Condition of Confinement Review Worksheet

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

This Form to be used for Inspections of all Facilities Used Over 72 Hours



ICE Detention Standards Review Worksheet

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

SECTION I DETAINEE SERVICES STANDARDS

ACCESS TO LEGAL MATERIALS

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

COMPONENTS	YES	No	NA	REMARKS
The facility provides a designated law library for detainee use.	\boxtimes			The law library is located in the central corridor of the facility in an area assessable to the detainee population.
The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.	\boxtimes			Attachment A is posted and all materials are available.
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.	\boxtimes			There are (b)(7)(e) work tables, b)(7)(e)computer work stations, and a printer/copier work station. There is seating for approximately 20 detainees.
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	\boxtimes			
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	\boxtimes			A LexisNexis station is provided.
Where provided, the Lexus Nexus library is updated and is current.	\boxtimes			The LexisNexis stations had the updated 12/09 version.
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.	\boxtimes			
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine basis.	\boxtimes			The facility has a designated law librarian who manages and supervises law library operations. Files and documentation were readily available.
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.	\boxtimes			Facility policy 200.09, Law Library/Recreation Library, explains this process. In addition, page 10 of the detainee handbook gives law library hours and procedures.
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within $3-5$ business days.	\boxtimes			A Detainee Request Form is used for this purpose.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	\boxtimes			
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.	\boxtimes			Efforts would be made to obtain these types of legal materials, if requested. The request may be forwarded to ICE for assistance.
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.	\boxtimes			
Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	\boxtimes			The law librarian may take requested legal materials to the SMU. However, access to the law library is not prohibited.

ACCESS TO LEGAL MATERIALS							
POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS.							
COMPONENTS	YES	No	NA	REMARKS			
All denials of access to the law library fully documented.	\boxtimes			Denials would be documented through the disciplinary process.			
Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	\boxtimes						
Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	\boxtimes			This topic is covered in staff training. Detainees have unimpeded access to the legal system and the facility administrative process.			
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING			

The facility has a large law library which contains all of the legal resources identified on Attachment A legal resources as well as LexisNexis. The law library maintains documentation that revealed consistent use by the detainee population. Observation of the law library during open hours as well as interviews with detainees confirmed compliance with this standard.

(b)(6), (b)(7)c / April 8, 2010 AUDITOR'S SIGNATURE / DATE

ADMISSION AND RELEASE

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

COMPONENTS	YES	No	NA	REMARKS
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.				All elements of this component are covered during the orientation period. The detainee signs a form regarding access to ICE staff as well as a receipt for the detainee handbook. Videos are shown to supplement information provided.
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	\boxtimes			Medical screenings are performed for every intake. The questionnaire is completed and filed in the detention files. If a medical issue is identified, there is an immediate referral to the medical department.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	\boxtimes			The facility uses an objective based classification system which identifies threat factors that establish the security level. ICE Form 213 is used.
(b)(7)e				If a datain also proports is last a CEO
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	\boxtimes			If a detainee's property is lost, a GEO KCCC Disposition of Personal Property form is completed.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	\boxtimes			

ADMISSION AND RELEASE POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY. No COMPONENTS YES NA REMARKS The facility provides and replenishes personal hygiene items as \boxtimes needed. Gender-specific items are available. ICE Detainees are not charged for these items. All releases are properly coordinated with ICE using a Form I-203. Release documents including Form I-203 were found in the archived X detention files. Staff completes paperwork/forms for release as required. In addition to the Form I-203, a GEO KCCC Offender Release form is used, \boxtimes with an attachment Disposition of Personal Property.

REMARKS:

The facility complies with the NDS regarding Admission and Release administers the admission and release program in compliance with the standard.

AT-RISK

DEFICIENT

REPEAT FINDING

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

 \boxtimes ACCEPTABLE

CLASSIFICATION SYSTEM

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

COMPONENTS	YES	No	NA	REMARKS		
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	\boxtimes			The facility uses the U.S. Immigration and Customs Enforcement Detainee Classification System (Primary and Secondary), ICE Form 213.		
The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision.	\boxtimes					
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	\boxtimes					
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.	\boxtimes			The initial security evaluation includes a score derived from the severity of most recent charges, serious offense history, escape history, and other special management concerns (e.g. psychological impairment, suicide risk, violent threat, etc.).		
Housing assignments are based on classification-level.	\boxtimes			Housing assignment is based on the classification level, level 1, level 2, level 3 or administrative segregation.		
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.	\boxtimes					
Detainee work assignments are based upon classification designations.	\boxtimes					
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	\boxtimes			Policy 300.02, Offender Intake/Classification Procedures, requires a classification level reassessment every 60 days. A detainee may request a reassessment at any time.		
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	\boxtimes			Appeal procedures are described in the detainee handbook, page 3, Classification, Section 5.		
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.	\boxtimes			Classification appeals are initiated through the facility grievance system.		
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	\boxtimes					
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	\boxtimes			The detainee handbook, page 3, Classification Conditions and Restrictions, explains the classification levels.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

The classification system uses appropriate risk factors to establish a security level. Housing assignments, job assignments, and other programming activities are based on the detainee's security level.

(b)(6), (b)(7)c April 8, 2010

CORRESPONDENCE AND OTHER MAIL

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

COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	\boxtimes			Rules are provided in the detainee handbook, page 13, Correspondence Information.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	\boxtimes			The detainee handbook and several postings are provided in Spanish.
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	\boxtimes			Policy 200.10 Offender Mail, requires distribution within 24 hours excluding weekends and holidays.
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	\boxtimes			
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.	\boxtimes			Staff is authorized by the Warden in Policy 200.10 to open and inspect incoming general correspondence.
Staff does not read incoming general correspondence without the Warden's prior written approval.	\boxtimes			
(b)(7)e		(b)(7)e		(b)(7)e
Staff is prohibited from reading or copying incoming special correspondence.	\boxtimes			
(b)(7)e		(b)(7)e	;	(b)(7)e
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	\boxtimes			Policy 200.10 lists the types of mail which is considered "special" or 'legal." Politicians and representatives of the media are included in this list.
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	\boxtimes			The facility uses a "Notice of Rejection of Mail" form. This notification is sent to both the sender and the addressee.
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	\boxtimes			
	(b)(7)e			

CORRESPONDENCE AND OTHER MAIL							
POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SEND AND RECEIVE CORRESPONDENCE IN A TIMELY MANNER, SUBJECT TO LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE FACILITY. OTHER MAIL WILL BE PERMITTED, SUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WIDELY DISTRIBUTE ITS GUIDELINES CONCERNING CORRESPONDENCE AND OTHER MAIL.							
(b)(7)e		(b)(7)e		(b)(7)e			
The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	\boxtimes			The facility uses a Mail Form for Cash Received to document and record the removal of funds from incoming mail. The money is deposited in the detainee's trust fund account, and the form is forwarded to the detainee.			
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.	\boxtimes			Documentation was provided to verify this component.			
Staff provides the detainee a copy of his/her identity document(s) upon request.	\boxtimes						
(b)(7)e	(b)(7)e			(b)(7)e			
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.							
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	\boxtimes						
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	\boxtimes						
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The facility uses several forms to document activities relating to mail operations. Outgoing mail is placed in the collection box unsealed so staff may conduct a cursory inspection.

(b)(6), (b)(7)c April 8, 2010 AUDITOR'S SIGNATURE / DATE

DETAINEE HANDBOOK

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

ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK	UPON AI	OMISSIO	N TO TH	IE FACILITY.
COMPONENTS	YES	No	NA	REMARKS
The detainee handbook is written in English and translated into Spanish, or into the next most-prevalent Language(s).	\boxtimes			
The handbook is supplemented by the facility orientation video, where one is provided.	\boxtimes			
All staff members receive a handbook and training regarding the handbook contents.	\boxtimes			
The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	\boxtimes			
There an annual review of the handbook by a designated committee or staff member.	\boxtimes			Revisions are conducted annually, or as needed. The last update was completed during the inspection. Reviews are conducted by each department, and a final review is conducted by the Warden.
The detainee handbook addresses the following issues: • Personal Items permitted to be retained by the detainee; and • Initial issue of clothes, bedding and personal hygiene items.	\boxtimes			
The detainee handbook states in clear language the basic detainee responsibilities.	\boxtimes			
The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	\boxtimes			
The handbook states when a medical examination will be conducted.	\boxtimes			Page 2 of the detainee handbook advises that a medical examination will be conducted within fourteen days of arrival.
The handbook describes the facility, housing units, dayrooms, in-dorm activities, and special housing units.	\boxtimes			
The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying procedures, and expected personal hygiene practices.	\boxtimes			
The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court will be afforded the opportunity to shave first.	\boxtimes			
The handbook describes barber hours and hair cutting restrictions.	\boxtimes			
The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	\boxtimes			Telephone calls are limited to 20 minutes which alleviates high demand.
The handbook addresses religious programming.	\boxtimes			
The handbook states times and procedures for commissary or vending machine usage, where available.	\boxtimes			Commissary schedules are posted in the housing units.
The handbook describes the detainee voluntary work program.	\boxtimes			
The handbook describes the library location and hours of operation, and law library procedures and schedules.	\boxtimes			

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINE								
DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT T								
PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS								
ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY. COMPONENTS VES. No. NA. DEMARKS								
COMPONENTS The least tension of the second	YES	No	NA	REMARKS				
The handbook describes attorney and regular visitation hours,	\boxtimes							
policies, and procedures. The handbook describes the facility contraband policy.	\boxtimes							
The handbook describes the facility visiting hours and								
schedule, and visiting rules and regulations.	\boxtimes							
The handbook describes the correspondence policy and	\boxtimes							
procedures.								
The handbook describes the detainee disciplinary policy and								
procedures, including:								
 Prohibited acts and severity scale sanctions; 	\boxtimes							
 Time limits in the Disciplinary Process; and 								
 Summary of the Disciplinary Process. 								
The grievance section of the handbook explains all steps in the								
grievance process – Including:								
 Informal (if used) and formal grievance procedures; 								
 The appeals process; 								
 In CDF facilities: procedures for filing an appeal of a 				The handbook states detainees may submit				
grievance with ICE.	\boxtimes	Ιп		staff complaints to ICE officials during their				
 Staff/detainee availability to help during the grievance 				weekly visit or thru the DHS-OIG hotline.				
process.				weekly visit of that the D115-010 houme.				
 Guarantee against staff retaliation for filing/pursuing a 								
grievance.								
 How to file a complaint about officer misconduct with 								
the Department of Homeland Security.								
The detainee handbook describes the medical sick call	\boxtimes	l 🖂						
procedures for general population and segregation.								
The handbook describes the facility recreation policy including:		l	l					
 Outdoor recreation hours. 	\boxtimes							
Indoor recreation hours.								
The handbook describes the detainee dress code for daily	\boxtimes	l 🖂						
living; and work assignments.								
The handbook specifies the rights and responsibilities of all	\boxtimes							
detainees.								
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DETAINEE HANDBOOK

REMARKS:

The detainee handbook is revised as necessary. A copy is provided to the detainee during intake processing at the facility. This process ensures that the handbook provided is current.

(b)(6), (b)(7)c April 8, 2010

FOOD SERVICE POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. YES No NA REMARKS COMPONENTS The food service program is under the direct supervision of a The Food Service Administrator has professionally trained and certified food service completed a certified training course in Food administrator. Responsibilities of cooks and cook foremen \times Management from the Beaumont are in writing. The Food Service Administrator (FSA) Environmental Health Division. determines the responsibilities of the Food Service Staff. The Cook Supervisor is on duty on days when the FSA is off \times duty and vice versa. The FSA provides food service employees with training that At the time of the inspection, the Food Service specifically addresses detainee-related issues. \boxtimes Administrator did not have a copy of the NDS In ICE Facilities this includes a review of the ICE regarding Food Service. "Food Service" standard (b)(7)eWhen necessary, special procedures govern the handling of \times food items that pose a security threat. Operating procedures include daily searches (shakedowns) \times of detainee work areas. The FSA monitors staff implementation of the facility's The facility's count procedures are covered population counts procedures. Staff is trained in count \times during the 120 hour orientation pre-service training. The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with \times the "Food Service" standard. The FSA annually reviews detainee-volunteer \times descriptions to ensure they are accurate and up-to-date. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food \times service department. During orientation and training session(s), the CS explains and demonstrates: Safe work practices and methods; Safety features of individual products/pieces of \times equipment; and Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. The Cook Supervisor documents all training in individual \times detainee detention files. Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at \times IGSAs are subject to local and state rules and regulations regarding detainee pay. Detainees are served at least two hot meals every day. No Detainees are served three hot meals each day. \times more than 14 hours elapse between the last meal served and The evening meal is served at 6:00 PM and the first meal of the following day. breakfast is served at 5:30 AM.

FOOD SERVICE

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

COMPONENTS	YES	No	NA	REMARKS
For cafeteria style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.			\boxtimes	This facility utilizes satellite feeding procedures only.
The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	\boxtimes			This facility utilizes a six week menu cycle.
The FSA or facility considers the ethnic diversity of the facility's detainee population when developing menu cycles (Provide examples).	\boxtimes			The menu includes eggs with chorizo, corn dogs, fish, tacos, turnip greens, combread, green chili and chicken fried steak.
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	\boxtimes			
The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	\boxtimes			
The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its justification With copy to FSA	\boxtimes			
All staff and volunteers know and adhere to written "food preparation" procedures.	\boxtimes			
Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	\boxtimes			
A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week; The common-fare menus satisfy nutritional recommended daily allowances (RDAs); Staff routinely provide hot water for instant beverages and foods; Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. A supervisor at the command level must approve a detainee's removal from the Common-Fare Program.	\boxtimes			The Chaplain, Warden and Food Service Administrator must approve a detainee's
The Warden, in conjunction with the chaplain and/or local religious leaders, provides the FSA a schedule of the ceremonial meals for the following calendar year.	\boxtimes			removal from the Common-Fare Program.

FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN

ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.				_
COMPONENTS	YES	No	NA	REMARKS
 The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	\boxtimes			
The food service program addresses medical diets.	\boxtimes			
Satellite-feeding programs follow guidelines for proper sanitation.		\boxtimes		Equipment not in use had food particles under and on the machines. After washing, food trays still had food residue on them.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.		\boxtimes		Hot food was plated at between 152 - 180 degrees. The food temperatures, when delivered, ranged from 118 - 138.9 degrees. No cold items were served during the meal observed. All meals were served within two hours of the food being plated in compliance with the NDS pg.20, G (1). The food carts used for satellite feeding are not enclosed and do not have locking devices which is a requirement of the NDS C2 (g). The food carts are transported from food service to the housing units by a correctional officer.
All meals are provided in nutritionally adequate portions.	\boxtimes			
Food is not used to punish or reward detainees based upon behavior.	\boxtimes			
The food service staff instructs detainee volunteers on: • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment.	\boxtimes			
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes			
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?	\boxtimes			The Food Service Administrator conducts inspections of all food service areas.
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?	\boxtimes			The most recent inspection of equipment was conducted on March 10, 2010 by b)(6), (b)(7) Fire and Safety Equipment Company. No concerns were identified during the inspection.
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is scheduled and completed.	\boxtimes			Any discrepancies are reported to the Safety Officer who forwards a report to the Warden to initiate corrective action.
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	\boxtimes			

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

FOOD SERVICE								
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN								
ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.								
COMPONENTS	YES	No	NA	REMARKS				
Staff documents the results of every refrigerator/freezer temperature check.	\boxtimes							
The cleaning schedule for each food service area is conspicuously posted.	\boxtimes							
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes							
Storage areas are locked when not in use.	\boxtimes							
☐ ACCEPTABLE ☐ DEFICIENT	☐ AT-RISK			REPEAT FINDING				

Overall, the facility complies with the NDS regarding Food Service with two exceptions. At the time of the inspection, the sanitation for the satellite feeding program was poor. It is recommended that the facility address and improve the sanitation so that food trays, after washing, are clean and have no residue remaining. It is also recommended that equipment used to prepare meals be kept clean.

The food service department is in the process of purchasing thermo covers for the carts utilized to transport meals to the housing units. The use of thermo covers will assist in maintaining the temperatures of hot food for a longer period of time between plating and serving.

(b)(6), (b)(7)c pril 8, 2010 AUDITOR'S SIGNATURE / DATE

FUNDS AND PERSONAL PROPERTY					
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.					
COMPONENTS	YES	No	NA	REMARKS	
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	\boxtimes			Detainee valuables are stored in the intake department.	
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	\boxtimes			Detainee clothing is secured in a building containing a property room which is separate from the intake department. The lieutenant and intake officers have access to the property room.	
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). <u>For IGSAs and CDFs</u> , using a personal property inventory form that meets the ICE standard?	\boxtimes				
Staff forwards an arriving detainee's medication to the medical staff.	\boxtimes			The intake officers label the medications with an identification number and then forward it to medical staff.	
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.		\boxtimes		There was no documentation to show audits of non-valuable property were conducted.	
(b)(7)e officers are present during the processing of detainee funds and valuables during in-processing to the facility. (b)(7)(e) officers verify funds and valuables.	\boxtimes				
(b)(7)e	(b)(7)e				
Staff procedures follow written policy for returning forgotten property to detainees.	\boxtimes			Facility policy 200.11 provides the procedures for forgotten property.	
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes				
Staff follows written procedures when returning property to detainees.	\boxtimes			Facility policy 200.11 provides the procedures for returning property.	
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes				
 The facility attempts to notify an out-processed detainee that he/she left property in the facility: By sending written notice to the detainee's last known address; Via certified mail; and The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 		\boxtimes		Any property left at the facility is given to ICE staff for processing.	
The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.					
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING	

When attempts to return property to detainees fail, the property is turned over to ICE staff for processing.

(b)(6), (b)(7)c April 8, 2010 AUDITOR'S SIGNATURE / DATE

DETAINEE GRIEVANCE PROCEDURES

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

COMPONENTS	YES	No	NA	REMARKS
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	\boxtimes			Grievance procedures are included in the detainee handbook and facility policy 200.20.
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	\boxtimes			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	\boxtimes			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.		\boxtimes		There have been no cases reported of staff misconduct or harassment.
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed.	\boxtimes			
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RIS	SK		REPEAT FINDING

REMARKS:

The Grievance Coordinator responses to all grievances.

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

GROUP LEGAL RIGHTS PRESENTATIONS POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF DETAINES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND ORDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT. CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS. MARK STANDARD AS ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET. COMPONENTS No NA REMARKS YES The Field Office is responsive to requests by attorneys and accredited X representatives for group presentations. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification \bowtie to attorneys or accredited representatives. The facility follows policy and procedure when rejecting or requesting Any material submitted to the modifications to objectionable material provided or presented by the \times facility is approved by ICE prior attorney or accredited representative. to distribution. There have been no formal presentations in the units or in classrooms. Legal Rights Posters announcing presentations appear in common areas at least 48 \times Presentations at this facility are hours in advance and sign-up sheets are available and accessible. provided and viewed by individuals or small groups during the intake process. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the \bowtie When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so \bowtie that all detainees signed up may attend. Detainees in segregation, unable to attend for security reasons, may request separate sessions with presenters. Such requests are \bowtie documented. Interpreters are admitted when necessary to assist attorneys and other \boxtimes legal representatives. Presenters are afforded a minimum of one hour to make the X presentation and to conduct a question-and-answer session. Staff permits presenters to distribute ICE-approved materials. X Presenters are permitted to meet with small groups of detainees to There have been no requests for discuss their cases after the group presentation. ICE or authorized \boxtimes such presentations in the last 12 detention staff is present but do not monitor conversations with legal months. providers. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention \bowtie and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations. The facility plays ICE-approved videotaped presentations on legal Approved videos are played X during the intake process. rights at regular opportunities, at the request of outside organizations. This policy is included in the detainee handbook, page 12, A copy of the Group Legal Rights Presentation policy, including \boxtimes attachments, is available to detainees upon request Group Legal Rights Presentations.

AT-RISK

REPEAT FINDING

DEFICIENT

ACCEPTABLE

Videos developed by the Florence Immigration and Refugee Rights Project are provided for detainees during intake. A video entitled "Know Your Rights" and a video entitled "All about Bonds" is also provided. Recently, legal providers have also provided written materials for detainee use. There have been no requests for live presentations by legal rights groups during the last 12 months.

(b)(6), (b)(7)c April 8, 2010 **AUDITOR'S SIGNATURE / DATE**

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING. LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION. YES REMARKS COMPONENTS No NA The facility has a policy and procedure for the regular issuance and Facility policy 200.14 provides the exchange of clothing, bedding, linens, and towels. \times procedures for issuance of clothing The supply of these items exceeds the minimum required for and exchanges. the number of detainees. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: One uniform shirt and one pair of uniform pants, or one Detainees are provided two pairs of \times jumpsuit; socks and underwear. One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. Additional clothing is available for changing weather conditions, or as Sweatshirts are provided during \times seasonally appropriate. winter months. New detainees are issued clean bedding, linens, and towels. They receive at a minimum: One mattress: One sheet is issued to detainees. One blanket: Additional blankets are approved by Two sheets: \times medical staff or through a written One pillowcase:

 \times

 \bowtie

X

X

AT-RISK

request.

REPEAT FINDING

REMARKS:

outer garments daily.

more frequently.

All detainees are allowed to have their clothes washed on a daily basis.

Additional blankets are issued based on local weather

Detainees assigned to special work areas are clothed in accordance

Food service detainee volunteer workers are permitted to exchange

Volunteer detainee workers are permitted to exchange outer garments

DEFICIENT

Detainees are provided clean clothing, linen and towels.

• Socks and undergarments - exchanged daily.

Outer garments - twice weekly.

ACCEPTABLE

(b)(6), (b)(7)c April 8, 2010

One towel: and

with the requirements of the job.

Sheets - weekly. Towels - weekly. Pillowcases - weekly.

conditions.

MARRIAGE REQUESTS							
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CA	ASE CONSI	DERATIO	N FROM I	CE MANAGEMENT.			
COMPONENTS YES NO NA REMARKS							
The Field Office considers detainee marriage requests on a case-by-case basis.	\boxtimes			The Assistant Field Office Director reviews each marriage request.			
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	\boxtimes			The Assistant Field Office Director notifies the Warden if a marriage request is rejected. There have been no marriage requests in the past year.			
It is standard practice to require a written request for permission to marry.	\boxtimes						
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	\boxtimes						
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.	\boxtimes						
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes						
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes						
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING							

ICE handles all marriage requests on a case-by-case basis. All documentation is maintained in the detainee's A-file. There have been no marriage requests submitted during the past year by detainees.

(b)(6), (b)(7)c April 8, 2010

NON-MEDICAL EMERGENCY ESCORTED TRIPS

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

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

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

REMARKS:

ICE staff conducts all non-medical emergency escorted trips for detainees.

(b)(6), (b)(7)c April 8, 2010

RECREATION POLICY: IT IS ICE POLICY TO PROVIDE ACCESS TO RECREATIONAL PROGRAMS AND ACTIVITIES TO ALL ICE DETAINEES, TO THE EXTENT POSSIBLE, UNDER CONDITIONS OF SECURITY AND SUPERVISION THAT PROTECT THEIR SAFETY AND WELFARE. COMPONENTS YES No NA REMARKS The facility has a recreation program and facility. X A recreational specialist (for facilities with more than 350 detainees) X tailors the program activities and offerings to the detainee population. Regular maintenance keeps recreational facilities and equipment in good X condition. The recreational specialist or trained equivalent supervises detainee Detainees do not work in the X recreation workers. recreation area. The recreational specialist or trainee equivalent oversees recreation X programs for special housing units (SHU) and special-needs detainees. Dayrooms offer sedentary activities, e.g., board games, cards, television. Outside activities are restricted to limited-contact sports. X X Each detainee has the opportunity to participate in daily recreation. Detainees have access to recreation activities outside the housing units X for at least one hour daily, 5 days a week. Staff checks all items for damage and condition when equipment is X Staff conducts searches of recreation areas before and after use. X All recreation areas under constant staff supervision. X (b)(7)(e)Supervising staff is equipped with radios. \times The facility provides detainees in the SHU at least one hour of outdoor Detainees in SHU are provided recreation time daily, five times per week. X the opportunity for outdoor recreation every day. Detainees in disciplinary/administrative segregation receive a written No recreation privileges were \times explanation when a panel revokes his/her recreation privileges. revoked during the past year. X Special programs or religious activities are available to detainees. Volunteers are required to sign a waiver of liability before entering a X secure portion of the facility where detainees are present. Visitors, relatives or friends are not allowed to serve as volunteers. If outdoor recreation is offered, check this box. No further information is required when outdoor recreation is offered. If the facility has no outside recreation, are detainees considered for transfer after six months? If yes, written procedures ensure timely review of all eligible detainees. Case officers make written transfer recommendations about every six-month detainee to the OIC. The OIC documents all detainee-transfer decisions, whether yes or no. The detainee's written decision for or against an offered transfer documented in his/her A-file. Staff notifies the detainee's legal representative of his/her decision to П accept/decline a transfer. If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days. The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer. The detainee's legal representative is notified of the detainee's/OIC's decision. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

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Detainees are provided the opportunity to utilize the recreation area seven days a week. With prior approval, detainees are allowed to meet in special groups on the recreation yard for hymns and prayers.

(b)(6), (b)(7)c pril 8, 2010 AUDITOR'S SIGNATURE / DATE

RELIGIOUS PRACTICES

POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH REASONABLE AND EQUITABLE OPPORTUNITIES TO PARTICIPATE IN THE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFETY, SECURITY, THE ORDERLY OPERATIONS OF THE FACILITY AND BUDGETARY CONSIDERATIONS.

COMPONENTS	YES	No	NA	REMARKS
Detainees are allowed to engage in religious services.	\boxtimes			
Space is available for detainees to conduct religious services.	\boxtimes			Religious services are provided in the library or in the classroom located on Bravo Hall.
The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	\boxtimes			
The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions; • Honoring fasting requirements; • Facilitating religious services; and • Allowing activity restrictions.	\boxtimes			
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes			
Volunteer's credentials are checked and verified before allowing participation in detainee programs.	\boxtimes			National Crime Information Center checks are conducted on volunteers prior to approval for participation in detainee programs.
Members of faiths not represented by clergy may conduct their own services within security allowances.	\boxtimes			
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.	\boxtimes			
X ACCEPTABLE ☐ DEFICIENT ☐	AT-RISI	ζ.		REPEAT FINDING

REMARKS:

Volunteers are provided a one hour training course on rules and procedures before conducting programs at this facility.

(b)(6), (b)(7)c April 8, 2010

DETAINEE TELEPHONE ACCESS POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. COMPONENTS YES No NA REMARKS Phones are available from 6:00 AM to Detainees are allowed access to telephones during established X 10:30 PM daily. Phones may be left on facility waking hours. until 1 AM on week-ends and holidays. Phone access procedures are posted on the Upon admittance, detainees are made aware of the facility's \times phone and are explained in the detainee telephone access policy. handbook. Access rules are posted on the phones in \boxtimes Access rules are posted in housing units. each housing unit. Information regarding phone access is The facility makes a reasonable effort to provide key available in Spanish. In addition, the caller information to detainees in languages spoken by any significant \boxtimes may select the Spanish recordings for portion of the facility's population. certain speed dial connections. The two units used to house ICE detainees Telephones are provided at a minimum ratio of one telephone each contain 28 beds and each unit has \bowtie per 25 detainees in the facility population. (b)(7)e phones. Other housing units are similarly equipped with phones. Telephones are inspected regularly by facility staff to ensure All phones were checked and in working X that they are in good working order. order during the inspection. The facility administration promptly reports out-of-order X telephones to the facility's telephone service provider. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun \times and completed timely. Detainees are afforded a reasonable degree of privacy for legal A detainee may request assistance from \boxtimes staff in placing private legal calls. Detainees may advise unit staff of the A procedure exists to assist a detainee who is having trouble X concern or submit a "Request to Staff" placing a confidential call. The facility provides the detainees with the ability to make non- \bowtie collect (special access) calls. Special Access calls are at no charge to the detainees. The inspector checked the hotline number The OIG phone number for reporting abuse is programmed into and spoke with a live communications the detainee phone system and the phone number was checked \times specialist at DHS. The OIG Hotline by the inspector during the review. number was posted in the units and included in the speed dial listings. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes \boxtimes alternate arrangements to provide required access within 24 hours of a request by a detainee. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved X "Free Legal Services List". Policy 200.08 addresses this component. Facility staff forward such requests from Special arrangements are made to allow detainees to speak by \boxtimes an ICE detainee to ICE staff or instruct the telephone with an immediate family member detained in another Facility. detainee to submit a "Request to Staff" form directly to ICE. There were no restrictions in place during the inspection. Any restrictions would be \boxtimes Any telephone restrictions are documented. documented through the disciplinary process.

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.							
COMPONENTS	YES	No	NA	REMARKS			
The facility has a system for taking and delivering emergency detainee telephone messages.	\boxtimes			Policy 200.08 instructs staff to deliver emergency messages as soon as possible.			
Emergency phone call messages are immediately given to detainees.	\boxtimes						
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes			This requirement is included in policy 200.08.			
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	\boxtimes						
Detainees in administrative detention and protective custody are afforded the same telephone privileges as those in general population.	\boxtimes						
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	\boxtimes			Notification regarding monitoring is posted on each individual telephone and included in the detainee handbook.			
☐ ACCEPTABLE ☐ DEFICIENT		AT-RISI	K	REPEAT FINDING			

The facility complies with the NDS regarding Detainee Telephone Access.

(b)(6), (b)(7)c April 8, 2010

VISITATION

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

THE NEWS WEDIA.				
COMPONENTS	YES	No	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	\boxtimes			Visitation Schedules are posted in several areas throughout the facility. Additionally, visitation hours are included in the detainee handbook and in policy 200.01, Offender Visitation.
The visitation hours tailored to the detainee population and the demand for visitation.	\boxtimes			Visitation is permitted Thursday, Friday, and Saturday between the hours of 8:00 AM - 5:00 PM. Special visits may be requested and approved during other times. Attorney visits are allowed every day, if requested.
The visitation schedule and rules are available to the public.	\boxtimes			
The hours for all categories of visitation are posted in the visitation waiting area.	\boxtimes			
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.	\boxtimes			A handout, Karnes County Correctional Center Visitation Rules, is available in the Front Gate Building.
A general visitation log is maintained.	\boxtimes			The visitation log is maintained in the Front Gate Building.
The detainees are permitted to retain personal property items specified in the standard.	\boxtimes			
A visitor dress code is available to the public.	\boxtimes			The dress code is described in the handout and is also posted in the visitation lobby.
Visitors are searched and identified according to standard requirements.	\boxtimes			
The requirement on visitation by minors is complied with.	\boxtimes			Minors are allowed to visit if they are on the approved list submitted by the detainee and are accompanied by an approved adult.
At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.			\boxtimes	Minors are allowed to visit.
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.			\boxtimes	Minors are allowed to visit at this facility.
Detainees in special housing are afforded visitation.	\boxtimes			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			This component is defined in policy 200.01, and in the detainee handbook.
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.	\boxtimes			
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	\boxtimes			
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	\boxtimes			Private consultation rooms are available, and the rooms have a document portal.
There are written procedures governing detainee searches.	X			Policy 300.01 governs detainee searches.
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	\boxtimes			Strip searches are not conducted following contact visits.

VISITATION								
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, LEGAL REPRESENTATIVES, SPECIAL INTEREST GROUPS, AND THE NEWS MEDIA.								
Prior to each visit, legal service providers and assistants are identified per the standard.	\boxtimes			Proper identification is required. The attorney must be on the approved list submitted by the detainee.				
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.	\boxtimes							
The decision to permit or deny a tour is not delegated below the level of Field Office Director.	\boxtimes							
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.	\boxtimes			Provisions for NGO, or other special visits, are described in Policy 200.01.				
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.	\boxtimes							
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.	\boxtimes							
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes							
✓ ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING								

The facility has 10 non-contact stations and six large tables with seating for contact visitation. ICE detainees at this facility are allowed contact visitation unless precluded by a security concern.

(b)(6), (b)(7)c April 8, 2010

VOLUNTARY WORK PROGRAM						
POLICY: IN EVERY FACILITY OFFERING A VOLUNTARY WORK PROGRAM, ICE DETAINEES WILL HAVE THE OPPORTUNITY TO WORK AND EARN MONEY BY PARTICIPATING. WHILE NOT LEGALLY REQUIRED, ICE AFFORDS DETAINEE WORKERS BASIC OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) PROTECTIONS.						
☐ 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	YES	No	NA	REMARKS		
 Does the facility have a voluntary work program? Do ICE detainees participate? 	\boxtimes			ICE detainees are allowed to work in the food service department, housing units, laundry, and barber shop.		
Detainee housekeeping meets neatness and cleanliness standards.	\boxtimes					
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	\boxtimes					
Written procedures govern selection of detainees for the Voluntary Work Program.	\boxtimes			Facility policy 200.03 provides the procedures for selecting detainees to participate in the Voluntary Work Program.		
Where possible, physically and mentally challenged detainees participate in the program.			\boxtimes	There have been no mentally or physically challenged detainees requesting to participate in the volunteer work program during the past year.		
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.	\boxtimes					
Detainee volunteers generally work according to fixed schedule.	X					
If a detainee is removed from a work detail, staff places the written						
justification for the action in the detainee's detention file.	\boxtimes					
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	\boxtimes					
The voluntary work program meets: OSHA, NFPA, ACA standards	\boxtimes					
Medical staff screen and formally certify detainee food service volunteers. • Before the assignment begins; and • As a matter of written procedure	\boxtimes			Medical staff signs off on the work waiver to indicate the detainee has been approved to work in the food service department.		
Detainees receive safety equipment/ training sufficient for the assignment.	\boxtimes					
Proper procedure is followed when an ICE detainee is injured on the job.	\boxtimes					
△ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING		
REMARKS: This facility provides an opportunity for volunteer detainees to work in the food service department, laundry, barbershop, and as orderlies.						

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

SECTION II HEALTH SERVICES STANDARDS

HUNGER STRIKES

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

COMPONENTS	YES	No	NA	REMARKS
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	\boxtimes			Policy 513, Management of Hunger Strikes, requires notification of medical staff when a detainee has refused food for 72 hours. The Health Service Administrator (HSA) advised that, in practice, the medical unit is notified within 24 hours of the first refused meal.
CDFs and IGSAs immediately report a hunger strike to the ICE.	\boxtimes			In accordance with policy 513 and as confirmed by the Health Service Administrator and the SIEA, ICE is notified immediately of any detainee hunger strike.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	\boxtimes			Policy 513 establishes procedures to ensure staff respond immediately to a hunger strike.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?	\boxtimes			Policy 513 requires the isolation of detainee hunger strikers. The Health Service Administrator advised that hunger strikers are admitted to the observation cell in the medical unit. If this cell is unavailable, one of the camera-monitored cells in Unit 268 is used. This includes cells 1, 2, 11 and 12.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	\boxtimes			As confirmed by the Health Service Administrator, medical staff is authorized to place a hunger striker in one of the designated cells.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	\boxtimes			In accordance with policy 513 and as confirmed by discussions with the Health Service Administrator and a review of a hunger striking detainee's medical record, medical staff record the weight and vital signs of a hunger striker upon initial evaluation and at least once every 24 hours thereafter.
The OIC of the facility obtains a hunger striker's consent before medical treatment.	\boxtimes			Policy 513 requires the signing of a consent for medical treatment. A general Consent to Medical Services is signed during the medical intake screening process. This was confirmed based on a review of detainee medical records.

HUNGER STRIKES					
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES.					
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	\boxtimes			In accordance with policy 513 and as confirmed by the Health Service Administrator and a review of a hunger striking detainee's medical record, any detainee refusing medical evaluation or treatment must sign a Release of Responsibility for Medical Services form. If a detainee refuses to sign the form, medical staff documents the refusal to sign.	
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	\boxtimes			In accordance with policy 513 and as confirmed by the Health Service Administrator and a review of a completed Hunger Strike Monitoring Form in a detainee medical record, 3 meals are offered each day. The acceptance or refusal of each meal is documented on this form.	
Staff maintains the hunger striker's supply of drinking water/other beverages.	\boxtimes			The Health Service Administrator advised that detainees placed in an observation cell for a hunger strike initially retain independent access to water via the in-cell sink. If the hunger strike persists, the detainee is placed on a strict intake/output monitoring status and all drinking water and other beverages are provided by staff.	
During a hunger strike, staff removes all food items from the hunger striker's living area.	\boxtimes			In accordance with policy 513 and as confirmed by the Health Service Administrators, detainees placed in an observation cell for a hunger strike are not permitted to purchase or retain commissary food items.	
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	\boxtimes			Policy 513 requires documentation of a hunger striker's fluid intake and food consumption. Based on a review of a detainee medical record, this information is documented on a Hunger Strike Monitoring Form.	
The medical staff has written procedures for treating hunger strikers.	\boxtimes			Policy 513 establishes written procedures for the treatment of hunger strikers.	
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	\boxtimes			The Health Service Administrator advised and as confirmed by a review of a hunger striking detainee's medical record, medical staff documents all treatment attempts in the detainee's medical record.	

HUNGER STRIKES				
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR THE MEDICAL AND ADMINISTRATIVE MANAGEMENT OF ICE DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEALTH AND WELFARE OF THE INDIVIDUAL DETAINEES, FACILITIES WILL STRIVE TO SUSTAIN THEIR LIVES. Staff has received training in identification of hunger strikes. Medical Discussions with the training officer				
staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.				and as confirmed by a review of training schedules and individual employee training records, staff receives training on the identification of hunger strikes during pre-service and annual in-service training. Training documentation provided by the Health Service Administrator confirmed that medical staff receives training on the evaluation and treatment of hunger strikers.
□ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING

During the inspection, numerous discussions with the Health Service Administrator occurred as well as a review of the 21 available detainee medical records. Of this number, one ICE detainee went on a hunger strike at this facility. He was evaluated and treated by medical staff and began eating again on the third day of his hunger strike.

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

ACCESS TO MEDICAL CARE

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

THE GENERAL WELL-BEING OF ICE DETAINEES.				
COMPONENTS	YES	No	NA	REMARKS
Facilities operate a health care facility in compliance with state and local laws and guidelines.				Documentation maintained by the Health Service Administrator (HSA) was reviewed. Licenses for the physician, dentist, psychiatrist and nursing staff are active and current. The facility maintains a Clinical Laboratory Improvement Amendment (CLIA) waiver for the limited on-site lab operation and a pharmacy with waiver license for the storage and distribution of medications. Dental x-ray equipment inspections are up-to-date. The medical facility maintains no accreditations.
The facility's in-processing procedures for arriving detainees include medical screening.	\boxtimes			As confirmed by a review of the 21 available detainee medical records, medical intake screening is consistently completed during in-processing by staff assigned to the intake department.

ACCESS TO MEDICAL CARE								
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN THE GENERAL WELL-BEING OF ICE DETAINEES.	POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.							
All detainees have access to and receive medical care.				As confirmed by a review of detainee medical records and direct observations in the medical and detainee housing units, detainees have access to and receive medical care through sick call requests and direct requests to staff for more urgent concerns. The majority of medical staff is bilingual speaking both English and Spanish. Phone-based interpreters are available for non-English or Spanish speaking detainees. Instructions for accessing medical care, sick call requests, and consent and refusal forms are available in both English and Spanish. Chronically ill detainees are tracked, medically monitored, and seen at least quarterly by the physician. Detainees receive instructions on accessing medical care during intake processing. Instructions are also included on page 7 of the detainee handbook. Medical outpatient and limited inpatient services, dental care, and mobile x-ray services are provided on-site. EKG's are completed through a phone link with Compumed. Lab testing is provided through a contract with LabCorp. Hospital-based emergency and inpatient services are available at the Otto-Kaiser Memorial Hospital. Specialty care services are available through community providers. On site mental health services, provided daily by a psychologist, are supplemented by teleconference psychiatric services.				
The facility has access to a PHS/DIHS Managed Health Care Coordinator.	\boxtimes			The Health Service Administrator advised that medical staff has access to a Managed Care Coordinator through contact with local ICE staff or through the TARWeb system. Such requests are usually approved within 24 hours. An approved request was noted in a detainee medical record.				

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. The medical staff is large enough to provide, examine, and Medical services are provided 24 hours treat the facility's detainee population. a day, 7 days/week. The Health Service Administrator (HSA) advised that the physician is on-site 2 days a week and on-call when not on site. A dentist and dental assistant provide services 10 hours per week. Mental health staffing includes (b)(7)e psychologist on site 1-1.5 hours each weekday, and)(7)psychiatrist who provides services via teleconference 1 \times day a week and is on-call for emergencies. Other medical personnel include (7) Registered Nurse (RN) (7)e Licensed Vocational Nurses (LVN)b)(7)e certified medication aids an(b)(7)e administrative and support staff. The has advised that creative scheduling has been used to provide sufficient nursing coverage. At least one RN or LVN is on duty at all times. An RN is on call for consultation when no RN is on site. The medical unit includes a treatment The facility has sufficient space and equipment to afford detainee privacy when receiving health care. room equipped for examinations. treatments, urgent care, and short-term medical observations. Emergency response equipment including an Automatic External Defibrillator is X available for use when needed. A second room is equipped for private intake assessments and other medical encounters. A third room is used for dental clinic one day per week and for confidential psychiatric teleconference consultations on another day. The medical unit is located within the The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter of the facility. Access \times secure perimeter. is electronically controlled by detention officers posted in Central Control. The medical facility entrance includes a holding/waiting A waiting room is located just inside \times the medical unit. As confirmed by direct observations The medical facility's holding/waiting room is under the and a review of the Medical Officer's direct supervision of custodial staff. post order, a detention officer is posted \times in the medical unit, and maintains supervision of detainees in the waiting Detainees in the holding/waiting room have access to a A portable water cooler is positioned drinking fountain. just outside of the waiting room. \times Drinking water is available upon request.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit; Medical records are secured in a medical records room within the With physical access restricted to authorized medical \times medical unit. Access is limited to staff: and authorized medical staff. Procedurally, no copies made and placed in detainee files. Pharmaceuticals are stored in a secure area. (b)(7)e \times Perpetual inventories are maintained on needles and syringes. Inventory counts of these items and of medical tools are conducted at each shift change. A spot check of the inventory documentation confirmed its accuracy. Medical screening includes a Tuberculosis (TB) test. Policy 200.02, Medical Services, requires TB screening of all detainees. Every arriving detainee receives a TB test during the The Health Service Administrator admission process; advised that at least 90% of the Detainee's TB-screening does not occur more than detainees are transferred in from one business day after his/her arrival at the facility; another facility with documentation of recent TB testing. Medical staff Detainees not screened are housed separate from the reviews the available documentation to general population. \times confirm recent testing. A TB test is administered if no such documentation is available. Of the 21 detainee medical records reviewed, all but one detainee arrived with a documented TB screening completed within the previous 6 months. TB testing of the detainee arriving without documentation was completed.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. All detainees receive a mental-health screening upon arrival. In accordance with policy 706, Suicide It is conducted: Recognition and Prevention, screening for mental health concerns is included By a health care provider or specially trained officer; in the medical screening completed during intake processing by staff Before a detainee's assignment to a housing unit. assigned to the intake department. The training officer indicated and a review of employee training records confirmed \times that staff responsible for intake processing has been trained to complete the medical intake screens. A review of detainee medical records confirmed consistent and timely completion of the intake screening. Medical staff completes a follow up mental health screening on all detainees within 14 The facility health care provider promptly reviews all I-794s The Health Service Administrator (or equivalent) to identify detainees needing medical advised that intake medical screening attention. documentation is promptly delivered to the medical unit and reviewed by \times medical staff. Detainees with any identified concerns are escorted to the medical unit for further evaluation as confirmed by a review of detainee medical records. The health care provider physically examines/assesses Policy 504, Health Assessments, arriving detainees within 14 days of admission/arrival at the requires the completion of physical facility. exams/assessments on all detainees within 14 days. A review of the 21 available detainee medical records \bowtie noted that all but one detainee was physically examined/assessed within the required time frame. The average time being 9-10 days. The remaining detainee was examined within 18 days. Detainees in the Special Management Unit have access to Detainees in the special management health care services. units have access to health care services through written sick call requests and direct requests to staff for more urgent concerns. In accordance with policy 512, Health Evaluations of Inmates in Disciplinary Segregation, and as confirmed by discussions with the X Health Service Administrator and Major, nursing staff visit the special management units at least daily. A review of Segregation Unit Daily Activity Logs confirmed that nursing staff make documented visits to the special management units at least twice each day.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. Staff provides detainees with health services (sick call) Medical Request forms with request slips daily, upon request. instructions in English and Spanish are Request slips are available in languages other than available to detainees in the housing English, including every language spoken by a units. The Health Service sizeable number of the facility's detainee population. Administrator (HSA) advised that nursing staff collect completed requests Service-request slips are delivered in a timely from the housing units and medical fashion to the health care provider. request drop boxes each evening. Requests are triaged by nursing staff. A review of the sick call log and detainee medical records noted that detainees with urgent concerns are seen promptly. Others are scheduled for \times sick call appointments or referred to dental or mental health staff, as applicable. A review of the sick call log noted that although there were some delayed responses early in the year, written responses to requests submitted within the past month were consistently given within 24-48 hours. The HSA indicated staff was recently trained on the importance of timely responses. A review of detainee medical records noted that those referred to the physician were seen within 1-4 days. The facility has a written plan for the delivery of 24-hour Medical personnel are on duty 24 hours emergency health care when no medical personnel are on duty each day, 7 days a week. Policy 511, at the facility, or when immediate outside medical attention is Emergency Medical Services, X establishes procedures for the delivery required. of emergency health care when immediate outside medical attention is needed. The physician and psychiatrist are on-The plan includes an on-call provider. \times call for health care emergencies. The plan includes a list of telephone numbers for local Phone numbers for the local hospital and on-call medical staff are available ambulance and hospital services. to nursing staff in the medical unit. \times The Health Service Administrator advised that ambulance and EMS services are available through a 911 call. The plan includes procedures for facility staff to utilize this Policy 511 establishes procedures for \times the delivery of emergency health care emergency health care consistent with security and safety. consistent with security and safety. Detention staff is trained to respond to health-related In accordance with requirements established in policy 400.07, Training, emergencies within a 4-minute response time. as reported by the Health Service Administrator, training officer, and CPR instructor, and as confirmed per a \times review of employee training records, all detention staff are trained in first aid and certified in CPR during pre-service training and annually thereafter.

ACCESS TO MEDICAL CARE POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES. Where staff is used to distribute medication, a health care The Health Service Administrator provider properly trains these officers. confirmed and observations in the medical and housing units noted that all \times prescription and over-the-counter medications are administered by medical staff. The medical unit keeps written records of medication that is The Health Service Administrator distributed. advised and as confirmed during interviews with other medical staff, and observations in the medical unit and detainee housing units as well as a \times review of detainee medical records П confirmed that the administration of all prescription and over-the-counter medication is documented on detaineespecific Medication Administration Records. The Health Service Administrator The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs. advised that immediate notification regarding significant special needs is X provided by phone or e-mail. A review of detainee medical records noted that notification is also provided through use of a Special Needs Notice form. In accordance with policy 901, A signed and dated consent form is obtained from a detainee before medical treatment is administered. Informed Consent, a general Consent to Medical Services agreement, available \times in English and Spanish, is signed by detainees during in-processing as confirmed by a review of detainee medical records. Authorization for Release of Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources. Information forms is available for use by detainees to authorize the release of confidential medical information. The \times Health Service Administrator noted that the facility also honors similar forms submitted by outside sources on behalf of, and signed by, the detainee. The facility health care provider is given advance notice prior The Health Service Administrator to the release, transfer, or removal of a detainee. advised that notification is provided 24 \times to 48 hours in advance of a detainee's transfer. The Health Service Administrator Detainee's medical records or a copy thereof, are available and transferred with the detainee. advised that a medical summary is \times prepared for transfer with the detainee. Original medical records are retained by the facility. Based on a description of actual Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and practice provided by the Health Service marked "MEDICAL CONFIDENTIAL". Administrator, medical records \times prepared for transfer with the detainee are placed in a sealed and appropriately labeled/marked envelope. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

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A review of the 21 available detainee medical records confirmed receipt of medical, dental, and mental health care for concerns identified during intake. Treatment plans are developed and implemented for the chronically and mentally ill. One detainee has been referred to an off-site specialist. The only unresolved detainee complaint noted involved dissatisfaction with a provider's decision about a psychotropic medication.

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pril 8, 2010

AUDITOR'S SIGNATURE

SUICIDE PREVENTION AND INTERVENTION

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	YES	No	NA	REMARKS
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	\boxtimes			In accordance with requirements established in policies 400.07, Training, and 706, Suicide Recognition and Prevention, and as confirmed by discussions with the training officer, and a review of employee training records, all staff receives suicide-prevention training during pre-service and annually thereafter.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.	\boxtimes			A review of suicide prevention and intervention educational material used during training confirmed inclusion of the required components.
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. • Screening does not occur later than one working day after the detainee's arrival.	\boxtimes			In accordance with policy 706, screening for suicide potential is completed during intake processing by staff working in the intake department. Discussions with the training officer and a review of employee training records noted that staff assigned to conduct detainee intake processing receive training on the screening procedures. A review of detainee medical records confirmed consistent and timely completion of the intake screening.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	\boxtimes			Policy 706 establishes procedures for the referral of at-risk detainees to medical staff. A review of detainee medical records confirmed referral to, and timely follow-up, by health care staff.
The facility has a designated isolation room for evaluation and treatment.	\boxtimes			The observation cell in the medical unit is designated as the primary location for the evaluation and treatment of detainees at-risk for suicide. Cells 1, 2, 11 and 12 in Unit 268 are equipped with in-cell cameras and are used as back-up suicide watch cells.

SUICIDE PREVENTION AND INTERVENTION

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	YES	No	NA	REMARKS
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.				The medical observation cell includes American with Disabilities Act (ADA) compliant hand rails to which the end of a noose could be attached. The designated cells in Unit 268 have open bar doors and other structures to which the end of a noose could be attached. Policy 706 establishes levels of suicide watch status. Per policy and as confirmed by discussions with the Warden, detainees on Level 1 watch status are placed on continuous observation with an officer specifically assigned to maintain this watch. These detainees retain no personal possessions and are given suicide resistant mattresses, blankets, and garments. A detainee on Level 2 watch status could per policy have personal clothing. The Warden advised that Level 2 watch status is not used by this facility. No detainee is removed from continuous observation until determined by an appropriately licensed health care provider to no longer be at risk for suicide.
Medical staff has approved the room for this purpose.	\boxtimes			The Health Service Administrator (HSA) indicated medical staff approval of the designated cells.
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	\boxtimes			The Health Service Administrator and detention supervisors confirmed that no ICE detainees have been placed on suicide watch during the past year. A review of completed Suicide Watch Logs used by detention officers to document the status of non-ICE detainees on suicide watch confirmed observation and documentation of a suicide watch detainee's status every 15 minutes.
△ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING

The Health Service Administrator (HSA) and the Significant Incident Summary provided by the facility noted that there have been no suicides or suicide attempts at this facility during the past year. The HSA and detention supervisors advised that no ICE detainees have been placed on suicide watch during this time period. Based on a review of detainee medical records, it was noted that several detainees admitted with a history of mental health concerns or who had received news of the death of a family member were evaluated by mental health staff and signed agreements to do themselves no harm. However, they did not express suicidal ideation and were determined to not be in need of suicide watch status.

The cells designated for use for suicide watches contain structures that could be used in a suicide attempt. The warden advised that any at-risk detainee placed in one of these cells would be under continuous observation by a designated officer, and would be given only a suicide-resistant mattress, blanket, and garment.

(b)(6), (b)(7)c April 8, 2010 **AUDITOR'S SIGNATURE / DATE**

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.

COMPONENTS	YES	No	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.				Per the Health Service Administrator (HSA), severely and terminally ill detainees are not accepted by the facility. Weekly updates on all chronically ill detainees are provided to ICE. In accordance with policy 200.02, Medical Services, if a detainee already housed at the facility develops the need for more extensive medical care, ICE would be notified and the detainee would be transported to a community hospital pending transfer to a more appropriate facility.
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: • The detainee's location; and • The limitations placed on visiting.	\boxtimes			As confirmed by the Health Service Administrator and SIEA, ICE is notified if a detainee's medical condition deteriorates and/or he is admitted to an outside medical facility. Per the SIEA, ICE would make other notifications as applicable.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.			\boxtimes	The facility does not accept severely or terminally ill detainees. Policies 200.02 and 524, End of Life Decision Making, reference assisting detainees interested in establishing advanced directives. The Health Service Administrator advised that no ICE detainees have requested this information.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.			\boxtimes	The facility does not accept severely or terminally ill detainees.
There is a policy addressing "Do Not Resuscitate Orders"			\boxtimes	The facility does not accept severely or terminally ill detainees.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?			\boxtimes	The facility does not accept severely or terminally ill detainees.
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.			\boxtimes	The facility does not accept severely or terminally ill detainees.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.

COMPONENTS	YES	No	NA	REMARKS
The facility has written procedures to address the issues of organ donation by detainees.	\boxtimes			Policy 524 addresses the issue of organ donation, and for ICE detainees the decision is deferred to ICE. An IEA confirmed that ICE would assume responsibility for consideration of any such request.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	\boxtimes			Policy 110, Death of an Inmate, establishes procedures for the notification of ICE in the event of a detainee death. Per the SIEA, ICE would make other needed notifications.
The facility has a policy and procedure to address the death of a detainee while in transport.			\boxtimes	Except for possible short transports in the event of a medical emergency, the facility does not transport ICE detainees.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	\boxtimes			Per the SIEA, ICE would dispose of a detainee's remains in accordance with the provisions of this standard.
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?	\boxtimes			The SIEA advised that ICE would arrange for the burial of unclaimed remains in accordance with the provisions of this standard.
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.	\boxtimes			The SIEA advised that ICE would place a copy of a detainee's death certificate in the subject's A-file.
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body.	\boxtimes			Policy 110 establishes procedures for contacting the local coroner in the event of a detainee death. The Warden confirmed that such contact would be made.
ICE staff follows established procedures to properly close the case of a deceased detainee.	\boxtimes			Per the SIEA, ICE would close the case of a deceased detainee in accordance with established procedures.
△ ACCEPTABLE □ DEFICIENT □	AT-RI	sk		REPEAT FINDING

REMARKS:

There have been no detainee deaths at this facility. The facility does not accept severely or terminally ill detainees due to a limited medical unit and staffing resources.

SECURITY AND CONTROL STANDARDS

CONTRABAND					
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLING AND DISPOSAL OF ALL CONTRABAND. DOCUMENTATION OF CONTRABAND DESTRUCTION IS REQUIRED.					
COMPONENTS	YES	No	NA	REMARKS	
				(b)(7)e	
(b)(7)e				(b)(7)e	
				(b)(7)e	
ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING	

The facility has developed effective policy and procedures for handling contraband.

(b)(6), (b)(7)c April 8, 2010

DETENTION FILES

POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.

COMPONENTS	YES	No	NA	REMARKS
A detention file is created for every new arrival whose stay will	\boxtimes			
exceed 24 hours.				
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	\boxtimes			Detention Files contain a GEO Client Contact Report that documents actions and activities pertinent to the detainees stay. The file also contains, classification documents; Form I-213, Record of Deportable Alien; Intake Screening forms, Offender's Visitor and Telephone list, Form I-216, Record of Persons and Property Transferred; Detainee Transfer Notifications, ICE Information Memorandum, receipts for property, handbook, ID badge, and 'know your rights", training records, and Offender Request to Staff Forms.
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same	\boxtimes			
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.	\boxtimes			Files are maintained in a secure office, in lockable file cabinets.
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	\boxtimes			
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	\boxtimes			
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	\boxtimes			
Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	\boxtimes			Staff use a "Sign Out Log" to ensure accountability of the files.
ACCEPTABLE DEFICIENT	AT-	-RISK		REPEAT FINDING

REMARKS:

Detention Files are created for every intake and contain all documents required by the NDS.

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

DISCIPLINARY POLICY

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

COMPLIANCE WITH FACILITY RULES AND REGULATIONS.				
COMPONENTS	YES	No	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.	\boxtimes			Facility policy 200.18 outlines the disciplinary program.
The facility rules state that disciplinary action shall not be capricious or retaliatory.	\boxtimes			
Written rules prohibit staff from imposing or permitting the following sanctions:	\boxtimes			
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	\boxtimes			The rules of conduct are provided in the detainee handbook which is distributed. The detainee signs for his copy.
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions	\boxtimes			These items are included in the detainee handbook which is distributed to all detainees.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	\boxtimes			Informal resolution is encouraged when possible.
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.	\boxtimes			The facility Major is the designated supervisor for review of incidents.
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	\boxtimes			
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes			
A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC; Considers written reports, statements, physical evidence, and oral testimony; Hears pleadings by detainees and staff representatives; Bases its findings on the preponderance of evidence; and Imposes only authorized sanctions	\boxtimes			
A staff representative is available if requested for a detainee facing a disciplinary hearing.	\boxtimes			
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	\boxtimes			
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The maximum time in disciplinary segregation is limited to 60 days for a single offense.	\boxtimes			

DISCIPLINARY POLICY						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN						
COMPLIANCE WITH FACILITY RULES AND REGULATIONS.						
COMPONENTS YES NO NA REMARKS						
(b)(7)e						
All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.						
	AT-RISE	K		REPEAT FINDING		

The facility encourages the use of informal resolution for minor infractions. All detainees receive detainee handbooks and sign for their copy. The handbook explains the facility rules, sanctions, and procedures for violations.

(b)(6), (b)(7)c April 8, 2010

EMERGENCY (CONTINGENCY) PLANS

POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.

COMPONENTS	YES	No	NA	REMARKS
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.	\boxtimes			The detainee handbook addresses the issue of detainees exercising control over other detainees.
Detainees are protected from: Personal abuse Corporal punishment Personal injury Disease Property damage Harassment from other detainees	\boxtimes			
Staff is trained to identify signs of detainee unrest. • What type of training and how often?	\boxtimes			Emergency plan training includes identification of detainee unrest. This is provided at new employee training and annually thereafter.
Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Officer In Charge (OIC)	\boxtimes			
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	\boxtimes			The emergency planning committee is responsible for the development and implementation of emergency plans.
The plans address the following issues:	\boxtimes			
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	\boxtimes			
The facility has cooperative contingency plans with applicable: • Local law enforcement agencies • State agencies • Federal agencies	\boxtimes			There are numerous cooperative contingency plans in place with outside agencies.
All staff receives copies of Hostage Situation Management policy and procedures.	\boxtimes			
(b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	\boxtimes			
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	\boxtimes			
Food service maintains at least 3 days' worth of emergency meals for staff and detainees.	\boxtimes			At least a five days food supply was on hand at the time of the inspection.
Written plans identify locations of shut-off valves and switches for all utilities (water, gas, electric).	\boxtimes			

	EMERGENCY (CONTIN	(GENCY) P	LANS		
POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.					
COMPONE	NTS	YES	No	NA	REMARKS
	(b)(7)e				
ACCEPTABLE	DEFICIENT	AT-RISK			REPEAT FINDING

The facility emergency plans are detailed, specific, and readily available to all staff. The plans include numerous contingency plans with outside agencies.

(b)(6), (b)(7)c April 8, 2010

ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	\boxtimes			
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	\boxtimes			
 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	\boxtimes			All work areas that have chemicals had the appropriate MSDSs and inventory counts.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.	\boxtimes			
The MSDSs are readily accessible to staff and detainees in work areas.	\boxtimes			
Hazardous materials are always issued under proper supervision. • Quantities are limited; and • Staff always supervises detainees using these substances.	\boxtimes			The supply officer distributes limited quantities of chemicals.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	\boxtimes			
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.	\boxtimes			
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	\boxtimes			An Evac system is utilized to ensure clean air.
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	\boxtimes			Vents are cleaned on a regular basis, and as needed. Filters are changed monthly.
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	\boxtimes			Winter temperatures are maintained at 68 degrees and summer temperatures are maintained at 74 degrees. The temperature panel is monitored in the Control Center.
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.		\boxtimes		Water temperatures in the housing unit exceeded the industry standard due to a valve failure. Maintenance staff was working on resolving this problem during the inspection.
All toxic and caustic materials are stored in their original containers in a secure area.	\boxtimes			
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	\boxtimes			
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.			\boxtimes	There were no products identified that contained methyl alcohol.

ENVIRONMENTAL HEALTH AND SAFETY

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COMPONENTS	YES	No	NA	REMARKS
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	\boxtimes			Employees receive training in fire and safety, bio-hazardous waste materials, entrance and exit procedures, emergency plans and staff/inmate relations training during the 120 hour Orientation/Pre-Service training. Detainees receive training based on their work assignment and area.
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).	\boxtimes			
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			The Fire Code Compliance inspection was conducted on January 21, 2010, by (b)(6), (b)(7)c (b)(6), (b)(7) farnes City Fire Marshal.
The Safety Office (or officer) maintains files of inspection reports.	\boxtimes			
The facility has an approved fire prevention, control, and evacuation plan.	\boxtimes			
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 	\boxtimes			
Fire drills are conducted and documented monthly.	\boxtimes			
A sanitation program covers barbering operations.	\boxtimes			
The barber shop has the facilities and equipment necessary to meet sanitation requirements.	\boxtimes			Hair cloths were not being utilized in the Barber Shop. This procedure was corrected during the inspection.
The sanitation standards are conspicuously posted in the barbershop.	\boxtimes			
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes			Facility Health Services policy 405.24 explains the procedures for disposal of sharps, needles, and syringes.
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	\boxtimes			
Standard cleaning practices include: • Using specified equipment; cleansers; disinfectants and detergents. • An established schedule of cleaning and follow-up inspections.	\boxtimes			Cleaning schedules were not posted in the housing units. This was corrected during the inspection.

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ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	YES	No	NA	REMARKS		
The facility follows standard cleaning procedures.	\boxtimes					
Spill kits are readily available.	\boxtimes			Spill kits are available in control, laundry, hall boxes, food service, and medical.		
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	\boxtimes			Stericycle picks up infectious/bio-hazardous waste twice a month.		
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes					
Do the methods for handling/disposing of refuse meet all regulatory requirements?	\boxtimes					
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.	\boxtimes			D-N Pest Control Company provides preventative pest control on a monthly basis.		
Drinking water and wastewater is routinely tested according to a fixed schedule.	\boxtimes			El OSO Water Supply Corporation provides a monthly test and lab results from GBRA Labs.		
 Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	\boxtimes			Holt Power System conducts tests of the generator and initiates repairs as needed. The facility conducts tests every Tuesday.		
✓ ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

All areas maintaining chemicals had easy access to MSDSs and accurate inventories.

There are no sprinkler systems located in the housing units. However, the length of the fire hoses was extended to cover all areas. The Karnes City Fire Marshal completed an inspection on January 21, 2010, with no concerns.

(b)(6), (b)(7)c April 8, 2010 AUDITOR'S SIGNATURE / DATE

HOLD ROOMS IN DETENTION FACILITIES POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY. **COMPONENTS** YES No NA REMARKS There are (b)(7)e hold rooms The hold rooms are situated within the secure perimeter. \times and (b)(7)eindividual cells in the booking area of the facility. The hold rooms are well ventilated well lighted, and all activating \times switches are located outside the room. The hold rooms contain sufficient seating for the number of detainees \times Bunks, cots, beds, or other related make-shift sleeping apparatus are \times precluded from use inside hold rooms. The walls and ceilings of the hold rooms are tamper and escape \times proof. Individuals are not held in hold rooms for more than 12 hours. X Male and females are segregated from each other. This facility does not house X females. Detainees under the age of 18 are not held with adult detainees. X Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, \times diapers and wipes. In older facilities, officers are within visual or audible range to allow \times detainees access to toilet facilities on a regular basis. (b)(7)eOfficers closely supervise the detention hold rooms using direct Documentation is maintained supervision (Irregular visual monitoring.). \times immediately outside the door to Hold rooms are irregularly monitored every 15 minutes. the hold rooms. Unusual behavior or complaints are noted. When the last detainee has been removed from the hold room, it is \boxtimes

 \bowtie

X

AT-RISK

REPEAT FINDING

REMARKS:

evacuation.

The facility hold rooms are adequate in size to handle detainees.

determination that a medical emergency may exist.

ACCEPTABLE

DEFI

There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building

An appropriate emergency service is called immediately upon a

DEFICIENT

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

given a thorough inspection.

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	YES	No	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.	\boxtimes			The maintenance supervisor is responsible for key and lock control for the facility. He has completed a locksmith training program.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	\boxtimes			
The security officer, or equivalent in IGSAs, provides training to employees in key control.	\boxtimes			
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.	\boxtimes			
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	\boxtimes			
Facility policies and procedures address the issue of compromised keys and locks.	\boxtimes			Facility policy 300.10 addresses compromised locks and keys.
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.	\boxtimes			
Only dead bolt or dead lock functions are used in detainee accessible areas.	\boxtimes			
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.	\boxtimes			
Grand master keying systems are prohibited.	\boxtimes			
All worn or discarded keys and locks are cut up and properly disposed of.	\boxtimes			
Padlocks and/or chains are prohibited from use on cell doors.	\boxtimes			
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101.	\boxtimes			
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	\boxtimes			The facility keyboard is located in the central control center.
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.	\boxtimes			
Emergency keys are available for all areas of the facility.	\boxtimes			
The facilities use a key accountability system.	\boxtimes			
Authorization is necessary to issue any restricted key.	\boxtimes			
Individual gun lockers are provided. • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access.				(b)(7)(e)
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE) POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS. YES COMPONENTS No NA REMARKS All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. \boxtimes When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The facility's key and lock system is effectively implemented, and ensures accountability and maintenance of all keys and locks.

(b)(6), (b)(7)c April 8, 2010

POPULATION COUNTS POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL							
COUNTS CONDUCTED AS NECESSARY. COMPONENTS YES NO NA REMARKS							
Staff conduct a formal count at least once each shift.				(b)(7)e			
(b)(7)e							
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.	\boxtimes			(b)(7)e			
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.	\boxtimes						
This training is documented in each officer's training folder.	\boxtimes			Training is provided during new employee training.			
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

(b)(6), (b)(7)c <u>April 8, 2010</u> **AUDITOR'S SIGNATURE / DATE**

POST ORDERS							
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST							
ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST ANNUALLY, AND GIVEN TO EACH OFFICER UPON ASSIGNMENT							
TO THAT POST.							
COMPONENTS	YES	No	NA	REMARKS			
Every fixed post has a set of post orders.	\boxtimes						
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	\boxtimes						
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.	\boxtimes			The facility Major is responsible for oversight of post orders.			
The IGSA maintains a complete set (central file) of post orders.	\boxtimes			A central set of post orders is kept in the Warden's conference room.			
The central file is accessible to all staff.	\boxtimes						
The OIC or Contract / IGSA equivalent initiates/authorizes all post- order changes.	\boxtimes						
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	\boxtimes						
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	\boxtimes						
Procedures keep post orders and logbooks secure from detainees at all times.	\boxtimes						
(b)(7)e							
The post orders for housing units track the event schedule.	\bowtie						
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.	\boxtimes						
ACCEPTABLE DEFICIENT	AT-RISK	-		REPEAT FINDING			

The facility Major is responsible for ensuring all post orders are accurate and kept up-to-date. Copies of post orders are available throughout the facility. So, all staff has access.

(b)(6), (b)(7)c April 8, 2010

SECURITY INSPECTIONS

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

BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNL				
COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The				
policy specifies:				
Posts to be inspected;				Facility policies 100.10 and
 Required inspection forms; 	\boxtimes			300.10 address security
 Frequency of inspections; 				inspection procedures.
 Guidelines for checking security features; and 				hispection procedures.
 Procedures for reporting weak spots, inconsistencies, and 				
other areas needing improvement				
Every officer is required to conduct a security check of his/her				
assigned area. The results are documented.	\boxtimes			
Documentation of security inspections is kept on file.	X			
Procedures ensure that recurring problems and a failure to take				
corrective action are reported to the appropriate manager.	\boxtimes			
The front-entrance officer checks the ID of everyone entering or				
exiting the facility.	\boxtimes			
All visits are officially recorded in a visitor logbook or electronically				
recorded.	\boxtimes			
The facility has a secure visitor pass system.	\boxtimes			
Every Control Center officer receives specialized training.				
The Control Center is staffed around the clock.	X			
	X			
Policy restricts staff access to the Control Center.				
Detainees are restricted from access to the Control Center.	\boxtimes			
Communications are centralized in the Control Center.	\boxtimes			
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			The outside perimeter officer monitors all vehicular traffic.
The facility maintains a log of all incoming and departing vehicles to				
sensitive areas of the facility. Each entry contains:				
The driver's name;				
Company represented;				
Vehicle contents;	\boxtimes			The outside mobile officer
Delivery date and time;				maintains the vehicle log.
· ·				
Vehicle license number; and				
Name of employee responsible for the vehicle during the visit				
Officers thoroughly search each vehicle entering and leaving the facility.	\boxtimes			
lacinty.				
(b)(7)e				
Tools being taken into the secure area of the facility are inventoried				
before entering and prior to departure.	\boxtimes			
The SMU entrance has a sally port.	\boxtimes			
Written procedures govern searches of detainee housing units and	\boxtimes			
personal areas.	\square			
Housing area searches occur at irregular times.	\boxtimes			
Every search of the SMU and other housing units is documented.	\boxtimes			
Storage and supply rooms, walls, light and plumbing fixtures,				
accesses, and drains, etc., undergo frequent, irregular searches. These	\boxtimes			
searches are documented.				
Walls, fences, and exits, including exterior windows, are inspected for	\boxtimes			
defects once each shift.	Ы			

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

CECUDITY INCDE	CTIONS					
SECURITY INSPE	CHONS					
POLICY, DOOR AGGICAN CAME BY THE PACH HAVE HIGH NICH AND AG MINE	n					
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHE						
BE RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUND				S.		
COMPONENTS	YES	No	NA	REMARKS		
(b)(7)e						
	<u> </u>					
Visitation areas receive frequent, irregular inspections.	\boxtimes					
ACCEPTABLE DEFICIENT	AT-RISE	ζ.		REPEAT FINDING		
REMARKS:						
The facility has a comprehensive security inspection system that is monitored by the facility Major.						

(b)(6), (b)(7)c April 8, 2010 AUDITOR'S SIGNATURE / DATE

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

COMPONENTS	YES	No	NA	REMARKS
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	×			Facility policy 300.17 governs the operation of Administrative Segregation.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.	\boxtimes			
The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).	\boxtimes			The initial review is usually conducted within 24 hours.
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?	×			Reviews are conducted weekly. The reviews include an interview with the detainee. A written decision is rendered. The detainee receives a copy of the decision.
The detainee is given a copy of the decision and justification for each review. • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.	\boxtimes			
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	\boxtimes			
 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 	\boxtimes			
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.	\boxtimes			
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	\boxtimes			
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.	\boxtimes			
All cells are equipped with beds. • Every bed is securely fastened to the floor or wall.	\boxtimes			

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COMPONENTS	YES	No	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy				
 When occupancy exceeds recommended capacity, do basic living standards decline? Do criteria for objectively assessing living standards exist? If yes, are the criteria included in the written procedures? 	\boxtimes			Although this has not occurred, the plan would be to convert another housing unit for administrative segregation use.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	\boxtimes			
Detainees receive three nutritious meals per day, from the general population's menu of the day. • Do detainees eat only with disposable utensils? • Is food ever used as punishment?	\boxtimes			Detainees use disposable eating utensils. Food is not used as punishment.
 Each detainee maintains a normal level of personal hygiene in the SMU. The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 	\boxtimes			Detainees may shower daily.
 The detainees are provided: Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 	\boxtimes			
A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays.	\boxtimes			A nurse usually visits Administrative Segregation at least twice daily.
Procedures comply with the "Visitation" standard. • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours.	\boxtimes			
Visits from clergy are allowed.	\boxtimes			
 Detainees have the same law-library access as the general population. Are they required to use the law library ∑Separately, or ∑As a group? Are legal materials brought to them? 	\boxtimes			If legal materials are requested, the detainee may be escorted to the library. If only reading material is requested, the library staff may deliver books to the unit.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.	\boxtimes			
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent).	\boxtimes			

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COMPONENTS	YES	No	NA	REMARKS		
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.	×					
A new record is created for each week the detainee is in Administrative Segregation. • The weekly records are retained in the SMU until the detainee's return to the general population.	\boxtimes					
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING						

REMARKS:

The facility staff is knowledgeable in the management of the Administrative Segregation Unit. The facility Major ensures compliance with all applicable standards.

(b)(6), (b)(7)c April 8, 2010

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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

COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	\boxtimes			Facility policy 300.17 addresses the operation of Disciplinary Segregation.
The sanctions for violations committed during one incident are limited to 60 days.	\boxtimes			
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	\boxtimes			
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. • After each formal review, the detainee receives a written copy of the decision and supporting reasons.	\boxtimes			Detainees receive copies of the written decision.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	\boxtimes			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	\boxtimes			Reduced commissary is an example of lesser privileges.
 Living conditions in disciplinary SMUs remain the same regardless of behavior. If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 	\boxtimes			The Officer in Charge always approves any change in conditions.
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.	\boxtimes			
The quarters used for segregation are: Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition.	\boxtimes			
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	\boxtimes			
The number of detainees confined to each cell or room is limited to the number for which the space was designate. • Does the OIC approve excess occupancy on a temporary basis?	\boxtimes			Staff advised that excessive occupancy has never been an issue.
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	\boxtimes			ICE staff would also be notified.
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	\boxtimes			
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. • Food is not used as punishment.	\boxtimes			Food is not used as punishment.
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	\boxtimes			Detainees may shower daily.

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COMPONENTS	YES	No	NA	REMARKS
Detainees receive, unless documented as a threat to security:				
 Barbering services; 				
 Recreation privileges; 				
 Other-than-legal reading material; 	\boxtimes			
 Religious material; 				
 The same correspondence privileges as other detainees; and 				
Personal legal material.				
When phone access is limited by number or type of calls, the				
following areas are exempt:				
 Calls about the detainee's immigration case or other legal 				
matters;	\boxtimes			
 Calls to consular/embassy officials; and 				
 Calls during family emergencies (as determined by the 				
OIC/Warden).				
A health care professional visits every detainee in disciplinary				A health care professional
segregation every week day.	\boxtimes			usually visits the Disciplinary
 The shift supervisor visits each segregated detainee daily 				Segregation unit twice daily.
Weekends and holidays.				begregation tallet twice daily.
SMU detainees are allowed visitors, in accordance with the	\boxtimes			
"Visitation" standard.				
SMU detainees receive legal visits, as provided in the "Visitation"				
standard.	\boxtimes			
Legal service providers are notified of security concerns				
arising before a visit.				
Visits from clergy are allowed.				
The clergy member is given the option of visiting/not				
visiting the segregated detainee.	\boxtimes			
Violent/uncooperative detainees are denied access to				
religious services when safety and security would otherwise be affected.				
SMU detainees have law library access.				
Violent/uncooperative detainees retain access to the law				
library unless adjudicated a security threat in writing.				
Legal material brought to individuals in the SMU on a case-	\boxtimes			
by-case basis.				
Staff documents every incident of denied access to the law				
library.				
All detainee-related activities are documented, e.g. meals served,				
recreation activities, visitors, etc.	\boxtimes			
The SPC's, the Special Management Housing Unit Record (I-888or				
equivalent), is prepared as soon as the detainee is placed in the SMU.				
All I-888s are filled out by the end of each shift.	\boxtimes			
The <u>CDF/IGSA</u> facility use Form.				
I-888 (or equivalent local form).				

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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COMPONENTS	YES	No	NA	REMARKS			
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 							
△ ACCEPTABLE □ DEFICIENT □	AT-RISK REPEAT FINDING						

REMARKS:

The Disciplinary Segregation unit operates in compliance with the NDS.

(b)(6), (b)(7)c April 8, 2010

TOOL CONTROL

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

COMPONENTS	YES	No	NA	REMARKS
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	\boxtimes			The facility major is responsible for tool control.
Department heads are responsible for implementing this standard in their departments.	\boxtimes			
Tool inventories are required for the: • Maintenance Department; • Medial Department; • Food Service Department; • Electronics Shop; • Recreation Department; and • Armory.	\boxtimes			There are no tools used in the recreation department. The facility does not have an electronics department.
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	\boxtimes			Facility policy 300.09 defines the tool control system. All departments check their tools daily. A monthly inventory is conducted and forwarded to the Warden.
The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous); and Non-Restricted (non-hazardous).	\boxtimes			All tools are classified.
Department heads are responsible for implementing tool-control procedures.	\boxtimes			
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	\boxtimes			
The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.	\boxtimes			The tool storage room is well organized.
Each facility has procedures for the issuance of tools to staff and detainees.	\boxtimes			There is a checkout system that is managed by the maintenance supervisor.
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools.	\boxtimes			
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	\boxtimes			Broken or worn out tools are disposed of by the maintenance supervisor.
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	\boxtimes			
✓ ACCEPTABLE ☐ DEFICIENT	AT-RISE	ζ.		REPEAT FINDING

REMARKS:

The tool control system is supervised by the facility major and implemented by the maintenance supervisor and department heads. At the time of the inspection, the maintenance department tool room was clean and well organized.

(b)(6), (b)(7)c April 8, 2010

AUDITOR'S SIGNATURE / DATE

TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

IN CONTROL OF THE DETAINEE CASE.				
COMPONENTS	YES	No	NA	REMARKS
Transporting officers comply with applicable local, state, and federal				
motor vehicle laws and regulations. Records support this finding of				
compliance.				
Every transporting officer required to drive a commercial size bus has				
a valid Commercial Driver's License (CDL) issued by the state of				
employment.				
Supervisors maintain records for each vehicle operator.				
Officers use a checklist during every vehicle inspection.				
 Officers report deficiencies affecting operability; and 		l		
 Deficiencies are corrected before the vehicle goes back into 				
service.				
Transporting officers:				
Limit driving time to 10 hours in any 15 hour period;				
Drive only after eight consecutive off-duty hours;				
Do not receive transportation assignments after having been				
on duty, in any capacity, for 15 hours;		_		
Drive a 50-hour maximum in a given work week; a 70-hour				
maximum during eight consecutive days;				
 During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a 				
safe area—exceeding the 10-hour limit.				
(b)(7)e officers with valid CDLs required in any bus transporting detainees.				
• When buses travel in tandem with detainees, there are (b)(7)e				
qualified officers per vehicle.				
An unaccompanied driver may transport an empty vehicle. The state of the				
Before the start of each detail, the vehicle is thoroughly searched.		┝┾		
Positive identification of all detainees being transported is confirmed.				
All detainees are searched immediately prior to boarding the vehicle				
by staff controlling the bus or vehicle.				
The facility ensures that the number of detainees transported does not				
exceed the vehicles manufacturer's occupancy level.				
Protective vests are provided to all transporting officers.				
The vehicle crew conducts a visual count once all passengers are on				
board and seated.				
 Additional visual counts are made whenever the vehicle 				
makes a scheduled or unscheduled stop.				
Policies and procedures are in place addressing the use of restraining		ΙΠ		
equipment on transportation vehicles.				
Officers ensure that no one contacts the detainees.		 		
 (b)(7) officer remains in the vehicle at all times when detainees 				
are present.				
Meals are provided during long distance transfers.				
The meals meet the minimum dietary standards, as identified				
by dieticians utilized by ICE.				

TRANSPORTATION (LAND TRANSPORTATION)

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STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.				
(b)(7)e				
The vehicles are clean and sanitary at all times.				
Personal property of a detainee transferring to another facility is:				
(b)(7)e				
_ ACCEPTABLE _ DEFICIENT _	AT-RISE			REPEAT FINDING

REMARKS:

ICE staff conducts all transportation.

(b)(6) April 8, 2010

AUDITOR'S SIGNATURE / DATE

USE OF FORCE					
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHOR	ORIZES TE	HE LISE O	F FOR	CE ONLY AS A LAST ALTERNATIVE AFTER ALL.	
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL					
OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETA					
AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY B DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WI				TRAINTS NECESSARY TO GAIN CONTROL OF A	
COMPONENTS	YES		NA	REMARKS	
(t	o)(7)e				

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	ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING REMARKS: (b)(7)(e) The facility policy for use of force is specific and comprehensive. Correctional officers are well trained and cognizant of the procedures.		COMPONENTS		YES	No	NA	REMARKS
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trained and cognizant of the procedures.	(b)(6) (b)(7)c	trained and co	gnızant of the procedures.					
(b)(6), (b)(7)c pril 8 2010	(5)(5)(5)(7) [pril 8, 2010	(b)(6), (b)(7)c	pril 8, 2010					

AUDITOR'S SIGNATURE / DATE

STAFF DETAINEE COMMUNICATIONS POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME. COMPONENTS YES No NA REMARKS The ICE Field Office Director ensures that weekly announced and X unannounced visits occur at the IGSA. Detention and Deportation Staff conduct scheduled weekly visits with Detention and Deportation staff X detainees held in the IGSA. visits the facility each Thursday. Scheduled visits are posted in ICE detainee areas. ICE Visitation Schedules were \boxtimes posted in the units where detainees are housed. The Facility Liason Checklist is Visiting staff observe and note current climate and conditions of \boxtimes confinement at each IGSA. used for this purpose. Request to Staff forms are ICE information request Forms are available at the IGSA for use by ICE detainees. readily available. There is a \bowtie special box provided to submit the request forms. The IGSA treats detainee correspondence to ICE staff as Special \boxtimes Correspondence. ICE staff responds to a detainee request from an IGSA within 72 Request forms are promptly answered. Copies of completed hours. \boxtimes request forms were evident in the detention files. ICE detainees are notified in writing upon admission to the facility of Detainees are notified in

REMARKS:

ICE staff visit the facility at least weekly. Schedules are posted in the units. Interviews with detainees indicate they have access to ICE staff.

DEFICIENT

 \boxtimes

AT-RISK

writing, and sign a form

the detention files.

REPEAT FINDING

documenting receipt. Copies of the signed notifications were in

(b)(6), (b)(7)c April 8, 2010 GNATURE / DATE

conditions of confinement.

their right to correspond with ICE staff regarding their case or

ACCEPTABLE

DETAINEE TRANSFER STANDARD

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

COMPONENTS	YES	No	NA	REMARKS
When a detainee is represented by legal counsel or a legal	IES	NO	NA	REMARKS
representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS				G-28's on record were contained in the detention files. The Detainee Transfer Notification forms are used to notify the legal representative.
Notification includes the reason for the transfer and the location of the new facility.	\boxtimes			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	\boxtimes			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	\boxtimes			
Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.		\boxtimes		This requirement is not contained in facility policy. However, facility and ICE staff indicated that operationally, it is followed.
The detainee is provided with a completed Detainee Transfer Notification Form.	\boxtimes			
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			I-203 A is the official form authorizing release from this facility
 For medical transfers: The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee. 	\boxtimes			
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.	\boxtimes			
For medical transfers, transporting officers receive instructions regarding medical issues.	\boxtimes			Information regarding medication schedules, acute conditions, etc. is relayed to the transport staff.
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	\boxtimes			
Transfer and documentary procedures outlined in Section C and D are followed.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.	\boxtimes			Sack lunches are provided if the transport will exceed scheduled meal times. Most transports from this facility are to a Service Processing Center 3 hours away.

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE. **COMPONENTS** YES No NA REMARKS An A File or work folder accompanies the detainee when transferred A-Files would accompany the \times to a different field office or sub-office. transfer in such cases. Files are forwarded to the receiving office via overnight mail no later Arrangements are in place to forward the A-File if it cannot than one business day following the transfer. \bowtie be sent at the time of transfer.

AT-RISK

REPEAT FINDING

DETAINEE TRANSFER STANDARD

REMARKS:

Facility policy does not specifically mandate that transfer plans are not discussed with the detainee, that the detainee is not notified of the transfer until immediately prior to departing, and that the detainee is not permitted to make phone calls or have contact with other detainees in general population.

DEFICIENT

April 8, 2010 GNATURE / DATE

ACCEPTABLE

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



MEMORANDUM FOR:

Michael J. Pitts

Field Office Director

San Antonio Field Office

APR 2 1 2010

FROM:

Robert P. Helwig

Assistant Director for Detention and Removal Management

SUBJECT:

Karnes County Correctional Center Annual Review

The annual review of the Karnes County Correctional Center conducted on April 6-8, 2010, in Karnes City, Texas has been received. A final rating of "Good" has been assigned. No further action is required and this review is closed.

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

- 1) The Field Office Director, Detention and Removal Operations, shall notify the facility within five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before April 6, 2011.

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

Should you or your staff have any questions regarding this matter, please contact	
(b)(7)(e) Deputy Assistant Director, Detention Management Division at (202) 732	(b)(6),
	(2)(3),

(b)(7)c

cc: Official File

ICE:HQDRO 04/19/2010 (b)(6), (b)(7)c

(b)(7)e

Department of Homeland Security

Immigration and Customs Enforcement Office of Detention and Removal

Condition of Confinement Review Worksheet

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

This Form to be used for Inspections of all Facilities Used Over 72 Hours



ICE Detention Standards Review Worksheet

 ✓ Local Jail – IGSA ✓ State Facility – IGSA ✓ ICE Contract Detention Facility 	
ICE Contract Detention Facility	
Name	ı
Karnes County Correctional Center	
Address (Street and Name)	
810 Commerce Street	
City, State and Zip Code	
Karnes City, Texas 78118	
County	
Karnes	
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent)	
(b)(7)a ry, Warden	
vame and title of Reviewer-In-Charge	ļ
(b)(6), (b)(7)(c) Lead Compliance Inspector	
Date[s] of Review	
April 6-8, 2010	
Type of Review	
Headquarters Operational Special Assessment Other	
	- 1

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

SECTION I DETAINEE SERVICES STANDARDS

ACCESS TO LEGAL MATERIALS

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

COMPONENTS	YES	No	NA	REMARKS
The facility provides a designated law library for detainee use.	×			The law library is located in the central corridor of the facility in an area assessable to the detainee population.
The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library.	\boxtimes			Attachment A is posted and all materials are available.
The library contains a sufficient number of chairs, is well lit, and is reasonably isolated from noisy areas.				There are (b)(7)e vork tables, (b)(7)a computer work stations, and a printer/copier work station. There is seating for approximately 20 detainees.
The law library is adequately equipped with typewriters and/or computers, and has sufficient supplies for daily use by the detainees.	\boxtimes			
In addition to the physical law library, detainees have access to the Lexus Nexus electronic law library.	\boxtimes			A LexisNexis station is provided.
Where provided, the Lexus Nexus library is updated and is current.	\boxtimes			The LexisNexis stations had the updated 12/09 version.
Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by ICE prior to inclusion.				
There is a designated ICE or facility employee who inspects, updates, and maintains/replaces legal materials and equipment on a routine pasis.				The facility has a designated law librarian who manages and supervises law library operations. Files and documentation were readily available.
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.	×			Facility policy 200.09, Law Library/Recreation Library, explains this process. In addition, page 10 of the detainee handbook gives law library hours and procedures.
Detainees may request materials not currently in the law library. Each request is reviewed and, where appropriate, an acquisition request is timely initiated. Requests for copies of court decisions are accommodated within 3 – 5 business days.				A Detainee Request Form is used for this purpose.
Detainees are permitted to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.				
Illiterate or non-English-speaking detainees without legal representation receive access to more than just English-language law books after indicating their need for help.	\boxtimes			Efforts would be made to obtain these types of legal materials, if requested. The request may be forwarded to ICE for assistance.
Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.				
Detainees housed in Administrative Detention and Disciplinary Segregation units have the same law library access as the general opulation, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.				The law librarian may take requested legal materials to the SMU. However, access to the law library is not prohibited.

ACCESS TO LEGAL MATERIALS POLICY: FACILITIES HOLDING ICE DETAINEES SHALL PERMIT DETAINEES ACCESS TO A LAW LIBRARY, AND PROVIDE LEGAL MATERIALS, FACILITIES, EQUIPMENT, DOCUMENT COPYING PRIVILEGES, AND THE OPPORTUNITY TO PREPARE LEGAL DOCUMENTS. COMPONENTS YES No NA REMARKS All denials of access to the law library fully documented. Denials would be documented X through the disciplinary process. Facility staff informs ICE Management when a detainee or group of \boxtimes detainees is denied access to the law library or law materials. Detainees who seek judicial relief on any matter are not subjected to This topic is covered in staff reprisals, retaliation, or penalties. training. Detainees have \boxtimes П unimpeded access to the legal system and the facility administrative process. **ACCEPTABLE** ■ DEFICIENT ☐ AT-RISK REPEAT FINDING REMARKS: The facility has a large law library which contains all of the legal resources identified on Attachment A legal resources as well as LexisNexis. The law library maintains documentation that revealed consistent use by the detainee population. Observation of the law library during open h detainees confirmed compliance with this standard. (b)(6), (b)(7)c April 8 AUDITOR'S SIGNATI (b)(6), (b)(7)c

ADMISSION AND RELEASE

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

SAFEGUARDED AS NECESSARY.	<u>, , , , , , , , , , , , , , , , , , , </u>			
COMPONENTS	YES	No	NA	REMARKS
In-processing includes an orientation of the facility. The orientation includes: Unacceptable activities and behavior, and corresponding sanctions; How to contact ICE; The availability of <i>pro bono</i> legal services, and how to pursue such services; schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.				All elements of this component are covered during the orientation period. The detainee signs a form regarding access to ICE staff as well as a receipt for the detainee handbook. Videos are shown to supplement information provided.
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.				Medical screenings are performed for every intake. The questionnaire is completed and filed in the detention files. If a medical issue is identified, there is an immediate referral to the medical department.
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.				The facility uses an objective based classification system which identifies threat factors that establish the security level. ICE Form 213 is used.
(b)(7)e Staff completes Form I-387 or similar form for CDFs and IGSAs for				If a detainee's property is lost, a GEO
every lost or missing property claim. Facilities forward all I-387 claims to ICE.				KCCC Disposition of Personal Property form is completed.
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	\boxtimes			

ADMISSION AND RELEASE POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY. COMPONENTS YES No NA REMARKS The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not \boxtimes charged for these items. All releases are properly coordinated with ICE using a Form I-203. Release documents including Form I- \boxtimes 203 were found in the archived detention files. In addition to the Form I-203, a GEO Staff completes paperwork/forms for release as required. KCCC Offender Release form is used, \boxtimes with an attachment Disposition of Personal Property. REPEAT FINDING **ACCEPTABLE** DEFICIENT AT-RISK REMARKS:

The facility complies with the NDS regarding A	dmission and Release administers the admission and release program in compliance
with the standa	
(b)(6), (b)(7)c	

AUDITOR'S SI

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

CLASSIFICATION SYSTEM

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

COMPONENTS

YES NO NA REMARKS

COMPONENTS	YES	No	NA	REMARKS
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.				The facility uses the U.S. Immigration and Customs Enforcement Detainee Classification System (Primary and Secondary), ICE Form 213.
The facility classification system includes: Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision.	×			
The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	\boxtimes			
Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainees classifications.	×			The initial security evaluation includes a score derived from the severity of most recent charges, serious offense history, escape history, and other special management concerns (e.g. psychological impairment, suicide risk, violent threat, etc.).
Housing assignments are based on classification-level.				Housing assignment is based on the classification level, level 1, level 2, level 3 or administrative segregation.
A detainee's classification-level does not affect his/her recreation opportunities. Detainees recreate with persons of similar classification designations.				
Detainee work assignments are based upon classification designations.				
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.				Policy 300.02, Offender Intake/Classification Procedures, requires a classification level reassessment every 60 days. A detainee may request a reassessment at any time.
Procedures exist for a detainee to appeal their classification assignment. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.				Appeal procedures are described in the detainee handbook, page 3, Classification, Section 5.
Classification appeals are resolved within five business days and detainees are notified of the outcome within 10 business days.				Classification appeals are initiated through the facility grievance system.
Classification designations may be appealed to a higher authority, such as the Warden or equivalent.	\boxtimes			
The Detainee Handbook or equivalent for IGSAs explains the classification levels, with the conditions and restrictions applicable to each.	\boxtimes			The detainee handbook, page 3, Classification Conditions and Restrictions, explains the classification levels.
			AT-RI	SK REPEAT FINDING

REMARKS:

The classification system	uses	appropriat	e risk	factors	to establish	a security leve	 Housing 	g assignments	, job assigr	ments,	and o	other
programming activities		1		ec	urity level.							

(b)(6), (b)(7)c April 8, 20

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

CORRESPONDENCE AND OTHER MAIL

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

COMPONENTS	YES	No	NA	REMARKS
The rules for correspondence and other mail are posted in each housing or common area, or provided to each detainee via a detainee handbook.	\boxtimes			Rules are provided in the detainee handbook, page 13, Correspondence Information.
The facility provides key information in languages other than English; In the language(s) spoken by significant numbers of detainees. List any exceptions.	\boxtimes			The detainee handbook and several postings are provided in Spanish.
Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	\boxtimes			Policy 200.10 Offender Mail, requires distribution within 24 hours excluding weekends and holidays.
Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	\boxtimes			
Staff does not open and inspect incoming general correspondence and other mail (including packages and publications) without the detainee present unless documented and authorized in writing by the Warden or equivalent for prevailing security reasons.				Staff is authorized by the Warden in Policy 200.10 to open and inspect incoming general correspondence.
Staff does not read incoming general correspondence without the Warden's prior written approval.				
	(b)(7)e			
Staff is prohibited from reading or copying incoming special correspondence.	\boxtimes			
	(b)(7)e			
Correspondence to a politician or to the media is processed as special correspondence and is not read or copied.	\boxtimes			Policy 200.10 lists the types of mail which is considered "special" or 'legal." Politicians and representatives of the media are included in this list.
The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.				The facility uses a "Notice of Rejection of Mail" form. This notification is sent to both the sender and the addressee.
The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.				
	(b)(7)e			

POLICY: ALL FACILITIES WILL ENSURE THAT DETAINEES SENI LIMITATIONS REQUIRED FOR THE SAFETY, SECURITY, AND ORDESUBJECT TO THE SAME LIMITATIONS. EACH FACILITY WILL WILL OTHER MAIL.	O AND F	RECEIVE PERATIO	CORRE	SPONDENCE IN A TIMELY MANNER, SUBJECT TO HE FACILITY. OTHER MAIL WILL BE PERMITTED,
	(b)(7)e			
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.	×			The facility uses a Mail Form for Cash Received to document and record the removal of funds from incoming mail. The money is deposited in the detainee's trust fund account, and the form is forwarded to the detainee.
Original identity documents (e.g., passports, birth certificates) are immediately removed and forwarded to ICE staff for placement in A-files.				Documentation was provided to verify this component.
Staff provides the detainee a copy of his/her identity document(s) upon request.	\boxtimes			
	(b)(7)e			
Every indigent detainee has the opportunity to mail, at government expense, reasonable correspondence about a legal matter, in three one ounce letters per week and packages deemed necessary by ICE.				
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	\boxtimes			
The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.				
□ Acceptable □ Deficient] AT-I	Risk	☐ REPEAT FINDING
REMARKS: The facility uses several forms to document activities relating to unsealed so staff may conduct a cursory inspection. (b)(6), (b)(7)c April 8, 20 AUDITOR'S SIGNATURE (b)(6), (b)(7)c	mail op	peration	ıs. Out	going mail is placed in the collection box

DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY. COMPONENTS YES No NA REMARKS The detainee handbook is written in English and translated into \boxtimes Spanish, or into the next most-prevalent Language(s). The handbook is supplemented by the facility orientation X П П video, where one is provided. All staff members receive a handbook and training regarding X П the handbook contents. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff \times П and detainees. There an annual review of the handbook by a designated Revisions are conducted annually, or as committee or staff member. needed. The last update was completed X П during the inspection. Reviews are conducted by each department, and a final review is conducted by the Warden. The detainee handbook addresses the following issues: Personal Items permitted to be retained by the \boxtimes П \Box detainee; and Initial issue of clothes, bedding and personal hygiene The detainee handbook states in clear language the basic X \Box detainee responsibilities. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification X appeals process. The handbook states when a medical examination will be Page 2 of the detainee handbook advises that П П conducted. M a medical examination will be conducted within fourteen days of arrival. The handbook describes the facility, housing units, dayrooms, X in-dorm activities, and special housing units. The handbook describes official count times and count procedures; meal times and feeding procedures; procedures for medical or religious diets; smoking policy; clothing exchange schedules; and, if authorized, clothes washing and drying \boxtimes П \Box procedures, and expected personal hygiene practices. The handbook describe times and procedures for obtaining disposable razors, and allows that detainees attending court \boxtimes П will be afforded the opportunity to shave first. The handbook describes barber hours and hair cutting \boxtimes П П restrictions. The handbook describes the telephone policy; debit card procedures; direct and free calls; locations of telephones; policy Telephone calls are limited to 20 minutes \boxtimes when telephone demand is high; and policy and procedures for which alleviates high demand. emergency phone calls. The handbook addresses religious programming. \boxtimes The handbook states times and procedures for commissary or Commissary schedules are posted in the \boxtimes vending machine usage, where available. housing units. The handbook describes the detainee voluntary work program. X he handbook describes the library location and hours of operation, and law library procedures and schedules.

DETAINEE HANDBOOK

POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINS						
DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT T						
PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS,						
ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK	No No		REMARKS			
COMPONENTS The handbook describes attorney and regular visitation hours,	YES	NO	NA	REMARKS		
policies, and procedures.	\boxtimes					
The handbook describes the facility contraband policy.	X		<u> </u>			
The handbook describes the facility visiting hours and						
schedule, and visiting rules and regulations.	\boxtimes					
The handbook describes the correspondence policy and procedures.	\boxtimes					
The handbook describes the detainee disciplinary policy and						
procedures, including:						
 Prohibited acts and severity scale sanctions; 	\boxtimes					
Time limits in the Disciplinary Process; and						
Summary of the Disciplinary Process.						
The grievance section of the handbook explains all steps in the						
grievance process – Including:		•				
 Informal (if used) and formal grievance procedures; 						
The appeals process;						
In CDF facilities: procedures for filing an appeal of a				The handbook states detainees may submit		
grievance with ICE.	\boxtimes			staff complaints to ICE officials during their		
Staff/detainee availability to help during the grievance	_			weekly visit or thru the DHS-OIG hotline.		
process.				•		
Guarantee against staff retaliation for filing/pursuing a						
grievance.						
 How to file a complaint about officer misconduct with the Department of Homeland Security. 						
The detainee handbook describes the medical sick call						
procedures for general population and segregation.	\boxtimes					
The handbook describes the facility recreation policy including:						
Outdoor recreation hours.	\boxtimes		│ □			
Indoor recreation hours.						
The handbook describes the detainee dress code for daily						
living; and work assignments.	\boxtimes					
The handbook specifies the rights and responsibilities of all	\boxtimes					
detainees.						
✓ ACCEPTABLE ☐ DEFICIENT		AT-RI	SK	REPEAT FINDING		
REMARKS:						
The detainee handbook is revised as necessary. A copy is provided to the detainee during intake processing at the facility. This						
process ensures tha						
(b)(6), (b)(7)c						
(1-)(0) (1-)(7)						
AUDITOR'S SIGNA						

FOOD SERVICE

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

COMPONENTS	YES	No	NA	REMARKS
The food service program is under the direct supervision of a <u>professionally trained</u> and certified food service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.				The Food Service Administrator has completed a certified training course in Food Management from the Beaumont Environmental Health Division.
The Cook Supervisor is on duty on days when the FSA is off duty and vice versa.	\boxtimes			
The FSA provides food service employees with training that specifically addresses detainee-related issues. • In ICE Facilities this includes a review of the ICE "Food Service" standard		\boxtimes		At the time of the inspection, the Food Service Administrator did not have a copy of the NDS regarding Food Service.
	(b)(7)e			
When necessary, special procedures govern the handling of food items that pose a security threat.				
Operating procedures include daily searches (shakedowns) of detainee work areas.	\boxtimes			
The FSA monitors staff implementation of the facility's population counts procedures. Staff is trained in count procedures.	\boxtimes			The facility's count procedures are covered during the 120 hour orientation pre-service training.
The detainees assigned to the food service department look neat and clean. Their clothing and grooming comply with the "Food Service" standard.	\boxtimes			
The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	\boxtimes			
The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	\boxtimes			
 During orientation and training session(s), the CS explains and demonstrates: Safe work practices and methods; Safety features of individual products/pieces of equipment; and Training covers the safe handling of hazardous material[s] the detainees are likely to encounter in their work. 				
The Cook Supervisor documents all training in individual detainee detention files.				
Detainees at CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and state rules and regulations regarding detainee pay.				
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	\boxtimes			Detainees are served three hot meals each day. The evening meal is served at 6:00 PM and breakfast is served at 5:30 AM.

FOOD SERVICE

POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. COMPONENTS YES No NA REMARKS For cafeteria style operations, a transparent "sneeze guard" This facility utilizes satellite feeding П П \boxtimes protects both the serving line and salad bar line. procedures only. The facility has a standard 35-day menu cycle. IGSAs use a X This facility utilizes a six week menu cycle. 35 day or similar system for rotating meals. The FSA or facility considers the ethnic diversity of the The menu includes eggs with chorizo, corn facility's detainee population when developing menu cycles X dogs, fish, tacos, turnip greens, combread, (Provide examples). green chili and chicken fried steak. A registered dietitian conducts a complete nutritional X analysis of every master-cycle menu planned. The FSA has established procedures to ensure that items on \boxtimes the master-cycle menu are prepared and presented according to approved recipes. The Cook Foreman has the authority to change menu items if necessary. If yes, documenting each substitution, along with its \boxtimes \Box П iustification With copy to FSA All staff and volunteers know and adhere to written "food X \Box П preparation" procedures. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain X П П A common-fare menu available to detainees whose dietary requirements cannot be met on the main line. Changes to the planned common-fare menu can be made at the facility level; Hot entrees are offered three times a week: The common-fare menus satisfy nutritional recommended daily allowances (RDAs); \boxtimes П Staff routinely provide hot water for instant beverages and foods; o Common-fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. A supervisor at the command level must approve a The Chaplain, Warden and Food Service \boxtimes detainee's removal from the Common-Fare Program. П П Administrator must approve a detainee's removal from the Common-Fare Program. The Warden, in conjunction with the chaplain and/or local

 \boxtimes

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religious leaders, provides the FSA a schedule of the

ceremonial meals for the following calendar year.

FOOD SERVICE

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

COMPONENTS	YES	No	NA	REMARKS
 The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 				
The food service program addresses medical diets.				
Satellite-feeding programs follow guidelines for proper sanitation.		\boxtimes		Equipment not in use had food particles under and on the machines. After washing, food trays still had food residue on them.
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) while being served.				Hot food was plated at between 152 - 180 degrees. The food temperatures, when delivered, ranged from 118 - 138.9 degrees. No cold items were served during the meal observed. All meals were served within two hours of the food being plated in compliance with the NDS pg.20, G (1). The food carts used for satellite feeding are not enclosed and do not have locking devices which is a requirement of the NDS C2 (g). The food carts are transported from food service to the housing units by a correctional officer.
All meals are provided in nutritionally adequate portions.				<u> </u>
Food is not used to punish or reward detainees based upon behavior.	\boxtimes			
The food service staff instructs detainee volunteers on: • Personal cleanliness and hygiene; • Sanitary techniques for preparing, storing, and serving food; and • The sanitary operation, care, and maintenance of equipment.				
Everyone working in the food service department complies with food safety and sanitation requirements.	\boxtimes			
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • Who conducts the inspections?				The Food Service Administrator conducts inspections of all food service areas.
Equipment is inspected for compliance with health and safety codes and regulations. • When was the most recent inspection? • Which agency conducted the inspection?				The most recent inspection of equipment was conducted on March 10, 2010 by (6). (b)(7) Fire and Safety Equipment Company. No concerns were identified during the inspection.
Reports of discrepancies are forwarded to the Warden or designated department head, and corrective action is cheduled and completed.	\boxtimes			Any discrepancies are reported to the Safety Officer who forwards a report to the Warden to initiate corrective action.
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.				

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FOC	DD SER	VICE				
POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS.	ITS CA	RE WIT	H NUTRI	TIOUS AND APPETIZING MEALS, PREPARED IN		
COMPONENTS	YES	No	NA	REMARKS		
Staff documents the results of every refrigerator/freezer temperature check.						
The cleaning schedule for each food service area is conspicuously posted.	\boxtimes					
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes					
Storage areas are locked when not in use.	\boxtimes					
ACCEPTABLE □ DEFICIENT		ПАТ	-Risk	REPEAT FINDING		
REMARKS:			,			
Overall, the facility complies with the NDS regarding Food Service with two exceptions. At the time of the inspection, the sanitation for the satellite feeding program was poor. It is recommended that the facility address and improve the sanitation so that food trays, after washing, are clean and have no residue remaining. It is also recommended that equipment used to prepare meals be kept clean.						
The food service department is in the process of purchasing the The use of thermo covers will assist in maintaining the tempers serving.						
(b)(6), (b)(7)c April AUDITOR'S SIGNATURE (b)(6), (b)(7)c						

POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND SAFEGUARD DETAINEES' PERSONAL PROPERTY. PROCEDURES WILL PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE AND OTHER PERSONAL PROPERTY; THE DOCUMENTATION AND RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULARLY SCHEDULED INVENTORYING OF ALL FUNDS, VALUABLES, AND OTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAINEE FUNDS, VALUABLES AND PROPERTY ARE HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.						
COMPONENTS	YES	No	NA	REMARKS		
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	\boxtimes			Detainee valuables are stored in the intake department.		
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	\boxtimes			Detainee clothing is secured in a building containing a property room which is separate from the intake department. The lieutenant and intake officers have access to the property room.		
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). For IGSAs and CDFs, using a personal property inventory form that meets the ICE standard?	⊠					
Staff forwards an arriving detainee's medication to the medical staff.				The intake officers label the medications with an identification number and then forward it to medical staff.		
Audits of baggage and non-valuable property occur each quarter and audits are logged and verified.		\boxtimes		There was no documentation to show audits of non-valuable property were conducted.		
(b)(7)(e) officers are present during the processing of detainee funds and valuables during in-processing to the facility. (b)(7)(e) officers verify funds and valuables.	\boxtimes					
(b)(7)e, (b)(6	5)					
Staff procedures follow written policy for returning forgotten property to detainees.	\boxtimes			Facility policy 200.11 provides the procedures for forgotten property.		
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes					
Staff follows written procedures when returning property to detainees.				Facility policy 200.11 provides the procedures for returning property.		
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes					
The facility attempts to notify an out-processed detainee that he/she left property in the facility: • By sending written notice to the detainee's last known address; • Via certified mail; and • The notice state that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.		×		Any property left at the facility is given to ICE staff for processing.		
The facility disposes of abandoned property in accordance with written procedures. • If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.						
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING		

REMARKS:

When attempts to return property to detainees fail, the property is turned over to ICE staff for processing.

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

AUDITOR'S SIG:
(b)(6), (b)(7)c

DETAINEE GRIEVANCE PROCEDURES

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

COMPONENTS	YES	No	NA	REMARKS
Written procedures provide for the informal resolution of oral grievances (Not mandatory). • If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff.	×			Grievance procedures are included in the detainee handbook and facility policy 200.20.
Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.	⊠			
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	⋈			
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.				There have been no cases reported of staff misconduct or harassment.
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed.				
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	\boxtimes			
ACCEPTABLE □ DEFICIENT □	AT-RIS	SK .		REPEAT FINDING

REMARKS:

The Grievance Coordinator responses to all grievances.

(b)(6), (b)(7)c **AUDITOR'S SIGNA**

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

GROUP LEGAL RIGHTS PRESENTATIONS

POLICY: FACILITIES HOUSING ICE DETAINEES SHALL PERMIT AUTHORIZE PERSONS TO MAKE PRESENTATIONS TO GROUPS OF

DETAINEES FOR THE PURPOSE OF INFORMING THEM OF U.S. IMMIGRATION LAW AND PROCEDURES, CONSISTENT WITH THE SECURITY AND REDERLY OPERATION OF EACH FACILITY. ICE ENCOURAGES SUCH PRESENTATIONS, WHICH INSTRUCT DETAINEES ABOUT THE IMMIGRATION SYSTEM AND THEIR RIGHTS AND OPTIONS WITHIN IT. CHECK HERE IF NO GROUP PRESENTATIONS WERE CONDUCTED WITHIN THE PAST 12 MONTHS. MARK STANDARD AS ACCEPTABLE OVERALL AND CONTINUE ON WITH NEXT PORTION OF WORKSHEET. COMPONENTS YES No NA REMARKS The Field Office is responsive to requests by attorneys and accredited \boxtimes representatives for group presentations. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE Field Office ensures timely and proper notification \boxtimes \Box to attorneys or accredited representatives. The facility follows policy and procedure when rejecting or requesting Any material submitted to the modifications to objectionable material provided or presented by the X \Box facility is approved by ICE prior to distribution. attorney or accredited representative. There have been no formal presentations in the units or in classrooms. Legal Rights Posters announcing presentations appear in common areas at least 48 \boxtimes \Box Presentations at this facility are hours in advance and sign-up sheets are available and accessible. provided and viewed by individuals or small groups during the intake process. Documentation is submitted and maintained when any detainee is \boxtimes П \Box denied permission to attend a presentation and the reason(s) for the denial. When the number of detainees allowed to attend a presentation is limited, the facility provides a sufficient number of presentations so X П hat all detainees signed up may attend. Detainees in segregation, unable to attend for security reasons, may \boxtimes request separate sessions with presenters. П Such requests are documented. Interpreters are admitted when necessary to assist attorneys and other X legal representatives. Presenters are afforded a minimum of one hour to make the \boxtimes presentation and to conduct a question-and-answer session. Staff permits presenters to distribute ICE-approved materials. X Presenters are permitted to meet with small groups of detainees to There have been no requests for discuss their cases after the group presentation. ICE or authorized X \Box such presentations in the last 12 detention staff is present but do not monitor conversations with legal months. providers. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee; and the reasons for suspension are documented. The Headquarters Office for Detention \boxtimes and Removal, Field Operations and Detention management Division, is notified when a group or individual is suspended from making presentations. The facility plays ICE-approved videotaped presentations on legal Approved videos are played X \Box rights at regular opportunities, at the request of outside organizations. during the intake process. This policy is included in the detainee handbook, page 12, A copy of the Group Legal Rights Presentation policy, including \boxtimes П Group Legal Rights attachments, is available to detainees upon request Presentations. **ACCEPTABLE** DEFICIENT ☐ AT-RISK REPEAT FINDING

REMARKS:

Videos developed by the Florence Immigration and Refugee Rights Project are provided for detainees during intake. A video entitled "Know Your Rights" and a video entitled "All about Bonds" is also provided. Recently, legal providers have also provided written materials for detained use. There have been no second for live presentations by legal rights groups during the last 12 months.

(b)(6), (b)(7)c / Api AUDITOR'S SIGN

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

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, and towels. • The supply of these items exceeds the minimum required for the number of detainees.				Facility policy 200.14 provides the procedures for issuance of clothing and exchanges.
 All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive: One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and One pair of facility-issued footwear. 				Detainees are provided two pairs of socks and underwear.
Additional clothing is available for changing weather conditions, or as seasonally appropriate.	\boxtimes			Sweatshirts are provided during winter months.
New detainees are issued clean bedding, linens, and towels. They receive at a minimum: One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions.				One sheet is issued to detainees. Additional blankets are approved by medical staff or through a written request.
Detainees assigned to special work areas are clothed in accordance with the requirements of the job.	\boxtimes			
Detainees are provided clean clothing, linen and towels. Socks and undergarments - exchanged daily. Outer garments - twice weekly. Sheets - weekly. Towels - weekly. Pillowcases - weekly.	⊠			
Food service detainee volunteer workers are permitted to exchange outer garments daily.	\boxtimes			
Volunteer detainee workers are permitted to exchange outer garments more frequently.	\boxtimes			
□ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		☐ REPEAT FINDING

REMARKS:

All detainees are allowed to have their clothes washed on a daily basis.

, ,)(6), (b)(7)e DITOR'S SIGNA	(b)(6), (b)(7)c, (b)(7)b

MARRIAGE REQUESTS					
POLICY: ALL DETAINEE MARRIAGE REQUESTS WILL RECEIVE CASE-BY-CASE CONSIDERATION FROM ICE MANAGEMENT.					
COMPONENTS	YES	No	NA	REMARKS	
The Field Office considers detainee marriage requests on a case-by- case basis.				The Assistant Field Office Director reviews each marriage request.	
The Field Office Director reviews every marriage request rejected by a Warden/OIC or IGSA. Rejections are documented.	⊠			The Assistant Field Office Director notifies the Warden if a marriage request is rejected. There have been no marriage requests in the past year.	
It is standard practice to require a written request for permission to marry.	\boxtimes				
The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.					
The Warden/OIC provides a written copy of his/her decision to the detainee and his/her legal representative.					
When permission is denied, the Warden/OIC states the basis for his/her decision.	\boxtimes				
The Warden/OIC provides the detainee with a place and time to make wedding arrangements.	\boxtimes				
ACCEPTABLE □ DEFICIENT □	AT-RISI	(REPEAT FINDING	

REMARKS:

ICE handles all marriage requests on a case-by-case basis. All documentation is maintained in the detainee's A-file. There have been no marriage requests submitted during the past year by detainees.

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

NON-MEDICAL EMERGENCY ESCORTED TRIPS

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

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

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

REMARKS:



RECREATION

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a recreation program and facility.				The state of the s
A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.				
Regular maintenance keeps recreational facilities and equipment in good condition.				
The recreational specialist or trained equivalent supervises detainee recreation workers.			\boxtimes	Detainees do not work in the recreation area.
The recreational specialist or trainee equivalent oversees recreation programs for special housing units (SHU) and special-needs detainees.				
Dayrooms offer sedentary activities, e.g., board games, cards, television.				
Outside activities are restricted to limited-contact sports.				
Each detainee has the opportunity to participate in daily recreation.				
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	\boxtimes			
Staff checks all items for damage and condition when equipment is returned.	\boxtimes			
Staff conducts searches of recreation areas before and after use.				
All recreation areas under constant staff supervision.				(b)(7)(e)
Supervising staff is equipped with radios.				<u> </u>
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.				Detainees in SHU are provided the opportunity for outdoor recreation every day.
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.				No recreation privileges were revoked during the past year.
Special programs or religious activities are available to detainees.		$\vdash \sqcap$		revened during the past year.
Volunteers are required to sign a waiver of liability before entering a	$\overline{}$			
secure portion of the facility where detainees are present.			🗆	
Visitors, relatives or friends are not allowed to serve as volunteers.				
☑ If outdoor recreation is offered, check this box. No further inform		required	when or	utdoor recreation is offered.
If the facility has no outside recreation, are detainees considered for				
transfer after six months? • If yes, written procedures ensure timely review of all eligible detainees.				
Case officers make written transfer recommendations about every six- month detainee to the OIC.				
The OIC documents all detainee-transfer decisions, whether yes or no.				
The detainee's written decision for or against an offered transfer documented in his/her A-file.				
Staff notifies the detainee's legal representative of his/her decision to accept/decline a transfer.				
If no recreation is available, the ICE Districts routinely review transfer eligibility for all detainees after 60 days.				
The A-file of every detainee who is held more than 60 days without access to recreation contains either a transfer-waiver signed by the detainee, or the OIC's written determination of the detainee's ineligibility for transfer.				
The detainee's legal representative is notified of the detainee's/OIC's ecision.				
Acceptable □ Deficient □	AT-RISE	ζ.		REPEAT FINDING

REMARKS:

Detainees are provided the meet in special grou	e appartunity to utilize the	recreation area seven days a week. ns and prayers.	With prior approval, detainees are allowed to
(b)(6), (b)(7)c AUDITOR S SIGNAT	(b)(6), (b)(7)c		

COMPONENTS	YES	No	NA	REMARKS
Detainees are allowed to engage in religious services.	\boxtimes			
Space is available for detainees to conduct religious services.	\boxtimes			Religious services are provided in the library or in the classroom located on Bravo Hall.
The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.				
The facility accommodates recognized holy-day observances by: Providing special meals, consistent with dietary restrictions; Honoring fasting requirements; Facilitating religious services; and Allowing activity restrictions.		, 🗆		
Each detainee is allowed religious items in his/her immediate possession.	\boxtimes			
Volunteer's credentials are checked and verified before allowing participation in detainee programs.				National Crime Information Center checks are conducted on volunteers prior to approval for participation in detainee programs.
Members of faiths not represented by clergy may conduct their own services within security allowances.	\boxtimes			
Detainees in the Special Management Unit are allowed to participate in religious practices unless otherwise documented for the safety and security of the facility.				
ACCEPTABLE □ DEFICIENT □	AT-RISI	ζ.		REPEAT FINDING

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

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

DETAINEE TELEPHONE ACCESS POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. COMPONENTS YES No NA REMARKS Phones are available from 6:00 AM to Detainees are allowed access to telephones during established \boxtimes 10:30 PM daily. Phones may be left on facility waking hours. until 1 AM on week-ends and holidays. Phone access procedures are posted on the Upon admittance, detainees are made aware of the facility's phone and are explained in the detainee \boxtimes telephone access policy. handbook. Access rules are posted on the phones in \Box X Access rules are posted in housing units. each housing unit. Information regarding phone access is The facility makes a reasonable effort to provide key available in Spanish. In addition, the caller information to detainees in languages spoken by any significant \boxtimes may select the Spanish recordings for portion of the facility's population. certain speed dial connections. The two units used to house ICE detainees Telephones are provided at a minimum ratio of one telephone each contain 28 beds and each unit has \bowtie П per 25 detainees in the facility population. (b)(7)ephones. Other housing units are similarly equipped with phones. Telephones are inspected regularly by facility staff to ensure All phones were checked and in working \boxtimes \Box that they are in good working order. order during the inspection. The facility administration promptly reports out-of-order \boxtimes \Box telephones to the facility's telephone service provider. The facility administration monitors repair progress and takes appropriate measures to ensure that required repairs are begun \boxtimes and completed timely. Detainees are afforded a reasonable degree of privacy for legal A detainee may request assistance from M П staff in placing private legal calls. bhone calls. Detainees may advise unit staff of the A procedure exists to assist a detainee who is having trouble X \Box concern or submit a "Request to Staff" placing a confidential call. form. The facility provides the detainees with the ability to make non- \boxtimes collect (special access) calls. Special Access calls are at no charge to the detainees. X П The inspector checked the hotline number The OIG phone number for reporting abuse is programmed into and spoke with a live communications the detainee phone system and the phone number was checked \bowtie specialist at DHS. The OIG Hotline by the inspector during the review. number was posted in the units and included in the speed dial listings. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes \bowtie \Box alternate arrangements to provide required access within 24 hours of a request by a detainee. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved \boxtimes "Free Legal Services List". Policy 200.08 addresses this component. Facility staff forward such requests from Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another \boxtimes an ICE detainee to ICE staff or instruct the Facility. detainee to submit a "Request to Staff" form directly to ICE. There were no restrictions in place during the inspection. Any restrictions would be Any telephone restrictions are documented. \boxtimes documented through the disciplinary

DETAINEE TELEPHONE ACCESS POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES. COMPONENTS YES No NA REMARKS The facility has a system for taking and delivering emergency Policy 200.08 instructs staff to deliver M detainee telephone messages. emergency messages as soon as possible. Emergency phone call messages are immediately given to \boxtimes \Box detainees. Detainees are allowed to return emergency phone calls as soon This requirement is included in policy \boxtimes 200.08. as possible. Detainees in disciplinary segregation are allowed phone calls \boxtimes relating to the detainee's immigration case or other legal matters, including consultation calls. Detainees in disciplinary segregation are allowed phone calls to \boxtimes consular/embassy officials. Detainees in disciplinary segregation are allowed phone calls for \bowtie \Box family emergencies. Detainees in administrative detention and protective custody are \boxtimes afforded the same telephone privileges as those in general population. When detainee phone calls are monitored, notification is posted Notification regarding monitoring is posted \boxtimes on each individual telephone and included by detainee telephones that phone calls made by the detainees . may be monitored. Special Access calls are not monitored. in the detainee handbook. **ACCEPTABLE** ☐ DEFICIENT ☐ AT-RISK REPEAT FINDING REMARKS: The facility complies with the NDC according Datained Telephone Access. (b)(6), (b)(7)c April 8,

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

AUDITOR'S SIGNATU

VISITATION

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

COMPONENTS	YES	No	NA	REMARKS
There is a written visitation schedule and hours for general visitation.				Visitation Schedules are posted in several areas throughout the facility. Additionally, visitation hours are included in the detainee handbook and in policy 200.01, Offender Visitation.
The visitation hours tailored to the detainee population and the demand for visitation.				Visitation is permitted Thursday, Friday, and Saturday between the hours of 8:00 AM - 5:00 PM. Special visits may be requested and approved during other times. Attorney visits are allowed every day, if requested.
The visitation schedule and rules are available to the public.	\boxtimes			
The hours for all categories of visitation are posted in the visitation waiting area.				
A written copy of the rules regulating visitation and the hours of visitation is available to visitors.				A handout, Karnes County Correctional Center Visitation Rules, is available in the Front Gate Building.
A general visitation log is maintained.				The visitation log is maintained in the Front Gate Building.
The detainees are permitted to retain personal property items specified in the standard.	\boxtimes			
A visitor dress code is available to the public.	\boxtimes			The dress code is described in the handout and is also posted in the visitation lobby.
Visitors are searched and identified according to standard requirements.	\boxtimes			
The requirement on visitation by minors is complied with.				Minors are allowed to visit if they are on the approved list submitted by the detainee and are accompanied by an approved adult.
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.				Minors are allowed to visit.
After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.			\boxtimes	Minors are allowed to visit at this facility.
Detainees in special housing are afforded visitation.	\boxtimes			
Legal visitation is available seven (7) days a week, including holidays.	\boxtimes			This component is defined in policy 200.01, and in the detainee handbook.
On regular business days legal visitation hours are provide for a minimum of eight (8) hours per day, and a minimum of four hours per day on weekends and holidays.				
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.				
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.				Private consultation rooms are available, and the rooms have a document portal.
There are written procedures governing detainee searches.				Policy 300.01 governs detainee searches.
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.				Strip searches are not conducted following contact visits.

VISI	TATIO	N		
POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, THE NEWS MEDIA.	FRIEND	S, LEGA	L REPRI	
Prior to each visit, legal service providers and assistants are identified per the standard.				Proper identification is required. The attorney must be on the approved list submitted by the detainee.
The current list of <i>pro bono</i> legal organizations is posted in the detainee housing areas and other appropriate areas.				
The decision to permit or deny a tour is not delegated below the level of Field Office Director.				
Provisions for NGO visitation, as stated in the Detention Standards, are complied with.				Provisions for NGO, or other special visits, are described in Policy 200.01.
Law enforcement officials who request to visit with a detainee are referred to the ICE Field Office for approval.				
Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the OIC or ICE Field Office.				
Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	\boxtimes			
✓ ACCEPTABLE ☐ DEFICIENT		AT-RI	SK	☐ REPEAT FINDING
REMARKS:				
The facility has 10 non-contact stations and six large tables with allowed contact visitation unless precluded by a security concern (b)(6), (b)(7)c April 8, 20 GNATURE (b)(6), (b)(7)c		for cont	act visit	ation. ICE detainees at this facility are

VOLUNTARY WORK PROGRAM

COMPONENTS	YES	No	NA	REMARKS
Does the facility have a voluntary work program? • Do ICE detainees participate?	\boxtimes			ICE detainees are allowed to work in the food service department, housing units, laundry, and barber shop.
Detainee housekeeping meets neatness and cleanliness standards.	\boxtimes			
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	\boxtimes			
Written procedures govern selection of detainees for the Voluntary Work Program.	\boxtimes			Facility policy 200.03 provides the procedures for selecting detainees to participate in the Voluntary Work Program.
Where possible, physically and mentally challenged detainees participate in the program.			\boxtimes	There have been no mentally or physically challenged detainees requesting to participate in the volunteer work program during the past year.
The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day and Forty hours a week.				
Detainee volunteers generally work according to fixed schedule.				
If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.				
Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.				
The voluntary work program meets: OSHA, NFPA, ACA standards	\boxtimes			
Medical staff screen and formally certify detainee food service volunteers. • Before the assignment begins; and • As a matter of written procedure				Medical staff signs off on the work waiver to indicate the detainee has been approved to work in the food service department.
Detainees receive safety equipment/ training sufficient for the assignment.				
Proper procedure is followed when an ICE detainee is injured on the job.				
✓ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISE	ζ.		REPEAT FINDING
REMARKS:				

SECTION II HEALTH SERVICES STANDARDS

HUNGER STRIKES

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

COMPONENTS	YES	No	NA	REMARKS
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.				Policy 513, Management of Hunger Strikes, requires notification of medical staff when a detainee has refused food for 72 hours. The Health Service Administrator (HSA) advised that, in practice, the medical unit is notified within 24 hours of the first refused meal.
CDFs and IGSAs immediately report a hunger strike to the ICE.				In accordance with policy 513 and as confirmed by the Health Service Administrator and the SIEA, ICE is notified immediately of any detainee hunger strike.
The facility has established procedures to ensure staff respond immediately to a hunger strike.				Policy 513 establishes procedures to ensure staff respond immediately to a hunger strike.
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. • If yes, in an observation room?				Policy 513 requires the isolation of detainee hunger strikers. The Health Service Administrator advised that hunger strikers are admitted to the observation cell in the medical unit. If this cell is unavailable, one of the camera-monitored cells in Unit 268 is used. This includes cells 1, 2, 11 and 12.
Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.				As confirmed by the Health Service Administrator, medical staff is authorized to place a hunger striker in one of the designated cells.
Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.				In accordance with policy 513 and as confirmed by discussions with the Health Service Administrator and a review of a hunger striking detainee's medical record, medical staff record the weight and vital signs of a hunger striker upon initial evaluation and at least once every 24 hours thereafter.
The OIC of the facility obtains a hunger striker's consent before medical treatment.				Policy 513 requires the signing of a consent for medical treatment. A general Consent to Medical Services is signed during the medical intake screening process. This was confirmed based on a review of detainee medical records.

HUNGER STRIKES

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

WILL STRIVE TO SUSTAIN THEIR LIVES.		 	
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.			In accordance with policy 513 and as confirmed by the Health Service Administrator and a review of a hunger striking detainee's medical record, any detainee refusing medical evaluation or treatment must sign a Release of Responsibility for Medical Services form. If a detainee refuses to sign the form, medical staff documents the refusal to sign.
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	×		In accordance with policy 513 and as confirmed by the Health Service Administrator and a review of a completed Hunger Strike Monitoring Form in a detainee medical record, 3 meals are offered each day. The acceptance or refusal of each meal is documented on this form.
Staff maintains the hunger striker's supply of drinking water/other beverages.			The Health Service Administrator advised that detainees placed in an observation cell for a hunger strike initially retain independent access to water via the in-cell sink. If the hunger strike persists, the detainee is placed on a strict intake/output monitoring status and all drinking water and other beverages are provided by staff.
During a hunger strike, staff removes all food items from the hunger striker's living area.			In accordance with policy 513 and as confirmed by the Health Service Administrators, detainees placed in an observation cell for a hunger strike are not permitted to purchase or retain commissary food items.
Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.			Policy 513 requires documentation of a hunger striker's fluid intake and food consumption. Based on a review of a detainee medical record, this information is documented on a Hunger Strike Monitoring Form.
The medical staff has written procedures for treating hunger strikers.			Policy 513 establishes written procedures for the treatment of hunger strikers.
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.			The Health Service Administrator advised and as confirmed by a review of a hunger striking detainee's medical record, medical staff documents all treatment attempts in the detainee's medical record.

HUNGER STR	IKES	- 				-
POLICY: ALL FACILITIES WILL FOLLOW STANDARD GUIDELINES FOR DETAINEES ENGAGING IN HUNGER STRIKES. BY MONITORING OF THE HEAVILL STRIVE TO SUSTAIN THEIR LIVES.						
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remains current in evaluation and treatment techniques.			and as a training employ received of hung and and Training the Heat confirm received	confirmed by schedules ee training or strikes dual in-serving document. Ith Service and that me is training or	ne training officer by a review of and individual records, staff in the identificatio uring pre-service ice training. tation provided by Administrator edical staff in the evaluation unger strikers.	on
□ ACCEPTABLE □ DEFICIENT □	AT-R	SK	REP	EAT FINDI	√G	
REMARKS: During the inspection, numerous discussions with the Health Service Ac detainee medical records. Of this number, one ICE detainee went on a hamedical staff and began eating again on the third day of his hunger strike (b)(6), (b)(7)c ADDITOR S SIGNA (b)(6), (b)(7)c	unger st					

ACCESS TO MEDICAL CARE

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

COMPONENTS	YES	No	NA	REMARKS
Facilities operate a health care facility in compliance with state and local laws and guidelines.				Documentation maintained by the Health Service Administrator (HSA) was reviewed. Licenses for the physician, dentist, psychiatrist and nursing staff are active and current. The facility maintains a Clinical Laboratory Improvement Amendment (CLIA) waiver for the limited on-site lab operation and a pharmacy with waiver license for the storage and distribution of medications. Dental x-ray equipment inspections are up-to-date. The medical facility maintains no accreditations.
The facility's in-processing procedures for arriving detainees include medical screening.				As confirmed by a review of the 21 available detainee medical records, medical intake screening is consistently completed during in-processing by staff assigned to the intake department.

ACCESS TO M	EDICA	L CAR	E			
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.						
All detainees have access to and receive medical care.				As confirmed by a review of detainee medical records and direct observations in the medical and detainee housing units, detainees have access to and receive medical care through sick call requests and direct requests to staff for more urgent concerns. The majority of medical staff is bilingual speaking both English and Spanish. Phone-based interpreters are available for non-English or Spanish speaking detainees. Instructions for accessing medical care, sick call requests, and consent and refusal forms are available in both English and Spanish. Chronically ill detainees are tracked, medically monitored, and seen at least quarterly by the physician. Detainees receive instructions on accessing medical care during intake processing. Instructions are also included on page 7 of the detainee handbook. Medical outpatient and limited inpatient services, dental care, and mobile x-ray services are provided on-site. EKG's are completed through a phone link with Compumed. Lab testing is provided through a contract with LabCorp. Hospital-based emergency and inpatient services are available at the Otto-Kaiser Memorial Hospital. Specialty care services are available through community providers. On site mental health services, provided daily by a psychologist, are supplemented by teleconference psychiatric services.		
The facility has access to a PHS/DIHS Managed Health Care			····	The Health Service Administrator		

 \boxtimes

advised that medical staff has access to a Managed Care Coordinator through contact with local ICE staff or through

the TARWeb system. Such requests are usually approved within 24 hours. An approved request was noted in a

detainee medical record.

Coordinator.

ACCESS TO M	EDICA	L CAR	Œ	
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN	ACCRE	DITED/A	CCREDI	TATION-WORTHY HEALTH PROGRAM FOR
THE GENERAL WELL-BEING OF ICE DETAINEES. The medical staff is large enough to provide, examine, and treat the facility's detainee population.				Medical services are provided 24 hours a day, 7 days/week. The Health Service Administrator (HSA) advised that the physician is on-site 2 days a week and on-call when not on site. A dentist and dental assistant provide services 10 hours per week. Mental health staffing includes (b)(7)e psychologist on site 1-1.5 hours each weekday, an(b)(7)sychiatrist who provides services via teleconference 1 day a week and is on-call for emergencies. Other medical personnel include)(7)egistered Nurse (RN)(b)(7)e Licensed Vocational Nurses (LVN)(b)(7)e certified medication aids and 3 administrative and support staff. The has advised that creative scheduling has been used to provide sufficient nursing coverage. At least one RN or LVN is on duty at all times. An RN is on call for consultation when no RN is on site.
The facility has sufficient space and equipment to afford detainee privacy when receiving health care.	\boxtimes			The medical unit includes a treatment room equipped for examinations, treatments, urgent care, and short-term medical observations. Emergency response equipment including an Automatic External Defibrillator is available for use when needed. A second room is equipped for private intake assessments and other medical encounters. A third room is used for dental clinic one day per week and for confidential psychiatric teleconference consultations on another day.
The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	\boxtimes			The medical unit is located within the secure perimeter of the facility. Access is electronically controlled by detention officers posted in Central Control.
The medical facility entrance includes a holding/waiting room.	\boxtimes			A waiting room is located just inside the medical unit.
The medical facility's holding/waiting room is under the direct supervision of custodial staff.				As confirmed by direct observations and a review of the Medical Officer's post order, a detention officer is posted in the medical unit, and maintains supervision of detainees in the waiting room.
Detainees in the holding/waiting room have access to a drinking fountain.	\boxtimes			A portable water cooler is positioned just outside of the waiting room. Drinking water is available upon request.

ACCESS TO MEDICAL CARE							
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.							
Medical records are kept apart from other files. They are: Secured in a locked area within the medical unit; With physical access restricted to authorized medical staff; and Procedurally, no copies made and placed in detainee files.				Medical records are secured in a medical records room within the medical unit. Access is limited to authorized medical staff.			
Pharmaceuticals are stored in a secure area.				Perpetual inventories are maintained on needles and syringes. Inventory counts of these items and of medical tools are conducted at each shift change. A spot check of the inventory documentation confirmed its accuracy.			
 Medical screening includes a Tuberculosis (TB) test. Every arriving detainee receives a TB test during the admission process; Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility; and Detainees not screened are housed separate from the general population. 				Policy 200.02, Medical Services, requires TB screening of all detainees. The Health Service Administrator advised that at least 90% of the detainees are transferred in from another facility with documentation of recent TB testing. Medical staff reviews the available documentation to confirm recent testing. A TB test is administered if no such documentation is available. Of the 21 detainee medical records reviewed, all but one detainee arrived with a documented TB screening completed within the previous 6 months. TB testing of the detainee arriving without documentation was completed.			

ACCESS TO MEDICAL CARE							
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN THE GENERAL WELL-BEING OF ICE DETAINEES.	ACCRE	DITED/A	CCRED	TTATION-WORTHY HEALTH PROGRAM FOR			
All detainees receive a mental-health screening upon arrival. It is conducted: By a health care provider or specially trained officer; and Before a detainee's assignment to a housing unit.				In accordance with policy 706, Suicide Recognition and Prevention, screening for mental health concerns is included in the medical screening completed during intake processing by staff assigned to the intake department. The training officer indicated and a review of employee training records confirmed that staff responsible for intake processing has been trained to complete the medical intake screens. A review of detainee medical records confirmed consistent and timely completion of the intake screening. Medical staff completes a follow up mental health screening on all detainees within 14 days.			
The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.				The Health Service Administrator advised that intake medical screening documentation is promptly delivered to the medical unit and reviewed by medical staff. Detainees with any identified concerns are escorted to the medical unit for further evaluation as confirmed by a review of detainee medical records.			
The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.				Policy 504, Health Assessments, requires the completion of physical exams/assessments on all detainees within 14 days. A review of the 21 available detainee medical records noted that all but one detainee was physically examined/assessed within the required time frame. The average time being 9-10 days. The remaining detainee was examined within 18 days.			
Detainees in the Special Management Unit have access to health care services.				Detainees in the special management units have access to health care services through written sick call requests and direct requests to staff for more urgent concerns. In accordance with policy 512, Health Evaluations of Inmates in Disciplinary Segregation, and as confirmed by discussions with the Health Service Administrator and Major, nursing staff visit the special management units at least daily. A review of Segregation Unit Daily Activity Logs confirmed that nursing staff make documented visits to the special management units at least twice			

ACCESS TO MEDICAL CARE								
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR								
Staff provides detainees with health services (sick call) request slips daily, upon request. • Request slips are available in languages other than English, including every language spoken by a sizeable number of the facility's detainee population. • Service-request slips are delivered in a timely fashion to the health care provider.				Medical Request forms with instructions in English and Spanish are available to detainees in the housing units. The Health Service Administrator (HSA) advised that nursing staff collect completed requests from the housing units and medical request drop boxes each evening. Requests are triaged by nursing staff. A review of the sick call log and detainee medical records noted that detainees with urgent concerns are seen promptly. Others are scheduled for sick call appointments or referred to dental or mental health staff, as applicable. A review of the sick call log noted that although there were some delayed responses early in the year, written responses to requests submitted within the past month were consistently given within 24-48 hours. The HSA indicated staff was recently trained on the importance of timely responses. A review of detainee medical records noted that those referred to the physician were seen within 1-4 days.				
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.				Medical personnel are on duty 24 hours each day, 7 days a week. Policy 511, Emergency Medical Services, establishes procedures for the delivery of emergency health care when immediate outside medical attention is needed.				
The plan includes an on-call provider.	\boxtimes			The physician and psychiatrist are on- call for health care emergencies.				
The plan includes a list of telephone numbers for local ambulance and hospital services.	\boxtimes			Phone numbers for the local hospital and on-call medical staff are available to nursing staff in the medical unit. The Health Service Administrator advised that ambulance and EMS services are available through a 911 call.				
The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.				Policy 511 establishes procedures for the delivery of emergency health care consistent with security and safety.				
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.				In accordance with requirements established in policy 400.07, Training, as reported by the Health Service Administrator, training officer, and CPR instructor, and as confirmed per a review of employee training records, all detention staff are trained in first aid and certified in CPR during pre-service training and annually thereafter.				

ACCESS TO MEDICAL CARE									
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR									
THE GENERAL WELL-BEING OF ICE DETAINEES. Where staff is used to distribute medication, a health care The Health Service Administrator									
provider properly trains these officers.			\boxtimes	confirmed and observations in the medical and housing units noted that all prescription and over-the-counter medications are administered by medical staff.					
The medical unit keeps written records of medication that is distributed.				The Health Service Administrator advised and as confirmed during interviews with other medical staff, and observations in the medical unit and detainee housing units as well as a review of detainee medical records confirmed that the administration of all prescription and over-the-counter medication is documented on detainee-specific Medication Administration Records.					
The Form I-819 (or IGSA equivalent) is used to notify the Warden/Facility of a detainee that has special medical needs.				The Health Service Administrator advised that immediate notification regarding significant special needs is provided by phone or e-mail. A review of detainee medical records noted that notification is also provided through use of a Special Needs Notice form.					
A signed and dated consent form is obtained from a detainee before medical treatment is administered.	×			In accordance with policy 901, Informed Consent, a general Consent to Medical Services agreement, available in English and Spanish, is signed by detainees during in-processing as confirmed by a review of detainee medical records.					
Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.				Authorization for Release of Information forms is available for use by detainees to authorize the release of confidential medical information. The Health Service Administrator noted that the facility also honors similar forms submitted by outside sources on behalf of, and signed by, the detainee.					
The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.				The Health Service Administrator advised that notification is provided 24 to 48 hours in advance of a detainee's transfer.					
Detainee's medical records or a copy thereof, are available and transferred with the detainee.				The Health Service Administrator advised that a medical summary is prepared for transfer with the detainee. Original medical records are retained by the facility.					
Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".				Based on a description of actual practice provided by the Health Service Administrator, medical records prepared for transfer with the detainee are placed in a sealed and appropriately labeled/marked envelope.					
ACCEPTABLE DEFICIENT		AT-RISI	K	☐ REPEAT FINDING					

REMARKS:

A review of the 21 available detainee medical records confirmed receipt of medical, dental, and mental health care for concerns dentified during intake. Treatment plans are developed and implemented for the chronically and mentally ill. One detainee has been referred to an off-site specialist. The only unresolved detainee complaint noted involved dissatisfaction with a provider's decision about a psychotropic medication.

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SUICIDE PREVENTION AND INTERVENTION

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	YES	No	NA:	REMARKS
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	⊠			In accordance with requirements established in policies 400.07, Training, and 706, Suicide Recognition and Prevention, and as confirmed by discussions with the training officer, and a review of employee training records, all staff receives suicide-prevention training during pre-service and annually thereafter.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.				A review of suicide prevention and intervention educational material used during training confirmed inclusion of the required components.
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. • Screening does not occur later than one working day after the detainee's arrival.				In accordance with policy 706, screening for suicide potential is completed during intake processing by staff working in the intake department. Discussions with the training officer and a review of employee training records noted that staff assigned to conduct detainee intake processing receive training on the screening procedures. A review of detainee medical records confirmed consistent and timely completion of the intake screening.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.				Policy 706 establishes procedures for the referral of at-risk detainees to medical staff. A review of detainee medical records confirmed referral to, and timely follow-up, by health care staff.
The facility has a designated isolation room for evaluation and treatment.	×			The observation cell in the medical unit is designated as the primary location for the evaluation and treatment of detainees at-risk for suicide. Cells 1, 2, 11 and 12 in Unit 268 are equipped with in-cell cameras and are used as back-up suicide watch cells.

SUICIDE PREVENTION AND INTERVENTION

POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE TRAINED TO RECOGNIZE SUICIDE-RISK INDICATORS. STAFF WILL HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVISION, AND REFERRALS. A CLINICALLY SUICIDAL DETAINEE WILL RECEIVE PREVENTIVE SUPERVISION AND TREATMENT.

COMPONENTS	YES	No	NA	REMARKS
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.				The medical observation cell includes American with Disabilities Act (ADA) compliant hand rails to which the end of a noose could be attached. The designated cells in Unit 268 have open bar doors and other structures to which the end of a noose could be attached. Policy 706 establishes levels of suicide watch status. Per policy and as confirmed by discussions with the Warden, detainees on Level 1 watch status are placed on continuous observation with an officer specifically assigned to maintain this watch. These detainees retain no personal possessions and are given suicide resistant mattresses, blankets, and garments. A detainee on Level 2 watch status could per policy have personal clothing. The Warden advised that Level 2 watch status is not used by this facility. No detainee is removed from continuous observation until determined by an appropriately licensed health care provider to no longer be at risk for suicide.
Medical staff has approved the room for this purpose.	\boxtimes			The Health Service Administrator (HSA) indicated medical staff approval of the designated cells.
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.				The Health Service Administrator and detention supervisors confirmed that no ICE detainees have been placed on suicide watch during the past year. A review of completed Suicide Watch Logs used by detention officers to document the status of non-ICE detainees on suicide watch confirmed observation and documentation of a suicide watch detainee's status every 15 minutes.
□ ACCEPTABLE □ DEFICIENT □	AT-RI	SK		REPEAT FINDING

REMARKS:

The Health Service Administrator (HSA) and the Significant Incident Summary provided by the facility noted that there have been no suicides or suicide attempts at this facility during the past year. The HSA and detention supervisors advised that no ICE detainees have been placed on suicide watch during this time period. Based on a review of detainee medical records, it was noted that several detainees admitted with a history of mental health concerns or who had received news of the death of a family member were evaluated by mental health staff and signed agreements to do themselves no harm. However, they did not express suicidal ideation and were determined to not be in need of suicide watch status.

The cells designated for use for suicide watches contain structures that could be used in a suicide attempt. The warden advised that any at-risk detainee placed in one of these cells would be under continuous observation by a designated officer, and would be given only a suicide-resistant mattress, blanket, and garment.

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TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.

COMPONENTS	YES	No	NA	REMARKS
Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.	\boxtimes			Per the Health Service Administrator (HSA), severely and terminally ill detainees are not accepted by the facility. Weekly updates on all chronically ill detainees are provided to ICE. In accordance with policy 200.02, Medical Services, if a detainee already housed at the facility develops the need for more extensive medical care, ICE would be notified and the detainee would be transported to a community hospital pending transfer to a more appropriate facility.
The facility or appropriate ICE office promptly notifies the next of kin of the detainee's medical condition, to include: • The detainee's location; and • The limitations placed on visiting.	×			As confirmed by the Health Service Administrator and SIEA, ICE is notified if a detainee's medical condition deteriorates and/or he is admitted to an outside medical facility. Per the SIEA, ICE would make other notifications as applicable.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. • The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.			\boxtimes	The facility does not accept severely or terminally ill detainees. Policies 200.02 and 524, End of Life Decision Making, reference assisting detainees interested in establishing advanced directives. The Health Service Administrator advised that no ICE detainees have requested this information.
The guidelines provide the detainee the opportunity to have a private attorney prepare the documents.				The facility does not accept severely or terminally ill detainees.
There is a policy addressing "Do Not Resuscitate Orders"				The facility does not accept severely or terminally ill detainees.
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation?				The facility does not accept severely or terminally ill detainees.
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSAs, this notification is made through the local ICE representative.				The facility does not accept severely or terminally ill detainees.

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

POLICY ALL FACILITIES HOUSING ICE DETAINEES SHALL HAVE POLICIES AND PROCEDURES ADDRESSING THE ISSUES OF TERMINAL ILLNESS OR INJURY, MEDICAL ADVANCED DIRECTIVES, AND DETAINEE DEATH, TO INCLUDE THE PROCEDURES TO ENSURE PROPER NOTIFICATION IS PROVIDED TO ICE OFFICIALS, FAMILY MEMBERS AND OTHER INTERESTED PARTIES IN THE EVENT OF A DETAINEE BECOMING TERMINALLY ILL OR INJURED OR DEATH OF A DETAINEE OCCURS. IN ADDITION, THE POLICY WILL COVER PROCEDURES TO BE TAKEN IF THE DEATH OF A DETAINEE OCCURS WHILE IN TRANSIT.

CHECK THIS BOX IF THE FACILITY DOES NOT ACCEPT ICE DETAINEES WHO ARE SEVERELY OR TERMINALLY ILL. INDICATE NA IN THE APPROPRIATE BOX FOR THIS PORTION OF THE WORKSHEET. ALWAYS COMPLETE ALL REFERENCES TO DETAINEE DEATH AND RELATED NOTIFICATIONS.

COMPONENTS	YES	No	NA	REMARKS
The facility has written procedures to address the issues of organ donation by detainees.				Policy 524 addresses the issue of organ donation, and for ICE detainees the decision is deferred to ICE. An IEA confirmed that ICE would assume responsibility for consideration of any such request.
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.				Policy 110, Death of an Inmate, establishes procedures for the notification of ICE in the event of a detainee death. Per the SIEA, ICE would make other needed notifications.
The facility has a policy and procedure to address the death of a detainee while in transport.				Except for possible short transports in the event of a medical emergency, the facility does not transport ICE detainees.
At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.				Per the SIEA, ICE would dispose of a detainee's remains in accordance with the provisions of this standard.
In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee's is a U.S. military veteran, is the Department of Veterans Affairs notified?				The SIEA advised that ICE would arrange for the burial of unclaimed remains in accordance with the provisions of this standard.
An original or certified copy of a detainee's death certificate is placed in the subject's a-file.				The SIEA advised that ICE would place a copy of a detainee's death certificate in the subject's A-file.
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body.				Policy 110 establishes procedures for contacting the local coroner in the event of a detainee death. The Warden confirmed that such contact would be made.
ICE staff follows established procedures to properly close the case of a deceased detainee.				Per the SIEA, ICE would close the case of a deceased detainee in accordance with established procedures.
ACCEPTABLE □ DEFICIENT □	AT-RI	sĸ		REPEAT FINDING

REMARKS:

There have been no detain medical unit and staffing r		ne facility does not accept severely or terminally ill detainees due to a limited
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SECTION III SECURITY AND CONTROL STANDARDS

Compon	ENTS	YES	No	NA	REMARK
		(b)(7)e			
	(b)(7)e				
		(b)(7)e			
		(b)(7)e			
	(b)(7)e				
		(b)(7)e			
ACCEPTABLE	☐ DEFICIENT	☐ AT-RISE	(☐ REP	EAT FINDING

DETENTION FILES

POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.

COMPONENTS	YES	No	NA	REMARKS
A detention file is created for every new arrival whose stay will exceed 24 hours.	\boxtimes			
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.				Detention Files contain a GEO Client Contact Report that documents actions and activities pertinent to the detainees stay. The file also contains, classification documents; Form I-213, Record of Deportable Alien; Intake Screening forms, Offender's Visitor and Telephone list, Form I-216, Record of Persons and Property Transferred; Detainee Transfer Notifications, ICE Information Memorandum, receipts for property, handbook, ID badge, and 'know your rights", training records, and Offender Request to Staff Forms.
The detainee's detention file also contains documents generated during the detainee's custody. • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same				
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.				Files are maintained in a secure office, in lockable file cabinets.
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.				
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	\boxtimes			
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.				
Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.				Staff use a "Sign Out Log" to ensure accountability of the files.
ACCEPTABLE DEFICIENT	AT-	-Risk		REPEAT FINDING

REMARKS:

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DISCIPLINARY POLICY

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a written disciplinary system using progressive levels of reviews and appeals.	\boxtimes			Facility policy 200.18 outlines the disciplinary program.
The facility rules state that disciplinary action shall not be capricious or retaliatory.				
Written rules prohibit staff from imposing or permitting the following sanctions:	⊠			
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.				The rules of conduct are provided in the detainee handbook which is distributed. The detainee signs for his copy.
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: Rights and Responsibilities Prohibited Acts Disciplinary Severity Scale Sanctions				These items are included in the detainee handbook which is distributed to all detainees.
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.				Informal resolution is encouraged when possible.
Incident reports and Notice of Charges are promptly forwarded to the designated supervisor.				The facility Major is the designated supervisor for review of incidents.
Incident reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	\boxtimes			
An intermediate disciplinary process is used to adjudicate minor infractions.	\boxtimes			
 A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: Conducts hearings on all charges and allegations referred by the UDC; Considers written reports, statements, physical evidence, and oral testimony; Hears pleadings by detainees and staff representatives; Bases its findings on the preponderance of evidence; and Imposes only authorized sanctions 	\boxtimes			
A staff representative is available if requested for a detainee facing a disciplinary hearing.				
The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	\boxtimes			
The duration of punishment set by the OIC, as recommended by the disciplinary panel, does not exceed established sanctions. The naximum time in disciplinary segregation is limited to 60 days for a single offense.				

DISCIPLINARY POLICY POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS. **COMPONENTS** YES No NA REMARKS (b)(7)eAll forms relevant to the incident, investigation, committee/panel \boxtimes reports, etc., are completed and distributed as required. **ACCEPTABLE** DEFICIENT AT-RISK ☐ REPEAT FINDING REMARKS: The facility encourages the use of informal resolution for minor infractions. All detainees receive detainee handbooks and sign for their copy. The handbook explains the facility rules, sanctions, and procedures for violations. (b)(6), (b)(7)cApril 8 AUDITOR'S SIGNATU (b)(6), (b)(7)c

EMERGENCY (CONTINGENCY) PLANS

POLICY ALL FACILITIES HOLDING ICE DETAINEES WILL RESPOND TO EMERGENCIES WITH A PREDETERMINED STANDARDIZED PLAN TO MINIMIZE THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS RECOMMENDED THAT SPCS AND CDFS ENTER INTO AGREEMENT, VIA MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND STATE AGENCIES TO ASSIST IN TIMES OF EMERGENCY.

COMPONENTS	YES	No	NA	REMARKS
	IES	140	IVA	
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.				The detainee handbook addresses the issue of detainees exercising control over other detainees.
Detainees are protected from:				
Personal abuse				
Corporal punishment		ľ		
Personal injury			Ιп	
Disease		"		
Property damage				
Harassment from other detainees				
Staff is trained to identify signs of detainee unrest.				Emergency plan training
				includes identification of
What type of training and how often?	\boxtimes		Ιп	detainee unrest. This is
		_		provided at new employee
				training and annually thereafter.
Staff effectively disseminates information on facility climate, detainee				a uning unit was ward, the control
attitudes, and moods to the Officer In Charge (OIC)				
There is a designated person or persons responsible for emergency				The emergency planning
plans and their implementation. Sufficient time is allotted to the person				committee is responsible for the
or group for development and implementation of the plans.				development and
		_		implementation of emergency
				plans.
The plans address the following issues:				
Confidentiality		\		
 Accountability (copies and storage locations) 				
Annual review procedures and schedule				
Revisions				
Contingency plans include a comprehensive general section with				
procedures applicable to most emergency situations.				
The facility has cooperative contingency plans with applicable:				There are numerous
Local law enforcement agencies		lп		cooperative contingency plans
State agencies		'''		in place with outside agencies.
Federal agencies				in place with outside agencies.
All staff receives copies of Hostage Situation Management policy and	\boxtimes			
procedures.				
Staff is trained t (b)(7)e] _			
(b)(7)e Vithin 24 hours after release, hostages are screened for medical				
and psychological effects.				
Emergency plans include emergency medical treatment for staff and	\boxtimes			
detainees during and after an incident.				
Food service maintains at least 3 days' worth of emergency meals for			_	At least a five days food supply
staff and detainees.	\boxtimes			was on hand at the time of the
With a last it of the control of the				inspection.
Written plans identify locations of shut-off valves and switches for all	\boxtimes			
utilities (water, gas, electric).				

	EMERGENCY (C	ONTINGENCY)	PLANS		
POLICY ALL FACILITIES HOLDING IC MINIMIZE THE HARMING OF HUMAN LI AGREEMENT, VIA MEMORANDUM OF EMERGENCY.	FE AND THE DESTRUCTION	OF PROPERTY. IT IS	RECOMM	IENDED THAT	SPCs and CDFs enter into
COMPON	ENTS	YES	No	NA L	REMARKS
	(b)(7)e				
	☐ DEFICIENT	☐ AT-RISK	ζ	REP	EAT FINDING
REMARKS: The facility emergency plans are detained by the outside agencies. (b)(6), (b)(7)c April 8, 20 AUDITOR'S SIGNATURE	led, specific, and readily a	available to all stafi	f. The pla	ans include nu	umerous contingency plans

ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	\boxtimes			
 The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 				All work areas that have chemicals had the appropriate MSDSs and inventory counts.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.				
The MSDSs are readily accessible to staff and detainees in work areas.	\boxtimes			
Hazardous materials are always issued under proper supervision. • Quantities are limited; and • Staff always supervises detainees using these substances.				The supply officer distributes limited quantities of chemicals.
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.				
Lighting fixtures and electrical equipment installed in storage rooms and other hazardous areas meet National Electrical Code requirements.				
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	\boxtimes			An Evac system is utilized to ensure clean air.
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.				Vents are cleaned on a regular basis, and as needed. Filters are changed monthly.
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)	⊠			Winter temperatures are maintained at 68 degrees and summer temperatures are maintained at 74 degrees. The temperature panel is monitored in the Control Center.
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.		\boxtimes		Water temperatures in the housing unit exceeded the industry standard due to a valve failure. Maintenance staff was working on resolving this problem during the inspection.
All toxic and caustic materials are stored in their original containers in a secure area.				
Excess flammables, combustibles, and toxic liquids are disposed of properly and in accordance with MSDSs.	\boxtimes			
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable luantities.				There were no products identified that contained methyl alcohol.

ENVIRONMENTAL HEALTH AND SAFETY

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

COMPONENTS	YES	No	NA	REMARKS
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	⊠			Employees receive training in fire and safety, bio-hazardous waste materials, entrance and exit procedures, emergency plans and staff/inmate relations training during the 120 hour Orientation/Pre-Service training. Detainees receive training based on their work assignment and area.
The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association and the Occupational Safety and Health Administration (OSHA).				
A technically qualified officer conducts the fire and safety inspections.	\boxtimes			The Fire Code Compliance inspection was conducted on January 21, 2010, b (b)(6), (b)(7)c (c)(6), (b)(7)c (c)(6).
The Safety Office (or officer) maintains files of inspection reports.	\boxtimes			
The facility has an approved fire prevention, control, and evacuation plan.				
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 				
Fire drills are conducted and documented monthly.				
A sanitation program covers barbering operations.	☒			
The barber shop has the facilities and equipment necessary to meet sanitation requirements.				Hair cloths were not being utilized in the Barber Shop. This procedure was corrected during the inspection.
The sanitation standards are conspicuously posted in the barbershop.	\boxtimes			
Written procedures regulate the handling and disposal of used needles and other sharp objects.				Facility Health Services policy 405.24 explains the procedures for disposal of sharps, needles, and syringes.
All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.				
Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections.	\boxtimes			Cleaning schedules were not posted in the housing units. This was corrected during the inspection.

ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS

PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE I					
ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES					
COMPONENTS	YES	No	NA	REMARKS	
The facility follows standard cleaning procedures.	\boxtimes				
Spill kits are readily available.				Spill kits are available in control, laundry, hall boxes, food service, and medical.	
A licensed medical waste contractor disposes of infectious/bio-hazardous waste.				Stericycle picks up infectious/bio-hazardous waste twice a month.	
Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	\boxtimes				
Do the methods for handling/disposing of refuse meet all regulatory requirements?	\boxtimes				
A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. • At least monthly. • The pest-control program includes preventative spraying for indigenous insects.				D-N Pest Control Company provides preventative pest control on a monthly basis.	
Drinking water and wastewater is routinely tested according to a fixed schedule.	×			El OSO Water Supply Corporation provides a monthly test and lab results from GBRA Labs.	
 Emergency power generators are tested at least every two weeks. Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	\boxtimes			Holt Power System conducts tests of the generator and initiates repairs as needed. The facility conducts tests every Tuesday.	
✓ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISE	ζ		REPEAT FINDING	

REMARKS:

All areas maintaining chemicals had easy access to MSDSs and accurate inventories.

There are no sprinkler systems located in the housing units. However, the length of the fire hoses was extended to cover all areas. The Karnes City Fig. on January 21, 2010, with no concerns.

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AUDITOR'S SIGNAT

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HOLD ROOMS IN DETENTION FACILITIES

POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY. No NA REMARKS COMPONENTS YES (b)(7)e hold rooms The hold rooms are situated within the secure perimeter. There are \boxtimes \Box \Box booking area of the facility. The hold rooms are well ventilated well lighted, and all activating \Box \boxtimes switches are located outside the room. The hold rooms contain sufficient seating for the number of detainees X \Box held. Bunks, cots, beds, or other related make-shift sleeping apparatus are \boxtimes \Box \Box precluded from use inside hold rooms. The walls and ceilings of the hold rooms are tamper and escape \boxtimes \Box \Box proof. Ø Individuals are not held in hold rooms for more than 12 hours. Male and females are segregated from each other. This facility does not house П \Box \boxtimes females. Detainees under the age of 18 are not held with adult detainees. Ø \sqcap Detainees are provided with basic personal hygiene items such as \boxtimes \Box water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes. In older facilities, officers are within visual or audible range to allow \boxtimes П П detainees access to toilet facilities on a regular basis. \boxtimes (b)(7)(e)Officers closely supervise the detention hold rooms using direct Documentation is maintained supervision (Irregular visual monitoring.). \boxtimes \Box immediately outside the door to Hold rooms are irregularly monitored every 15 minutes. the hold rooms. Unusual behavior or complaints are noted. When the last detainee has been removed from the hold room, it is \boxtimes given a thorough inspection. There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building \boxtimes П П An appropriate emergency service is called immediately upon a \boxtimes determination that a medical emergency may exist. DEFICIENT **ACCEPTABLE** ☐ AT-RISK REPEAT FINDING REMARKS: The facility hold room

The facility hold rocal detainees. (b)(6), (b)(7)c April AUDITOR'S SIGNAT (b)(6), (b)(7)c

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	YES	No	NA	REMARKS
The security officer[s], or equivalent in IGSAs, has attended an approved locksmith training program.				The maintenance supervisor is responsible for key and lock control for the facility. He has completed a locksmith training program.
The security officer, or equivalent in IGSAs, has responsibly for all administrative duties and responsibilities relating to keys, locks etc.	\boxtimes			
The security officer, or equivalent in IGSAs, provides training to employees in key control.				
The security officer, or equivalent in IGSAs, maintains inventories of all keys, locks and locking devices.				
The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.				
Facility policies and procedures address the issue of compromised keys and locks.				Facility policy 300.10 addresses compromised locks and keys.
The security officer, or equivalent in IGSAs, develops policy and procedures to ensure safe combinations integrity.				
Only dead bolt or dead lock functions are used in detainee accessible areas.				
Only authorized locks (as specified in the Detention Standard) are used in detainee accessible areas.				
Grand master keying systems are prohibited.				
All worn or discarded keys and locks are cut up and properly disposed of.				
Padlocks and/or chains are prohibited from use on cell doors.				
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to:				
 Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101. 				
The operational keyboard is sufficient to accommodate all the facility key rings, including keys in use, and is located in a secure area.	\boxtimes			The facility keyboard is located in the central control center.
Procedures are in place to ensure that key rings are: Identifiable; The numbers of keys are cited; and Keys cannot be removed.	\boxtimes			
Emergency keys are available for all areas of the facility.				
The facilities use a key accountability system.				
Authorization is necessary to issue any restricted key.	\boxtimes			
Individual gun lockers are provided. • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access.	\boxtimes			(b)(7)(e)
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	\boxtimes			

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

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

COMPONENTS	YES	No	NA	REMARKS
 All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. Detainees are not permitted to handle keys assigned to staff. 				
✓ ACCEPTABLE ☐ DEFICIENT ☐	AT-RISI	K		REPEAT FINDING

REMARKS:

The facility's key and lock system is effectively implemented, and ensures accountability and maintenance of all keys and locks.

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POPUL.	ATION	COUNTS

POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK ACCOUNTABILITY FOR ALL DETAINEES. THIS REQUIRES THAT THEY CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION PER SHIFT, WITH ADDITIONAL FORMAL AND INFORMAL COUNTS CONDUCTED AS NECESSARY.

COMPONENTS	YES	No	NA	REMARKS	
Staff conduct a formal count at least once each shift.				(b)(7)(e)	
(b)(7)(e)	\boxtimes				
Certain operations cease during formal counts.					
All movement ceases for the duration of a formal count.					
Formal counts in all units take place simultaneously.					
Detainee participation in counts is prohibited.					
(b)(7)(e)					
Officers positively identify each detainee before counting him/her as present.	\boxtimes				
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.				Facility policy 300.05 outlines procedures for population counts.	
The control officer (or other designated position) maintains an out - count record of all detainees temporarily leaving the facility.	\boxtimes				
This training is documented in each officer's training folder.	\boxtimes			Training is provided during new employee training.	
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

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POST ORDE	RS	<u> </u>					
POLICY: ICE PROVIDES OFFICERS ALL NECESSARY GUIDANCE FOR CARRYING OUT THEIR DUTIES. THIS GUIDANCE INCLUDES THE POST							
ORDERS ESTABLISHED FOR EVERY POST, WHICH ARE REVIEWED AT LEAST							
TO THAT POST.							
COMPONENTS	YES	No	NA	REMARKS			
Every fixed post has a set of post orders.	\boxtimes	<u> </u>	Ц_				
Each set contains the latest inserts (emergency memoranda, etc.) and revisions.							
One individual or department is responsible for keeping all post-orders current with revisions that take place between reviews.				The facility Major is responsible for oversight of post orders.			
The IGSA maintains a complete set (central file) of post orders.	\boxtimes			A central set of post orders is kept in the Warden's conference room.			
The central file is accessible to all staff.	\boxtimes						
The OIC or Contract / IGSA equivalent initiates/authorizes all post- order changes.	\boxtimes						
The OIC or Contract / IGSA equivalent has signed and dated the last page of every section.	\boxtimes						
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.							
Procedures keep post orders and logbooks secure from detainees at all times.	\boxtimes						
(b)(7)(e)	\boxtimes			Post order 11 defines use of arms.			
· , , , , ,							
The post orders for housing units track the event schedule.							
Housing-unit post officers record all detainee activity in a log. The post order includes instructions on maintaining the logbook.							
ACCEPTABLE □ DEFICIENT □	AT-RISE	(REPEAT FINDING			
REMARKS:				-			
The facility Major is responsible for ensuring all post orders are accurate throughout the facility. So, all staff has access.	and kept	up-to-dat	te. Copie	es of post orders are available			
(b)(6), (b)(7)c (Ar (b)(6), (b)(7)c							

SECURITY INSPECTIONS

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

COMPONENTS	YES	No	NA	REMARKS
The facility has a comprehensive security inspection policy. The policy specifies: • Posts to be inspected; • Required inspection forms; • Frequency of inspections; • Guidelines for checking security features; and • Procedures for reporting weak spots, inconsistencies, and	⊠			Facility policies 100.10 and 300.10 address security inspection procedures.
other areas needing improvement				
Every officer is required to conduct a security check of his/her assigned area. The results are documented.	\boxtimes			
Documentation of security inspections is kept on file.	\boxtimes			
Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.				
The front-entrance officer checks the ID of everyone entering or exiting the facility.	\boxtimes			
All visits are officially recorded in a visitor logbook or electronically recorded.	\boxtimes			
The facility has a secure visitor pass system.	\boxtimes			
Every Control Center officer receives specialized training.	\boxtimes			
The Control Center is staffed around the clock.	×			
Policy restricts staff access to the Control Center.	\boxtimes			
Detainees are restricted from access to the Control Center.	×			
Communications are centralized in the Control Center.	\square			
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			The outside perimeter officer monitors all vehicular traffic.
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: • The driver's name; • Company represented; • Vehicle contents; • Delivery date and time; • Date and time out; • Vehicle license number; and • Name of employee responsible for the vehicle during the visit				The outside mobile officer maintains the vehicle log.
Officers thoroughly search each vehicle entering and leaving the facility.				
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	\boxtimes			
The SMU entrance has a sally port.				
Written procedures govern searches of detainee housing units and				
personal areas.				
Housing area searches occur at irregular times.	X			
Every search of the SMU and other housing units is documented.	X			
Storage and supply rooms, walls, light and plumbing fixtures, accesses, and drains, etc., undergo frequent, irregular searches. These searches are documented.	\boxtimes			
Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	\boxtimes			

	SECURIT	Y INSPECTIONS			
POLICY: POST ASSIGNMENTS IN THE BE RESTRICTED TO EXPERIENCED PERS					
Сомром	ENTS	YES	No	NA	REMARKS
	(b)(7)e				
Visitation areas receive frequent, irreg	gular inspections.				
	■ DEFICIENT	AT-RISK			REPEAT FINDING
REMARKS: The facility has a comprehensive security (b)(6), (b)(7)c April AUDITOR'S SIGNAT	rity inspection system tha	at is monitored by th	e facility	Major.	
	6), (b)(7)c				

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

COMPONENTS	YES	No	NA	REMARKS
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	\boxtimes			Facility policy 300.17 governs the operation of Administrative Segregation.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.				
The OIC (or equivalent) regularly reviews the status of detainees in administrative detention. • A supervisory officer conducts a review within 72 hours of the detainee's placement in the SMU (administrative).				The initial review is usually conducted within 24 hours.
A supervisory officer conducts another review after the detainee has spent seven days in administrative segregation, and: • Every week thereafter for the first month; and • Every 30 days after the first month. • Does each review include an interview with the detainee? • Is a written record made of the decision and the justification?	\boxtimes			Reviews are conducted weekly. The reviews include an interview with the detainee. A written decision is rendered. The detainee receives a copy of the decision.
The detainee is given a copy of the decision and justification for each review. • The detainee is given an opportunity to appeal the reviewer's decision to someone else in the facility.				
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. • Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.				
 The OIC or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. A written record is made of the decision and the justification. The detainee receives a copy of this record. 				
The detainee is given the right to appeal to the OIC (or equivalent) the conclusions and recommendations of any review conducted after the detainee have remained in administrative segregation for seven consecutive days.	\boxtimes			
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.				
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.	\boxtimes			
All cells are equipped with beds. • Every bed is securely fastened to the floor or wall.				

SPECIAL MANAGEMENT UNIT (SMU) (Administrative Segregation)

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

COMPONENTS	YES	No	NA	REMARKS
The number of detainees in any cell does not exceed the occupancy				
 When occupancy exceeds recommended capacity, do basic living standards decline? Do criteria for objectively assessing living standards exist? If yes, are the criteria included in the written procedures? 	\boxtimes			Although this has not occurred, the plan would be to convert another housing unit for administrative segregation use.
The segregated detainees have the same opportunities to exchange/launder clothing, bedding, and linen as detainees in the general population.	\boxtimes			
Detainees receive three nutritious meals per day, from the general population's menu of the day. • Do detainees eat only with disposable utensils? • Is food ever used as punishment?				Detainees use disposable eating utensils. Food is not used as punishment.
 Each detainee maintains a normal level of personal hygiene in the SMU. The detainees have the opportunity to shower and shave at least three times a week. If not, explain. 				Detainees may shower daily.
 The detainees are provided: Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and Personal legal material. 				
A health care professional visits every detainee at least three times a week. The shift supervisor visits each detainee daily. Weekends and holidays.				A nurse usually visits Administrative Segregation at least twice daily.
Procedures comply with the "Visitation" standard. • The detainee retains visiting privileges; and • The visiting room is available during normal visiting hours.				
Visits from clergy are allowed.				
 Detainees have the same law-library access as the general population. Are they required to use the law library ∑Separately, or ☐As a group? Are legal materials brought to them? 				If legal materials are requested, the detainee may be escorted to the library. If only reading material is requested, the library staff may deliver books to the unit.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.				
 SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent). 	\boxtimes			

SPECIAL MANAGEMENT UNIT (SMU) (ADMINISTRATIVE SEGREGATION)

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

COMPONENTS

YES NO NA REMARKS

Staff record whether the detainee are showered exercised and took

COMPONENTS	YES	No	NA.	REMARKS
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift. • Staff logs record all pertinent information, e.g., a medical condition, suicidal/assaultive behavior, etc; • The medical officer/health care professional signs each individual's record during each visit; and • The housing officer initials the record when all detainee services are completed or at the end of the shift.				
A new record is created for each week the detainee is in Administrative Segregation. • The weekly records are retained in the SMU until the detainee's return to the general population.				
☐ ACCEPTABLE ☐ DEFICIENT	AT-RI	sk		REPEAT FINDING

REMARKS:

The facility staff is knowledgeable in the management of th	e Administrative Segregation	Unit.	The facility Major ensures	compliance
with all applicable				

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SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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

COMPONENTS	YES	No	NA	REMARKS
Officers placing detainees in disciplinary segregation follow written procedures.	\boxtimes			Facility policy 300.17 addresses the operation of Disciplinary Segregation.
The sanctions for violations committed during one incident are limited to 60 days.	×			
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. • The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	⊠			
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. • After each formal review, the detainee receives a written copy of the decision and supporting reasons.				Detainees receive copies of the written decision.
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	\boxtimes			
Detainees in disciplinary segregation have fewer privileges than those housed in administrative segregation.	\boxtimes			Reduced commissary is an example of lesser privileges.
 Living conditions in disciplinary SMUs remain the same regardless of behavior. If no, does staff prepare written documentation for this action? Does the OIC sign to indicate approval. 				The Officer in Charge always approves any change in conditions.
Every detainee in disciplinary segregation receives the same humane treatment, regardless of offense.				
The quarters used for segregation are: Well-ventilated. Adequately lighted. Appropriately heated. Maintained in a sanitary condition.	⊠			
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.				
The number of detainees confined to each cell or room is limited to the number for which the space was designate. • Does the OIC approve excess occupancy on a temporary basis?				Staff advised that excessive occupancy has never been an issue.
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.				ICE staff would also be notified.
Detainees in the SMU have the same opportunities to exchange clothing, bedding, etc., as other detainees.	\boxtimes			
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. • Food is not used as punishment.				Food is not used as punishment.
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.				Detainees may shower daily.

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COMPONENTS	YES	No	NA	REMARKS
Detainees receive, unless documented as a threat to security:				
Barbering services;				
 Recreation privileges; 				
 Other-than-legal reading material; 	\boxtimes			
 Religious material; 				
 The same correspondence privileges as other detainees; and 				
Personal legal material.				_
When phone access is limited by number or type of calls, the				
following areas are exempt:				
 Calls about the detainee's immigration case or other legal 		_		
matters;	\boxtimes			
 Calls to consular/embassy officials; and 				
 Calls during family emergencies (as determined by the 				
OIC/Warden).				
A health care professional visits every detainee in disciplinary				A health care professional
segregation every week day.	\boxtimes			usually visits the Disciplinary
The shift supervisor visits each segregated detainee daily				Segregation unit twice daily.
Weekends and holidays.				
SMU detainees are allowed visitors, in accordance with the	\boxtimes			
"Visitation" standard.	1			
SMU detainees receive legal visits, as provided in the "Visitation"				
standard.	\boxtimes			
Legal service providers are notified of security concerns		_	_	
arising before a visit.				
Visits from clergy are allowed.				
 The clergy member is given the option of visiting/not visiting the segregated detainee. 				
Violent/uncooperative detainees are denied access to	\boxtimes			
religious services when safety and security would otherwise				
be affected.				İ
SMU detainees have law library access.				
Violent/uncooperative detainees retain access to the law				
library unless adjudicated a security threat in writing.				
Legal material brought to individuals in the SMU on a case-	\boxtimes			
by-case basis.	_	_		:
Staff documents every incident of denied access to the law				
library.				
All detainee-related activities are documented, e.g. meals served,				
recreation activities, visitors, etc.	\boxtimes			
The SPC's, the Special Management Housing Unit Record (I-888or				
equivalent), is prepared as soon as the detainee is placed in the SMU.				
 All I-888s are filled out by the end of each shift. 	\boxtimes			
 The <u>CDF/IGSA</u> facility use Form. 				
I-888 (or equivalent local form)			!	

SPECIAL MANAGEMENT UNIT (DISCIPLINARY SEGREGATION)

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

COMPONENTS	YES	No	NA	REMARKS
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. The health care official sign individual records after each visit. The housing officer initials the record when all detainee services are completed or at the end of the shift. A new record is created weekly for each detainee in the SMU. The SMU retains these records until the detainee leaves the SMU. 				
ACCEPTABLE DEFICIENT	☐ AT-RI	SK		REPEAT FINDING

REMARKS:

The Disciplinary Segregation unit operates in compliance with the NDS.

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

TOOL CONTROL

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

COMPONENTS	YES	No	NA	REMARKS	
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.				The facility major is responsible for tool control.	
Department heads are responsible for implementing this standard in their departments.	\boxtimes			for tool control.	
Tool inventories are required for the: Maintenance Department; Medial Department; Food Service Department; Electronics Shop; Recreation Department; and Armory.	⊠			There are no tools used in the recreation department. The facility does not have an electronics department.	
 The facility has a policy for the regular inventory of all tools. The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 				Facility policy 300.09 defines the tool control system. All departments check their tools daily. A monthly inventory is conducted and forwarded to the Warden.	
The facility has a tool classification system. Tools are classified according to: • Restricted (dangerous/hazardous); and • Non-Restricted (non-hazardous).				All tools are classified.	
Department heads are responsible for implementing tool-control procedures.					
The facility has policies and procedures in place to ensure that all tools are marked and readily identifiable.	\boxtimes				
The facility has an approved tool storage system. The system ensures that all stored tools are accountable. Commonly used tools (tools that can be mounted) are stored in such a way that missing tool is readily notice.				The tool storage room is well organized.	
Each facility has procedures for the issuance of tools to staff and detainees.				There is a checkout system that is managed by the maintenance supervisor.	
The facility has policies and procedures to address the issue of lost tools. The policy and procedures include: • Verbal and written notification; • Procedures for detainee access; and • Necessary documentation/review for all incidents of lost tools.					
Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.				Broken or worn out tools are disposed of by the maintenance supervisor.	
All private or contract repairs and maintenance workers under contract to ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility.	\boxtimes				
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK ☐ REPEAT FINDING					

REMARKS:

The tool control system is supervised by the facility major and implemented by the maintenance supervisor and department heads. At the time of the inspection, the maintenance department tool room was clean and well organized.

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

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

TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE. YES No NA COMPONENTS REMARKS Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of \Box compliance. Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment. Supervisors maintain records for each vehicle operator. Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and \Box \Box Deficiencies are corrected before the vehicle goes back into service. Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; П П Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area-exceeding the 10-hour limit. (b)(7)e officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are (b)(7)e П qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. Before the start of each detail, the vehicle is thoroughly searched. Positive identification of all detainees being transported is confirmed. All detainees are searched immediately prior to boarding the vehicle \Box П by staff controlling the bus or vehicle. The facility ensures that the number of detainees transported does not \Box П exceed the vehicles manufacturer's occupancy level. Protective vests are provided to all transporting officers. The vehicle crew conducts a visual count once all passengers are on board and seated. П П Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. Policies and procedures are in place addressing the use of restraining \Box equipment on transportation vehicles. Officers ensure that no one contacts the detainees. (b)(7) officer remains in the vehicle at all times when detainees

The meals meet the minimum dietary standards, as identified

Meals are provided during long distance transfers.

by dieticians utilized by ICE.

are present.

TRANSPORTATION (LAND TRANSPORTATION)

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENT	S	YES	No	NA	REMARKS
The vehicle crew inspects all Food Serv delivery (food wrapping, portions, quality containers, etc.). • Before accepting the meals, the resolves questions, concerns, or Service representative; • Basins, latrines, and drinking-way cleaned and sanitized on a fixed	be vehicle crew raises and discrepancies with the Food atter containers/dispensers are				
	(b)(7)e				
The vehicles are clean and sanitary at all t					
Personal property of a detainee transferrin	g to another facility is:				
(b)(7)e					
☐ ACCEPTABLE	DEFICIENT	AT-RISE	(REPEAT FINDING

REMARKS:

ICE staff cond	ducts all transperation	
(b)(6), (b)(7)c	April 8, 2010	(b)(6), (b)(7)c
AUDITOR'S S	IGNATURE / DA	

USE OF FORCE

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

DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE: REMARKS COMPONENTS No NA YES (b)(7)e

	USI	E OF FORCE	 					
POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALL OTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:								
COMPONENTS		YES NO	NA	REMARKS				
		(b)(7)e						
△ ACCEPTABLE	☐ DEFICIENT	AT-RIS	к [REPEAT FINDING				
REMARKS: (b)(7)(e) The fa trained and cognizant of the procedures. (b)(6), (b)(7)c April 8, 201 AUDITOR'S SIGNATURE/ (b)(6),		force is specific and	l comprehensive	. Correctional officers are well				

STAFF DETAINEE COMMUNICATIONS

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

COMPONENTS	YES	No	NA	REMARKS		
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.						
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.				Detention and Deportation staff visits the facility each Thursday.		
Scheduled visits are posted in ICE detainee areas.				ICE Visitation Schedules were posted in the units where detainees are housed.		
Visiting staff observe and note current climate and conditions of confinement at each IGSA.	\boxtimes			The Facility Liason Checklist is used for this purpose.		
ICE information request Forms are available at the IGSA for use by ICE detainees.				Request to Staff forms are readily available. There is a special box provided to submit the request forms.		
The IGSA treats detainee correspondence to ICE staff as Special Correspondence.	\boxtimes					
ICE staff responds to a detainee request from an IGSA within 72 hours.				Request forms are promptly answered. Copies of completed request forms were evident in the detention files.		
ICE detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.				Detainees are notified in writing, and sign a form documenting receipt. Copies of the signed notifications were in the detention files.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

REMARKS:

ICE staff visit the fac	cility at least weekly.	Schedules are posted	d in the units.	Interviews with de	tainees indicate th	ey have access to
ICE staff.						

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

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

DETAINEE TRANSFER STANDARD

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

COMPONENTS	YES	No	NA	REMARKS
When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. • The notification is recorded in the detainee's file; and • When the A File is not available, notification is noted within DACS				G-28's on record were contained in the detention files. The Detainee Transfer Notification forms are used to notify the legal representative.
Notification includes the reason for the transfer and the location of the new facility.	\boxtimes			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	\boxtimes			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.				
Facility policy mandates that: • Times and transfer plans are never discussed with the detainee prior to transfer; • The detainee is not notified of the transfer until immediately prior to departing the facility; and • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.				This requirement is not contained in facility policy. However, facility and ICE staff indicated that operationally, it is followed.
The detainee is provided with a completed Detainee Transfer Notification Form.				
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			I-203 A is the official form authorizing release from this facility
For medical transfers: The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; Medical transfers are coordinated through the local ICE office; and A medical transfer summary is completed and accompanies the detainee.	\boxtimes			
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.	\boxtimes			
For medical transfers, transporting officers receive instructions regarding medical issues.				Information regarding medication schedules, acute conditions, etc. is relayed to the transport staff.
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.				
Transfer and documentary procedures outlined in Section C and D are followed.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.				Sack lunches are provided if the transport will exceed scheduled meal times. Most transports from this facility are to a Service Processing Center 3 hours away.

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DETAINEE TRANSFEI	RSTAND	ARD		
POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETA VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS) WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERAL IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR W PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN RES THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.	S), ICE W ATION WHI TILL CONSI	ILL ADHI ETHER TH DER THE	ERE TO J IE DETAI DETAINI	PATS PROTOCOLS. IN DECIDING NEE IS REPRESENTED BEFORE THE EE'S STAGE WITHIN THE REMOVAL
COMPONENTS	YES	No	NA	REMARKS
An A File or work folder accompanies the detainee when transferred to a different field office or sub-office.	\boxtimes			A-Files would accompany the transfer in such cases.
Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	\boxtimes			Arrangements are in place to forward the A-File if it cannot be sent at the time of transfer.
□ ACCEPTABLE □ DEFICIENT □	AT-RISE	ζ		REPEAT FINDING
REMARKS: Facility policy does not specifically mandate that transfer plans are not d the transfer until immediately prior to departing, and that the detainee is detainees in genera (b)(6), (b)(7)c pri AUDITOR'S SIGNA (b)(6), (b)(7)c				