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



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

5-11-09 update

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

<b>Name</b> <i>Adelanto Detention Facility East</i>
<b>Address (Street and Name)</b> <i>10400 Ranch Road</i>
<b>City, State and Zip Code</b> <i>Adelanto, California 93301</i>
<b>County</b> <i>San Bernardino</i>
<b>Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator)</b> (b)(6), (b)(7)(c) <i>Facility Administrator</i>
<b>Name and Title of Lead Compliance Inspector</b> (b)(6), (b)(7)(c) <i>Lead Compliance Inspector</i>
<b>Date[s] of Review</b> <i>From 11/1/2011 to 11/3/2011</i>
<b>Type of Review</b> <input checked="" type="checkbox"/> <b>Headquarters</b> <input type="checkbox"/> <b>Operational</b> <input type="checkbox"/> <b>Special Assessment</b> <input type="checkbox"/> <b>Other</b>

## Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

### What is “Performance-Based”?

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

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

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

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

### Worksheet Overview

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

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

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

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

### **Worksheet Completion**

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

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

### **Outcome Measures Completion**

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

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

## ***Table of Contents***

### **SECTION I – SAFETY**

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

### **SECTION II – SECURITY**

- Admission and Release**
- Classification System**
- Contraband**
- Facility Security and Control**
- Funds and Personal Property**
- Hold Rooms in Detention Facilities**
- Key and Lock Control**
- Population Counts**
- Post Orders**
- Searches of Detainees**
- Sexual Abuse and Assault Prevention and Intervention**
- Special Management Units**
- Staff-Detainee Communication**
- Tool Control**
- Use of Force and Restraints**

### **SECTION III – ORDER**

- Disciplinary System**

### **SECTION IV – CARE**

- Food Service**
- Hunger Strikes**
- Medical Care**
- Personal Hygiene**
- Suicide Prevention and Intervention**
- Terminal Illness, Advance Directives, and Death**

### **SECTION V – ACTIVITIES**

- Correspondence and Other Mail**
- Escorted Trips for Non-Medical Emergencies**
- Marriage Requests**
- Recreation**
- Religious Practices**
- Telephone Access**
- Visitation**
- Voluntary Work Program**

### **SECTION VI – JUSTICE**

- Detainee Handbook**
- Grievance System**
- Law Libraries and Legal Material**
- Legal Rights Group Presentations**

### **SECTION VII – ADMINISTRATION & MANAGEMENT**

- Detention Files**
- News Media Interviews and Tours**
- Staff Training**
- Transfer of Detainees**

# **Section I SAFETY**

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

# **PART 1 – 1. EMERGENCY PLANS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is covered in the facility's emergency plans.
2. Detainees are protected from: <ul style="list-style-type: none"> <li>Personal abuse</li> <li>Corporal punishment</li> <li>Personal injury</li> <li>Disease</li> <li>Property damage</li> <li>Harassment from other detainees</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> <li>What type of training and how often?</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff was trained to identify signs of detainee unrest during orientation training. It is also scheduled to be covered during the annual in-service training.
4. Staff effectively disseminates information on facility climate, detainee attitudes, and moods to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The emergency plan states that staff is to alert their supervisor and the facility administrator about facility climate as well as detainee attitudes and moods.
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security is responsible for the development and implementation of the emergency plans with input from staff and department heads.
6. Each emergency plan is assigned a number and is strictly accounted for. A list identifying the location of each emergency plan is maintained by the Chief of Security or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are (b)(7)e emergency plan books in the facility. (b)(7)e (b)(7)e
7. All staff receives training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff is trained during orientation and will be re-trained during annual in-service training.
8. The General Section of the emergency plans discusses alternate routes to the facility for staff to use in the event the primary route is impassable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alternative routes to the facility are outlined in the emergency plans.
9. The plans address the following issues: <ul style="list-style-type: none"> <li>Confidentiality</li> <li>Accountability (copies and storage locations)</li> <li>Annual review procedures and schedule</li> <li>Revisions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the bulleted items identified in this component are outlined in the emergency plans.

# **PART 1 – 1. EMERGENCY PLANS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The contingency plans include a comprehensive general section with procedures applicable to most emergency situations but do not include procedures for handling detainees with special needs.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The contingency plans state that neighbors will be notified by the "One Call" system on the telephone. However, staff advised that the Sheriff's Office is responsible for notifying the neighbors.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> <li>Local law enforcement agencies</li> <li>State agencies</li> <li>Federal agencies</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Cooperative contingency plans have been developed with the California Highway Patrol, Sheriff's Office, and two local hospitals.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The emergency plans state that mock exercises will be conducted annually. However, the facility has not conducted a mock drill since opening in August 2011.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff is required to sign an acknowledgment that they have been trained on the hostage policy, but they do not receive a copy of the policy.
15. (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)e (b)(7)e emergency plan states that within 24 hours after release, hostages will be screened for medical and psychological effects.
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A contract with the Language Line has been established to assist staff, if needed, during a hostage crisis.



# **PART 1 – 1. EMERGENCY PLANS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The emergency plans include emergency medical treatment for staff and detainees during and after an incident.
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Food Service Department maintains at least a three days' supply of emergency meals for staff and detainees.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Written plans illustrating locations of shut-off valves and switches for utilities are located (b)(7)(E) (b)(7)(E)
20. Written plans include a Staff Work Stoppage procedure. This procedure is available for limited supervisory review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written plan for Staff Work Stoppage is located in the Facility Administrator's copy of the emergency plans. It is not included in the other two copies of the emergency plans, which are available to all staff.
21. <b>(MANDATORY)</b> Written procedures cover: <ul style="list-style-type: none"> <li>• Work/Food Strike</li> <li>• Fire</li> <li>• Environmental Hazard</li> <li>• Detainee Transportation System Emergency</li> <li>• ICE-wide Lockdown</li> <li>• Staff Work Stoppage</li> <li>• Disturbances</li> <li>• Escapes</li> <li>• Bomb Threats</li> <li>• Adverse Weather</li> <li>• Internal Searches</li> <li>• Facility Evacuation</li> <li>• Detainee Transportation System Plan</li> <li>• Hostages (Internal)</li> <li>• Civil Disturbances</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's emergency plans address all of the bulleted items identified in this component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 1 – 1. EMERGENCY PLANS**

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

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

The facility has three emergency plan books that address the various components of this standard. The plans are well written and thorough. The emergency plans were reviewed by this inspector and found to be well written, easy to understand and they address the components of this standard.

Staff received training on the emergency plans during their orientation and are scheduled to receive a refresher course on the emergency plans during their annual in-service training.

The contingency plans include a comprehensive general section with procedures applicable to most emergency situations but do not include procedures for handling detainees with special needs.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

## PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has policies and procedures in place for the storage, issue, and inventory maintenance of all chemicals.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A constant inventory is not maintained of chemicals located in the laundry facility.
3. The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used. <ul style="list-style-type: none"> <li>The files list all storage areas, and include a plant diagram and legend.</li> <li>The MSDSs and other information in the files are available to personnel managing the facility's safety program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire Safety officer maintains the Master MSDS file for all hazardous substances used.
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> <li>Wear personal protective equipment.</li> <li>Report hazards and spills to the designated official.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> <li>Quantities are limited.</li> <li>Detainees are trained.</li> <li>Staff always supervises detainees using these substances.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize any products containing methyl alcohol.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. <b>(MANDATORY)</b> The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy indicates that the facility complies with the applicable codes, standards, and regulations of NFPA and OSHA. The facility Fire Safety Plan has been approved by the local fire authority.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire and Safety officer has completed San Bernardino County "Fire Control 3 Training," Hazmat training as well as OSHA training.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility began housing detainees on August 29, 2011. Weekly fire safety inspections have been initiated. However, at this time there is only one inspection report on file for the past two months.
16. <b>(MANDATORY)</b> The facility has an approved fire prevention, control, and evacuation plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's fire prevention, control and evacuation plan was approved by the San Bernardino County Deputy Fire Marshall on August 2, 2011.
17. The plan requires: <ul style="list-style-type: none"> <li>Monthly fire inspections.</li> <li>Fire protection equipment strategically located throughout the facility.</li> <li>Public posting of emergency plan with accessible building/room floor plans.</li> <li>Exit signs and directional arrows.</li> <li>An area-specific exit diagram conspicuously posted in the diagrammed area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility began housing detainees on August 29, 2011. Monthly fire safety inspections have been initiated; however, at this time only one monthly fire inspection has been completed and is on file. The other bulleted elements of this component are in place.
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is presently conducting monthly fire drills,
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a dedicated barbershop in Unit One housing area. In Unit Two, barbering services are provided through the use of a mobile cart which contains the necessary supplies. The cart is wheeled to the housing units in Unit two, and the barbering is carried out in the unit.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The syringes, needles, and sharp instruments in the medical department are inventoried each shift, and this inventory is checked weekly by the Health Service Administrator (HSA).
24. Standard cleaning practices include: <ul style="list-style-type: none"> <li>Using specified equipment; cleansers; disinfectants and detergents.</li> <li>An established schedule of cleaning and follow-up inspections.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility contracts with Stericycle for the disposal of infectious/bio-hazardous waste.
27. Staff is trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> <li>At least monthly.</li> <li>The pest-control program includes preventive spraying for indigenous insects.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility contracts with Dewey Pest Control for monthly inspections, and preventative spraying services.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water testing is conducted annually by the City of Adelanto. The most recent report on file is dated July 1, 2011.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> <li>Other emergency systems and equipment receive testing at least quarterly.</li> <li>Testing is followed-up with timely corrective actions (repairs and replacements).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The HSA has an inspection form that includes the required elements of this component. Daily inspections were documented for the first three weeks of October. However, they have not been completed for the entire last week of October or the first three days of November.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> <li>American Correctional Association,</li> <li>Occupational Safety and Health Administration,</li> <li>Environmental Protection Agency,</li> <li>Food and Drug Administration,</li> <li>National Fire Protection Association's Life Safety Code, and</li> <li>National Center for Disease Control and Prevention.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

This facility was initially built in 1991. The administration area is outside of the secure perimeter of the facility in a separate two story building which is adjacent to the secure portion of the facility. The secure facility is entered through a lobby. There is a reception desk with a medical detector and x-ray machine immediately inside of this area. The Central Control Center is located behind the reception desk. A contact visiting area is to the immediate left, and a non-contact visiting booth is to the right. Sally ports lead into the core area of the facility, which is a single-story area housing medical, food service, laundry, and the intake area.

There are two detainee housing areas. Unit One is to the left of the core area and is accessed by crossing through the outdoor recreation yard. Unit One has four detainee housing units. Unit Two is to the right of the core area and has three detainee housing units. The center unit of Unit One was split in half by a cinder block wall to accommodate special housing and segregation units. The left side of this split unit is the segregation unit. The bottom tier of this unit provides a secure area within the special housing unit.

Fire protection equipment is located throughout the facility. There are exit diagrams posted, and exit signs posted throughout the facility.

Forms are in place for required sanitation and fire inspections of the facility. However, the inspections have only recently been implemented and have not consistently been completed, as required by the standard, since the facility began housing detainees on August 29, 2011.

The facility was clean and neat at the time of the inspection. It is well lit and ventilated. Space restrictions of the facility are most noticeable in the intake area where former holding cells are utilized as office space, and property must be stored some distance from the booking area.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records reviewed indicated that all transportation officers have been in compliance with motor vehicle laws and regulations.
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Lieutenant and five other officers have a valid CDL issued by the state of California.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a fleet of (b)(7)e (b)(7)e Individual records for each vehicle were checked during this inspection.
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle records indicate inspections have been completed as required.
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> <li>Officers report deficiencies affecting operability.</li> <li>Deficiencies are corrected before the vehicle goes back into service.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daily checklists are completed for each vehicle. Vehicles are taken out of service if any safety or performance deficiencies are noted.
7. Transporting officers: <ul style="list-style-type: none"> <li>Limit driving time to 10 hours in any 15 hour period when transporting detainees.</li> <li>Drive only after eight consecutive off-duty hours.</li> <li>Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours.</li> <li>Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days.</li> <li>(b)(7)e</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation officer post orders support this component and records indicated compliance.



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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. (b)(7)(e) with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> <li>When buses travel in tandem with detainees, there are (b)(7)(E) qualified officers per vehicle.</li> <li>An unaccompanied driver transports an empty vehicle.</li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vehicles always have (b)(7)(e) with valid CDLs in the vehicle. The transportation supervisor verified that an unaccompanied driver does not always transport an empty vehicle when detainees are transported.
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation officers verify the identity of each detainee before each trip.
11. All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation officers perform a thorough pat search of each detainee prior to the detainees boarding the bus or vehicle.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (b)(7)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)(E) <div style="background-color: #cccccc; padding: 5px; margin-top: 5px;">(b)(7)(E)</div>
14. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> <li>Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders require a visual count of all passengers once on board and seated. Additional counts are taken whenever there is a scheduled or unscheduled stop.
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E) <div style="background-color: #cccccc; padding: 5px; margin-top: 5px;">The transportation supervisor confirmed this process.</div>
16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> <li>(b)(7)(E) officer remains in the vehicle at all times when detainees are present.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders require that no one contacts the detainees, and at least (b)(7)(E) officer remains in the vehicle at all times when detainees are present.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. Meals are provided during long distance transfers. <ul style="list-style-type: none"> <li>The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The transportation supervisor verified that long distance transfers have not occurred to date. The longest trip has lasted one and a half hours. Facility policy does state that approved meals will be provided for trips lasting longer than six hours.
18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). <ul style="list-style-type: none"> <li>Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative.</li> <li>Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the bulleted items of this component. Food Service meals have not been provided on any trip to date due to the short distance of the trips.
19. Vehicles have: <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px; text-align: center;">(b)(7)e</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px; text-align: center;">(b)(7)e</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">(b)(7)(E) One of the facility vans is equipped for detainees with disabilities.</div>
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> <li>Is inventoried.</li> <li>Is inspected.</li> <li>Accompanies the detainee.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"><li>• Attack</li><li>• Escape</li><li>• Hostage-taking</li><li>• Detainee sickness</li><li>• Detainee death</li><li>• Vehicle fire</li><li>• Riot</li><li>• Traffic accident</li><li>• Mechanical problems</li><li>• Natural disasters</li><li>• Severe weather</li><li>• Passenger list is not exclusively men or women or minors</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, post orders and Emergency Plan #11, Detainee Transportation System Emergency, addresses all of the bulleted items of this component.

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

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

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

The transportation unit at this facility makes frequent trips to the Los Angeles area for transport of detainees to and from the staging area facility. The fleet of two buses and three vans is new and in excellent condition.

Observation of the transportation process and a review of the records indicated the facility is in compliance with this standard. The supervisor of this unit is very detailed and proud of the officers assigned to this unit.

The transportation supervisor verified that an unaccompanied driver does not always transport an empty vehicle on all detainee transports.

(b)(7)e

(b)(7)e

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

## **Section II SECURITY**

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

## PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an orientation that includes the detainee handbook. The other requirements of this component are only applicable to SPCs and CDFs. However, the facility presents an orientation video containing material consistent with the standard, and a detainee handbook is issued to each detainee.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trained medical personnel provide the initial health screening.
3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring new detainees to be segregated from the general population during the orientation and classification period is specific to SPCs and CDFs. Detainees are not housed separately during the orientation and pre-classification phase of the admission process. The I-213 form is the only form used by facility personnel to classify each new arrival.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires all strip searches to be documented on a G-1025, or equivalent, with proper supervisory approval is specific to SPCs and CDFs. Strip searches are allowed only when reasonable suspicion has been established and the Warden has approved the search. The G-1025 form is used when necessary.

## PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
6. The “Contraband” standard governs all personal property searches. IGSA’s and CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee’s possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive a copy of the receipt for property seized.
7. Staff completes Form I-387 or similar form for CDFs and IGSA’s for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. However, all releases are coordinated with ICE personnel.
10. Staff completes paperwork/forms for release as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Each detainee receives a receipt for personal property secured by the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a receipt for property secured by facility personnel.
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. ICE staff enters all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs; however, ICE personnel are available on-site and enter information pertaining to release, removal, or transfer into the EADM when appropriate.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Orientation material is provided in English and Spanish.

## PART 2 – 4. ADMISSION AND RELEASE

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

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

The inspector reviewed policy and supportive documentation; observed the admission and release process; and interviewed personnel to determine the compliance level of the facility. The facility operates a small intake/release area that provides detainee separation, processing and holding space. Strip searches are not conducted as part of routine policy.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer’s Signature / Date

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

## PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSA's use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the facility to use the required Objective Classification System is specific to SPCs and CDFs. The facility uses an objective classification instrument to classify ICE detainees.
2. The facility classification system includes: <ul style="list-style-type: none"> <li>Classifying detainees upon arrival.</li> <li>Separating individuals who cannot be classified upon arrival from the general population.</li> <li>The first-line supervisor or designated classification specialist reviews every classification decision.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The intake/processing officer reviews all available information made available to identify and classify a detainee. The normal process is to review the I-213 form prepared by ICE personnel; however, the A-file or work folders are not provided.
4. 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 detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees, classified as minimum custody, are housed separately from ICE detainees classified as maximum.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring subsequent reassessments to be completed at 90 day to 120 day intervals is specific to SPCs and CDFs. Facility policy requires a reassessment to be completed at 90 and 120 day intervals.



## PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that indicates that only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal is specific to SPCs and CDFs. A designated supervisor has the authority to reduce a classification level on appeal.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring classification appeals to be resolved in 5 business days is specific to SPCs and CDFs. Facility policy requires classification appeals to be resolved within five business days.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy allows a designated supervisor to address appeals of classification.
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook provides a comprehensive description.
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring detainees to be assigned color-coded uniforms and IDs to reflect classification levels is specific to SPCs and CDFs. Color-coded detainee uniforms are issued to distinguish detainee classification levels.

## PART 2 – 5. CLASSIFICATION SYSTEM

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

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

The facility maintains a detainee classification system that determines the classification level of each detainee upon his immediate arrival. Policy requires reassessments to be completed within prescribed time periods.

(b)(6), (b)(7)(c) / November 3, 2011  
 Reviewer's Signature / Date

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

## PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requirement for staff to inventory, hold, and report contraband to the proper authority for action/possible seizure is specific to SPCs and CDFs. Staff inventories, holds, and reports contraband when necessary to the proper authority for action/possible seizure.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Contraband that is considered to be government property is retained as evidence for potential disciplinary action or prosecution.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff returns property not needed as evidence to the proper authority. Facility policy addresses the return of this property.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the destruction of altered property.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility chaplain or other religious authority is consulted prior to the confiscation of any religious items.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy outlines the procedures for the destruction of illegal hard contraband.
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> <li>If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use.</li> <li>Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sections of the component that requires hard contraband that is illegal (under criminal statutes) if retained, be secured when not in use and be used under specific written procedures is specific to SPCs and CDFs. Illegal hard contraband may be retained for training purposes. The hard contraband is stored in the training Lieutenant's office.  Soft contraband may be mailed to a third party or stored according to the standard on Funds and Personal Property.

**PART 2 – 6. CONTRABAND**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a copy of the detainee handbook, which explains the contraband rules and procedures.
9. Facilities with Canine Units only use them for contraband detection.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Staff advised that their contract with ICE does not permit the use of Canine Units.

**PART 2 – 6. CONTRABAND**

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

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

Facility policy 10.2.06, Handling of Contraband/Preservation of Evidence, addresses the procedures for the handling and disposition of illegal contraband.

All detainees receive a copy of the handbook explaining the rules and procedures regarding contraband.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A random review of housing unit logs indicates that the Facility Administrator and other department heads visit detainee living quarters at least once per week.
2. At least one male and one female staff are on duty where both males and females are housed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Females are not housed at this facility.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility administration performed a comprehensive staffing analysis prior to opening the facility. Staff advised that the staffing complement can fluctuate depending on the detainee count and the contract agreement with ICE. An annual review will be conducted at the completion of one year of operation.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has filled essential posts with qualified and trained personnel.
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Control Center officers receive special training prior to assuming their posts.
6. Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Policy restricts access to the Control Center to those who have official duties to perform.
7. Detainees do not have access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees are prohibited access to the Control Center.
8. Communications are centralized in the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Communications are centralized in the Control Center.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Control Center is staffed by (b)(7)(F) officers on each shift, 24 hours per day. The Control Center is clean, well equipped, and well maintained.

## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Control Center maintains a list of all employees and their phone numbers for emergency recall purposes.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The recall list with the employee name and home phone number was current at the time of the inspection.
12. (b)(7)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)(E)
13. Information about routine procedures, emergency situations, and unusual incidents will be continually recorded in permanent post logs and shift reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff record routine procedures, emergency situations, and unusual incidents in pass down logs. Emergency situations are immediately reported verbally to a supervisor.
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visits are recorded in one of several logbooks located in the main lobby. Detainee visits are also recorded electronically.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a color-coded visitor pass system for issuing visitor identification cards.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Control Center monitors all vehicular traffic entering and leaving the facility. A utility officer is assigned to accompany all vehicles entering the facility grounds.

## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> <li>The driver's name</li> <li>Company represented</li> <li>Vehicle contents</li> <li>Delivery date and time</li> <li>Date and time out</li> <li>Vehicle license number</li> <li>Name of employee responsible for the vehicle during the facility visit</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The perimeter patrol officer maintains a log documenting all of the bullets of this component except the name of the employee responsible for the vehicle during the facility visit. The Control Center records the name of the utility officer accompanying the vehicle during the visit. A check of the logbook confirmed this process is being followed.
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Officers thoroughly check all vehicles entering or leaving the facility.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The design of the facility and location of the perimeter fence helps to ensure that detainees will remain within. Public access is denied without proper authorization.
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10.2.1, Facility/Detainee Searches, details searches of housing units and personal areas.
24. Housing area searches occur at irregular times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Post Orders and facility policy instructs officers to conduct searches at irregular times.
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is designed to operate in a "direct supervision" mode, which places the officer station in the living area, allowing for personal contact and interaction with the detainees.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders are written for every security officer post.

## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee movement out of the housing area is controlled by staff.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The officer's station is located directly in the housing areas facilitating continuous, direct observation of all areas of the housing units.
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All housing unit searches are documented in the housing unit logbook.
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The SMU does not have a pedestrian sally port.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU housing officer performs an inventory of all tools prior to entry and departure from the unit.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> <li>• Posts to be inspected</li> <li>• Required inspection forms</li> <li>• Frequency of inspections</li> <li>• Guidelines for checking security features</li> <li>• Procedures for reporting weak spots, inconsistencies, and other areas needing improvement</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a comprehensive security inspection policy. The bulleted sections of this component are only applicable to SPCs and CDFs. The bulleted items of this component are addressed in facility policy 10.2.1, Facility/Detainee Searches.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Officers are required to perform frequent searches of their respective areas and document their findings in the logbook.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit searches are recorded in the unit logbook. The security inspections conducted by the shift Lieutenants are kept on file in the Administrative Lieutenant's office. Several inspection forms were reviewed and found to be filled out thoroughly.



## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Shift Supervisor reports recurring problems to the respective department heads or Assistant Facility Administrator for Security for corrective action.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools are inventoried prior to being taken into or removed from the facility by the lobby officer. This information is documented on a form.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Housing unit officers and shift Lieutenants conduct inspections of the storage and supply rooms, as well as walls, lights, and plumbing fixtures. (b)(7)(E) (b)(7)(E) (b)(7)(E) No documentation was available to show searches were conducted, as required. All inspections completed are documented in logbooks or on inspection forms.
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift Lieutenant is responsible for conducting a security inspection of these areas at least once per shift. The results of these inspections are documented and filed in the Administrative Lieutenant's office. A check of the inspection forms revealed that they are being completed, as required.
39. Daily procedures include: <ul style="list-style-type: none"> <li>Perimeter alarm system tests.</li> <li>Physical checks of the perimeter fence.</li> <li>Documenting the results.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires (b)(7)e (b)(7)e
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visiting room officer inspects the visitation room before visitation begins each day and after each visit.

## PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security is responsible for ensuring the security inspection process covers all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Maintenance Supervisor and Assistant Facility Administrator for Security make monthly checks of the perimeter fence.

### FACILITY SECURITY AND CONTROL

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

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

The Facility Administrator and other department heads make frequent tours of all areas of the facility. During the inspection team's tour of the facility, it was apparent that the detainees knew who the Facility Administrator and other staff were. The facility has hired, trained, and filled the posts with well qualified personnel. Staff was found to be knowledgeable and helpful.

The lobby officer checks the ID of anyone visiting the facility and issues a color-coded pass to all visitors. Detainee visitors are recorded electronically and also in a logbook.

All vehicles entering through the sally port are accompanied at all times by a utility officer.

Housing unit officers perform frequent, unannounced security checks in their respective areas and record this information in the logbook.

The shift lieutenants perform thorough security inspections of all areas of the facility at least (b)(7)e. The inspection (b)(7)e. The results are documented on a form with deficiencies being reported to the proper office for correction. Copies of these inspection forms are filed in the administrative lieutenant's office. Several of the forms were reviewed and found to be filled out properly and thoroughly.

(b)(7)(E) Maintenance staff acknowledged that they did not realize this was a requirement.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. (b)(7)e officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)e officers verify funds and valuables.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. During the processing of funds and valuables at this facility, there are (b)(7)e officers present and (b)(7)e verify the funds and valuables received.
5. For IGSA and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses its own appropriate form.
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The detainee receives the original copy of the inventory form. The yellow copy is placed in the detention file, and a pink copy is inserted in the funds envelope.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Discrepancies are immediately reported to the Lieutenant responsible for supervising the intake area and filter up the chain of command.
10. Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> <li>By sending written notice to the detainee's last known address; via certified mail;</li> <li>The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff obtains a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. It is standard procedure for (b)(7) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7) officers are present when funds are removed from a detainee's possession and documentation occurs.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Property receipts (G-589s) are numbered, and this information is entered into the detainee's file for tracking purposes.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A G-589 property receipt form is completed and copies are distributed in accordance with the ICE standard.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The processing officer records each property receipt in a G-589 log book and enters the initials of the receipting officer.
18. Staff tags large valuables with both a G-589 and an I-77.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff tags large valuables with a Form I-77.
19. The supervisor verifies the accuracy of every G-589.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Lieutenant on duty does verify the accuracy of all funds and valuable property receipt forms.

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<b>20. The supervisor ensures that:</b> <ul style="list-style-type: none"> <li>• Detainee funds are, without exception, deposited into the cash box;</li> <li>• Every property envelope is sealed.</li> <li>• All sealed property envelopes are placed in the safe.</li> <li>• Large, valuable property is kept in the secured locked area.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The intake Lieutenant ensures that detainee funds are deposited in the intake safe. Valuables are placed in clear envelopes and locked in the filing cabinet designated for valuables. Non-valuable property is placed in storage, and any large valuable property is stored in the baggage area as well.
<b>21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Property bags are tagged with a Form I-77.
<b>22. Staff secures every container used to store property with a tamper-proof numbered strap.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Property is numbered and stored with a tamper-proof strap.
<b>23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There is a logbook in which the detainee name, A-number, and Form I-77 number is recorded. Baggage is stored by number.
<b>24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Weekly comprehensive audits are not conducted with an ICE agent. The intake Lieutenant audits property as time permits.
<b>25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility plans to conduct quarterly audits of baggage and non-valuable property. However, as the facility has not yet been operational for a full quarter, this documentation is not presently available.
<b>26. The facility positively identifies every detainee being released or transferred.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Every detainee is positively identified prior to release or transfer.

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring staff to routinely inform supervisors of lost/damaged property claims is specific to SPCs and CDFs. The facility has only housed detainees for the last 67 days. Staff reported that, as yet, there have been no claims reported of missing or damaged property. However, if a report was filed, procedures are in place for the claim to be investigated.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Procedures are in place to notify ICE of lost and damaged property claims.

## PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

The facility searches all arriving detainees for contraband. Medical information and medications that arrive with a detainee are given directly to medical staff. (b)(7)(e) officers are present during the processing of detainee funds, valuables, and property.

Funds are placed in an envelope, and a copy of the receipt of funds form is sealed in the envelope with the funds. This is placed in a safe in the intake area for daily pick-up and deposit to the detainee's account.

Valuable property is stored in a locked filing cabinet which is secured with a bar in the intake Lieutenant's office. The intake Lieutenant maintains the keys that access this file cabinet. Property stored in this file is placed in a clear envelope with the property receipt, and logged in a logbook.

Non-valuable property is placed in a large beige property bag, which is sealed and tagged with a Form I-77. These bags are stored in a room located off of the outside of the facility. Property bags are accumulated in a laundry cart in the intake area and moved to the property storage area by the property officer. The property area is accessed by going through a sally port and two locked gates, as well as the locked door to the property storage room. Property is stored with a property receipt, and it is numbered and logged into a book to facilitate access. This number is also recorded in the detainee's detention file.

The property room is lined with shelves for bulk property, abandoned property, and property awaiting pick up. The numbered property bags are stored on a series of two-level racks that span the interior of the room.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold rooms are located within the secure perimeter.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring hold rooms to be well ventilated, well lit, and that all activating switches are located outside the room is specific to SPCs and CDFs. The hold rooms are well ventilated, well lit, and all activating switches are located outside the rooms.  The hold rooms are clean and in good repair.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold rooms contain sufficient seating for the number of detainees held.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Bunks/cots/beds or other makeshift sleeping apparatuses were not observed in the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold room walls and ceilings appear to be escape and tamper resistant.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff advised that detainees are usually not held in the hold rooms for longer than six hours. A check of the logbook supported this statement.
7. Male and females detainees are segregated from each other at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Female detainees are not housed at this facility.
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet paper was observed in the hold rooms. Soap and cups for water are available upon request.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms are equipped with toilet facilities.



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are given a pat down search before being placed in the ICE hold room. They are pat searched again before being placed in the facility hold rooms.
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> <li>Cleaning.</li> <li>Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff performs a security and sanitation check after each group of detainees is removed from the hold room.
12. <b>(MANDATORY)</b> There is a written evacuation plan. <ul style="list-style-type: none"> <li>There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring the written evacuation plan designate an officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency is specific to SPCs and CDFs. The intake officer is responsible for the evacuation of detainees from the hold rooms in case of emergencies. The facility has a written evacuation plan. The supervisor in this area stated that she has performed mock evacuation drills with her staff, without detainees present.
13. An appropriate emergency service is called immediately upon a determination that a medical emergency exists.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> <li>If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The single occupancy hold rooms meet the minimum square footage requirements.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are:</p> <ul style="list-style-type: none"> <li>Compliant with the American Disabilities Act.</li> <li>Small hold rooms (1 to 14 detainees) have at least one combi-unit.</li> <li>Large hold rooms (15 to 49 detainees) are provided with at least two combi-units.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The two large hold rooms have a rated capacity of 55 detainees per room. There is a single sink and single commode in each room with a privacy half wall surrounding these fixtures. Both of these fixtures are stainless steel. The single rooms each have one stainless steel combi-unit.
16. In SPCs designed after 1998 the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The large hold rooms have a floor drain in each room.
17. In SPCs designed after 1998, the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold room doors swing outward and the doors comply with the specifications of this standard.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states that persons of advanced age will not be placed in a hold room but rather placed in a chair close to the officer's station. The facility does not accept family units, females with children, and unaccompanied juvenile detainees.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are not housed at this facility.
<p>20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell.</p> <ul style="list-style-type: none"> <li>The log includes the required information specified in the standard.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The portion of this component that requires the log to include the required information specified in the standard is specific to SPCs and CDFs. The logs include the information required in this standard but a review of the logs revealed that the log is not always completed entirely.</p> <p>A manual detention log is posted outside the door of each hold room.</p>

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> <li>Juveniles, babies and pregnant women have access to snacks, milk or juice.</li> <li>Meal are served to juveniles regardless of time in custody</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals or sack lunches are provided to any detainee who is held in the hold room for longer than six hours. If a detainee is in the hold room during meal time, he is provided a meal. Juveniles, babies, and pregnant women are not housed at this facility.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is present when detainees arrive at the facility. If a detainee has a disability, medical staff will make the decision regarding s housing assignment while the detainee is in the hold room area.
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maximum capacities for each multi-occupancy hold room are posted outside the door of the hold room.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The intake officers, as well as medical staff, observe the detainees before he is placed in a hold room in an effort to screen for obvious mental or physical problems.
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The entire facility is non-smoking.
26. Officers closely supervise hold rooms through direct supervision, to ensure: <ul style="list-style-type: none"> <li>Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and</li> <li>Visual monitoring at irregular intervals at least every 15 minutes, each time recording in the detention log, the time and officer's printed name and any unusual behavior or complaints under "Comments."</li> <li>Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms are located immediately adjacent to the officer's station and have large windows for observation. The officers are performing 15-minute checks of each hold room. Checks of the logs indicated that this process is being enforced. Even though it is difficult to hear all activity in the hold room, the rooms are continually visually monitored by direct observation and by the 15 minute checks. The Control Center can also provide auditory and camera monitoring, if requested.

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

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

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

The facility has two large hold rooms with a capacity for 55 detainees each and three individual hold rooms. ICE also has one large hold room in this area with a capacity of 34 detainees. The hold rooms are located in the intake area; and they are clean and in good repair.

Detainees are first processed by ICE and held in their hold room before they are moved to the facility hold rooms for further processing. Logs are maintained that record when a detainee is placed in and released from the hold room. The 15-minute security checks are also recorded on this log.

The two large hold rooms are located immediately adjacent to the officer's station which allows for direct supervision of these rooms. Detainees are usually held in this area for less than six hours.

During the inspection, the intake process was observed. Staff carried out their responsibilities according to facility policy.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

## PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sergeant in charge of keys and locks has attended three different approved locksmith training programs.
2. The security officer, or equivalent, has responsibility for all administrative duties and responsibilities relating to keys, locks etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A sergeant has been assigned this responsibility.
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sergeant provides training to all employees regarding key and lock control.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories of all keys and locks were reviewed by this inspector.
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sergeant has developed a monthly preventative maintenance checklist and documentation is on file.
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility key control policy addresses this component.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the disposition of worn, broken or discarded keys.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> <li>Occupational Safety and Environmental Health Manual, Chapter 3</li> <li>National Fire Protection Association Life Safety Code 101.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The operational keyboard sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has four keyboards that are more than sufficient to accommodate all of the facility key rings.

## PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> <li>Identifiable</li> <li>Numbers of keys on the ring are cited?</li> <li>Keys cannot be removed from issued key rings</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states that all key rings will be identifiable; the number of keys cited; and actual keys cannot be removed from issued key rings. Several key rings were checked and found to be in compliance.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency key rings are maintained in the Master Control Center.
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has installed a Morse electronic Key Watcher System for the storage of all key rings. Staff must first enter a PIN number, scan their fingerprint and then enter a code to unlock the key cabinet and retrieve their key ring. The system continually documents all activity in the key cabinets and produces an alarm if an employee does not return their key ring within the pre-designated time frame.
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor, Assistant Facility Administrator, or Facility Administrator can authorize the issuance of a restricted key.
19. Individual gun lockers are provided. <ul style="list-style-type: none"> <li>They are located in an area that permits constant officer observation.</li> <li>In an area that does not allow detainee or public access.</li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Several gun lockers are located throughout the facility and the  (b)(7)(E)
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for the keys to be physically counted daily is specific to SPCs and CDFs. The Lieutenant checks the keyboards on each shift to ensure all key rings are accounted for. The electronic Key Watcher system also ensures that all key rings are in the proper location.  The facility policy on key control addresses key accountability.

## PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> <li>• Issued keys are returned immediately in the event an employee inadvertently carries a key ring home.</li> <li>• When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified.</li> <li>• Detainees are not permitted to handle keys assigned to staff.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only required for SPCs and CDFs. Staff is required to immediately return a key ring to the facility if s/he inadvertently carries a key ring home. Facility policy states that the shift supervisor is to be notified immediately if a key ring is lost, misplaced or not accounted for. Detainee are not permitted to handle keys.  All staff received training during orientation on the proper procedures for handling keys and key rings.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The key control officer has this responsibility.
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The key control officer is the only employee authorized to add or remove a key from a ring.
25. The splitting of key rings into separate rings is not authorized.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Splitting of key rings is not authorized.

## PART 2 – 10. KEY AND LOCK CONTROL

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

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

The facility has installed a Morse Electronic Key Watcher System to assist with key accountability. All of the facility key rings are stored in four key cabinets. Each staff member must first (b)(7)(E) order to open the key cabinet to either retrieve or return a key ring. The system documents all activity in the key cabinets and produces an alarm if a key ring is not returned with the pre-designated timeframe for each key ring. The Lieutenant on each shift is responsible for periodically checking the system for alarms or other issues. This is an excellent system for key accountability. Several key rings were checked and found to be identifiable. The number of keys was cited and the keys could not be removed from the key ring.

The facility has several gun lockers (b)(7)(E)

(b)(7)(E)

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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



## PART 2 – 11. POPULATION COUNTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conducts a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Formal counts are conducted five times over a 24-hour period. One count is conducted on the day shift and two counts are conducted on each of the other two shifts. A face to photo count is conducted at 4:30 p.m. each day.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All activities cease during formal count, except food service workers who are permitted to remain in their work area.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7) officers perform the count in each housing and work area. Out counts are submitted to the main Control Center for inclusion in the count.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Counts take place simultaneously in all units.
5. Officers do not allow detainee participation in the count.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees are not permitted to participate in counts at this facility.
6. A face-to-photo count follows each unsuccessful recount.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A face to photo count is not conducted until after a second unsuccessful recount.
7. Officers positively identify each detainee before counting him/her as present.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees are positively identified before counting them as present.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses informal and emergency counts.
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The main Control Center maintains an ongoing "out-count" of each detainee temporarily out of the facility.



## PART 2 – 11. POPULATION COUNTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Security officers and any other staff with responsibilities for conducting counts are provided adequate initial and periodic training in count procedures, and that training is documented in each person's training folder.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All officers received training on count procedures during their orientation training and are scheduled to receive follow-up training at their annual in-service training.

## PART 2 – 11. POPULATION COUNTS

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

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

(b)(7)e Formal counts are conducted at this facility during each 24 hour period with a face to photo count occurring during the 4:30 p.m. count. The face to photo count was observed by this inspector during the inspection. The count was carried out in accordance with facility policy, and staff performed their duties in a professional manner.

Facility policy outlines the procedures for conducting counts including informal and emergency counts.

(b)(6), (b)(7)(c) / November 3, 2011  
 Reviewer's Signature / Date

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

## PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A set of post orders is located at each fixed post.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Post orders are arranged in the six part folder format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The post order sets reviewed contained the latest revisions.
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security is responsible for keeping all post orders current.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All post orders were distributed in August 2011. Facility policy states that the post orders will be reviewed, as necessary, and at least annually.
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility, the Facility Administrator has signed and dated the last page of each post order.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Post Order Master File is maintained in the Compliance Coordinator's office and is available for all staff to review.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states that Post Orders are to be secured from detainees at all times. During the inspection, it was noted that Post Orders were kept in cabinets or drawers that were inaccessible to detainees.
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 2 – 12. POST ORDERS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisor verifies that an officer assuming a new post, either on a temporary, permanent, or emergency basis, has read or understands the Post Order. The officer will then sign and date the Post Order. The shift supervisor will initial the Post Order verifying that the officer understands the Post Order.
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The officer is required to read, sign, date and print their name on the Post Order indicating that he/she has read and understands the Post Order.
13. Anyone assigned to an armed post qualifies with the post weapons before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E)
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> <li>Any staff member who is taken hostage is considered to be under duress, and</li> <li>Any order issued by such a person, regardless of his or her position of authority, is to be disregarded.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders for the perimeter patrol officer and the transportation officer contain the information identified in the bulleted items of this component.
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The Post Orders for housing units track the daily event schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The housing officer Post Order tracks the daily event schedule.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The housing officer records all detainee activity in the housing unit log. The Post Order for the housing officer contains instructions on maintaining the logbook.

**PART 2 – 12. POST ORDERS**

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

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

The facility has developed a set of Post Orders that is maintained at each fixed post. The Post Orders were distributed in August, 2011, when the facility opened. Facility policy dictates that the Post Orders will be reviewed as necessary, and at least on an annual basis. A recent revision to a Post Order was viewed in several Post Order sets.

Several Post Order sets were reviewed and found to be organized and secured from detainees.

A master copy of the Post Orders is located in the Compliance Coordinator's office and available for staff to review.

The shift supervisor ensures that an officer assuming a new post has read and understands the Post Order. Both the officer and the shift supervisor sign or initial the Post Order documenting that this action has occurred.

(b)(6), (b)(7)(c) November 3, 2011

Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 10.2.1, Facility/Detainee Searches, describes the search policy and procedures.
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a written policy that describes procedures consistent with the standard.
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No strip searches have been conducted according to staff. However, policy requires reasonable suspicion that the detainee may be in possession of contraband and authorization is received prior to a strip search being conducted.
7. Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No body cavity searches have been conducted as reported by staff.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dry cells are not used at the facility.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canines are not used at the facility.

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

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

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

Searches of detainees primarily consist of pat down searches. Detainee property is appropriately searched in a manner consistent with the standard.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 11.1.6, Prevention of Sexual Assault and Abuse, establishes this program
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Policy 11.1.6, Prevention of Sexual Abuse and Assault, was approved by the Warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. No sexual abuse or assaults have been reported. Policy requires the HSA to maintain statistics and reports when sexual abuse or assault has been reported
4. All staff is trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of training curriculum reveals that all staff is trained during orientation. The facility has only been operational for two months; therefore, annual refresher training cannot be confirmed.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are informed about the program in the detainee handbook and through the facility orientation.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Sexual Assault Awareness Notice was observed on all housing unit bulletin boards.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Sexual Assault Information brochure is not available for detainees.
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that this screening is part of the intake medical/mental health screening conducted by nursing staff. Interviews with medical staff indicate that high risk individuals would be referred promptly to a mental health professional and counseling is provided.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has only housed detainees for two months. No incidents of sexual abuse or assault have been reported.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No incidents or allegations of sexual abuse or assault by staff on a detainee have been reported.
11. There is prompt and effective intervention when any detainee is sexually abused or assaulted and policy and procedures for required chain-of-command reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 11.1.6 requires prompt and effective intervention when any detainee is sexually abused or assaulted and chain-of-command reporting.
12. When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 11.1.6 requires that staff conduct a thorough investigation, gather and maintain evidence, and make referrals to local law enforcement agencies for possible prosecution when there is an alleged sexual assault.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be verified since no sexual assaults have been reported. Policy 11.1.6 requires that ICE and local law enforcement be notified.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 11.1.6 addresses.
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be verified since no sexual assaults have been reported. The HSA has been designated as the staff coordinator, and she states that these records would be maintained.

**SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION**

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

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

This facility has only housed ICE detainees for two months. No claims of sexual assault or abuse have been reported. Policy 11.1.6 provides procedures to follow in the event of reported sexual assault or abuse and appears to be in compliance with the ICE standards. Interviews with staff reveal they are cognizant of the sexual assault or abuse policy and the procedures to follow in the event of such a claim.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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



## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10.2.11, Special Management Unit Operations, addresses procedures related to the special management unit.
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A detainee will be placed in Disciplinary Segregation only after a finding by a Disciplinary Hearing Panel that the detainee is guilty of a prohibited act or rule violation classified at a "Greatest", "High", or "High-Moderate" level, as defined in the Detention Standard on Disciplinary System.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security serves as the Hearing Officer and may place detainees in disciplinary segregation after finding a detainee guilty of one of these classifications of a violation.
4. <b>(MANDATORY)</b> Health care personnel are immediately informed when a detainee is admitted to an SMU to provide assessment and review as indicated by health care protocols.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are escorted to the Medical Department to be assessed by a health care professional before being placed in the SMU. If the detainee is acting out, the health care professional will assess him in the SMU as soon as possible.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this component.
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each cell in the SMU has two bunks securely fastened to the wall. The facility has only been housing one detainee in each cell.
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual logs are maintained on each detainee assigned to the SMU. Additional logs are maintained to record visits by other staff members.

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.).</p> <p>In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The portion of this component requiring the SMU log to have the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official and the date released recorded is specific to SPCs and CDFs. The SMU log records the items identified in this component.</p> <p>A permanent log is maintained in the SMU to record all detainee related activities.</p>
<p>10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record:</p> <ul style="list-style-type: none"> <li>▪ The time and date of the visit, and</li> <li>▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. A separate log is maintained in the SMU that all persons visiting the unit must sign, as well as record the date and time. Any unusual behavior of a detainee will be recorded by a follow-up memorandum sent to the Facility Administrator with a copy being placed in the detainee file.</p>
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> <li>▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU.</li> <li>▪ In CDFs and IGSA facilities form I-888 or a comparable form is used.</li> </ul> <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> <li>▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> <li>○ Whether the detainee ate, showered, exercised, and took any medication, and</li> <li>○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc.</li> </ul> </li> <li>▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>IGSAs are only required to have a Special Management Housing Unit Record maintained on each detainee in the SMU, and this is to be recorded on an I-888 or comparable form. All the other bulleted items are only applicable to SPCs and CDFs. The bulleted items identified in this component are recorded by the housing unit officer. The health care professional signs each individual's record, but the housing officer does not initial each record.</p> <p>The facility utilizes a comparable form to the I-888 for recording all detainee activity and pertinent information.</p>

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All of this information is forwarded to the supervisor for inclusion in the detainee's detention file.
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy specifies permitted property for each type of segregation.
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy specifies the various privileges permitted in each segregation area. Detainees in each type of segregation receive the same privileges as the detainees in general population, except for the amount of recreation time.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted for some cases (violent, mentally disordered, bizarre behavior, suicidal).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shift supervisors are required to see each detainee in the SMU at least once per shift.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a health care provider visit each detainee in the SMU at least three times per week, and detainees are provided any medications prescribed to them. The health care professionals visit each detainee in the SMU at least once each shift and record any action taken in the medical record and the medical visit is recorded in each individual's log. Medications are provided to the detainee during this visit.

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees housed in the SMU receive the same meals as detainees in the general population.
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees housed in the SMU may shower and shave daily and receive the other basic services on the same basis as the general population.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting privileges have not been denied for any detainee assigned to the SMU since the facility opened.
26. Adequate documentation was generated, for any restricted or disallowed general visitation for a detainee in Administrative Segregation status because the detainee was charged with, or committed, a prohibited act having to do with visiting guidelines or otherwise acted in a way that indicated the detainee would be a threat to the orderly operation or security of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting privileges have not been restricted or disallowed for any detainee assigned to administrative segregations since the facility opened.
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees in protective custody or violent and disruptive detainees are permitted visits when other visitors are not present in the visiting room, or they may be placed in the non-contact visiting room.

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Violent and disruptive detainees are limited to non-contact visits or the visit is not permitted.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is addressed in facility policy, but this situation has not occurred.
32. Detainees in SMUs are allowed visits by members of the clergy, upon request; unless it is determined a visit presents a risk to safety, security, or orderly operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility chaplain makes regular rounds in SMU. Other chaplains have not visited detainees since the facility opened.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard.  Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may be escorted to use the LexisNexis computer program for their legal work. A reasonable amount of legal material is permitted in their cell and requests for legal material from their personal property shall be accommodated within 24 hours. It should be noted that this has not occurred since this facility opened.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> <li>Supported by compelling security concerns,</li> <li>For the shortest period required for security, and</li> <li>Fully documented in the SMU housing logbook.</li> <li>ICE/DRO is notified every time law library access is denied.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All bulleted items in this component are addressed in facility policy; however, this situation has not occurred.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement.
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are provided one hour of recreation time, seven days per week. The outside recreation area has a covered area for protection from the sun and inclement weather. Special clothing will also be provided during colder weather.
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.  Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation.  When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement. However, this situation has not occurred since this facility opened.
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This procedure is addressed in facility policy but has not occurred to date.



## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This procedure is addressed in facility policy.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this time, detainees in administrative segregation and disciplinary segregation have telephone access similar to the general population detainees.
<p>45. Ordinarily, a written order is completed and approved by a supervisor before a detainee is placed in Administrative Segregation. If exigent circumstances make that impracticable, the order is prepared as soon as possible.</p> <p>A copy of the order is given to the detainee within 24 hours, unless delivery would jeopardize the safety, security, or orderly operation of the facility.</p> <p>If the segregation is for protective custody, the order states whether the detainee requested the segregation and whether the detainee requests a hearing.</p> <p>The order remains on file in the SMU until the detainee is released from the SMU, at which point the releasing officer records the date and time of release on the order and forwards it to the chief of security or supervisor for the detainee's detention file.</p> <p>(An Administrative Segregation Order is not required for a detainee awaiting removal, release, or transfer within 24 hours.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement. Only one detainee has been placed in administrative segregation since the facility opened. A review of his record indicated that this procedure was followed.

## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>All of the requirements of this component are addressed in facility policy. One detainee has been placed in Administrative Segregation since the facility opened and staff advised that even though a review was conducted within the required 72 hours of his placement in administrative segregation, a written record of this review was not made.</p>
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>One detainee has been placed in administrative segregation since the facility opened. A written record was not made of his review within 72 hours. Therefore, he did not receive a copy of the results of the review.</p>
<p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The provisions of this component are included in facility policy.</p>
<p>49. If a detainee has been in Administrative Segregation for more than 30 days and objects to this status, the facility administrator reviews the case to determine whether that status should continue, taking into account the views of the detainee. A written record is made of the decision and the justification.</p> <p>A similar review is done every 30 days thereafter.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The provisions of this component are included in facility policy.</p>



## PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility policy states that this notification will be made after 60 days. Facility staff thought they had corrected concerns with the requirements of this component after the pre-occupancy inspection. However, the policy was only changed in regards to disciplinary segregation.
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act. The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security conducts all hearings except for minor offenses. The maximum sanction for any violation is 60 days.
53. After the first 30 days in Disciplinary Segregation, the facility administrator sends a written justification to the Field Office Director, who may decide to transfer the detainee to a facility where he or she could be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This provision is included in facility policy but has never happened.
54. Before a detainee is placed in Disciplinary Segregation, a written order is completed and signed by the chair of the IDP (or equivalent). A copy is given to the detainee within 24 hours (unless delivery would jeopardize safety, security, or the orderly operation of the facility). The IDP chairman (or equivalent) prepares the Disciplinary Segregation Order (I-883 or equivalent), detailing the reasons for Disciplinary Segregation and attaching all relevant documentation. When the detainee is released from the SMU, the releasing officer records the date and time of release on the Disciplinary Segregation Order, and forwards the completed order to the chief of security or supervisor for insertion into the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the provisions of this component are included in facility policy and have been followed in the few cases that have been adjudicated since the facility opened.

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

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

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

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

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

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

The Special Management Unit (SMU) is located in a special housing area of the facility that also houses detainees that cannot be housed in general population for a variety of reasons. The SMU part of this housing area is located on the first floor and consists of nine, two person cells. Each cell contains two bunks that are welded to the wall. The second floor of this area provides dormitory style living area consisting of 29 beds. Detainees housed on the second floor have been deemed unable to reside in a general population housing unit. The unit was clean, sanitary, and well maintained at the time of the inspection.

At the time of this inspection, no detainees were assigned to administrative segregation or on segregation status. Staff advised that since the facility opened approximately two months ago, only one detainee has been placed in administrative segregation and three to four detainees have been placed in disciplinary segregation for short periods of time.

The components of this standard are addressed in the facility policy pertaining to special management operations. Many of the components regarding reviews and other issues have not occurred due to the short length of time the facility has been opened and the small number of detainees assigned to the SMU.

Staff admitted that proper documentation was not completed on the 72-hour review conducted on the one detainee assigned to administrative segregation. As a result, the detainee did not receive a copy of the review. This process has been corrected by staff since that incident.

Detainees in Administrative Segregation are not permitted additional time out of their cell due to the other general population detainees that reside in the same housing unit which could create security issues.

Frequent visits are made to the SMU by supervisors, health care professionals, and other staff. Logs and individual records of each detainee housed there have been maintained and filled out properly.

Facility policy states that the Field Office Director will be notified after the detainee has been held in Administrative Detention for 60 days. This was noted in the pre-occupancy inspection and the facility thought the policy had been revised. However, the policy was only revised as it related to disciplinary segregation.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

## PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scheduled visit days were posted in the housing units.
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Climate condition reports were reviewed and found to be consistent with the standard.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Based on observation and detainee interviews, request forms are available in each housing unit.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A mail box labeled "ICE" is located in each housing unit.
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. ICE/DRO staff responds to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the electronic file reflects a detailed tracking system that records detainee requests received and the date of response.
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notification is provided through the National ICE Detainee Handbook.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Posters were observed throughout the facility.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

The facility maintains appropriate staff detainee communication. Mail boxes are placed in each housing unit and direct supervision is provided in each housing unit. Detainee requests are responded to in a timely manner.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

### PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security is responsible for developing tool control procedures and an inspection system. A detention officer has also been assigned collateral duties relating to tool control.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The warehouse is located outside the secure perimeter and tool deliveries are received at this location.
3. <b>(MANDATORY)</b> The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tools, keys, medical equipment, and culinary equipment are well controlled by the respective departments.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Chits are exchanged for tools on all shadow boards.
5. Tool inventories are required for: <ul style="list-style-type: none"> <li>• Facility Maintenance Department</li> <li>• Medical Department</li> <li>• Food Service Department</li> <li>• Electronics Shop</li> <li>• Recreation Department</li> <li>• Armory</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tool inventories are required for the Facility Maintenance Department, Medical Department and Food Service Department. The Facility Maintenance Department is located outside the secure perimeter.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The tool inventory is posted in the food service tool shadow board. Tool boxes from the maintenance department contain a tool inventory.

# **PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> <li>The policy sets minimum time lines for physical inventory and all necessary documentation.</li> <li>ICE facilities use AMIS bar code labels when required.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy defines the timelines for the regular inventory of tools and supportive documentation.
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> <li>Restricted (dangerous/hazardous)</li> <li>Non Restricted (non-hazardous).</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted portions of this component requiring tools be specifically classified as Restricted and Non Restricted is specific to SPCs and CDFs. This facility classifies their tools as either restricted or non-restricted. The facility has a tool classification system.
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The department heads in the Food Service Department and the Medical Department are responsible for implementing tool control procedures in their respective departments.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation of tools and equipment in the Medical Department and Food Service Department supports facility policy requiring these items be properly marked and identifiable.
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> <li>The system ensures that all stored tools are accountable.</li> <li>Tools are stored on shadow boards in which the shadows resemble the tool.</li> <li>Shadow boards have a white background.</li> <li>Restricted tools are shadowed in red.</li> <li>Non-restricted tools are shadowed in black.</li> <li>Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an approved tool storage system that ensures all stored tools are accountable and that commonly used tools (tools that can be mounted) are stored in a way that missing tools can easily be noticed. The locked shadow board in the Food Service Department identifies all tools and utensils stored as non-restricted and are mounted on a white board with the tools shadowed in black. The system ensures that all tools are accountable and any missing tools is noticeable.



**PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Tools removed from service have their shadows removed from shadow boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The tool control officer confirmed that if a tool is removed from the shadow board, the shadow is painted over with white paint.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Some tools and utensils in the medical department, not adaptable to shadow boards, are stored in locked drawers and cabinets.
14. Sterile packs are stored under lock and key.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Sterile packs for the dental office are stored in a locked cabinet.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy on tool control addresses this component. Detainees are not issued tools except for various utensils in the food service department.
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> <li>• Verbal and written notification.</li> <li>• Procedures for detainee access.</li> <li>• Necessary documentation/review for all incidents of lost tools.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the bulleted items identified in this component are addressed in the facility tool control policy.
17. Broken or worn out tools are surveyed and disposed of in an appropriate and secure manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The tool control officer is responsible for the disposition of broken or worn out tools. Form OPS 600, completed by the tool control officer to document this process, was reviewed during the inspection.
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Lobby Officer completes a form identifying all tools being brought into the facility by any private contractor or facility maintenance staff member. The officer then verifies that all tools are accounted for prior to being removed from the facility.

**PART 2-17. TOOL CONTROL**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. Hoses longer than three feet in length are classified as a restricted tool.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All hoses over three feet in length are classified as a restricted tool. Four 50 foot hoses were observed in a locked storage area in the Food Service Department.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Two pair of scissors in the intake area were observed tethered to a table.

**PART 2-17. TOOL CONTROL**

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

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

The primary tools for the facility are located in the Maintenance Department located outside the secure perimeter of the facility. Tools and other implements are maintained in the food service department and medical department. The department heads in these areas are responsible for the implementation of the tool control policy in their respective departments. Members of the inspection team checked the inventory and storage of tools and other implements in these areas and found them to be in compliance with the components of this standard.

Tools being brought into the facility by facility maintenance staff and private contractors are inventoried by the Lobby Officer prior to being taken into or removed from the facility.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. <b>(MANDATORY)</b> The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10.2.15, addresses Use of Force.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy permits staff to use the appropriate amount of force necessary in an immediate use-of-force situation without supervisory approval.
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy stresses that a calculated use of force is feasible in most cases and should be practiced if use of force becomes necessary.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy supports the Confrontation Avoidance Procedures and identifies the Facility Administrator, Mental Health Supervisor, and other staff as the decision makers in this process.
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff has been trained on the Use-of-Force Team Technique, and facility policy addresses this procedure. The facility has not had a situation where a calculated use of force was necessary.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff members are trained during orientation on the Use of Force Team Technique.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of Force incidents are documented on the Use-of-Force/ Restraint Report.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states that all use of force incidents shall be documented, including the medical evaluation, after the conclusion of the incident. Policy also dictates that the incident be audio and visually recorded in its entirety. The review team is required to investigate any breaks in the recording and document its findings.
10. Staff: <ul style="list-style-type: none"> <li>Does not use force as punishment.</li> <li>Attempts to gain the detainee's voluntary cooperation before resorting to force</li> <li>Uses only as much force as necessary to control the detainee.</li> <li>Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the requirements of this component.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. <b>(MANDATORY)</b> Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy on Use of Force stresses precautions to follow in an attempt to reduce injuries and exposure to communicable diseases.
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> <li>Soft (nylon/leather) restraints.</li> <li>Dressing the detainee appropriately for the temperature.</li> <li>A bed, mattress, and blanket/sheet.</li> <li>Checking the detainee at least every 15 minutes.</li> <li>Logging each check.</li> <li>Repositioning detainee often enough to prevent soreness or stiffness.</li> <li>Medical evaluation of the restrained detainee twice per eight-hour shift.</li> <li>When qualified medical staff are not immediately available, staff position the detainee "face-up."</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses the requirements of this component. It should be noted that it has not been necessary to restrain a detainee since this facility opened.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement.
15. All detainee checks are logged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. When the Facility Administrator authorizes use of non-lethal weapons: <ul style="list-style-type: none"> <li>Medical staff is consulted before staff use pepper spray/non-lethal weapons.</li> <li>Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement. (b)(7)(E) (b)(7)(E)
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement. (b)(7)(E) (b)(7)(E)
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)(E)
20. Special precautions are taken when restraining pregnant detainees. <ul style="list-style-type: none"> <li>Medical personnel are consulted</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Female detainees are not housed at this facility.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff documents every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that all use of force incidents, including what type of restraint was used, shall be documented.
23. It is standard practice to review any use of force and the non-routine application of restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has designated a review team consisting of the Facility Administrator, an Assistant Facility Administrator, Health Services Director, and the ICE Field Office Director's designee to review use of force and non-routine application of restraints.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> <li>Specialized training is given to officers ensuring they are certified in all devices approved for use.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers receive training in self-defense, confrontation-avoidance techniques and use-of-force to control detainees during orientation. <div style="background-color: #cccccc; text-align: center; padding: 5px;">(b)(7)(E)</div>
25. All staff authorized to use OC spray receive training not only in its use, but also in the decontamination of individuals exposed to it. This training must be documented in the staff training record.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this component. <div style="background-color: #cccccc; text-align: center; padding: 2px;">(b)(7)(E)</div> <div style="background-color: #cccccc; text-align: center; padding: 2px;">(b)(7)(E)</div>
26. The use of canines is restricted to contraband detection purposes only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The use of canines is restricted for all purposes at this facility. The ICE contract does not permit the use of a Canine Unit.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to use the "Use of Force Form" is specific to SPCs. At this facility, the "Use of Force/ Restraints Report" is used to document use-of-force incidents.

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

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

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

The facility has embraced a philosophy of housing detainees in civil detention rather than penal detention. As a result, facility policy and administrative direction stresses that use-of-force should be the last alternative to control a situation. The facility has been open for approximately two months. There has not been a single use of force incident during that time. Facility policy addresses the components of this standard, but it has not been necessary to put into action these components.

(b)(7)(E)

(b)(7)(E)

(b)(7)(E)

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

 November 3, 2011

Reviewer's Signature / Date

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

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

# **Section III ORDER**

## **19 Disciplinary System**



### PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 11.2.1, Hearing Board and Disciplinary Procedures, outlines the facility disciplinary process in detail, including the progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this requirement.
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> <li>• corporal punishment</li> <li>• deviations from normal food service</li> <li>• clothing deprivation</li> <li>• bedding deprivation</li> <li>• denial of personal hygiene items</li> <li>• loss of correspondence privileges</li> <li>• deprivation of legal access and legal materials</li> <li>• deprivation of physical exercise</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All bulleted items identified are not approved sanctions in the disciplinary process.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> <li>• Rights and Responsibilities</li> <li>• Prohibited Acts</li> <li>• Disciplinary Severity Scale</li> <li>• Sanctions</li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Rights and Responsibilities are posted in Spanish and English in all of the housing units. Prohibited acts, the disciplinary severity scale and sanctions are not posted in the facility. This information is listed in the detainee handbook, provided to all detainees.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Incident reports and notice of charges are promptly forwarded to the designated supervisor.

### PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incident reports are usually investigated by the next shift supervisor and no later than 24 hours. The Lieutenant who conducts the hearing does not hear the case until after the investigation is completed.
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hearing by the Lieutenant is the intermediate disciplinary process to adjudicate minor infractions. Major infractions are referred to the facility hearing officer.
10. A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> <li>• Conducts hearings on all charges and allegations referred by the UDC</li> <li>• Considers written reports, statements, physical evidence, and oral testimony</li> <li>• Hears pleadings by detainee and staff representative</li> <li>• Bases its findings on the preponderance of evidence</li> <li>• Imposes only authorized sanctions</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Assistant Facility Administrator for Security presently serves as the facility hearing officer. He considers all of the bulleted items of this component when adjudicating infractions.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may request a staff representative to assist them in the process.
12. The facility permits hearing postponements or continuances when conditions warrant such a continuance. Reasons are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows for continuances and postponements for certain circumstances.
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The maximum sanction for a single offense is 60 days in disciplinary segregation.
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy states it will not utilize a confidential informant.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 3 – 19. DISCIPLINARY SYSTEM

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

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

Facility policy 11.2.1, Hearing Board and Disciplinary Procedures, outlines the facility disciplinary process in detail.

The Administrative Lieutenant adjudicates all minor incident reports and forwards all major reports to the Assistant Facility Administrator for Security, who serves as the facility hearing officer.

An atmosphere of civil detention is encouraged by the administration. As a result, few incident reports are submitted. An incident report is a last resort, if the situation cannot be handled in a different fashion. Facility policy ensures that the detainee is afforded his rights during this process.

Prohibited acts, the disciplinary severity scale and sanctions are not posted conspicuously anywhere in the facility. It should be noted that this was also noted in the pre-occupancy inspection. This information is, however, contained in the detainee handbook.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

## **Section IV CARE**

**20 Food Service**

**21 Hunger Strikes**

**22 Medical Care**

**23 Personal Hygiene**

**24 Suicide Prevention and Intervention**

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

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food service manager is ServSafe certified and possesses a current "Food Handler" card issued through San Bernardino County. The food service manager determines the responsibilities of the food service staff.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The FSA provides food service employees with training that specifically addresses detainee-related issues. In ICE Facilities this includes a review of the "Food Service" standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. <b>(MANDATORY)</b> Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not utilize any knives. Dough cutters and a slicer are utilized if products need to be sliced or chopped. The need for cutting is limited by purchasing pre-sliced/chopped items. All utensils are numbered and maintained in a cage with a shadow board and locking device. Utensils are signed out when in use and inventoried four times daily. Keys are inventoried and properly stored.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. <b>Staff monitor the condition of knives and dining utensils</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. Re-usable sporks are utilized for dining and their condition is checked when returned after each meal. The facility does not utilize any knives. Detainees are not permitted to utilize the dough cutters or the slicer; only staff utilizes these utensils.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff is trained in count procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. <b>(MANDATORY)</b> There is adequate health protection for all detainees and staff in the facility, and for all persons working in food service. Detainees and other persons working in food service are monitored each day for health and cleanliness by the food service supervisor or designee. Detainee clothing and grooming comply with the "Food Service" standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All food service personnel, to include staff and detainees, receive a pre-employment physical. Health and cleanliness checks of detainee workers are conducted and documented daily. Detainee clothing and grooming requirements comply with the "Food Service Standard".
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility plans to review detainee-volunteer job descriptions annually. However, detainees have only been housed at the facility for sixty days, and this has not yet occurred.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> <li>• Safe work practices and methods.</li> <li>• Safety features of individual products/ pieces of equipment.</li> <li>• Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Cook Foreman documents all training in individual detainee detention files.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainee training is not documented in individual detainee detention files. All training is documented in a notebook in the food service office, alphabetically, by detainee name.
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detainees be paid in accordance with the "Voluntary Work Program" standard is specific to SPCs and CDFs. Detainee workers are paid \$1.00 per day for each day worked.
15. Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Breakfast is served at 5:30 AM, lunch at 12:30 PM and dinner is served at 5:30 PM.

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not utilize a cafeteria-style operation for detainee feeding. However, a cafeteria style operation is used for staff.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring a 35-day menu cycle is specific to SPCs and CDFs. The facility utilizes a six week (forty-two day) rotating menu cycle.
18. <b>(MANDATORY)</b> A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program. If necessary, the FSA shall modify the menu in light of the nutritional analysis to ensure nutritional adequacy. The menu will need to be revised and re-certified by the registered dietitian in that event.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An initial nutritional analysis of the menu was completed by the facility's Registered Dietitian and the menus were certified for use on July 25, 2011. Facility policy requires an annual analysis of the menu. However, at this time the facility has not been operational for a full year.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> <li>If yes, documenting each substitution, along with its justification, with copy to the FSA</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. All staff and volunteers know and adhere to written "food preparation" procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. A Common Fare menu available to detainees, at no charge, whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> <li>Changes to the planned Common Fare menu can be made at the facility level.</li> <li>Hot entrees are offered three times a week.</li> <li>The Common Fare menus satisfy nutritional recommended daily allowances (RDAs).</li> <li>Staff routinely provides hot water for instant beverages and foods. <ul style="list-style-type: none"> <li>Common Fare meals are served with:</li> <li>Disposable plates and utensils.</li> <li>Reusable plates and utensils.</li> </ul> </li> <li>Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not utilize a Common Fare menu. However, religious diets are provided in accordance with the bulleted requirements of this component.



**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chaplain and the Warden are the only personnel authorized to remove a detainee from a religious diet.
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The Common Fare Program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> <li>• Muslims fasting during Ramadan receive their meals after sundown.</li> <li>• Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate.</li> <li>• Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> <li>• Personal cleanliness and hygiene;</li> <li>• Sanitary techniques for preparing, storing, and serving food, and;</li> <li>• The sanitary operation, care, and maintenance of equipment.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

# **PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
34. <b>(MANDATORY)</b> The facility implements written procedures for the administrative, medical, and/or dietary personnel conducting the weekly inspections of all food service areas, including dining, storage, equipment, and food-preparation areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedures for safety and sanitation in the food service area requires that the health services administrator and the food service manager conduct weekly inspections of all food service areas.
35. Reports of discrepancies are forwarded to the Facility Administrator or designated department head and corrective action is scheduled and completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. <b>(MANDATORY)</b> Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The temperature of the dish machine is logged three times daily This is completed after each meal.
37. <b>(MANDATORY)</b> Staff documents the results of every refrigerator/ freezer temperature check, in accordance with the Detention Standard on Food Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The temperatures of refrigeration and freezer units are logged twice daily.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <b>In SPCs only:</b> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not have a dining room. Detainees eat in the dayroom area of their housing unit under the supervision of the housing unit officer.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <b>In SPCs only:</b> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The food service manager does not estimate the cost of religious diets.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Air curtains or comparable devices are used on outside doors where food is prepared, stored, or served to protect against insects and other rodents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47. Staff complies with the ICE requirements for "food receipt and storage.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 4 – 20. FOOD SERVICE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
48. Stock inventory levels are monitored and adjusted to correct overage and shortage problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Staff complies with all ICE Housekeeping, Storeroom/Refrigerator requirements. Identify and explain any shortcomings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Dining room facilities and operating procedures will provide sufficient space and time for detainees to eat meals in a relatively relaxed, unregimented atmosphere.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51. <b>(MANDATORY)</b> An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The County of San Bernardino Department of Public Health, Environmental Health Services conducted a final inspection of the food service area and approved the facility on March 1, 2011.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. <b>(MANDATORY)</b> The FSA is responsible for pest control in the food service department, including contracting the services of an outside exterminator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a contract with Dewey Pest Control. The food service administrator works with the facility's safety officer to obtain services as needed.

**FOOD SERVICE**

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

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

The food service operation is under the supervision of a food service manager that is a GEO employee. There are (b)(7) food service foreman, (b)(7) food service supervisors, and (b)(7) food service staff. Detainees work in the kitchen as a part of the detainee voluntary work program under the supervision of the GEO food service staff. Staff monitors the health and cleanliness of the detainee workers and documents these inspections daily.

A Registered Dietitian at the GEO corporate level certifies and/or approves the menus and conducts a nutritional analysis of the menu cycle. The facility utilizes a six-week menu cycle.

Meals are prepared and assembled onto insulated trays in the facility's kitchen. They are then loaded onto flatbed carts and transported to the housing units by food service staff and/or detention officers. Trays are distributed to detainees in the housing units under the supervision of the detention officer in the housing unit. Detainees eat their meals at the tables and chairs in the dayroom of the housing unit. Detainees are provided with a re-usable spork for consumption of their meal. At the completion of the meal, service trays are returned to the kitchen on the flatbed carts by food service staff or detention officers for cleaning.

This facility does not utilize any knives in the kitchen. It utilizes dough cutters and the slicer if products need to be sliced or chopped. The facility also purchases pre-sliced/chopped items.

Preparation of a lunch meal was observed during the inspection. The food was attractively presented. The kitchen facilities, to include storage areas, were clean. Storage space is limited. However, food items were observed to be appropriately stored within space constraints.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

# **PART 4 – 21. HUNGER STRIKES**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is not specifically addressed in the GEO Care Hunger Strike Policy. Interviews with staff revealed that they are trained to report a hunger strike if a detainee refuses three consecutive meals.
2. Facility immediately reports via the chain of command a hunger strike to ICE/DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hunger strike policy states that the Warden shall be responsible for notifying the client.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff is trained to respond immediately to a hunger strike.
4. Policy and procedure require that staff isolate a hunger-striking detainee from other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires that the hunger striking detainee be housed in the medical department.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy indicates that medical personnel are authorized to place a detainee in the hospital observation room.
6. Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires that staff records the weight and vital signs of a hunger striking detainee daily.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy states that involuntary treatment will only be done with appropriate court orders and ICE approval.
8. A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment, or two staff/provider signatures indicating detainee refusal to sign form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is specifically stated in the hunger strike policy.
9. Unless otherwise directed by the medical authority, staff delivers three meals per day to the detainee's room, regardless of the detainee's response to a verbally offered meal and document those meal offers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is specifically addressed in the hunger strike policy.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is not addressed in the hunger strike policy. However, it is the practice according to the HSA
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hunger strike policy indicates that the detainee will be housed in the medical isolation room. So, no food items other than those provided by the staff are in the hunger strikers living area.

### PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Staff is directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy states that a healthcare professional will monitor and record any caloric or fluid intake.
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy provides written procedures for the monitoring and treatment of hunger strikers.
14. Staff documents all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires the documentation of all treatment attempts, including attempts to persuade the hunger striker, by counseling him of the medical risks.
15. All staff receives orientation and annual training on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. Medical staff receives training in hunger-strike evaluation and treatment and remain up-to-date on these techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with staff and review of the training curriculum indicated that all staff receives an orientation on recognizing the signs of a hunger striker and on the procedures for referral for medical assessment. The facility has only been operational for two months. Therefore, annual training has not been scheduled. Medical staff has received training on hunger strike evaluation and monitoring.

### PART 4 – 21. HUNGER STRIKES

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

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

No detainee hunger strikes have been reported since the facility opened. Review of policy and interviews with staff indicated that policies and procedures are in place to identify, refer, and monitor hunger striking detainees. Staff is trained and knowledgeable of these procedures. Interview with the Health Services Administrator indicated that if involuntary treatment became necessary, the detainee would be transferred to an offsite medical facility or to another ICE facility.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DEA and CLIA (waived category) certificates are current. Review of credential files revealed that all professional licenses are current and verified.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care Policy, Intake Screening, indicates that in-processing procedures of arriving detainees include medical, dental, and mental health screening. A review of 25 detainee medical records revealed that all had a medical and mental health screening performed and documented by a health care provider.
3. <b>(MANDATORY)</b> The essential positions needed to perform the health services mission and provide the required scope of services are described in a staffing plan that is reviewed at least annually by the health authority.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The current staffing plan was reviewed and it is reviewed annually by the health authority and the facility. Current staffing includes (b)(7)e Health Services Administrator, (b)(7)e Physician, (b)(7)e Registered Nurse Practitioner, (b)(7)e Registered Nurses, (b)(7)e Licensed Practical Nurses, (b)(7)e Data Entry Clerk, and (b)(7)e Medical Records Clerk, (b)(7)e Dentist, (b)(7)e Dental Assistant, and (b)(7)e Physician provide services on part-time basis. Mental health staffing consists of (b)(7)e part-time psychologist, and (b)(7)e Psychiatrist via telemedicine.
4. <b>(MANDATORY)</b> Newly admitted detainees will be informed, orally and in writing (in a language they can understand), about how to access health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Newly admitted detainees are informed orally and in writing on how to access health services. This information is available in English and Spanish and the language line is used for other languages. Detainees sign a form to indicate that they have received this information..
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours per day, seven days a week (b)(7)e physician, dentist, and psychiatrist are always on call.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
6. New direct care staff will receive tuberculosis tests prior to their job assignment and periodically thereafter and will be offered the hepatitis B vaccine series.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the medical staff medical files revealed that all received TB tests prior to their job assignment, and were offered the hepatitis B vaccine series.
7. Health care services will be provided by trained and qualified personnel, whose duties are governed by job descriptions and who are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of credential files revealed that all professional staff is properly licensed, certified, credentialed, and registered in compliance with applicable state and federal requirements. Written job descriptions are provided and were reviewed.
8. The facility provides each detainee, upon admittance, a copy of the detainee handbook or equivalent, in which procedures for access to health care services are explained (in a language they can understand).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees sign a form that states they have been advised on how to access health care services. This information is also clearly explained in the detainee handbook.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Credentialing and verification complies with NCCHC and Joint Commission standards.
10. Within 12 hours of arrival, all newly admitted detainees receive initial medical, dental and mental health screening by a health care provider or a detention officer specially trained to perform this function. <ul style="list-style-type: none"><li>When screening is performed by a detention officer, the facility maintains documentation of the officer's special training.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of 25 detainee medical records indicated that all newly admitted detainees receive an initial medical, dental, and mental health screening from a nurse.
11. <b>(MANDATORY)</b> If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The telephonic language line is used extensively for purposes of completing the medical screening.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department is of adequate size and well equipped with modern and functional equipment. Exam rooms are available in the medical department and adjacent to the housing units. All provide privacy when receiving medical care.

# **PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department is located within the secure perimeter and access is restricted.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a holding/waiting room located just outside the entrance to the department.
15. The medical facility's holding/waiting room under the direct supervision of custodial staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention officer is assigned to provide supervision of the holding/waiting room.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the holding/waiting room have access to a toilet and sink with a drinking fountain.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> <li>Secured in a locked area within the medical unit.</li> <li>With physical access restricted to authorized medical staff.</li> <li>Procedurally, no copies made and placed in detainee files.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical records are stored apart from other files in a locked records room within the medical unit, with physical access restricted to authorized medical staff. Procedurally, no copies of medical records are made and placed in other detainee files.
18. <b>(MANDATORY)</b> A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A general consent form is completed as part of the intake process. Specific consent forms for any invasive procedure are obtained prior to performance of such procedures. This was verified by a review of 25 detainee medical records.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GEO form HS-106, Authorization for Release of Information, is used.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Typically, at least 24 hours notice is given prior to the release, transfer, or removal of a detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with staff and observation revealed that all detainees are transferred with a transfer summary and other pertinent medical records.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical records are placed in a sealed envelope and labeled with the detainees name, A-number, and marked "medical confidential".

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of 25 detainee medical records revealed that medical screening includes a digital chest X-ray.
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> <li>• By a health care provider or specially trained officer;</li> <li>• Before a detainee's assignment to a housing unit.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of 25 detainee medical records revealed that all detainees receive a mental health screening upon arrival. The screening is conducted by a health care provider before a detainee's assignment to a housing unit.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A nurse reviews all medical information arriving with a detainee to identify detainees needing medical attention.
26. <b>(MANDATORY)</b> Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that health appraisals/physical examinations are not consistently being performed within 14 days of arrival. This concern was identified by the facility on October 16, 2011. A tracking system was developed and implemented at that time. A review of 20 medical records of detainees that arrived after October 16th revealed that the health appraisals/physical examinations were all completed within 14 days of arrival. 17 of the physical examinations were performed by Registered Nurses (RNs) and reviewed by the Registered Nurse Practitioner. Interviews with the HSA and the RN on duty revealed that the RNs had not been appropriately trained by the supervising physician and were not qualified to perform these comprehensive physical examinations. The physician trained and credentialed (b)(7)(e) of the (b)(7)(e) RNs during the on-site review and indicated the remaining RN would be trained at the next opportunity.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU have the same access to health care as detainees in the general population.
28. Staff provides detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> <li>Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population.</li> <li>Service-request slips are delivered in a timely fashion to the health care provider.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical request slips are available in all housing units in English and Spanish. The request slips are picked up daily by a nurse.
29. <b>(MANDATORY)</b> The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Health care staff is on duty 24 hours a day, seven days a week. The GEO Care policy regarding Emergency Services provides procedures for immediate outside medical attention, if required.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The physician and dentist are always on call.
31. The plan includes a list of telephone numbers for local ambulances and hospital services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone numbers for the ambulance service and hospital services are located in the medical department.
32. The plan includes procedures for facility staff to utilize this emergency health care consistent with security and safety.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is addressed in the policy.
33. <b>(MANDATORY)</b> Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of training files revealed that all staff is trained in first aid, CPR, and use of the Automated External Defibrillator (AED).
34. Where staff is used to distribute medication, a health care provider properly trains these officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All medication is distributed by medical staff.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medications are stored, inventoried, dispensed, and administered in accordance with established standards and facility needs for safety and security.

# **PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>36. <b>(MANDATORY)</b> Each facility has written policy and procedures for the management of pharmaceuticals that include:</p> <ul style="list-style-type: none"> <li>• A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources.</li> <li>• A method for obtaining medicines not on the formulary.</li> <li>• Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed.</li> <li>• Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications.</li> <li>• Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy, Medication Management, includes procedures for obtaining medicines not on the formulary. Also addressed in the policy are prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescriptions are reviewed before being renewed, procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications, secure storage and perpetual inventory of all controlled substances, syringes, and needles. A formulary of all prescription and non-prescription medicines stocked or routinely procured is used.
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> <li>• A secure perimeter;</li> <li>• Access limited to authorized medical staff (never detainees);</li> <li>• Solid walls from floor to ceiling and a solid ceiling;</li> <li>• A solid core entrance door with a high security lock (with no other access); and</li> <li>• A secure medication storage area.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pharmaceuticals are stored in the pharmacy located in the medical department in a secure perimeter. Access is limited to the pharmacy nurse. I observed that the walls are solid from floor to roof through the dropped ceiling. The entrance door is a solid core door with a high security lock and no other access. Medication is stored in locked cabinets and medication carts.
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> <li>• Administration and management in accordance with state and federal law.</li> <li>• Supervision by properly licensed personnel.</li> <li>• Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent.</li> <li>• Accountability for administering or distributing medications in a timely manner and according to physician orders.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the pharmacy have a locking pass-through window is specific to SPCs and CDFs. The pharmacy has a locking pass-through window. It is licensed as a non-resident pharmacy and is managed on a day to day basis by a nurse. A contracted local responsible pharmacist inspects the facility quarterly. Medication is only administered by nursing personnel under the supervision of the health services administrator, according to physician orders.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medication is distributed in accordance with procedures established in policy. All medications administered to detainees are recorded on a Medication Administration Record.
40. Medication may not be delivered or administered by detainees. <ul style="list-style-type: none"> <li>In facilities that are medically staffed 24 hours a day, the health care provider distributes medication.</li> <li>In facilities that are not medically staffed 24 hours a day, medication may be distributed by detention officers, who have received proper training by the health care provider, only when medication must be delivered at a specific time when medical staff is not on duty.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours a day at this facility. All medication at this facility is delivered or administered by medical staff.
41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medical staff is on duty 24 hours a day at this facility. All medication at this facility is delivered or administered by medical staff.
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden receives notification that a detainee has special medical needs via GEO form HS-132, Health Summary for Classification
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy includes procedures for examinations by independent medical service providers and experts.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>44. <b>(MANDATORY)</b> Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include:</p> <ul style="list-style-type: none"> <li>• Coordination with public health authorities;</li> <li>• Ongoing education for staff and detainees;</li> <li>• Control, treatment, and prevention strategies;</li> <li>• Protection of individual confidentiality;</li> <li>• Media relations;</li> <li>• Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and</li> <li>• Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy, Infection Control, addresses the management of infectious and communicable diseases including the prevention, education, identification, surveillance, immunization, treatment, follow-up, isolation, and reporting to local, state, and federal agencies. Policy includes coordination with public health authorities, ongoing education for staff and detainees, control, treatment and prevention strategies, protection of individual confidentiality, media relations, management of TB, hepatitis A, B, and C, HIV infection, avian influenza, and reporting communicable disease to local and/or state health departments in accordance with local and state regulations.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One negative pressure room is available and used to isolate detainees with a communicable disease.
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of 25 detainee medical records revealed that all were screened for TB using a digital chest X-ray upon arrival at the institution. Detainees that are not screened are housed separately from the general population.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with symptoms suggestive of TB are placed in the negative pressure room in the medical department and promptly evaluated for TB disease.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency transportation is available through the 911 EMS system. Transportation to a specialty or other off-site provider is arranged with custody staff based on urgency and medical need.



**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
49. Detainee who requires close, chronic or convalescent medical supervision will be treated in accordance with a plan approved by licensed physician, physician assist, nurse practitioner, dentist, or mental health practitioner that includes directions to health care and other involved personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has only been operational for two months. It is therefore difficult to ascertain chronic or convalescent care. The facility does have a policy to address these medical issues and has begun to implement these plans.
50. <b>(MANDATORY)</b> Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house female detainees.
51. <b>(MANDATORY)</b> Detainees with chronic conditions (such as hypertension and diabetes) will receive periodic care and treatment that includes monitoring of medications, laboratory testing, and chronic care clinics, and others will be scheduled for periodic routine medical examinations, as determined by the health authority	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has not been operational long enough to ascertain this. However, a system for monitoring and scheduling detainees with chronic conditions has been established.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A local form is used to notify the facility administrators of any detainees whose special medical or mental health needs require special consideration regarding housing, transfer, or transportation.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility contracts for dental services twice a week (b)(7)(D) dentist and dental assistant provide routine and emergency dental care. The facility also has a Panorex on-site.
54. <b>(MANDATORY)</b> Detainees with mental health problems will be referred to a mental health provider as needed for detection, diagnosis, treatment, and stabilization to prevent psychiatric deterioration while confined.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of medical records revealed that detainees identified with mental health problems during intake screenings are referred to a mental health provider based on urgency. The registered Nurse Practitioner (NP) has psychiatric training and is available when the psychologist is not.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A psychiatrist is always on call for telemedicine consultation and the NP is also available for mental health emergencies.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical and mental health encounters are conducted in rooms that provide privacy. Female detainees are not housed at this facility.
57. <b>(MANDATORY)</b> Any detainee referred for mental health treatment receives a comprehensive evaluation by a licensed mental health provider within 14 days of the referral.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of medical records revealed that detainees referred for mental health treatment receive a comprehensive evaluation by the psychologist who provides services twice a week.
58. <b>(MANDATORY)</b> Restraints for medical or mental health purposes may be authorized only by a qualified medical or mental health provider, after reaching the conclusion that less restrictive measures are not successful. The facility has written procedures that specify: <ul style="list-style-type: none"> <li>• The conditions under which restraints may be applied;</li> <li>• The types of restraints to be used;</li> <li>• How a detainee in restraints is to be monitored;</li> <li>• The length of time restraints are to be applied;</li> <li>• Requirements for documentation, including efforts to use less restrictive alternatives; and</li> <li>• After-incident review.</li> <li>• The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy, Therapeutic Restraints and Seclusion, specifies the conditions under which restraints may be applied; the types of restraints to be used; how a detainee in restraints is to be monitored; the length of time restraints are to be applied; requirements for documentation including efforts to use less restrictive alternatives and after incident review. An Order for Discontinuation of Restraint or Seclusion is used in lieu of DIHS-867.
59. <b>(MANDATORY)</b> Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will: <ul style="list-style-type: none"> <li>• Specify the duration of therapy;</li> <li>• Obtain an order authorizing the administration of the drug from a Federal District Court.</li> <li>• Document that less restrictive intervention options have been exercised without success;</li> <li>• Detail how the medication is to be administered;</li> <li>• Monitor the detainee for adverse reactions and side effects; and</li> <li>• Prepare treatment plans for less restrictive alternatives as soon as possible.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy, Forced Psychotropic Medications, states that the authorizing physician or psychiatrist will specify the duration of therapy; document that less restrictive intervention options have been exercised without success; detail how the medication is to be administered; monitor the detainee for adverse reactions and side effects; an prepare treatment plans for less restrictive alternatives as soon as possible. ICE would be notified prior to the involuntary administration of psychotropic medication to an ICE detainee.

**PART 4 – 22. MEDICAL CARE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of 25 detainee medical records revealed that an initial dental screening exam was performed by the dentist or was refused by the detainee.
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The health authority and facility administrator have determined the contents, location, number, and use protocols for first aid kits. Nursing staff performs monthly inspections of first aid kits.
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that there is an AED in the medical department. All medical staff is trained on the use of the AED.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is specifically required by the GEO Care policy, Informed Consent and Right to Refuse.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Warden and HSA meet weekly.
65. <b>(MANDATORY)</b> Biohazardous waste will be managed and medical and dental equipment decontaminated in accordance with sound medical standards and compliance with applicable local, state, and federal regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biohazardous waste handling and disposal was observed to be in compliance with sound medical standards and applicable laws. Disposal is contracted to Stericycle. Sterilization procedures were observed and found to be sound. Spore testing is performed weekly and documented results were available.
66. <b>(MANDATORY)</b> The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA has established and implemented a system of internal review and quality assurance.

**PART 4 – 22. MEDICAL CARE**

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

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

This facility has been operational for a little over two months. Most of the medical staff are new to corrections and have little or no experience with ICE standards. Interviews with staff, review of policies, and observation of daily activities, revealed that detainees do have access to medical, mental health, and dental care. Review of detainee medical records revealed that intake screenings and TB screenings are performed within the required time frames.

Review of 25 detainee medical records revealed that health appraisals/physical examinations were not always performed within 14 days of arrival. This was identified by the facility on October 16, 2011. A tracking system was developed and implemented at that time. A review of 20 medical records of detainees that arrived after October 16th revealed that their health appraisals/physical examinations were all completed within 14 days of arrival. 17 of the physical examinations were performed by Registered Nurses (RNs) and reviewed by the Registered Nurse Practitioner. Interviews with the HSA and the RN on duty revealed that the RNs had not been trained by the supervising physician and were not qualified to perform these comprehensive physical examinations. The physician trained and credentialed (b)(7)(E) RNs on the second and last day of the on-site review.

(b)(6), (b)(7)(c) / November 3, 2011	(b)(6), (b)(7)(c)
Reviewer's Signature / Date	

**PART 4 – 23. PERSONAL HYGIENE**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 12.1.7, Issuance and Exchange of Clothing, Bedding, and Towels, establishes policy and procedures for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items far exceeds the minimum required for the number of detainees.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> <li>One uniform shirt and one pair of uniform pants or one jumpsuit.</li> <li>One pair of socks.</li> <li>One pair of underwear (daily change).</li> <li>One pair of facility-issued footwear.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. All new detainees are issued clean, temperature appropriate, presentable clothing during in-processing to include: two uniforms, three pair of socks and underwear, one pair of shower sandals, and one pair of shoes.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The component is only applicable for SPCs and CDFs. Additional blankets are issued during inclement weather.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> <li>One mattress</li> <li>One blanket</li> <li>Two sheets</li> <li>One pillow</li> <li>One pillowcase</li> <li>One towel</li> <li>Additional blankets, based on local weather conditions.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. New detainees are issued clean bedding, linens, and towels to include: one mattress, one pillow, two sheets, one pillowcase, and one towel. Sufficient blankets are issued, when necessary, to provide comfort under existing temperature controls.
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 12.1.6, Detainee Personal Hygiene Articles, states that all arriving detainees will be provided with all necessary personal hygiene articles to include soap, shampoo, a comb or brush, toothbrush, toothpaste, skin lotion, and toilet paper. Female detainees are not housed at this facility.

### PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> <li>Clean</li> <li>Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas.</li> </ul> <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that toilet facilities are clean, adequate in number, and can be used without staff assistance 24 hours per day.
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> <li>Clean</li> <li>Operable with temperatures between 100 and 120 degrees Fahrenheit.</li> </ul> <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that bathing facilities are clean and operable. The hot water temperature was 115 degrees Fahrenheit in the showers and 112.6 degrees Fahrenheit in the sinks.
8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit 1-C provides handicapped accessible housing.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> <li>Socks and undergarments - daily.</li> <li>Outer garments - twice weekly.</li> <li>Sheets - weekly.</li> <li>Towels - weekly.</li> <li>Pillowcases - weekly.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Laundrying of socks and underwear is available twice a week. Clothing and linen exchange are available twice a week
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Food service detainee workers are provided clean white shirts and trousers daily.
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainee workers are permitted to exchange or launder outer garments as needed.

### PART 4 – 23. PERSONAL HYGIENE

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

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

Review of policy, interviews with staff and detainees, and observation revealed that detainees are housed in a clean and sanitary environment. Additionally, each detainee is able to maintain acceptable personal hygiene practices through the provision of adequate bathing facilities and the issuance and exchange of clean clothing, bedding, linens, towels, and personal hygiene items.

(b)(6), (b)(7)(c) / December 3, 2011  
Reviewer's Signature / Date

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



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy, Suicide Prevention and Intervention, is the basis for the program. Policy 4.1.11, Suicide Recognition and Prevention, has been approved and signed by the health authority and Warden.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> <li>• Intake screening and referral requirements;</li> <li>• The identification and supervision of suicide-prone detainees;</li> <li>• Staff training requirements;</li> <li>• The management and reporting of suicidal incidents, suicide watches, and deaths;</li> <li>• Provision of safe housing for suicidal detainees;</li> <li>• Debriefing of any suicides and suicide attempts by administrative, security, and health services staff;</li> <li>• Guidelines for returning a previously suicidal detainee to a facility's general population, upon written authorization of the clinical director.</li> <li>• Reporting guidelines for facility personnel when suspected suicidal behavior is observed; and</li> </ul> Written procedures for the proper handling of detainees who exhibit suicidal behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The program includes procedures to address intake screening and referral requirements; the identification and supervision of suicide-prone detainees; staff training requirements; the management and reporting of suicidal incidents; suicide watches, and deaths; provision of safe housing for suicidal detainees; debriefing of any suicides and suicide attempts by administrative, security, and health services staff; guidelines for returning a previously suicidal detainee to a facility's general population upon written authorization of the clinical director; reporting guidelines for facility personnel when suspected suicidal behavior is observed; and written procedures for the proper handling of detainees who exhibit suicidal behavior at screening
3. Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation and annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of the training curriculum and interviews with staff indicated that every staff member receives suicide prevention training during employee orientation and annual training

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> <li>• Effective methods for identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>• Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>• Responding to suicidal and depressed detainees,</li> <li>• Effective communication between correctional and health care personnel,</li> <li>• Necessary referral procedures,</li> <li>• Housing observation and suicide-watch level procedures,</li> <li>• Follow-up monitoring of detainees who have already attempted suicide, and</li> <li>• Reporting and written documentation procedures.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of the training outline revealed that training prepares staff with effective methods for identifying the warning signs and symptoms of impending suicidal behavior, demographic, cultural, and precipitating factors of suicidal behavior; responding to suicidal and depressed detainees, effective communication between correctional and health care personnel, necessary referral procedures, housing observation and suicide-watch level procedures, follow-up monitoring of detainees who have already attempted suicide, and reporting and written documentation procedures.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> <li>• Screening does not occur later than one working day after the detainee's arrival.</li> <li>• Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review of medical records revealed that a nurse screens all detainees for suicide potential as part of the admission process. The screening is conducted upon arrival at the facility. Officers do not screen detainees for suicide potential during the admission process.
6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.1.11 provides procedures for referring at risk detainees to medical staff.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 4.1.11 indicates that the mental health professional or physician can authorize the return of a previously suicidal detainee to the general population.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The observation room in the medical unit has been designated for evaluation and treatment.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The designated room does not contain any structures or smaller items that could be used in a suicide attempt.
10. Medical staff has approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical staff has approved the room for this purpose.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff observes and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two levels of suicide watches, one requires direct one-on-one observation and the other mandates observation at least every 15 minutes.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is the practice at this facility as required by policy.
13. In CDFs or IGSA's, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is 24 hour medical staff coverage at this facility.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is required by policy 4.1.11.

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

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

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

Review of policies, training curriculum, and interviews with staff revealed that all staff is trained and knowledgeable in the identification, supervision, and referral of potentially suicidal detainees. No suicides or suicide attempts have been reported at this facility since the facility opened. The Psychiatric Nurse Practitioner is available during normal duty hours and a psychiatrist is on call 24 hours a day, seven days a week.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not house detainees who are seriously or terminally ill. The facility has an agreement with Victor Valley and Desert View hospitals in Victorville to temporarily house detainees having this type of medical condition.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> <li>The detainee's location.</li> <li>The visiting hours and rules at that location.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff is located at this facility and would make all notifications.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> <li>These guidelines include instructions for detainees who wish to have a living will.</li> <li>These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense.</li> </ul>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GEO Care policies, Terminal Illness and End of Life Decision Making, provide State Advanced Directives for implementing Living Wills. However, they do not include instructions for detainees who wish to have a living will or for the opportunity to have a private attorney prepare the documents at the detainee's expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GEO Care policy addresses "Do Not Resuscitate Orders".
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is stipulated in the GEO Care policy.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility notifies the on-site ICE staff and ICE makes all other notifications.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Care policy states that the facility would follow the procedures for organ donations established by ICE.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility would notify the on-site ICE staff who would make all other notifications.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Plan #11 and Policy 10.3.13 address the death of a detainee while in transport.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the AFOD indicated that ICE would assume this responsibility.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> <li>If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the AFOD indicated that ICE would assume this responsibility.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be substantiated since no detainee deaths have occurred at this facility. However, the AFOD states that this would be done.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none"> <li>Performance of an autopsy.</li> <li>Person(s) to perform the autopsy.</li> <li>Obtaining State approved death certificates.</li> <li>Local transportation of the body.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the AFOD indicated that ICE would assume authority for determining who is to perform the autopsy, obtaining state approved death certificates, and local transportation of the body.
14. ICE staff follows established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be substantiated since no detainee deaths have occurred at this facility. However, the AFOD states that this would be done.

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

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

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

No detainee deaths have been reported at this facility. The facility is not equipped or staffed to house severely or terminally ill detainees. A review of policies and interviews with staff revealed the facility's continuum of health care services addresses terminal illness, fatal injury, and advanced directives. The policies provide specific guidance in the event of a detainee's death.

(b)(6), (b)(7)(c) / November 3, 2011

Reviewer's Signature / Date

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

## **Section V ACTIVITIES**

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail <b>are posted in each housing or common area</b> or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for correspondence rules to be posted in each housing or common area is specific to SPCs and CDFs. The rules are not posted in each housing or common area. However, they are provided to each detainee via a detainee handbook.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook is provided in English and Spanish.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incoming mail is distributed five days per week, Monday through Friday.
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. <b>Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A logbook is maintained that documents priority mail delivered to the facility for a detainee.
6. 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 Facility Administrator or equivalent for prevailing security reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff opens and inspects incoming general mail in the presence of the detainee.
7. <b>Staff does not read incoming general correspondence without the Facility Administrator's prior approval.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff does not routinely read incoming mail. The detainee handbook states that mail can be read if the detainee has been placed on "mail monitoring" status for security reasons as a result of reasonable suspicion being established. No detainees were on "Mail Monitoring" status during the on-site review.
8. Staff does not inspect incoming Special Correspondence for physical contraband or to verify the "special" status of enclosures without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff inspects incoming Special Correspondence in the presence of the detainee for contraband only.



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Staff is prohibited from reading or copying incoming and outgoing Special Correspondence without the detainee present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff do not routinely read or copy incoming and outgoing Special Correspondence.
10. Staff is only authorized to inspect outgoing correspondence or other mail <b>without the detainee present</b> when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to inspect outgoing mail without the detainee present is specific to SPCs and CDFs. Staff only inspects outgoing correspondence without the detainee present when there is reason to believe the correspondence contains contraband.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice <b>to the sender</b> and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to notify the sender of rejected incoming mail is specific to SPCs and CDFs. The facility sends notification to both the sender and the addressee when mail is rejected.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation is maintained in a logbook.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A receipt is provided when cash is received in the mail.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Staff provides the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Staff disposes of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy reflects procedures consistent with the standard.
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Based on a review of policy, observation, and staff as well as detainee interviews, it was determined that the facility's operational practice is consistent with this standard.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

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

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

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

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

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

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

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

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

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

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

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

The facility does not conduct escorted trips for non-medical emergencies.

(b)(6), (b)(7)(c) November 3, 2011

Reviewer's Signature / Date

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

### PART 5 – 28. MARRIAGE REQUESTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The Field Office Director reviews every marriage request rejected by a Facility Administrator or IGSA. Rejections are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's administrator forwards all requests for marriage to the field office. If ICE personnel approve the request, the facility permits the marriage.
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility administrator does not deny marriage requests. All requests for marriage are forwarded to ICE personnel for approval or denial.
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. At this facility all requests for marriage are referred to ICE.

### PART 5 – 28. MARRIAGE REQUESTS

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

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

The facility had one completed marriage during the sixty seven days that detainees have been housed at the facility. There have been two additional requests for marriage received that are currently in the review process.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

# **PART 5 - 29. RECREATION**

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> <li>An indoor recreation program.</li> <li>An outdoor recreation program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has hired a recreational specialist that began working approximately two weeks prior to the date of this inspection.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detention Officers supervise the detainee recreation workers that are primarily responsible for maintaining the cleanliness of the recreation area.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outside activities include basketball, handball, walking, running, and exercising.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have access to recreation outside of the housing unit at least two hours daily.
10. Staff checks all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conducts searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Recreation privileges for detainees housed in disciplinary or administrative segregation are not revoked at this facility.

**PART 5 - 29. RECREATION**

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

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

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

**PART 5 - 29. RECREATION**

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



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

The facility has two large triangular shaped outdoor recreation yards. They are located between the core services section of the facility and each of the housing areas. These areas are open on the top and surrounded by two-story facility walls on each side. There are basketball hoops, and a toilet facility and sink in the recreation area. The facility has recently hired a recreation specialist to oversee the facility's recreation program. Detainees have access to two hours of outdoor recreation on a daily basis. Outdoor recreation activities are under the direct supervision of a Detention Officer (b)(7)(E). Staff indicated that in the future additional outdoor recreation space is planned that will be shared with a new facility under construction next to this facility. The new recreation area will include a baseball and soccer field.

(b)(6), (b)(7)(c) November 3, 201  
Reviewer's Signature / Date

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

### PART 5 – 30. RELIGIOUS PRACTICES

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are currently being conducted in the outdoor recreation areas, weather permitting. In the event of inclement weather, (b)(7) Chaplain indicated that services would likely take place in the visiting area in smaller, more frequent groups.
3. The facility allows detainees to observe the major "holy days" of their religious faith. • List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Holy day observances are and will be accommodated to include the bulleted activities listed in this component.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this time, there are no volunteers approved to participate in detainee programs. Several potential volunteers are currently in the background screening process.
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the special management unit are not permitted to attend religious services conducted for the general population. The Chaplain visits the Special Management unit weekly to meet the religious services needs of these detainees.

#### RELIGIOUS PRACTICES

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

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

The facility employs a full time Chaplain that is responsible for addressing detainee religious needs. Space for programming is limited at the facility. Currently, religious services are being conducted in the outdoor recreation area. In the event of inclement weather, the Chaplain indicated he would provide more frequent services to smaller groups in an area in the contact visiting room. At this time, there are no approved volunteers who assist with religious programs. The facility is waiting on security clearance approval for volunteers that have submitted background check documentation.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

**ART 5 – 31. TELEPHONE ACCESS**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have access to telephones throughout each day.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The telephone policy is addressed in the detainee handbook.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access rules and consulate numbers are posted in the housing units.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided in English and Spanish.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Telephones are inspected daily by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephones are inspected on the third shift by security personnel and by ICE personnel on a weekly basis.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility provides appropriate telephone service to meet the standard.
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### ART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff reported no restrictions have been implemented.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A mobile and wall-mounted telephone are available to the detainees within the housing unit.
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A mobile and wall-mounted telephone are available to the detainees within the housing unit.
26. When detainee phone calls are monitored, notification is posted by detainee telephones, including a recorded message on the phone system, that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notification that the telephone call may be monitored was posted next to each telephone.
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The telephones in two housing units were tested and found to be operational. The OIG phone number was called and appropriate contact was made.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation was reviewed and serviceability checks are documented on a weekly basis.

### PART 5 – 31. TELEPHONE ACCESS

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

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

A sufficient number of telephones are available in each housing unit. Detainee telephone access is provided to all detainees in a

manner consistent with this standard.

(b)(6), (b)(7)(c) November 3, 201  
Reviewer's Signature / Date

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

PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation procedures, schedule, and hours are posted in the lobby of the facility and on the public website.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A minimum of thirty minutes is provided for each visit.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation hours are posted in the lobby of the facility and on the public website.
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors in English, Spanish, and other major languages spoken in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A visitation log is maintained at the front entrance and in the visitation room.
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors are required to clear a walk-through metal detector prior to admittance to the visitation area.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility allows minors to visit when accompanied by an approved adult.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved minors are allowed to visit.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in special housing are allowed to visit in a separate room when required.
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



### PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Multiple private rooms are available.
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Legal representatives and assistants are subject to a non-intrusive search – such as a pat-down search of the person or a search of the person's belongings - at any time for the purpose of ascertaining the presence of contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper identification is required from all visitors.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. One tour has been requested and approved during this reporting period. Appropriate authorization was received.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses this issue in a manner consistent with the standard.

### PART 5 – 32. VISITATION

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

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

Detainee visitation is available in a manner consistent with the ICE standard as determined by reviewing facility policy, schedules, and conducting staff and detainee interviews.

(b)(6), (b)(7)(c) November 3, 201  
Reviewer's Signature / Date

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

### PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detainees classified as level 1 to have the opportunity to participate in special details outside the secure perimeter under direct supervision is specific to SPCs and CDFs. Detainees are not allowed to work outside of the secure perimeter of the facility. At the time of this inspection, it was noted that there were references in the facility handbook and the policy/procedures for the voluntary work program that indicated it may be possible for detainees to work outside of the secure perimeter. Staff indicated that this is not the practice and revisions were made to the policy to correct this issue.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees do not work more than eight hours a day or forty hours a week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff places the written justification for the action in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Staff, in accordance with written procedure, ensures that detainee volunteers understand their responsibilities as workers before they join the work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<b>10. The voluntary work program meets:</b> <ul style="list-style-type: none"> <li>• OSHA standards</li> <li>• NFPA standards</li> <li>• ACA standards</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Policies and procedures indicate that the voluntary work program meets OHSA, NFPA, and ACA standards.
<b>11. Medical staff screen and formally certifies detainee food service volunteers;</b> <ul style="list-style-type: none"> <li>• Before the assignment begins</li> <li>• As a matter of written procedure</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>12. Detainees receive safety equipment/ training sufficient for the assignment</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>13. Proper procedure is followed when an ICE detainee is injured on the job.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

There are opportunities for detainees to work in the kitchen, recreation, library, barbershop, and laundry. They may also work in the living areas or perform janitorial work throughout the facility. Detainees participating in the voluntary work program are paid \$1.00 per day for each day worked. Detainees working in the kitchen are medically cleared prior to beginning work and are provided with white uniforms. Detainees assigned to the barbershop are also medically cleared prior to working there.

(b)(6), (b)(7)(c) / November 3, 2011  
 Reviewer's Signature / Date

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

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

# **Section VI JUSTICE**

**34 Detainee Handbook**

**35 Grievance System**

**36 Law Libraries and Legal Material**

**37 Legal Rights Group Presentations**

### PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee handbook is written in English and translated into Spanish.
3. A procedure for requesting interpretive services for essential communication has been developed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees that cannot read are provided assistance by staff or through other detainees to understand the orientation materials.
5. The handbook supplements the facility orientation video where one is provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has an orientation video in English and Spanish.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policies and procedures indicate that revisions to the handbook are posted on the housing unit bulletin boards and in the intake area. These changes are communicated to detainees during the intake process. Memoranda are distributed to staff to advise them of revisions to the detainee handbook.
7. There is an annual review of the handbook by a designated committee or staff member.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy and procedures designate a committee to annually review the handbook. At this time, the handbook has not been in place for a year. Therefore, an annual review cannot be confirmed.
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> <li>Personal Items permitted to be retained by the detainee.</li> <li>Initial issue of clothes, bedding and personal hygiene items.</li> <li>How to access care.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 6 - 34. DETAINEE HANDBOOK**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook describes all of the elements of this component. Clothes washing and drying is not permitted in the housing units.
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook indicates that disposable razors are available daily, but does not indicate a specific time. It does indicate that detainees attending court are afforded the opportunity to shave first.
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The handbook includes a section on the library; however, it does not clearly indicate the location of the library. The handbook does explain law library procedures and schedules.
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The handbook/supplement provides local ICE contact information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> <li>Prohibited acts and severity scale sanctions.</li> <li>Time limits in the Disciplinary Process.</li> <li>Summary of Disciplinary Process.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>Informal (if used) and formal grievance procedures;</li> <li>The appeals process;</li> <li>In CDFs procedures for filing an appeal of a grievance with ICE.</li> <li>Staff/detainee availability to help during the grievance process.</li> <li>Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>How to file a complaint about officer misconduct with the Department of Homeland Security.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The specific portion of this component requiring procedures for filing an appeal of a grievance with ICE is specific to CDFs. A detainee may appeal a grievance to ICE at level four (4) of the grievance process. The prior steps in the grievance process are informal, formal, detainee grievance committee, and step four being the facility's Administrator or ICE AFOD. All of the bulleted steps identified in this component regarding the grievance process are addressed in the facility's handbook.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical sick call procedures at this facility are the same for general population and segregation.
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> <li>Outdoor recreation hours.</li> <li>Indoor recreation hours.</li> <li>In dorm leisure activities.</li> <li>Rules for television viewing.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	At this facility, level one detainees wear blue uniforms; level two detainees wear orange uniforms; level three detainees wear red uniforms; and kitchen workers wear white uniforms.
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**PART 6 - 34. DETAINEE HANDBOOK**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 6 - 34. DETAINEE HANDBOOK**

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

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

Each detainee is provided with a copy of the ICE National Detainee Handbook and a facility handbook at intake. They are required to sign for the handbook and a copy of this document is maintained in their detention file. The facility handbook is available in English and Spanish. There is also an orientation video available in English and Spanish to supplement the material provided in the handbook.

Policies and procedures designate a committee to conduct annual reviews of the facility handbook. Since the facility has not yet been operational for a year, this practice could not be confirmed. Some minor revisions have been made to the handbook during the time the facility has been operational.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

**PART 6 – 35. GRIEVANCE SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> <li>• Informal and formal grievance procedures;</li> <li>• The appeals process and step-by-step procedures;</li> <li>• Staff/detainee availability to help during the grievance process</li> <li>• Guarantee against staff retaliation for filing/pursuing a grievance.</li> <li>• How to file a complaint about officer misconduct with the Department of Justice.</li> <li>• How to file an emergency grievance.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Procedures are in place to provide for informal resolution of oral grievances.
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> <li>• Detainees may seek help from other detainees or facility staff when preparing a grievance.</li> <li>• Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written procedures identify an emergency grievance as one that involves an immediate threat to the safety or welfare of a detainee and this type of grievance is immediately processed upon receipt.
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 6 – 35. GRIEVANCE SYSTEM**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> <li>If not, an alternative acceptable record keeping system is maintained.</li> <li>"Nuisance complains" are identified in the records.</li> <li>For quality control purposes, staff document nuisance complaints received but not filed.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has policy and procedures in place to address the elements of this component regarding nuisance complaints. The facility has not documented or identified any nuisance complaints at the present time.
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff complies with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> <li>In all facilities written procedures cover detainee appeals and are included in the detainee handbook</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of the component requiring a detainee to file an appeal with the ICE Facility Administrator when he/she does not accept the grievance committee's decision is specific to SPCs and CDFs. A detainee may file an appeal with the ICE Assistant Field Office Director if he does not agree with the grievance committee's decision.
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A detainee has up to five days after an incident or informal grievance to file a formal grievance.

**PART 6 – 35. GRIEVANCE SYSTEM**

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

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

The facility maintains a grievance log to track grievances filed. Since the facility began housing detainees on August 29, 2011, there have been twenty formal grievances logged. The grievances address a range of topics and no particular issues are prevalent. Staff indicated that some of the issues submitted as grievances fall into the category of requests. However, due to staff being new in their positions, they were accepted as grievances, resulting in more filings than might otherwise be expected.

(b)(6), (b)(7)(c) / November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two separate law libraries located at the facility and one additional computer in the restricted movement unit which contains LexisNexis software.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> <li>In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is equipped with updated Lexis/Nexis software that contains all the required legal materials. Therefore, there is no requirement to post the listing of materials.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> <li>Operable computers and printers, in sufficient numbers in order to provide access</li> <li>Photocopiers, and</li> <li>Supplies for both.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides operable computers and printers.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appropriate equipment is available in each law library.
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each detainee is provided a flash drive on which to save appropriate legal documentation.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law library has a schedule and detainees are allowed access a minimum of five hours per week.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiated and timely pursued. Request for copies of court decisions are accommodated within 3 – 5 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The facility permits detainees to assist other detainees, voluntarily and free of charge, in researching and preparing legal documents, consistent with security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Based on staff interviews and on site observation, the facility permits detainees to assist other detainees when appropriate.
13. Staff ensures that illiterate or non-English-speaking detainees without legal representation receive more than access to English-language law books after indicating their need for help.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff reported that no denials to the law library have occurred.
17. Facility staff informs ICE Management when a detainee or group of detainees is denied access to the law library or law materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Detainees who seek judicial relief on any matter are not subjected to reprisals, retaliation, or penalties.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There has been no evidence of retaliation or penalties to detainees as a result of seeking judicial relief.
19. Indigent detainees are provided with free envelopes and stamps to mail related to legal matters.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

The facility maintains two separate law libraries to accommodate detainees. A computer equipped with LexisNexis software is also located in the restricted movement housing unit. Each law library maintains updated LexisNexis software, computers equipped with Word document software, and a printer.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input checked="" type="checkbox"/> <b>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.</b>				
1. The Field Office is responsive to requests by attorneys and accredited representatives for group presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Upon receipt of concurrence by the Field Office Director, the facility or authorized ICE/DRO Field Office ensures proper notification to attorneys or accredited representatives in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The facility follows policy and procedure when rejecting or requesting modifications to objectionable material provided or presented by the attorney or accredited representative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When the number of detainees allowed to attend a presentation is limited, the facility allows a sufficient number of presentations so that all detainees signed up may attend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees in segregation, unable to attend for security reasons may request separate sessions with presenters. Such requests are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Presenters are afforded a minimum of one hour to make the presentation and additional time to conduct a question-and-answer session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff permits presenters to distribute ICE/DRO-approved materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility permits presenters to meet with small groups of detainees to discuss their cases after the group presentation. ICE/DRO or authorized detention staff is present but do not monitor conversations with legal providers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input checked="" type="checkbox"/> <b>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.</b>				
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Staff reported no legal group requests or presentations have been made during this review period.

(b)(6), (b)(7)(c) November 3, 2011  
 Reviewer's Signature / Date

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

## **Section VII ADMINISTRATION & MANAGEMENT**

**38 Detention Files**

**39 News Media Interviews and Tours**

**40 Staff Training**

**41 Transfer of Detainees**

## PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detention file is established for each detainee admitted to the facility.
2. The detainee Detention File contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee file contains original documentation.
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> <li>• Special requests</li> <li>• Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay</li> <li>• Disciplinary forms/Segregation forms</li> <li>• Grievances, complaints, and the disposition(s) of same</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Based on a review of sample detention files, appropriate documentation is maintained in the file.
4. The Detention Files are located and maintained in a secured area. <b>If not the cabinets are lockable and distribution of the keys is limited to supervisors.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detention files be in lockable cabinets and the key distribution to be limited to supervisors if the files are not located in a secure area is specific to SPCs and CDFs. Detention files are located and stored in a secure file room.
5. 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A notation is made on the outside cover of the detention file and inside the file.
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Appropriate staff 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only authorized personnel are allowed access to the detainees' files.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after (b)(7) years by shredding or burning.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Staff reported no archived files have reached (b)(7) years as of this date; however, files are scheduled to be maintained indefinitely.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The ICE Field Office does not maintain separate detention files. An ICE Field Office is located on site at the facility and appropriate staff may review detention files at the facility. The files are maintained for at least 18 months.

### PART 7 – 38. DETENTION FILES

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

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

Detainee files are maintained in an organized and secure manner. This inspector observed detainee files, interviewed staff, and reviewed policy. Only authorized personnel are allowed access to detainees' files.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

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

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No news media interviews have been requested or approved during the period of this inspection, as reported by facility administrative and ICE personnel. Facility policy 1.1.6, Public and Media Access to the Facility, describes the approval process in a manner consistent with this standard.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff reported that no news interviews have occurred. However, facility policy addresses the requirements of this component.
3. The Field Office Director consulted with Headquarters before deciding to allow an interview with a detainee who was the center of a controversy, or special interest, or high profile case.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No approved interviews have occurred during this inspection period; however, appropriate policy is in place.
4. Signed released forms are obtained and retained in the detainee's a-file from any media representatives who photographed or recorded any detainee in any way that would individually identify him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appropriate policy and procedures are in place; however, no photographs or recordings have occurred as reported by staff.
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> <li>A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action.</li> <li>All media representatives with pending or requested, tours, or visits were notified that, effective immediately and until further notice, all media representatives must comply with the press pool guidelines established by the Field Office Director.</li> <li>All material generated from such a press pool is made available to all news media, without right of first publication or broadcast.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy has been developed in a manner consistent with the ICE standard.

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

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

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

Staff reported there have been no news media interviews that have been requested or approved. Policy was reviewed and staff interviews were conducted.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records are available to document orientation and initial training. Policies indicate that annual training will be conducted. However, at this time, the facility has only been operational for approximately sixty-seven days. Annual training is not yet required.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The GEO Regional Human Resources Manager has assisted with the coordination of the staff development and initial training program. She has completed a forty hour Training for Trainers Course. Other GEO company trainers that have provided orientation training have also completed this course. The facility's assigned training officer is currently scheduled to attend the forty hour Training for Trainers Course.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A training plan has been developed and policies indicate that the plan will be approved annually. The facility has not been operational for a year. Therefore, documentation to indicate that an annual review has taken place is not required.



**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"><li>• Individual training folders,</li><li>• Other training records systems, and/or</li><li>• Electronic systems.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The training officer maintains an electronic spreadsheet of the training classes that have been conducted and a staff attendance roster. There are also training folders for each individual which documents the training they have completed. There is a section of the folder where copies of any certifications that an individual has received are maintained. Additionally, notebooks are maintained by course title, which contains the sign-in sheets each time the course was conducted.

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

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

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> <li>• Security procedures and regulations</li> <li>• Supervision of detainees</li> <li>• Searches of detainees, housing units, and work areas</li> <li>• Signs of suicide risk, precaution, prevention and intervention.</li> <li>• Code of Ethics</li> <li>• Health-related emergencies</li> <li>• Drug-free workplace</li> <li>• Suicide precautions</li> <li>• Self-defense techniques</li> <li>• Use-of-force regulations and tactics</li> <li>• Report writing</li> <li>• Detainee rules and regulations</li> <li>• Key control</li> <li>• Rights and responsibilities of detainees</li> <li>• Safety procedures</li> <li>• Emergency plans and procedures</li> <li>• Interpersonal relations</li> <li>• Social/cultural lifestyles of the detainee population</li> <li>• Cultural diversity/understanding staff &amp; detainees</li> <li>• Communication skills</li> <li>• Cardiopulmonary resuscitation (CPR)/first aid</li> <li>• Counseling techniques</li> <li>• Sexual abuse/assault awareness</li> <li>• National Detention Standards.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> <li>• Specialized training before undertaking their assignments.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has not established a situation response team at this time. They recently advertised for officers interested in applying to be on this team. The training officer indicated that situation response team members would be required to complete a forty hour training prior to undertaking this assignment.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> <li>• Management and Supervisory training</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. <b>(MANDATORY)</b> Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use -- before being assigned to a post involving their possible use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel authorized to use firearms receives training on the required elements of this component prior to being assigned to a post involving their possible use.
14. <b>(MANDATORY)</b> All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel authorized to use firearms are required to demonstrate competency on a quarterly basis.
15. <b>(MANDATORY)</b> Personnel authorized to use chemical agents receive training in the use of chemical agents and in the treatment of individuals exposed to a chemical agent before being assigned to a post involving their possible use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility is not utilizing any chemical agents at this time. Staff indicated that in the future they do intend to have chemical agents available for use, if needed. Upon chemical agents becoming available, training staff indicated that all staff authorized to use them will receive required training prior to their use.
16. All staff receives orientation and annual training on the facility's drug-free workplace program. Typical contents are: <ul style="list-style-type: none"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using illegal drugs.</li> <li>• Possessing illegal drugs except in the authorized performance of official duties.</li> <li>• Procedures to be used to ensure compliance.</li> <li>• Opportunities available for treatment and/or counseling for drug abuse.</li> <li>• Penalties for violation of the policy.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel records revealed that staff has received initial orientation on the facility's drug-free workplace program. The training plan and human resources staff indicated that training on this topic will be conducted annually. At the time of this audit, the facility had been operational for approximately sixty seven days and documentation to demonstrate that annual training is occurring is not required.
17. New staff is required to acknowledge in writing that they have reviewed and understand the facility's drug-free workplace program, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



# **PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. All staff is trained during orientation and annually thereafter, regarding the facility's code of ethics.</p> <p>Typical contents are:</p> <ul style="list-style-type: none"> <li>• Staff, contractors, and volunteers prohibited from:</li> <li>• Using their official positions to secure privileges for themselves or others.</li> <li>• Engaging in activities that constitute a conflict of interest.</li> <li>• Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family.</li> <li>• Acceptable behavior in the areas of campaigning, lobbying or political activities.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Personnel records demonstrated that staff have received initial orientation on the facility's code of ethics. The training plan and human resources staff indicated that training on this topic will be conducted annually. At the time of this audit, the facility has been operational for approximately sixty-seven days and documentation to demonstrate that annual training occurs is not required.</p>
<p>19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>20. <b>(MANDATORY)</b> All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> <li>• Recognizing of signs of potential health emergencies and the required responses.</li> <li>• Administering first aid and cardiopulmonary resuscitation (CPR).</li> <li>• Obtaining emergency medical assistance through the facility plan and its required procedures.</li> <li>• Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency.</li> <li>• The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The training plan and training records indicated that staff receives training on responding to health related emergencies during their initial orientation. The training plan indicated that health related emergencies, to include the bulleted elements of this component, will be completed annually. At the time of this audit, the facility has been operational for approximately sixty seven days and annual training has not yet been conducted.</p>

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> <li>• Understanding that sexual abuse or assault is never an acceptable consequence of detention.</li> <li>• Recognizing housing or other situations where sexual abuse or assault may occur.</li> <li>• Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences.</li> <li>• Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Personnel records revealed that staff have received initial orientation on the facility's Sexual Abuse and Assault Prevention and Intervention Program. The training plan and human resources staff indicated that training on this topic will be conducted annually. At the time of this audit, the facility has been operational for approximately sixty seven days and annual training is not yet required.</p>
<p>22. <b>(MANDATORY)</b> All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> <li>• Identifying the warning signs and symptoms of impending suicidal behavior,</li> <li>• Demographic, cultural, and precipitating factors of suicidal behavior,</li> <li>• Responding to suicidal and depressed detainees,</li> <li>• Communication between correctional and health care personnel,</li> <li>• Referral procedures,</li> <li>• Housing observation and suicide-watch level procedures, and</li> <li>• Follow-up monitoring of detainees who have attempted suicide.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Personnel records revealed that staff has received initial orientation on the facility's Suicide Prevention and Intervention Program. The training plan and human resources staff indicated that training on this topic will be conducted annually. The facility opened for housing detainees on August 29, 2011, and documentation to demonstrate that annual training is occurring is not yet required.</p>
<p>23. All staff is trained during orientation and annually to recognize the signs of a hunger strike and on the procedures for referral for medical assessment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>24. All staff is trained in proper procedures for the care and handling of keys. Orientation training shall be accomplished before staff is issued keys, and key control shall be among the topics covered in annual training. Ordinarily, such training is done by the Security Officer or Key Control Officer.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 7 – 40. STAFF TRAINING**

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. Through ongoing (at least annual) training, all detention facility staff is made aware of their responsibilities to control situations involving aggressive detainees. At a minimum, training shall include: <ul style="list-style-type: none"><li>• The requirements of this Detention Standard</li><li>• The use of force continuum</li><li>• Communication techniques</li><li>• Cultural diversity</li><li>• Dealing with the mentally ill</li><li>• Confrontation-avoidance techniques</li><li>• Approved methods of self-defense</li><li>• Force cell-move techniques</li><li>• Communicable diseases, particularly precautions to be taken for use of force</li><li>• Application of restraints (progressive and hard)</li><li>• Reporting procedures.</li></ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**PART 7 – 40. STAFF TRAINING**

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

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

The facility began housing detainees on August 29, 2011. There are training plans and policies and procedures in place that provide initial orientation and annual refresher training for staff, volunteers, and contractors. Documentation is available in the training officer's files and in human resource office's files to support that initial and orientation and training is being conducted. Due to the short period of time that the facility has been in operation, annual training has not yet taken place.

The facility's training officer is new to his position and has not attended the training for trainers' course. He is maintaining training records and developing the training plans, but is not conducting the training. The GEO Regional Human Resources Manager has assisted with training on personnel matters during orientation and GEO trainers have also provided initial training.

Plans indicate that volunteers will be trained. However, at this time, no volunteers have yet been approved to provide services to the facility.

A special response team is in the process of being established. Specialized training is planned for the special response team upon the team member's selection and assignment.

The facility does not presently utilize chemical agents. Staff indicated that they plan to have chemical agents available and specialized training will be conducted prior to anyone being authorized to utilize chemical agents.

(b)(6), (b)(7)(c) November 3, 2011  
Reviewer's Signature / Date

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

### PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> <li>The notification is recorded in the detainee's file</li> <li>When the A-File is not available, notification is noted within ENFORCE.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Notification includes the reason for the transfer and the location of the new facility,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In addition to verbally notifying the detainee, it is typically indicated on the notification form given to the detainee that it is their responsibility to inform family members of their transfer.
5. Facility policy mandates that: <ul style="list-style-type: none"> <li>Times and transfer plans are never discussed with the detainee prior to transfer.</li> <li>The detainee is not notified of the transfer until immediately prior to departing the facility.</li> <li>The detainee is not permitted to make any phone calls or have contact with any detainee in the general population.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Once the detainee is notified of his transfer, he is not permitted to make phone calls or have contact with detainees in the general population.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An equivalent GEO form is utilized.
8. For medical transfers: <ul style="list-style-type: none"> <li>The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer.</li> <li>Medical transfers are coordinated through the local ICE/DRO office.</li> <li>A medical transfer summary is completed and accompanies the detainee.</li> <li>Detainee is issued a minimum of 7 days worth of prescription medications.</li> </ul>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Detainees are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff reported that typically detainees are provided a meal immediately prior to transfer if they will be moved at the time of a regularly scheduled meal. Bag meals are available for transport with detainees if they are moved during a mealtime and not able to receive a meal before departure.
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. A-Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### PART 7 - 41. TRANSFER OF DETAINEES

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

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

ICE Field Office staff has offices on site on the second floor of the administration building. Additionally, ICE officers are assigned to work in the receiving and discharge area of the facility. Detainee A-files are maintained on site. ICE staff reported that the primary reason for transfer of detainees from this facility is for family visitation purposes at the request of the detainee.

(b)(6), (b)(7)(c) November 3, 201  
 Reviewer's Signature / Date

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

**A. Type of Facility Reviewed**

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

**B. Current Inspection**

Type of Inspection	
<input type="checkbox"/> Field Office	<input checked="" type="checkbox"/> HQ Inspection
Date[s] of Facility Review	
November 1-3, 2011	

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

Date[s] of Last Facility Review	
August 2-4, 2011 Pre-Occupancy Review	
Previous Rating	
<input checked="" type="checkbox"/> Meets Standards	<input type="checkbox"/> Does Not Meet Standards

**D. Name and Location of Facility**

Name	Adelanto Detention Facility-East
Address (Street and Name)	10400 Rancho Road
City, State and Zip Code	Adelanto, California 93301
County	San Bernardino
Name and Title of Facility Administrator (Warden/OIC/Superintendent)	(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)	760-861-1616, (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)	Los Angeles
Distance from Field Office	85 miles

**E. ICE Information**

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

**F. CDF/IGSA Information Only**

Contract Number	Date of Contract or IGSA
EROIGSA-11-0003	May 27, 2011
Basic Rates per Man-Day	
\$59.37	
Other Charges: (If None, Indicate N/A)	
\$43,059 per month for transportation; \$.50 per gallon; \$1.00 per day Detainee Work Program;	

Estimated Man-days Per Year

237,250

**G. Accreditation Certificates**

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

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

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

**I. Facility History**

Date Built	1991
Date Last Remodeled or Upgraded	March 7, 2011
Date New Construction / Bedspace Added	June 14, 2011
Future Construction Planned	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date:
Current Bedspace	650
Future Bedspace (# New Beds only)	Number: Date:

**J. Total Facility Population**

Total Facility Intake for previous 12 months	873
Total ICE Mandays for Previous 12 months	18,556

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

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

**L. Facility Capacity**

	Rated	Operational	Emergency
Adult Male	650	650	650
Adult Female	N/A	N/A	N/A
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

**M. Average Daily Population**

	ICE	USMS	Other
Adult Male	317	0	0
Adult Female	N/A	N/A	N/A

**N. Facility Staffing Level**

Security:	Support:
(b)(6), (b)(7)(c)	(b)(6), (b)(7)(c)

### Significant Incident Summary Worksheet

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

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders <sup>1</sup>	Types (Sexual <sup>2</sup> , Physical, etc.)	N/A	N/A	0	0
	With Weapon	N/A	N/A	0	0
	Without Weapon	N/A	N/A	0	0
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	N/A	N/A	0	0
	With Weapon	N/A	N/A	0	0
	Without Weapon	N/A	N/A	0	0
Number of Forced Moves, incl. Forced Cell moves <sup>3</sup>		N/A	N/A	0	0
Disturbances <sup>4</sup>		N/A	N/A	0	0
Number of Times Chemical Agents Used		N/A	N/A	0	0
Number of Times Special Reaction Team Deployed/Used		N/A	N/A	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	N/A	N/A	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	N/A	N/A	0	0
Number of Times Canines Used in Facility		N/A	N/A	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		N/A	N/A	0	0
Escapes	Attempted	N/A	N/A	0	0
	Actual	N/A	N/A	0	0
Grievances:	# Received	N/A	N/A	6	12
	# Resolved in favor of Offender/Detainee	N/A	N/A	2	3
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	N/A	N/A	0	0
	Number	N/A	N/A	0	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	N/A	N/A	2	14
	# Psychiatric Cases referred for Outside Care	N/A	N/A	1	0

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

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

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

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



## DHS/ICE Detention Standards Review Summary Report

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

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### LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)  (b)(6), (b)(7)(c) Title & Duty Location  <b>Lead Compliance Inspector, MGT of America, Inc.</b>	Signature  (b)(6), (b)(7)(c)  Date  <b>November 3, 2011</b>
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Team Members	
Print Name, Title, & Duty Location  (b)(6), (b)(7)(c) <b>CI-Security, MGT of America, Inc.</b> Print Name, Title, & Duty Location  (b)(6), (b)(7)(c) <b>CI-Environmental Health and Safety &amp; Food Services, MGT of America, Inc.</b>	Print Name, Title, & Duty Location  (b)(6), (b)(7)(c) <b>CI-Medical Care, MGT of America, Inc.</b> Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location

**Recommended Rating:**      ☐ **Meets Standards**  
   ☒ **Does Not Meet Standards**

**Comments:**

The facility began receiving ICE detainees on August 29, 2011. The facility only houses male ICE detainees.

The detainee population count on the first day of the ICE inspection was 530.

The facility reported no deaths during this period of review.

The facility does not use Electro-Muscular Disabling Devices or canines.



U.S. Immigration  
and Customs  
Enforcement

MEMORANDUM FOR: Timothy S. Robbins  
Field Office Director  
Los Angeles Field Office

FROM:

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

(A) AD

Assistant Director for Custody Management

SUBJECT: Adelanto Detention Facility Annual Review

The annual review of the Adelanto Detention Facility conducted on November 1-3, 2011, in Adelanto, California has been received. A final rating of **Meets the Standards** has been assigned and this review is closed.

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

- 1) The Field Office Director, Enforcement and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.

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

(b)(6), (b)(7)(c) Deputy Assistant Director, Detention Management Division at (202) 732- (b)(6), (b)(7)(c)

cc: Official File