</li> <li>• Staff/detainee availability to help during the grievance process</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Justice.</li> <li>• How to file an emergency grievance.</li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All requirements of this component are met with the exception that the handbook fails to explain how to file an emergency grievance.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> <li>• Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>• Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> <li>• If not, an alternative acceptable record keeping system is maintained.</li> <li>• "Nuisance complains" are identified in the records.</li> <li>• For quality control purposes, staff document nuisance complaints received but not filed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Separate logs are maintained for informal and formal grievances and nuisance complaints are identified.

**PART 6 – 35. GRIEVANCE SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff are required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff comply with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are required to report allegations of officer misconduct to a supervisor. No documentation, concerning allegations of officer misconduct, was noted during the inspection.
14. <u>In SPCs and CDFs</u> , when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> <li>In all facilities written procedures cover detainee appeals and are included in the detainee handbook</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is an IGSA facility. As explained in the facility handbook, detainees may submit grievance appeals to the Warden.
15. <u>In SPCs/CDFs</u> , the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGSA facilities are not required to comply with this component. At this facility, detainees have seven days (after an incident) to file a formal grievance

**PART 6 – 35. GRIEVANCE SYSTEM**

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

The facility satisfactorily complies with the standard.

(b)(6), (b)(7)(C) October 14, 2010

Reviewer's Signature / Date

**PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The issue of a designated law library is addressed in local policy 14-8, Access to Courts.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> <li>In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexis Nexis electronic law library.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees have access to the Lexis Nexis electronic law library.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> <li>Operable computers and printers, in sufficient numbers in order to provide access</li> <li>Photocopiers, and</li> <li>Supplies for both.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Computers, printers, photocopiers and supplies are available in the law library.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8. ICE recently provided the facility with disks for detainees to use to save legal work in a private electronic format.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is an employee of the FCC assigned as the library supervisor. The library supervisor works closely with ICE regarding updates, equipment needs, etc., for ICE detainees.



**PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library schedule for the FCC provides approximately 12.5 hours per week access for ICE detainees in the general population (M-F, 8 a.m.-10:30 a.m.). ICE detainees in segregation may also request access to the law library but would be scheduled during different times of the day in order to be separated from other detainees for security purposes.
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8.
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8.
13. Staff ensure that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8.
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8.
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8.
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library supervisor was in the process of documenting a request for denial of an ICE detainee during the review.
17. Facility staff inform ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library supervisor coordinates with ICE regarding any denial of access to an ICE detainee.
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-8, Access to Courts.
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 16-1, Correspondence Procedures.

**PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL**

☒ Meets Standard

☐ Does Not Meet Standard

☐ N/A

☐ Repeat Finding

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

The facility has a designated law library and a full time law library supervisor. The law library is equipped with an updated version of Lexis Nexis. All components of the standard for Law Libraries and Legal Material are being met.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input checked="" type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE/DRO Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff permit presenters to distribute ICE/DRO-approved materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff are present but do not monitor conversations with legal providers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS				
This Detention Standard protects detainees' rights by ensuring their access to information presented by authorized persons and organizations for the purpose of informing them of U.S. immigration law and procedures.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input checked="" type="checkbox"/> Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.				
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

No group legal rights presentations were conducted at this facility during the prior 12 months.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer's Signature / Date

## **Section VII ADMINISTRATION & MANAGEMENT**

**38 Detention Files**

**39 News Media Interviews and Tours**

**40 Staff Training**

**41 Transfer of Detainees**



**PART 7 – 38. DETENTION FILES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local policy 6-1, Inmate/Resident/Student Files, addresses detention files. The detention files were reviewed.
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detention files for ICE detainees contained appropriate forms generated during the admissions process.
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> <li>• Special requests</li> <li>• Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay</li> <li>• Disciplinary forms/Segregation forms</li> <li>• Grievances, complaints, and the disposition(s) of same</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The files contained all pertinent information.
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Files here are maintained in a secured area.
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff add copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Appropriate staff have access to the Detention Files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detention files do not leave the secure file room absent a request submitted to the records office staff. Files are logged out; the log was reviewed.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Computers are password protected.
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This requirement is found in FCC policy 6-1.
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 7 – 38. DETENTION FILES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pursuant to policy 6-1, the facility coordinates file retention with ICE.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>PART 7 – 38. DETENTION FILES</b>				
<input checked="" type="checkbox"/> <b>Meets Standard</b> <input type="checkbox"/> <b>Does Not Meet Standard</b> <input type="checkbox"/> <b>N/A</b> <input type="checkbox"/> <b>Repeat Finding</b>				

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

Detention files are created for each assigned ICE detainee and maintained in a secure file room in the administrative offices of the facility. A sign-out system is in place for accountability purposes. Detainees sign a release of information consent form before any information may be released from their files. The FCC meets the Standard for Detention Files.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS**

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The local policy 14-3 addresses this component. ICE detainees would be transferred to FDC Florence for the purpose of media interviews.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE reviews and approves all requests for media interviews with ICE detainees. Detainees approved for a media interview are routinely transferred to the FDC for the interview.
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component was confirmed by ICE staff.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in FCC policy 14-3.
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> <li>A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action.</li> <li>All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director.</li> <li>All material generated from such a press pool is made available to all news media, without right of first publication or broadcast.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policy 14-3 addresses the issue of press pools. ICE staff confirmed that the component is being met.

**PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS**

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

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

All requests for interviews with ICE detainees or media tours are reviewed and approved by ICE. If approved, ICE staff facilitates the proper protocol for the visit and/or tour. Routinely, ICE detainees approved for a media interview are transferred to FDC Florence for the interview. The requirements for the Standard for News Media Interviews and Tours are being met.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.1, effective October 25, 2007, describes the comprehensive training program that includes all aspects of the component.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a full-time training supervisor who has completed a corporate training program and a training for trainers' course.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The 2010 training plan was approved by the Warden on December 1, 2009.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> <li>• Individual training folders,</li> <li>• Other training records systems, and/or</li> <li>• Electronic systems.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual training records are electronically maintained.

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Each new employee, contractor, and volunteer is provided an orientation prior to assuming duties. While tailored specifically for staff, contractors, and volunteers, the orientation programs include, at a minimum:</p> <ul style="list-style-type: none"> <li>• Working conditions</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Code of ethics</li> <li>• Personnel policy manual</li> <li>• Employees' rights and responsibilities</li> <li>• Drug-free Workplace</li> <li>• Health-related emergencies</li> <li>• Signs of Suicide risk and precautions</li> <li>• Suicide prevention and intervention</li> <li>• Hunger strikes</li> <li>• Use of Force</li> <li>• Keys and Locks</li> <li>• Overview of the criminal justice system</li> <li>• Tour of the facility</li> <li>• Facility goals and objectives</li> <li>• Facility organization</li> <li>• Staff rules and regulations</li> <li>• Sexual harassment/sexual misconduct awareness</li> <li>• Personnel policies</li> <li>• Program overview</li> <li>• Orientation and training on detainee handbook and detainee rights.</li> <li>• Requirement of special-needs detainees.</li> <li>• National Detention Standards</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contractors and volunteers complete a 40--hour initial orientation program that includes the listed subjects.



**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Clerical/support employees who have minimal detainee contact receive a minimum of:</p> <ul style="list-style-type: none"> <li>• Working conditions</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Code of ethics</li> <li>• Personnel policy manual</li> <li>• Employees' rights and responsibilities</li> <li>• Overview of the criminal justice system</li> <li>• Tour of the facility</li> <li>• Facility goals and objectives</li> <li>• Facility organization</li> <li>• Staff rules and regulations</li> <li>• Sexual harassment/sexual misconduct awareness</li> <li>• Personnel policies</li> <li>• Program overview</li> <li>• National Detention Standards.</li> <li>• Key and Lock Control.</li> <li>• Suicide risk and prevention.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clerical staff complete the initial 40-hour training program and annual training. The listed subjects are included in the training.

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. Full-time health care employees receive at least 40 hours of formal orientation before undertaking their assignments. At a minimum, the orientation program includes:</p> <ul style="list-style-type: none"> <li>• The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations</li> <li>• Key control; appropriate conduct with detainees</li> <li>• Responsibilities and rights of employees</li> <li>• Standard precautions</li> <li>• Occupational exposure</li> <li>• Personal protective equipment</li> <li>• Bio-hazardous waste disposal</li> <li>• Overview of the detention operations.</li> <li>• National Detention Standards.</li> <li>• Medical grievance procedures and protocol.</li> <li>• Requirement for special needs detainees.</li> <li>• Code of Ethics</li> <li>• Drug free workplace</li> <li>• Hostage situations and staff conduct if taken hostage.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Full time health care professionals receive 40 hours of initial training including the listed subjects. In addition, each is required to complete an advanced cardiac life support training program (24 hour course).</p>

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> <li>• Security procedures and regulations</li> <li>• Supervision of detainees</li> <li>• Searches of detainees, housing units, and work areas</li> <li>• Signs of suicide risk, precaution, prevention and intervention.</li> <li>• Code of Ethics</li> <li>• Health-related emergencies</li> <li>• Drug-free workplace</li> <li>• Suicide precautions</li> <li>• Self-defense techniques</li> <li>• Use-of-force regulations and tactics</li> <li>• Report writing</li> <li>• Detainee rules and regulations</li> <li>• Key control</li> <li>• Rights and responsibilities of detainees</li> <li>• Safety procedures</li> <li>• Emergency plans and procedures</li> <li>• Interpersonal relations</li> <li>• Social/cultural lifestyles of the detainee population</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Communication skills</li> <li>• Cardiopulmonary resuscitation (CPR)/first aid</li> <li>• Counseling techniques</li> <li>• Sexual abuse/assault awareness</li> <li>• National Detention Standards.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Security personnel receive 40 hours of initial orientation training, 40 hours of on-the-job training, and 32 hours of emergency response training. In addition to the listed topics, other training received includes firearms training/qualification and chemical agent training/ qualification.</p>
<p>11. (b)(7)e receive:</p> <ul style="list-style-type: none"> <li>• Specialized training before undertaking their assignments.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>(b)(7)e receive initial training and bi-monthly training.</p>
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> <li>• Management and Supervisory training</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Management and supervisory staff must complete a forty-hour Sandberg Foundation Leadership program and a 24-hour Foundations of Leadership Workshop. In addition, each must complete 12 monthly leadership skills assignments.</p>

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. <b>(MANDATORY)</b> Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional staff are required to receive firearms training. Training records were reviewed during the inspections.
14. <b>(MANDATORY)</b> All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Firearm qualifications are required annually. The control center maintains a list of staff qualified to use firearms.
15. <b>(MANDATORY)</b> Personnel authorized to use (b)(7)e (b)(7)e receive training in the use of chemical agents and in the treatment of individuals exposed to a (b)(7)e before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional staff receive the training. A list of qualified staff is maintained in the control room.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using illegal drugs.</li> <li>• Possessing illegal drugs except in the authorized performance of official duties.</li> <li>• Procedures to be used to ensure compliance.</li> <li>• Opportunities available for treatment and/or counseling for drug abuse.</li> <li>• Penalties for violation of the policy.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff, contractors, and volunteers sign a statement acknowledging their completion of the drug-free work program.
17. New staff are required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. All staff are trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: <ul style="list-style-type: none"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using their official positions to secure privileges for themselves or others.</li> <li>• Engaging in activities that constitute a conflict of interest.</li> <li>• Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family.</li> <li>• Acceptable behavior in the areas of campaigning, lobbying or political activities.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. <b>(MANDATORY)</b> All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes: <ul style="list-style-type: none"> <li>• Recognizing of signs of potential health emergencies and the required responses.</li> <li>• Administering first aid and cardiopulmonary resuscitation (CPR).</li> <li>• Obtaining emergency medical assistance through the facility plan and its required procedures.</li> <li>• Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency.</li> <li>• The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff, with assistance from the American Heart Association, provide the training as specified in the component.
21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include: <ul style="list-style-type: none"> <li>• Understanding that sexual abuse or assault is never an acceptable consequence of detention.</li> <li>• Recognizing housing or other situations where sexual abuse or assault may occur.</li> <li>• Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences.</li> <li>• Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> <li>Identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>Responding to suicidal and depressed detainees,</li> <li>Communication between correctional and health care personnel,</li> <li>Referral procedures,</li> <li>Housing observation and suicide-watch level procedures, and</li> <li>Follow-up monitoring of detainees who have attempted suicide.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive two hours of training in Suicide Prevention and Intervention which includes the topics listed in the component.
23. All staff are trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. All staff are trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff are issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Key Control Officer provides the training.
<p>25. Through ongoing (at least annual) training, all detention facility staff are made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include:</p> <ul style="list-style-type: none"> <li>The requirements of this Detention Standard</li> <li>The use of force continuum</li> <li>Communication techniques</li> <li>Cultural diversity</li> <li>Dealing with the mentally ill</li> <li>Confrontation-avoidance techniques</li> <li>Approved methods of self-defense</li> <li>Force cell-move techniques</li> <li>Communicable diseases, particularly precautions to be taken for use of force</li> <li>Application of restraints (progressive and hard)</li> <li>Reporting procedures.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receive annual training including the listed subjects.

PART 7 – 40. STAFF TRAINING				
This Detention Standard ensures that staff, contractors, and volunteers are competent in their assigned duties by requiring that they receive initial and ongoing refresher training.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff may complete nine elective hours (free of charge) at the Central Arizona Community College.
PART 7 – 40. STAFF TRAINING				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

Remarks: *(Record significant facts, observations, other sources used, etc.)*  
 The facility complies with the requirements of this standard.

(b)(6), (b)(7)(C) / October 14, 2010

Reviewer's Signature / Date <b>PART 7 - 41. TRANSFER OF DETAINEES</b>				
This Detention Standard ensures that transfers of detainees from one facility to another are professionally and responsibly managed in regard to notifications, detainee records, safety and security, and protection of detainee funds and personal property.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> <li>The notification is recorded in the detainee's file</li> <li>When the A-File is not available, notification is noted within ENFORCE.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All transfers of ICE detainees are coordinated by ICE.
2. Notification includes the reason for the transfer and the location of the new facility,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Facility policy mandates that: <ul style="list-style-type: none"> <li>Times and transfer plans are never discussed with the detainee prior to transfer.</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility.</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FCC policies 13-64, Off-Site Care/Consultations; 21-101, Out-to-Court Procedures; and 9-18, Transportation, address the requirements of this component.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Form G-391 is provided by ICE.
8. For medical transfers: <ul style="list-style-type: none"> <li>The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer.</li> <li>Medical transfers are coordinated through the local ICE/DRO office.</li> <li>A medical transfer summary is completed and accompanies the detainee.</li> <li>Detainee is issued a minimum of 7 days worth of prescription medications.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All medical transfers are arranged through DIHS who makes the arrangements with ICE to facilitate the move. Detainees are transferred from the facility with 7 days of medication and a transfer summary.
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer's Signature / Date <b>PART 7 - 41. TRANSFER OF DETAINEES</b>				
This Detention Standard ensures that transfers of detainees from one facility to another are professionally and responsibly managed in regard to notifications, detainee records, safety and security, and protection of detainee funds and personal property.				
Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only detainees' funds are "stored" at the FCC. Valuables and property are stored at the FDC.
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A-files are handled by ICE. No A-files are maintained at the FCC.
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A-files are not maintained at the FCC. A-files would be forwarded from the FDC to another receiving facility.
<b>PART 7 - 41. TRANSFER OF DETAINEES</b>				
<input checked="" type="checkbox"/> <b>Meets Standard</b> <input type="checkbox"/> <b>Does Not Meet Standard</b> <input type="checkbox"/> <b>N/A</b> <input type="checkbox"/> <b>Repeat Finding</b>				

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

ICE manages transports for ICE detainees assigned to the FCC. All detainees assigned to the FCC come from the FDC and all detainees departing the FCC go through the FDC. The requirements of the standard for Transfer of Detainees are being met. This checklist was completed with the assistance of (b)(6), (b)(7)(C) ICE Enforcement Agent, Compliance Team Member.

(b)(6), (b)(7)(C) / October 14, 2010  
 Reviewer's Signature / Date



**A. Type of Facility Reviewed**

<input type="checkbox"/>	ICE Service Processing Center
<input type="checkbox"/>	ICE Contract Detention Facility
<input checked="" type="checkbox"/>	ICE Intergovernmental Service Agreement

**B. Current Inspection**

Type of Inspection	
<input type="checkbox"/> Field Office	<input checked="" type="checkbox"/> HQ Inspection
Date[s] of Facility Review	
October 12-14, 2010	

**C. Previous/Most Recent Facility Review**

Date[s] of Last Facility Review	
October 13-15, 2009	
Previous Rating	
<input type="checkbox"/> Superior	<input checked="" type="checkbox"/> Good
<input type="checkbox"/> Acceptable	<input type="checkbox"/> Deficient
<input type="checkbox"/> At-Risk	

**D. Name and Location of Facility**

Name	Florence Correctional Center
Address (Street and Name)	1100 Bowling Road
City, State and Zip Code	Florence, AZ 85132
County	Pinal
Name and Title of Facility Administrator (Warden/OIC/Superintendent)	(b)(6), (b)(7)(C) Warden
Telephone # (Include Area Code)	520-8686, (b)(7)(C)
Field Office / Sub-Office (List Office with oversight responsibilities)	Phoenix, AZ
Distance from Field Office	60 miles

**E. ICE Information**

Name of Inspector (Last Name, Title and Duty Station)	(b)(6), (b)(7)(C) CI / MGT of America
Name of Team Member / Title / Duty Location	(b)(6), (b)(7)(C) CI-Medical / MGT of America
Name of Team Member / Title / Duty Location	(b)(6), (b)(7)(C) Safety & Food Service / MGT of America
Name of Team Member / Title / Duty Location	(b)(6), (b)(7)(C) Security / MGT of America
Name of Team Member / Title / Duty Location	/ /

**F. CDF/IGSA Information Only**

Contract Number	Date of Contract or IGSA
ODT-9-C-0001	October 1, 2008
Basic Rates per Man-Day	
87.26	
Other Charges: (If None, Indicate N/A)	
N/A ; ;	
Estimated Man-days Per Year	
77261	

**G. Accreditation Certificates**

List all State or National Accreditation[s] received:
ACA
<input type="checkbox"/> Check box if facility has no accreditation[s]

**H. Problems / Complaints (Copies must be attached)**

The Facility is under Court Order or Class Action Finding	
<input type="checkbox"/> Court Order	<input type="checkbox"/> Class Action Order
The Facility has Significant Litigation Pending	
<input type="checkbox"/> Major Litigation	<input type="checkbox"/> Life/Safety Issues
<input checked="" type="checkbox"/> Check if None.	

**I. Facility History**

Date Built	1999
Date Last Remodeled or Upgraded	N/A
Date New Construction / Bedspace Added	2004 366
Future Construction Planned	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date: N/A	
Current Bedspace	Future Bedspace (# New Beds only)
1824	Number: 0 Date: N/A

**J. Total Facility Population**

Total Facility Intake for previous 12 months
14507
Total ICE Mandays for Previous 12 months
77261

**K. Classification Level (ICE SPCs and CDFs Only)**

	L-1	L-2	L-3
Adult Male			
Adult Female			

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	1918	1584	1918
Adult Female	369	240	369
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	193	837	503
Adult Female	0	369	0

**N. Facility Staffing Level**

Security:	Support:
(b)(7)(E)	(b)(7)(E)



### Significant Incident Summary Worksheet

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar 2010	Apr – Jun 2010	Jul – Sept 2010	Oct – Dec 2009
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	PHYSICAL	PHYSICAL	PHYSICAL	PHYSICAL
	With Weapon	1	1	0	0
	Without Weapon	8	8	14	7
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	PHYSICAL	PHYSICAL	PHYSICAL	PHYSICAL
	With Weapon	0	0	0	0
	Without Weapon	1	1	1	1
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		5	7	10	2
Disturbances <sup>4</sup>		2	0	0	0
Number of Times Chemical Agents Used		0	6	7	0
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)	N/A	N/A	N/A	N/A
Number of Times Canines Used in Facility		0 for ICE	0 for ICE	0 for ICE	0 for ICE
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	9	16	0	36
	# Resolved in favor of Offender/Detainee	0	0	N/A	4
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	N/A	N/A
	Number	0	0	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	80	64	101	80
	# Psychiatric Cases referred for Outside Care	0	0	0	0

<sup>1</sup> Any attempted physical contact or physical contact that involves two or more offenders

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

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

<sup>4</sup> Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

## DHS/ICE Detention Standards Review Summary Report

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

## LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name) (b)(6), (b)(7)(C)	Signature
Title & Duty Location Lead Compliance Inspector, MGT of America	Date October 14, 2010

Team Members	
Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Medical, MGT of America Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Security, MGT of America Print Name, Title, & Duty Location	Print Name, Title, & Duty Location (b)(6), (b)(7)(C) CI-Safety & Food Service, MGT of America Print Name, Title, & Duty Location Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

**Recommended Rating:**

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

Comments:

(b)(7)e

There have been no deaths at the FCC during the prior 12 months.

Per the Significant Incident Summary and as confirmed per the clinical supervisor, there have been no successful suicides or ICE detainee suicide attempts at this facility in the past 12 months. One ICE detainee threatened suicide when his deportation took longer than he expected. He was placed on suicide watch, assessed daily by mental health staff and released after two days. A second ICE detainee threatened suicide and was placed on suicide watch for one day. The psychiatrist determined that neither detainee was suicidal or mentally ill. A third ICE detainee diagnosed as mentally ill, threatened suicide and was transferred out of the facility by ICE after three weeks on watch status. Mental health assessments on these detainees were documented in the medical record. A review of detainee medical records confirmed documentation of the detainee's status on Monitoring Forms at least every 15 minutes. None of the detainees caused self-harm. In August of 2010, a non-ICE detainee with a history of

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depression attempted suicide by cutting his arms after receiving bad news. He was evaluated by medical staff and transported to the local hospital for sutures. Upon his return to the facility, he was placed on watch status and evaluated by mental health staff. He was released from watch, but continues to be monitored by mental health staff.