

MGT
OF AMERICA, INC.

601 13th Street, NW
Suite 650 North
Washington, DC 20005

Contract # HSCECR-09-C-00004

ICE National Detention Standards
Compliance Review

Facility: **Central Arizona Detention Center**
Inspection Date: **September 27, 2011 – September 29, 2011**
Report Date: **October 1, 2011**

October 1, 2011

MEMORANDUM FOR: Gary E. Mead
Executive Associate Director
Office of Enforcement and Removal Operations

FROM: (b)(6), (b)(7)(c)
Lead Compliance Inspector (b)(6), (b)(7)(c)

SUBJECT: Central Arizona Detention Center
Annual Detention Review

MGT of America, Inc. performed an annual inspection for compliance with the Immigration and Customs Enforcement (ICE) Performance Based National Detention Standards (PBNDS) at the Central Arizona Detention Center located in Florence, Arizona during the period of September 27-29, 2011. This facility is an Intergovernmental Service Agreement (IGSA) operated by Corrections Corporation of America (CCA).

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

Subject Matter Field	Team Member
Security	(b)(6), (b)(7)(c)
Health Services	
Food Service	
Environmental Health and Safety	

Type of Review

The review is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS for Over 72-hour facilities. The facility received a previous rating of "Meets Standards" during the October 2010 inspection, which was based on the ICE PBNDS.

Review Summary

The facility is accredited by the American Correctional Association (ACA). The facility is not accredited by the National Commission on Correctional Health Care (NCCHC) or The Joint Commission (TJC) formerly known as (JCAHO).

Standards Compliance

The following information is a summary of the standards reviewed and overall compliance as a result of the 2010 and 2011 PBNDS annual inspections.

2010 Inspection PBNDS Review	
Meets Standard	40
Does Not Meet Standard	0
Repeat Deficiency	0
Non-Applicable	1

2011 Inspection PBNDS Review	
Meets Standard	40
Does Not Meet Standard	0
Repeat Deficiency	0
Non-Applicable	1

The 2010 and 2011 PBNDSs consisted of both Mandatory and Non-Mandatory components. The following breakdown is provided as a result of the 2010 PBNDS annual inspection and 2011 PBNDS annual inspection.

2010 Inspection PBNDS Review	Mandatory	Non-Mandatory
Meets Component	38	681
Does Not Meet Component	0	10
Non-Applicable	2	158
Total Components	40	849
Percentage of Compliance	100%	98.55%

2011 Inspection PBNDS Review	Mandatory	Non-Mandatory
Meets Component	38	666
Does Not Meet Component	0	23
Non-Applicable	2	160
Total Components	40	849
Percentage of Compliance	100%	96.6%

- The first mandatory component identified as non-applicable was found in the Medical Care Standard. This component references pregnancy testing and management. The facility does not house female detainees. So, the component was non-applicable.
- The second mandatory component identified as non-applicable was found in the Food Service Standard. This component references knife cabinets, as well as the inventory and control of keys associated with knife cabinet security. The facility does not use or store knives within the Food Service Department.

LCI Issues and Concerns

There were no standards identified by the inspection team as "Does Not Meet Standard."

Recommended Rating and Justification

The Lead Compliance Inspector recommends the facility receive a rating of "Meets Standards." In addition to being compliant with 100% of the applicable mandatory components, the facility is also compliant with 96.5% of the non-mandatory components.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely recorded on the G-324A Worksheet and are supported by documentation in the inspection file. An out brief was conducted at the facility. In addition to the entire inspection team, the following were present from the facility: (b)(6), (b)(7)(c) Warden; (b)(6), (b)(7)(c) Assistant Warden; (b)(6), (b)(7)(c) Assistant Warden; (b)(6), (b)(7)(c) Chief of Security; (b)(6), (b)(7)(c) Chief of Unit Management; (b)(6), (b)(7)(c) Health Service Manager; (b)(6), (b)(7)(c) Quality Assurance Manager; (b)(6), (b)(7)(c) Quality Assurance Coordinator; and (b)(6), (b)(7)(c) Executive Assistant. Representing the U.S. Marshal Service was (b)(6), (b)(7)(c) Contracting Officer Technical Representative. Representing ICE were: (b)(6), (b)(7)(c) Acting Assistant Officer In Charge (AAOIC); (b)(6), (b)(7)(c) Supervisory Detention Deportation Officer (SDDO); (b)(6), (b)(7)(c) Acting Supervisory Detention Deportation Officer (ASDDO); (b)(6), (b)(7)(c) Supervisory Immigration Enforcement Agent (SIEA); (b)(6), (b)(7)(c) Supervisory Immigration Enforcement Agent (SIEA); and (b)(6), (b)(7)(c) Immigration Enforcement Agent (IEA).

(b)(6), (b)(7)(c) LCI
Printed Name/Title

October 1, 2011
Date

Signature: _____

A. Type of Facility Reviewed

- ☐ ICE Service Processing Center
☐ ICE Contract Detention Facility
☒ ICE Intergovernmental Service Agreement

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection

Date[s] of Facility Review
September 27-29, 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
October 19-21, 2010

Previous Rating
☒ Meets Standards ☐ Does Not Meet Standards

D. Name and Location of Facility

Name
Central Arizona Detention Center
Address (Street and Name)
1155 North Pinal Parkway
City, State and Zip Code
Florence, Arizona 85132
County
Pinal
Name and Title of Facility Administrator (Warden/OIC/Superintendent)
(b)(6), (b)(7)(c), Warden
Telephone # (Include Area Code)
520-868-6161 (b)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Phoenix, Arizona
Distance from Field Office
63 miles

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number
ODT-9-C-0001
Date of Contract or IGSA
October 1, 2008
Basic Rates per Man-Day
\$90.00
Other Charges: (If None, Indicate N/A)
N/A ;
Estimated Man-days Per Year
27,000

G. Accreditation Certificates

List all State or National Accreditation[s] received:
American Correctional Association
☐ Check box if facility has no accreditation[s]

H. Problems / Complaints (Copies must be attached)

The Facility is under Court Order or Class Action Finding
☐ Court Order ☐ Class Action Order
The Facility has Significant Litigation Pending
☐ Major Litigation ☐ Life/Safety Issues
☒ Check if None.

I. Facility History

Date Built
1994
Date Last Remodeled or Upgraded
November 1998
Date New Construction / Bedspace Added
N/A
Future Construction Planned
☐ Yes ☒ No Date:
Current Bedspace
3555
Future Bedspace (# New Beds only)
Number: N/A Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
18,650
Total ICE Mandays for Previous 12 months
618

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	72	3	0
Adult Female	N/A	N/A	N/A

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	2304	3555	3555
Adult Female	N/A	N/A	N/A

☐ Facility holds Juveniles Offenders 16 and older as Adults

M. Average Daily Population

	ICE	USMS	Other
Adult Male	71	3518	0
Adult Female	N/A	N/A	N/A

N. Facility Staffing Level

Security:
(b)(7)e
Support:
(b)(7)e

Significant Incident Summary Worksheet

For ICE to complete its review of your facility, the following information must be completed prior to the scheduled review dates. The information on this form should contain data for the past twelve months in the boxes provided. The information on this form is used in conjunction with the ICE Detention Standards in assessing your Detention Operations against the needs of the ICE and its detained population. This form should be filled out by the facility prior to the start of any inspection. Failure to complete this section will result in a delay in processing this report and the possible reduction or removal of ICE¹ detainees at your facility.

<i>Incidents</i>	<i>Description</i>	Jan – Mar	Apr – Jun	Jul – Sept	Oct – Dec
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	2	0	0	0
	Without Weapon	10	10	8	10
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	2	4	1	5
Number of Forced Moves, incl. Forced Cell moves ³		2	1	0	1
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		7	8	7	4
Number of Times Special Reaction Team Deployed/Used		3	2	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility		0	0	0	0
Offender / Detainee Medical Referrals as a result of injuries sustained.		1	1	3	3
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	2	0	0	1
	# Resolved in favor of Offender/Detainee	2	0	0	1
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	S	0	1	0
	Number	1	0	2	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	0	0	0	0
	# Psychiatric Cases referred for Outside Care	0	0	0	0

- ¹ Any attempted physical contact or physical contact that involves two or more offenders
² Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting
³ Routine transportation of detainees/offenders is not considered "forced"
⁴ 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
PART 1 SAFETY					
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"/>
PART 2 SECURITY					
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"/>	
PART 3 ORDER					
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PART 4 CARE					
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 checked="" type="checkbox"/>	<input 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"/>	
PART 5 ACTIVITIES					
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"/>
PART 6 JUSTICE					
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"/>	
PART 7 ADMINISTRATION & MANAGEMENT					
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"/>	

LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)	(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c)	
Title & Duty Location	
LCI, MGT of America	October 1, 2011

Team Members

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

Recommended Rating:

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

Comments:

The Lead Compliance Inspector engaged in many conversations with the Warden and facility staff regarding the scope of information to be provided. Essentially, the Warden was advised by the U.S. Marshal Service (USMS) not to release any information to the inspection team regarding the USMS detainee population. This included the reported SIS statistical data of one suicide, two deaths, and six Special Reaction Team deployments. The Warden indicated the inspection should only focus on the 71 ICE detainees. On the last day of the inspection, the facility did provide a brief synopsis of the reported suicide, two deaths, and activation of the Special Reaction Team.

Death/Suicide: There was one suicide and two deaths by natural causes reported. The facility provided a synopsis on the following deaths.

On February 20, 2011, a non-ICE inmate was the victim of an apparent suicide.

On September 9, 2011, a non-ICE inmate died of a heart attack.

On September 14, 2011, a non-ICE inmate died as a result of hepatic carcinoma.

Disturbances/Special Reaction Team deployment: The facility reported five incidents and provided the following information.

Use of Force (b)(7)(E) with No Injuries: On June 20, 2011, at approximately 1315 hours, the Special Response Team (SRT) was activated to do a forced cell move in the high custody unit in response to detainees refusing to move when ordered who had barricaded themselves.

Use of Force (b)(7)(E) with No Injuries: On June 6, 2011, at approximately 1539 hours, SRT was activated to do forced cell moves in the high custody unit in response to detainees covering their cell windows and refusing direct orders. The situation was resolved with no serious injuries to staff or inmates. It could not be determined from the information provided (b)(7)(E)

The other three incidents where SRT was activated involved searches of the high custody unit or segregation.

Canines: The facility routinely uses a canine unit located at another Corrections Corporation of America facility in Eloy, Arizona. The canines are used to search all areas of the facility. No detainees are present during canine use.

(b)(7)(E) are used at the facility. However, the facility maintains the (b)(7)(E) which is an (b)(7)(E) (b)(7)(E) Facility policy does not clarify if this device may or may not be used on ICE detainees. Facility staff indicates it has not been used in the past year.

(b)(7)(E) The facility reported 26 incidents (b)(7)(E) stating ICE detainees were not involved but did not provide any supporting documentation for review. The facility maintains an inventory of (b)(7)(E)

(b)(7)(E)

(b)(7)(E) Facility policy is silent on the use of (b)(7)(E) However, facility staff indicated that security training does not include the use of (b)(7)(E)

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)

Name Central Arizona Detention Center
Address (Street and Name) 1155 North Pinal Parkway
City, State and Zip Code Florence, Arizona 85132
County Pinal
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) (b)(6), (b)(7)(c) Warden
Name and Title of Lead Compliance Inspector (b)(6), (b)(7)(c) Lead Compliance Inspector
Date[s] of Review From September 27 to September 29, 2011
Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other

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"/>	Facility policy 14-4 indicates detainees may not be given power or authority over other detainees.
2. Detainees are protected from: <ul style="list-style-type: none"> • Personal abuse • Corporal punishment • Personal injury • Disease • Property damage • Harassment from other detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	These protections are addressed in the detainee handbook.
3. Staff is trained to identify signs of detainee unrest. <ul style="list-style-type: none"> • What type of training and how often? 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All new staff receives classroom training during orientation to assist them in identifying signs of detainee unrest. Computer based annual training is subsequently provided to each employee.
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"/>	Information is provided through the chain of command to the Warden.
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"/>	Corrections Corporation of America (CCA) provides an emergency plan policy to the facility. The Chief of Security is responsible for developing and implementing a site specific emergency plan. The facility's Quality Assurance Assistant is responsible for keeping plans current with facility specific information and updates from CCA.
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"/>	The facility has seven numbered emergency plan books stored in designated locations. The authorized storage locations are identified in facility policy.
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"/>	Emergency response training is provided during orientation in a classroom setting. Staff also receives annual computer based emergency response 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"/>	(b)(7)e

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
9. The plans address the following issues: <ul style="list-style-type: none"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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. Emergency plans do not contain a list of neighbors residing in close proximity to the facility for notification purposes.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has numerous formal cooperative agreements with local, state, and federal agencies.
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. Disaster drills are conducted annually in conjunction with cooperating agencies. Drills are designed to test the facility's response to various emergency situations.
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. The facility did not provide evidence of staff receiving individual copies of the facility's hostage policy and procedures.
15. (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. Hostage situation training is provided to all new employees. (b)(7)e (b)(7)e The post test provided at the conclusion of this training evaluates staffs' understanding. Hostages are screened for medical and psychological effects within 24 hours after release.

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
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. The facility provides an instruction sheet for using Language Line interpretation services. No other lists are provided.
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. Facility policy provides for 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 facility has sufficient rations to provide (b)(7)e
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. The (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 emergency plan addressing a staff work stoppage is available only to potential Incident Commanders and staff responsible for maintaining and updating 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
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written procedures addressing all of the potential emergency situations identified in this component. Most are in the emergency plan binder. Internal searches, detainee transportation, system emergency procedures, and the transportation system plan are in separate facility policies referenced in the emergency plans.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Deactivation Checklist specifies debriefings of staff are to occur after a critical incident.

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 adopted a team approach when responding to emergencies modeled after the Incident Command System delineated in the National Incident Management System.

The facility's emergency plans are kept in a loose-leaf binder format. The plans contain good information. However, they are somewhat disorganized and could prove difficult to use in an emergency. The plans refer to certain emergency procedures available in other policy binders which are not available in the emergency plan binder.

During orientation, facility staff receives classroom training on identifying signs of detainee unrest and emergency response. Annual refresher computer based training is provided to all staff.

Interviews with staff and a review of training records, lesson plans, emergency plans, and facility policies were used to determine compliance.

(b)(6), (b)(7)(c) / September 29, 201

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. (MANDATORY) 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 a proficient system for storing, issuing, and maintaining constant inventories of all chemicals.
2. Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each area of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories are maintained on all flammable, toxic, and caustic materials.
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"> The files list all storage areas, and include a plant diagram and legend. The MSDSs and other information in the files are available to personnel managing the facility's safety program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures: <ul style="list-style-type: none"> Wear personal protective equipment. Report hazards and spills to the designated official. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff and detainees receive training prior to handling or using chemicals. Protective equipment is available. Hazards and spills are reported to supervisory staff.
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Material Safety Data Sheets (MSDS) are maintained in all areas where chemicals are used and stored and are readily accessible to staff and detainees.
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervises detainees using these substances. 	<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"/>	Flammables and combustibles are stored and used according to label recommendations.
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"/>	All toxic and caustic chemicals are stored in their original containers and within secure areas.
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 utilizes no chemicals that contain 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"/>	Employees receive chemical training during initial facility orientation and annual recertification training. Annual recertification chemical training is accomplished via a computer based instruction. Detainees receive training from unit staff prior to handling or using any chemicals.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As inspected, the facility is in compliance with all NFPA and OSHA standards.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Fire/Safety Manager has successfully completed the fire/safety and OSHA regulations training course.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Files maintained in the safety/fire office include documentation of all tests, facility inspections, and drills. Files reviewed were completely documented with corrective action taken.
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The fire prevention, control, and evacuation plan was approved on April 19, 2011, by the Florence Fire Department Fire Chief.
17. The plan requires: <ul style="list-style-type: none"> • Monthly fire inspections. • Fire protection equipment strategically located throughout the facility. • Public posting of emergency plan with accessible building/room floor plans. • Exit signs and directional arrows. • An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The approved plan provides all the listed requirements of this component.

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
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"/>	Quarterly fire drills are conducted in all areas and on all shifts. Emergency keys are drawn and used during drills.
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 nine barber shop locations. An inspection of each revealed all had proper equipment and facilities. Sanitation was adequate in all locations.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitation standards were posted in all locations.
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"/>	The facility has written procedures for handling and disposing of sharps.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	<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"/>	The facility has universal precaution kits in various areas. There is one mobile blood borne pathogen kit located in the primary Control Center.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a contract with Stericycle for bio-hazardous waste disposal.
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"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has an annual contract with Anteater Extermination for all pest control requirements.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drinking and waste water tests are conducted quarterly by Legend Technical Services, Incorporated.

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"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generators are tested every two weeks. The tests are conducted under full load standards. If corrective action is required, it is initiated by facility staff.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Health Services Administrator inspects all health care areas daily. Inspections include floors, walls, windows, surfaces and equipment.
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"/>	
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"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Environmental health and safety conditions meet all listed safety and hygiene standards.

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.)*

The facility is a large complex constructed of concrete which houses in excess of 3,700 detainees.

The facility has a fire prevention, control, and evacuation plan approved by the Florence Fire Department Chief.

The facility has a proficient system for storing, issuing, and maintaining constant inventories of all chemicals. Detainees are not authorized to use or handle hazardous chemicals. The overall sanitation within the facility was adequate. Chemical control throughout the facility was good.

Staff and detainees are trained to safely use chemicals and protective equipment is available, as necessary.

The facility has nine areas dedicated to barbering services. All areas meet sanitation and equipment requirements.

The facility also has nine laundry operations which are equipped automatic chemical dispensing equipment. Laundry areas also meet sanitation requirements.

Facility inspections confirmed compliance with all NFPA and OSHA standards.

This compliance inspection included a review of facility policy and relevant documentation, inspection of chemical storage areas, and interviews with staff.

(b)(6), (b)(7)(c) September 29, 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"/>	Facility policy indicates safety and driving standards including adherence to 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"/>	A binder with copies of current CDLs of transport staff is maintained by the facility transportation officer.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle inspection checklists, work orders, and maintenance records were reviewed.
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"/>	
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"/>	A sample of a vehicle work order was tracked to the repair and found to be in compliance.
6. Officers use a checklist during every vehicle inspection. <ul style="list-style-type: none"> Officers report deficiencies affecting operability. Deficiencies are corrected before the vehicle goes back into service. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Transporting officers: <ul style="list-style-type: none"> Limit driving time to 10 hours in any 15 hour period when transporting detainees. Drive only after eight consecutive off-duty hours. Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours. Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days. During emergency conditions (including bad weather), officers may drive as long as necessary to reach a safe area—exceeding the 10-hour limit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. (b)(7)e officers with valid Commercial Drivers Licenses, (CDL's) required in any vehicle transporting detainees. <ul style="list-style-type: none"> When buses travel in tandem with detainees, there are (b)(7)e qualified officers per vehicle. An unaccompanied driver transports an empty vehicle. 	<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
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The inspection is documented on a Vehicle Inspection form.
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation staff is required to physically identify each detainee transported using a photo, detainee number, and roster check.
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"/>	ICE detainees are routinely pat searched prior to transport.
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"/>	Facility policy, Transportation Procedures, states the number transported will not exceed the manufacturer's occupancy level for the vehicle used.
13. (b)(7)e applicable contract policy when transporting detainees.	<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
14. The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(E)
16. Officers ensure that no one contacts the detainees. • (b)(7)e officer remains in the vehicle at all times when detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Meals are provided during long distance transfers. • The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation officers are responsible for acquiring sack lunches for transports conducted during a meal time.

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
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"> Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative. Basins, latrines, and drinking-water, containers, dispensers are cleaned and sanitized on a fixed schedule. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Transportation Procedures, addresses vehicle crew responsibilities related to meals which comply with the requirements of this component. The dietary department sanitizes all containers holding water and other beverages daily.
19. Vehicles have: <div style="background-color: #cccccc; padding: 10px; margin-top: 10px;"> (b)(7)e </div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
20. The vehicles are clean and sanitary at all times.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The interior of the transportation van inspected needed to be cleaned.
21. Personal property of a detainee transferring to another facility: <ul style="list-style-type: none"> Is inventoried. Is inspected. Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> Attack Escape Hostage-taking Detainee sickness Detainee death Vehicle fire Riot Traffic accident Mechanical problems Natural disasters Severe weather Passenger list is not exclusively men or women or minors 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy addresses all contingencies within the component including the contingency regarding diverse passengers

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.)*

Facility policy provides procedures for transportation of detainees in a safe and secure manner. Vehicles used for transportation have received regular maintenance and are inspected, as required.

Detainees transported are properly identified, searched, and restrained.

Drivers are appropriately licensed and scheduled.

Vehicles are properly equipped. The interior of the vehicle inspected needed to be cleaned.

Vehicle inspection logs, inspection of a transport van, interviews with staff, and a review of facility transportation policies, post orders, and documentation were used to determine compliance.

(b)(6), (b)(7)(c) September 29, 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"/>	The facility uses an orientation video. IGSA's are only required to have an orientation that includes the detainee handbook. The other requirements of this component are applicable to SPCs and CDFs. The facility also provides all detainees with a handbook available in English and Spanish which include all required topics.
2. Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical screening is performed by a Licensed Practical Nurse within medical room #2.
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"/>	All newly arriving detainees have documentation which is used in the classification process. 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. All detainees are separated from general population until classified.
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"/>	Security staff of the same sex perform pat searches of new detainees in a reasonably private area. Additionally, the "Boss II" chair is used for metal detection.
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"/>	Facility staff pat searches all detainees unless reasonable suspicion has been established. 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. Facility staff is familiar with the G-1025 requirement and indicated the required documentation would be prepared, if a strip search occurred. There have been no reported strip searches within the past year.

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. IGSAs 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"/>	ICE transports ICE detainees to the facility in a jumpsuit. The only property a detainee may possess is cash. Cash is inventoried by two staff with the detainee present. The detainee is issued a receipt and the money is placed in a sealed envelope and deposited in a safe. Accounting staff then picks up the cash and places it in the detainee's account.
7. Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<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"/>	All detainees are issued two sheets, a pillow, pillowcase, blanket, and towel. Two sets of clothing, hygiene items, are issued as is a jacket during cooler weather.
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. Facility staff and ICE coordinate all releases.
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"/>	Each detainee is issued a receipt for any funds received by the facility.
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. ICE staff enters all information, as required, at the ICE sub-office located in Florence, Arizona.
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"/>	All orientation material is issued in both English and Spanish.

PART 2 – 4. ADMISSION AND RELEASE

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

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. IGSAs 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 use the required Objective Classification System is specific to SPCs and CDFs. The facility uses the ICE Primary Assessment instrument as its classification tool.
2. The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival. Separating individuals who cannot be classified upon arrival from the general population. The first-line supervisor or designated classification specialist reviews every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All ICE detainees arrive pre-classified by ICE. Housing assignment is based upon the initial classification. Any detainee who may not be immediately classified is separated until the classification occurs. The ICE classification process is reviewed by a facility classification supervisor.
3. The intake/processing officer reviews work-folders, A-files, etc., to identify and classify each new arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility classification levels are: L-1 (low) and L-2 (medium). L-3 (High) detainees are not accepted at the facility. All L-1 and L-2 ICE detainees are housed together.
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees have their own reserved recreation time with no other facility detainees present. L-1 and L-2 ICE detainees are able to recreate together.
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are only allowed to hold housing unit job assignments.

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
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"/>	ICE staff conducts a facility reassessment of ICE detainees as they approach a 90-day stay at the facility. The section of this component requiring subsequent reassessments to be completed at 90 day to 120 day intervals is specific to SPCs and CDFs. ICE staff conducts subsequent reassessments every 90 days, thereafter. Although not required of an IGSA facility, staff also conducts a reassessment every six months. Any special reassessment is conducted as required by this component.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy allows all detainees to appeal their classification. 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. The SIEA has been designated as having the authority to reduce a classification level upon 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 five business days is specific to SPCs and CDFs. Classification appeals are resolved within five days and the detainee is notified the following day.
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. Classification appeals are forwarded to the AFOD.
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, issued in English and Spanish, explains levels of classification with the conditions and restrictions applicable to each.

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
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. Facility detainees are clothed as follows: L-3 (high) red; L-2 (medium) blue; and L-1 (minimum) green.

PART 2 – 5. CLASSIFICATION SYSTEM

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

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

All ICE detainees arrive at the facility pre-classified by ICE using the objective ICE Primary Assessment Instrument.

Detainees are appropriately classified, housed, and provided recreation.

Appeals are allowed and reviews occur consistent with the standard's requirements.

Overall, the facility complies with the PBNDS regarding Classification.

(b)(6), (b)(7)(c) September 29, 2010
Signature / Date Reviewer's

(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 inventory, hold, and report contraband to authorities, as necessary. The facility has written procedures for managing contraband.
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. This facility holds contraband that is government property until disciplinary action or criminal prosecution is completed.
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. The facility has written procedures addressing the return of property not needed as evidence to the proper authority.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The officer who physically destroys the property and at least one official observer submit documentation confirming destruction.
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 detainee handbook indicates a religious authority will be contacted before confiscating religious items.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<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. The detainee handbook indicates hard contraband may be kept for official purposes, as determined by the Chief of Security. The contraband is locked in a safe. Detainees may opt to pay to have contraband mailed to a third party.

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"/>	The detainee handbook includes a list of contraband items. It also addresses contraband retention and disposition procedures, and detainee options regarding confiscated property.
9. Facilities with Canine Units only use them for contraband detection.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 6. CONTRABAND

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

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

Detainees are informed of items considered to be contraband in the facility handbook.

The facility has written procedures addressing the management of contraband. Confiscated contraband is documented and retained until ownership can be established. Disposition of contraband is properly documented.

During the last inspection, the facility did not have established procedures in place for documenting destruction of altered property. The facility has addressed that finding and is in compliance during this inspection.

Interviews with staff, review of facility policy and contraband documentation were used to determine compliance.

(b)(6), (b)(7)(c) September 29, 2012
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"/>	Sign in sheets are used to document tours by administrative staff.
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"/>	The facility does not house female detainees.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy provides for an annual staffing analysis.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training files showed specialized training was provided for specialized positions within the facility.
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training files document that Control Center staff receives specialized training.
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. The Control Centers have restricted access.
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 do not have access to the Control Centers.
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. The facility (b)(7)e Communications are not centralized in any one area.
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"/>	
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 facility maintains a list of employees and their phone numbers.
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 facility has complete recall lists available for use. Phone numbers are updated, as necessary.
12. (b)(7)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)(E)

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
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"/>	
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The front desk officer examines and retains identification for everyone entering the facility and returns their identification to them upon departure.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Names of visitors are recorded both in a handwritten and an electronic log.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"> • The driver's name • Company represented • Vehicle contents • Delivery date and time • Date and time out • Vehicle license number • Name of employee responsible for the vehicle during the facility visit 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 search each vehicle entering and leaving the facility sally port.
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"/>	(b)(7)e
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
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. Facility policy and documentation indicate housing unit searches are to occur 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"/>	
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Every search of the SMU is documented in a search log.
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. All areas used for segregation have sally ports.
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"/>	Log book entries were noted listing tools being brought into and out of the SMU.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<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 facility's security inspection policy specifies areas to be inspected, frequency of inspections, guidelines for inspecting security features, procedures for reporting weaknesses and documentation requirements.
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. Every officer is required to conduct and document a security check of his/her assigned area.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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 Chief of Security reviews inspection reports, identifies recurring problems or failure to take corrective action, and works with the Maintenance Supervisor to resolve issues.
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"/>	Documentation for the past year was reviewed and found to be adequate.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Walking inspections are conducted three times daily, once on each shift.
39. Daily procedures include: <ul style="list-style-type: none"> • Perimeter alarm system tests. • Physical checks of the perimeter fence. • Documenting the results. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting areas are inspected at the beginning and end of each visiting period and intermittently through the visiting day.
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

FACILITY SECURITY AND CONTROL

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

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

This facility has a system of observation, security inspections, and searches designed to provide early identification of security concerns. Facility administrative and managerial staff visit all areas of the facility, as required. Critical posts are filled by experienced staff who have received specialized training in their assignments.

Due to its size, the facility (b)(7)e Minimum staffing in one Control
(b)(7)e Facility monitoring equipment is
available in the Control Center. Facility communications are not centralized in one Control Center.

The facility has processing procedures for visitors and staff designed to detect the introduction of contraband. X-rays are taken of bags and shoes. Staff and visitors are required to pass through a metal detector.

Vehicular traffic is searched on entrance and egress. Documentation is maintained of all vehicles entering the facility. Tools of contractors are inventories upon being brought into and taken out of the facility.

During the inspection, the facility's emergency team was conducting a full search of two of the housing units. The search observed was calm, organized, and professionally conducted.

Deficiencies uncovered during staff inspections are entered into a work order system. The system allows supervisory staff to enter a priority code. The system automatically generates an email to administrative staff when a high priority repair is requested.

Overall, the procedures used at this facility comply with the PBNDS. A review of facility policy and documentation, observation of facility practices, and interviews with staff were used to determine compliance.

(b)(6), (b)(7)(c) / September 29, 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 personal 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"/>	With the exception of funds, the facility does not accept detainee property requiring storage or documentation. Detainee funds are verified and deposited into their personal account. ICE stores all detainee property at the ICE facility.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Large valuables are not accepted or stored at this facility.
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"/>	The facility does not accept any property from detainees. Funds received are verified in the presence of the detainee, transporting staff, and two facility staff. The detainee is issued a receipt.
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. The facility does not accept detainee property. (b)(7)e staff verifies funds.
5. For IGSA's 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"/>	A local inventory form and receipt are issued for cash received.
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 facility issues the detainee a handwritten receipt for funds received and records all funds received into a computer program which generates a printed receipt for the detainee. A copy of the receipt is placed in the detainee's detention file.
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. The facility does not accept any detainee property requiring storage. Discrepancies pertaining to funds are reported to the shift supervisor and ICE immediately.

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
10. Staff follows written procedures when returning property to detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not accept any property or return any property to detainees.
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Due to the facility not accepting any property, there are no procedures for handling detainee property claims.
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not accept any property from detainees. Therefore, notification is not required.
13. Staff obtains a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility documents the detainee's address during the intake process.
14. It is standard procedure for two 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. There are two staff present during the verification/documentation of funds.
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. G-589's are not used. The facility does not accept property from detainees.
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. G-589's are not used. The facility does not accept property from detainees.
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. G-589's are not used. The facility does not accept property from detainees.
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. The facility does not accept any property from detainees.
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. G-589's are not used. The facility does not accept property from detainees.

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 personal 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
20. The supervisor ensures that: <ul style="list-style-type: none"> • Detainee funds are, without exception, deposited into the cash box; • Every property envelope is sealed. • All sealed property envelopes are placed in the safe. • Large, valuable property is kept in the secured locked area. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Funds are verified, sealed in an envelope and placed into a secure drop box. All deposits are verified by the Shift Supervisor. The facility does not accept large valuable property.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. I-77's are not used. The facility does not accept detainee property.
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not accept detainee property.
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not accept detainee property.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Weekly audits are not conducted. The facility does not accept detainee property.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Quarterly audits are not conducted. The facility does not accept detainee property.
26. The facility positively identifies every detainee being released or transferred.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility requires a positive picture identification and verification of specific detainee information prior to detainee release.

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 personal 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 does not accept detainee property. Therefore, there are no lost/damaged property claims to investigate.
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. Use of the I-387 is not necessary because the facility does not accept detainee property.

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.)*

All ICE detainees are transported to this facility from the Florence Detention Center SPC, located across the street. All detainee property is stored at the SPC. Detainees are dressed in an ICE jumpsuit prior to transfer to this facility. Once the detainee completes the intake process, they are dressed in a facility uniform and the jumpsuit is returned to ICE.

This facility stores no detainee property. Detainees are authorized to only bring property with them authorized to be kept in their immediate possession. This property is delivered by the ICE staff to the facility and issued to the detainee prior to their assignment to a housing unit.

Detainee funds are delivered to the facility by ICE staff. Two facility staff verifies the funds with ICE staff and detainee.

(b)(6), (b)(7)(c) September 29, 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. Hold rooms are located within the facility's security 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 be well ventilated, well lit, and that all activating switches are located outside the room is specific to SPCs and CDFs. Hold rooms are clean, in good repair, well lit, and do not have activating switches inside the rooms.
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. Hold rooms all have bench seating sufficient for the number of detainees held, but they are insufficient to meet seating needs when filled to capacity.
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. Hold rooms did not contain sleeping apparatus.
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 rooms are constructed and separated by fencing material within a larger room. They are not 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"/>	Documentation provided indicated detainees are not held more than 12 hours in hold rooms.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not house female detainees. Occasionally, a female detainee will be brought to this facility for video conferencing or medical care, and they are kept separate from male detainees at all times.
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"/>	Detainees are provided a kit containing the required items.
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"/>	Officers are assigned to supervise detainees in hold rooms.

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"/>	
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hold rooms are searched and sanitized after every group of detainees is released.
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<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 facility has a written evacuation plan with designated staff assigned to evacuate hold rooms, if necessary.
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"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms are multiple occupancy with sufficient unencumbered space for the number of detainees confined. Toilet fixtures are contained not in the hold rooms. The space in the hold rooms is sufficient for wheelchairs to turn around.
15. In <u>SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility was built in 1994. Restroom facilities are located outside of the hold rooms.
16. In <u>SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility was built in 1994. Each hold room does not have a floor drain.

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
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 facility was built in 1994. All hold room gates swing out and gates do not comply with the specifications outlined in the 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The supervisor in the hold room indicated facility practice is to house elderly detainees in a separate hold room.
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"/>	This facility does not house minors.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The portion of this component that requires the log to include the required information specified in the standard is specific to SPCs and CDFs. Logs at this facility do not contain the information specified in the standard. Individual detention logs are not maintained for each detainee. Group logs are created and closed out when the last detainee is released.
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> Juveniles, babies and pregnant women have access to snacks, milk or juice. Meal are served to juveniles regardless of time in custody 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Occupancy limits are stenciled on the walls of the hold rooms.
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"/>	
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is a tobacco-free facility.

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>26. Officers closely supervise hold rooms through direct supervision, to ensure:</p> <ul style="list-style-type: none"> ▪ Continuous auditory monitoring, even when the hold room is not in the officer's direct line of sight, and ▪ 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." ▪ Constant surveillance of any detainee exhibiting signs of hostility, depression, or similar behaviors. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Officers are assigned to monitor hold rooms when detainees are confined there. The hold room holding two ICE detainees did not have a monitoring form showing security checks at 15-minute intervals on the clip board attached near the gate.

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 an extremely large receiving and discharge operation. There are multiple hold rooms within a larger room. The hold rooms are constructed of fencing material with gates that swing out and are secured with pad locks.

Hold rooms had benches installed. The benches are insufficient to meet the needs of the detainees held if the number of detainees reached the room capacity. The hold room capacities were stenciled onto the walls in each hold room, which was corrected since the last inspection.

According to staff interviewed, elderly detainees are kept together in hold rooms.

Detainee monitoring forms are completed for groups of detainees, rather than individual detainees, and kept on a clip board near the gate of each hold room. There was no monitoring form completed for the hold room containing two ICE detainees on September 28, 2011.

Interviews with staff and an ICE detainee in a hold room, observance of receiving and discharge practices, and review of facility policy and documentation were used to determine compliance.

(b)(6), (b)(7)(c) September 29, 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 Key Control Officer is a certified locksmith through Arizona Institute of Locksmithing.
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"/>	The Key Control Officer under the guidance of the Chief of Security is responsible for all duties related to keys and locks.
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"/>	
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"/>	This facility provided a master inventory of all keys, locks, and locking devices.
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 Key Control Officer provided documentation of quarterly and annual inspections and preventive maintenance.
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Key Control, addresses compromised keys and locks.
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"/>	
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Padlocks are used to secure hold room gates. Other locks observed comply with the detention standard.
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Padlocks are used to secure hold room gates. Detainees working in the area and detainees confined to hold rooms have access to this area.
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There was no evidence of grandmaster keys being available at the facility.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None of the individual cells were secured with padlocks or chains.
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"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
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"/>	
15. Procedures in place to ensure that key rings are: <ul style="list-style-type: none"> • Identifiable • Numbers of keys on the ring are cited? • Keys cannot be removed from issued key rings 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Key rings include a metal tag with the number of the keyset and the number of keys engraved on the tag. Key rings are crimped to prevent key removal.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Complete sets of emergency keys are stored in the Armory and in the offices of the Warden and the Key Control Officer. Emergency sets are also split between two Control Centers.
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Individual gun lockers are provided. <ul style="list-style-type: none"> • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(e) supervision of the Sally Port Officer and the Armory Officer.
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. Keys are not counted daily; however, key sets are accounted for daily. The facility has written procedures addressing key accountability.
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"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only required for SPCs and CDFs. This facility has 129 sets of keys which staff are permitted to take home. Other keys inadvertently carried outside of the facility must be returned immediately. Unaccounted for keys are immediately reported to the Shift Supervisor. Detainees are prohibited from handling keys.
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"/>	

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
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 Chief of Security is responsible for approving changes to keys and locks made by the Key Control Officer.
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 key rings into separate rings is not authorized at this facility.

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 a dedicated locksmith who serves as the Key Control Officer. The Key Control Officer has been certified by the Arizona Institute of Locksmithing and has completed 40 hours of specialized instruction in detention equipment technology provided by Southern Folger.

Key parts and extra keys are all stored outside of the facility perimeter. Proper inventories are maintained of keys in use and extra keys.

(b)(7)(e)

Partial

emergency key sets are maintained in the two Control Centers.

The facility provided documentation to support quarterly and annual preventive maintenance on locks. Inspections of keys and locks are conducted. In addition, door operations from the door position switch, hinges and food traps are inspected.

Interviews with the Key Control Officer, the Tool Control Officer and Control Center staff; observation of key sign out procedures in one of the Control Centers; review of inventories and sign out logs; inspection of keys and key rings; and review of facility policies were used to determine compliance.

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

September 29, 20

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"/>	The facility conducts seven counts 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. Activities do not cease during formal counts; but they are controlled.
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. Out counts are conducted in various areas of the facility. Out-counts are reported verbally and in writing to the Administrative Captain tabulating 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. This is a very large facility and there is insufficient security staff available to take simultaneous counts. Counts are taken consecutively; and tabulated simultaneously.
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. There was no evidence of detainee participation in count.
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. Photo counts are used during recounts.
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. Staff is instructed they must see skin or movement before counting a detainee as present.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff in the receiving and discharge area and the Administrative Captain maintains records of all detainees 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"/>	Staff receives initial classroom training in count procedures during new employee orientation. Refresher training provided annually is computer based. Training is documented in employee training records.

PART 2 – 11. POPULATION COUNTS

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

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

The facility has standardized count procedures. Facility staff receives initial classroom training in count procedures during new employee orientation. Refresher training provided annually is computer based. Training is documented in employee training records.

The facility conducts seven counts each day. The facility population on the day of the inspection exceeded 3,700. Count is taken consecutively in each pod within each housing group by two officers and called into the Administrative Captain. The count is documented and documentation is also sent to the Administrative Captain. Count tabulation is computerized using an Excel spreadsheet that serves to minimize count officer mathematical errors. At least two counts occur on each of the three shifts. The count at 10:30 p.m. is the only count where every detainee returns to his cell and photo identification is made. Activities and movement are controlled during all counts.

The inspection team observed the 3:00 p.m. count on September 27, 2011, from various points of the facility. Procedures used were consistent with the expectations of the detention standard.

(b)(6), (b)(7)(c) / September 29, 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"/>	The facility has post orders for fixed posts used in the facility.
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. Facility post orders are not arranged in the prescribed six-part format.
3. Each set contains the latest inserts (emergency memoranda, etc.) and revisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders are kept in a binder on post which contains inserts relevant to the post and emergency information.
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"/>	Staff in the Quality Assurance Department is responsible for maintaining post orders with changes and revisions ordered by the Chief of Security and approved by the Warden.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Post orders are dated 2009 and 2010. None of the post orders have been reissued within the past year.
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. The Warden signs and dates the first page of every post order.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff has access to all post orders using on line computer access.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Documentation included in post orders showed staff sign post orders daily for their post assignment.
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"/>	This requirement is indicated in the general post orders for the facility.

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
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"> Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specific language in the general post orders addresses hostage situations.
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. Post orders track the daily facility 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. Detainee activity is recorded. Post orders include instructions for logbook documentation.

PART 2 – 12. POST ORDERS

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

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

This facility has a series of post orders addressing the duties of security posts in the facility. Each post has a binder with the post specific orders, emergency information, and other information useful to staff working the post. Staff also has access to all post orders on line. Post orders kept on posts with detainee access are secured.

While the facility has reviewed the post orders in the past year, they have not been reissued.

A review of the master post order binder, inspection of post orders stored on post, and interviews with staff were used to determine compliance with the PBNDS regarding Post Orders.

(b)(6), (b)(7)(c) September 29, 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"/>	The facility has written policy which addresses searches as required by this component.
2. Written policy and procedures require staff to employ the least intrusive method of body search practicable, as indicated by the type of contraband and the method of suspected introduction or concealment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written policy and procedures require staff to avoid unnecessary force during searches and to preserve the dignity of the detainee being searched, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written policy in place which specifies searches are to be conducted in a manner which avoids unnecessary force, embarrassment, or indignity to the detainee.
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"/>	Written facility policy meets the requirements of this component.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires pat searches and metal detectors are located at key locations throughout the facility.
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"/>	Strip searches are conducted based upon reasonable suspicion and must be authorized by a shift supervisor.
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"/>	Body cavity searches may only be conducted as this component requires. The facility must contact the Vice President of company operations for approval of a body cavity search, and only authorized medical staff may conduct the search.
8. "Dry cells" are used for contraband detection only when there is reasonable belief of concealment, with proper authorization, and in accordance with required procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has one dry cell for use and written policy addresses its use. The written policy meets the requirements of this component.
9. Contraband that may be evidence in connection with a violation of a criminal statute is preserved, inventoried, controlled, and stored so as to maintain and document the chain of custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility may use canines in all areas but not in detainee presence.

PART 2 – 13. SEARCHES OF DETAINEES

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"/>	The facility has a Sexual Abuse and Assault Prevention and Intervention 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. The FOD has approved the policy.
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. Tracking statistics were available for review.
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"/>	All staff receives training in sexual abuse and assault prevention during orientation and annual training.
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 sexual abuse and assault prevention program through an orientation video as well as the detainee handbook, which is written in English and Spanish.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sexual Assault Awareness Notices were posted on the 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. A brochure is not available, but the detainee handbook addresses sexual assault awareness.
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"/>	During the initial intake screening completed by the medical staff, detainees are screened to identify potential victims of sexual assault. Those identified are referred to mental health for further evaluation. Decisions about housing are made in accordance with identified risk.
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation of sexual abuse or assault by an ICE detainee on an ICE detainee has been documented and was available for review.
10. All incidents or allegations of sexual abuse or assault by staff on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no recorded incidents or allegations of sexual abuse or assault by staff on a detainee.

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
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"/>	The facility's policies and procedures require prompt and effective intervention, as well as chain-of-command reporting, when any detainee is sexually assaulted or abused.
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"/>	When a sexual assault occurs, the facility's policies and procedures outline the response required in conducting an investigation, gathering and maintaining information, and making referrals to appropriate law enforcement agencies.
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"/>	The facility has appropriate policies and procedures in place to ensure required notifications are promptly made.
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"/>	Victims of sexual assault are taken to the Florence Police Department to begin the criminal investigation. They are then taken to a hospital in Scottsdale to be evaluated by a rape counselor.
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"/>	A log of claims of sexual abuse or assault is maintained and tracked by designated staff.

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.)

There was one reported case of an ICE detainee having touched another ICE detainee in the housing unit. The incident was investigated but unsubstantiated.

Tracking data is maintained and was available for review during the inspection. There are numerous posters in the housing units informing detainees of what they should do if an assault were to occur. The ICE handbook provides additional information.

All detainees are evaluated during the initial mental health screening for the potential of being a victim or perpetrator of sexual abuse or assault.

(b)(6), (b)(7)(c) / September 29, 201

Reviewer's Signature / Date

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

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G-324A (Coded 10132010) Detention Review Worksheet - Rev: 5/11/09

ICE 2012 FOM 03030.015544

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"/>	
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"/>	The facility has an administrative segregation unit and an open protective custody unit for detainees with protection needs not requiring complete segregation.
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"/>	Facility policy and the Hearing Officer confirmed disciplinary segregation is not used for minor or moderate level offenses.
4. (MANDATORY) 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 placed in any form of segregation are seen by medical personnel who conduct a pre-segregation assessment just before placement.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Segregated ICE detainees are always single celled.
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"/>	
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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. Various permanent logs are used to record the required information.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<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"> ▪ The time and date of the visit, and ▪ Any unusual activity or behavior of an individual detainee, with a follow-up memorandum sent through the facility administrator to the detainee's file. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility maintains a sign-in log for all persons visiting the unit which includes the time and date of the visit. No documentation of unusual activity was noted in the log.
<p>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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 facility initiates a form comparable to the I-888 immediately upon a detainee's placement in the SMU. The form is used to record detainee meals, showers, exercise, and medication administered. A general comments section is available for recording behavioral information. The health care provider only initials forms for detainees who receive medication or request medical attention. The officer initials the forms by the end of each shift.
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainee SMU records are collated and attached to the segregation order and forwarded for inclusion in the detention file.
<p>13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Unit Management Manual indicates detainees in administrative segregation may retain the same property as general population detainees. Property for detainees in disciplinary segregation is limited.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Segregation Unit Manual identifies detainee privileges. Detainees in administrative segregation do not have telephone, law library, and television access which is similar to general population detainees.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees in administrative segregation are not provided time outside of their cells for leisure activities.
16. Detainees in SMUs are personally observed at least every 30 minutes in an irregular schedule and more often when warranted for some cases (violent, mentally disordered, bizarre behavior, suicidal).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Log books reviewed showed rounds at least every 30 minutes.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supervisory signatures on detainee specific housing unit records confirmed compliance.
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 type="checkbox"/>	<input checked="" 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. Records reviewed in the Unit Manager's Office showed detainees requiring medication or requesting to see medical staff are visited. However, every segregated detainee is not seen by medical at least three times a week as required.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daily showers and shaves are offered to segregated detainees. Laundry, barbering services, clothing, bedding and linens are provided as required by this component.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Denials involving ICE detainees reportedly have not occurred in the past year.
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"/>	No ICE detainees had visits restricted in the past year; however, procedures are in place to document these occurrences.
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"/>	No ICE detainees in administrative segregation had their visits restricted in the past year; however, procedures are in place to document these occurrences.
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. Disruptive detainees are not permitted to use the visiting room during normal visiting hours.
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. All general visits at this facility are non-contact. Detainee visiting privileges may be suspended if a detainee exhibits violent or disruptive behavior.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Clergy may visit with detainees in the visiting room or at their cell door.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees in disciplinary custody may retain personal legal materials on active cases only. Detainees in segregation do not have access to legal research materials in accordance with the requirements of the standard.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees in administrative segregation do not have access to law library privileges. During the course of this inspection, the mobile computer cart was updated and made current with LexisNexis.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Legal materials are not provided to detainees in disciplinary segregation as required by the standard.
37. Any denial of access to the law library is always: <ul style="list-style-type: none"> ▪ Supported by compelling security concerns, ▪ For the shortest period required for security, and ▪ Fully documented in the SMU housing logbook. ▪ ICE/DRO is notified every time law library access is denied. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees do not have access to the law library or law library materials consistent with the requirements of the standard.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	While SMU detainees are offered at least one hour of recreation on most days; recreation is cancelled during inclement weather. A portion of the recreation area is covered with a screen to diffuse the sun, but it will not stop rain.
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"/>	The Chief of Security must approve any restriction of recreational privileges of segregated detainees.
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"/>	
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. The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Detainees in segregation must submit a written request to make a phone call at least 24 hours in advance of the call time requested.</p>
<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"/>	<p>Detainees are provided copies of written segregation orders within 24 hours of placement in administrative segregation. Orders indicate the reason for segregation and orders remain on file in the SMU until the detainee is released. Segregation records are filed in detention files at the conclusion of segregation.</p>

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>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A committee of facility administrators conducts reviews at intervals prescribed by the detention standard.
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>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>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"/>	

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
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This facility utilizes a Hearing Officer to adjudicate infractions. Facility sanctioning guidelines comply with the requirements of the standard.
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"/>	
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"/>	The Hearing Officer documents disciplinary decisions in writing and provides a copy to the detainee within 24 hours of the hearing. A local form equivalent to the I-883 is used for documenting the rationale for disciplinary segregation.

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"/>	

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.)

This facility has four housing sections used for segregating detainees. One section is used for pre-disciplinary confinement, and one is used exclusive for segregating protective custody detainees. Administrative and disciplinary segregation cases are mixed in the other two sections used for housing. The facility also has an open unit with controlled access for protective custody cases who do not require as much control as provided in full segregation. Facility staff reported it is uncommon for ICE detainees to be placed in segregation for more than a few days. However, inspection revealed most procedures are in place to manage segregation requirements of an ICE detainee should the need arise.

The Special Management Units (SMU) are very secure units with controlled access and an intense structure. Detainee services are provided on a schedule and documented.

The facility has a committee responsible for conducting reviews of segregated detainees at prescribed intervals to determine when they can return to general population.

The facility has not provided segregated detainees adequate access to legal materials during the rating period.

All segregated detainees are not individually seen by health care staff three times a week, as required.

Segregated detainees must make a written request to use the telephone at least 24 hours in advance of the requested time. On the final day of the inspection, the Warden issued instruction to staff to allow administratively segregated ICE detainees access to telephone calls upon verbal request.

Recreation is cancelled during inclement weather rather than providing detainees with weather appropriate equipment and attire as required by the standard. Detainees in segregation do not have access to leisure activities such as board games or television viewing.

Compliance inspection included a review of documentation, observation of practices, interviews with staff, and an interview with a detainee confined in the SMU. As a result, it was determined by the facility complies with the PBNDS regarding Special Management Units.

(b)(6), (b)(7)(c) September 29, 201
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"/>	Housing units inspected establish weekly announced and unannounced visits by the IEA, DRO, and the SDDO. Log books are in place and maintain documentation of visits, as required.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff has scheduled visits on Wednesday and Friday from 8 a.m. until 10 a.m.
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A schedule of visits by ICE staff is posted within the ICE housing unit.
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visiting ICE staff completes the Facility Liaison Visit Checklist, which notes climate and conditions of confinement.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE housing unit contained the required forms.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All ICE correspondence is delivered immediately, unopened to ICE.
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The designated ICE housing unit has a secure locked box near the entry/exit door. ICE staff has the key and checks the box upon each visit.
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"/>	ICE maintains a log which establishes the requirements of this component being met.
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"/>	ICE detainees are advised of their right to correspond with ICE via the orientation video and within the ICE National 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"/>	The required information is posted within all ICE living units (including segregation). The facility conducts satellite feeding and indoor recreation occurs within the living unit.

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
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone serviceability checks are completed daily by facility staff and documented on a local form.

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.)

Interviews with ICE staff were conducted and postings, forms, and logs were inspected.

The process of communication, safely and securely between ICE detainees and ICE staff, is being met consistent with the PBNDS regarding Staff-Detainee Communication.

(b)(6), (b)(7)(c) / September 29, 201

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. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is responsible for developing and implementing a system of tool accountability.
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. Facility policy, Control of Tools and Equipment, identifies site specific procedures. All new tool deliveries are received in the outside warehouse and engraved before they are introduced into the facility by the Tool Control Officer. The Tool Control Officer documents receipt and places the tool in secure storage.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has strict accountability procedures for acquisition, use and disposal of tools, keys, medical instruments, and culinary equipment. All aspects of tool acquisition, control, and disposal are documented.
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. Numbered plastic chits are assigned to each employee and used to account for tools. The Tool Control Officer places the chit in the tool storage location when the tool is issued.
5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has tool inventories for all areas where tools are stored in the facility. Maintenance, medical, food service, recreation, and Armory tool inventories were reviewed. The facility does not have an electronics shop. No tools are used in recreation. Tools used by the information technology employees have inventories and are stored in the central tool room.
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. Tool inventories were found on all tool boards, tool boxes, and tool kits inspected.

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"> The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted portions of this component requiring tools are specifically classified as Restricted and Non Restricted is specific to SPCs and CDFs. This facility classifies tools as Class A and Class B. Class A tools have restricted use and Class B tool use is unrestricted.
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. Department heads are responsible for implementing tool control procedures.
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"/>	Tools are etched with inventory numbers.
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> The system ensures that all stored tools are accountable. Tools are stored on shadow boards in which the shadows resemble the tool. Shadow boards have a white background. Restricted tools are shadowed in red. Non-restricted tools are shadowed in black. Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<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. This facility stores most tools on shadow boards. The shadows conform to the shape of the tool. Shadow boards used have a white background. Shadows are red where Class A tools are stored and black where Class B tools are stored. Missing tools can be easily identified.
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. Shadows are removed when tools are taken out of service.

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
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. There are locked drawers containing small tools. The facility uses foam padding with the shadow cut out of the foam to store these tools.
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 were secured at the time of the inspection.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff interviewed were able to explain the requirements regarding lost or missing tools. Documentation reviewed confirmed compliance with facility procedures which address the requirements of this component.
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 facility documents disposal of broken and worn out tools on a standard facility form.
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"/>	Contractor tools are inventoried before being carried into the facility and again when removed from the facility. The Tool Control Officer had years' worth of completed forms on file showing compliance.
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. Hoses longer than three feet are classified as restricted and stored on a shadow board.
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. Scissors are not used for in-processing detainees.

PART 2-17. TOOL CONTROL

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

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

This facility has a dedicated Tool Control Officer and a large centralized tool room within the security perimeter. The tool room was well organized, maintained required inventories, and all tools were properly classified and stored at the time of the inspection. Sign out sheets and plastic chits are used to identify tool locations. Tools are also stored in five other areas within the facility. Proper tool inventory, storage, and sign out procedures are in place in each of these areas.

Contractor tools are inventoried prior to being brought into the facility and again as contractors leave the facility.

Tool disposal is properly documented and approved. All broken tools are disposed of through a vendor, Waste Management.

Interviews with staff, inspection of tool storage areas, and review of facility policies and documentation were used to determine compliance with the PBNDS regarding Tool Control.

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

September 29, 2012

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. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Use of Force, was updated on January 14, 2011
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"/>	
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"/>	
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"/>	
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"/>	Captains or Lieutenants oversee all planned situations involving force.
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"/>	
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The facility has a well defined use of force documentation package and review system. One of the forms used to document calculated force situations has a line for filling in the reasons for any breaks during a recording of incidents.
10. Staff: • Does not use force as punishment. • Attempts to gain the detainee's voluntary cooperation before resorting to force • Uses only as much force as necessary to control the detainee. • Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medication is not used at this facility for restraint purposes. Facility staff reported this would require a court order in the state of Arizona.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The procedures used were found on a checklist used by Captains and Lieutenants when assembling and assigning teams.
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> • Soft (nylon/leather) restraints. • Dressing the detainee appropriately for the temperature. • A bed, mattress, and blanket/sheet. • Checking the detainee at least every 15 minutes. • Logging each check. • Repositioning detainee often enough to prevent soreness or stiffness. • Medical evaluation of the restrained detainee twice per eight-hour shift. • When qualified medical staff are not immediately available, staff position the detainee "face-up." 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The Chief of Security indicated (b)(7)(e)</p> <p>(b)(7)(e)</p> <p>Facility policy adequately addresses the requirements of this component if use of restraints is necessary.</p>
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"/>	
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"> • Medical staff is consulted before staff use pepper spray/non-lethal weapons. • Medical staff reviews the detainee's medical file before use of a non-lethal weapon is authorized. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Intermediate Force Weapons, when not in use are stored in areas where access is limited to authorized personnel and to which detainees have no access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If Intermediate Force Weapons are stored in the Special Management Unit (SMU), they are stored and maintained the same as Class R tools.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)(E)

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
20. Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy indicates pregnant ICE detainees are not to be restrained, and that medical staff is to be consulted prior to restraining other types of detainees. This facility does not house females.
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"/>	Restraints used were identified on Incident Reports.
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 Chief of Security reviews all incidents involving force.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. • Specialized training is given to officers ensuring they are certified in all devices approved for use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training is provided during new employee orientation and during annual refresher training.
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"/>	The post test included in employee training files shows staff receive and are tested for competency in the (b)(7)(E)
26. The use of canines is restricted to contraband detection purposes only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are not present during canine searches, according to facility policy.
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. The facility uses local forms for documenting incidents involving force.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

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

This facility has written procedures addressing the Use of Force and restraints,

(b)(7)(E)

(b)(7)(E)

During the inspection of the Armory, the log revealed the Special Operations Response Team Leader conducting a full search of a housing unit holding U.S. Marshal detainees

(b)(7)(E)

(b)(7)(E)

Facility policy does not prohibit nor authorize (b)(7)(E) The lesson plan for Defensive Tactics does not teach (b)(7)(E)

(b)(7)(E)

A review of facility policy, the Defensive Tactics lesson plan, employee training files, incident reports, informational packets and videos for two incidents involving force were reviewed. Interviews with the Assistant Chief of Security, the Chief of Security and the Training Officer were also used to confirm compliance with the PBNDS regarding Use of Force.

(b)(6), (b)(7)(c) September 29, 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"/>	
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The detainee handbook indicates corporal punishment, physical restraint, psychological intimidation denial of regular meals, denial of medical care, denial of sufficient sleep, denial of sufficient exercise and denial of legal assistance will never be used as sanctions. Deprivation of clothing, bedding, and personal hygiene items are not addressed in facility policy.
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"/>	Information is provided verbally during orientation and in writing in either the site specific detainee handbook or the ICE National Detainee Handbook which is issued to all ICE detainees.
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"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the listed information is posted on the ICE detainee bulletin board in English and Spanish.
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 conduct violations are forwarded to the Shift Supervisor for review before the end of the shift.

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"/>	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Unit Team adjudicates minor infractions and forwards those results to the Hearing Officer.
10. A disciplinary panel (or equivalent in IGSAs) adjudicates infractions. The panel: <ul style="list-style-type: none"> Conducts hearings on all charges and allegations referred by the UDC Considers written reports, statements, physical evidence, and oral testimony Hears pleadings by detainee and staff representative Bases its findings on the preponderance of evidence Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A dedicated Hearing Officer is assigned to this facility and conducts hearings, considers testimony and other evidence, hears pleadings by the detainee and staff representative, and bases findings on the preponderance of evidence. Sanctions are prescribed in facility policy and are the only ones used by the Hearing Officer.
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"/>	
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"/>	Hearings may be postponed for defense preparation, physical or mental illness, security issues, and transfer or removal of a detainee. The Hearing Officer records postponements on the disciplinary form.
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 facility sanctions detainees up to 30 days for one offense, and a maximum of 60 days for offenses arising from one incident.
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 addresses confidential information. The Hearing Officer's procedures also protect confidential informants.
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.)*

Detainees are adequately informed of the rules, prohibited acts, disciplinary severity scale, and potential consequences of misconduct.

This facility has a written disciplinary system providing detainees with due process for any alleged infractions.

The Unit Management Team conducts hearings on minor infractions and refers repeat infractions or major infractions to a more formal process. The facility uses an assigned Hearing Officer rather than a panel to adjudicate more serious infractions.

An interview with the Hearing Officer and a review of facility policy and disciplinary documentation determined compliance with the PBNDS regarding the Disciplinary System.

(b)(6), (b)(7)(c) / September 29, 2011
Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section IV CARE

20 Food Service

21 Hunger Strikes

22 Medical Care

23 Personal Hygiene

24 Suicide Prevention and Intervention

25 Terminal Illness, Advance Directives, and Death

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Food Service Manager (FSM) has over 18 years of correctional food service experience. She has been a manager for the past eight years, and has been the FSM at this facility for the past five years. The FSM is ServSafe certified.
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"/>	The facility has two Assistant Food Service Managers (AFSMs). One of the AFSMs is on duty when the FSM is away from the facility.
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. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Knives are not used or stored at this facility.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. Knives are not used at this facility. Security staff assigned to food service conduct a complete inventory three times each day of all dietary tools and utensils. The evening shift conducts an inspection of the condition of all tools and utensils at the completion of the shift.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize any food items requiring special security measures.
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. (MANDATORY) 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 non-ICE detainees and staff assigned to food service are given physicals prior to assignment. All staff is required to have annual physicals. A health and cleanliness inspection is conducted by the duty cook as all detainees report to work. Detainee clothing and grooming comply with the 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"/>	
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"/>	The AFSM instructs all newly assigned workers on departmental rules and procedures.
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> Safe work practices and methods. Safety features of individual products/ pieces of equipment. Training covers the safe handling of hazardous material[s] the detainee are likely to encounter in their work. 	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainees are not authorized to work in food service. All training conducted for other detainees assigned is documented on a standard Canteen Training form maintained in the FSM's office.
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.	<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. The facility pays the assigned workforce in accordance with facility policy which is consistent with the expectations of the standard.
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"/>	
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"/>	

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
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 35-day cycle menu.
18. (MANDATORY) 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"/>	Canteen Corporation is contracted to provide food service. Canteen's registered dietitian has conducted a complete nutritional analysis of the current master menus including the 35-day cycle menu and the 14-day Common Fare menu. Changes to the menu are analyzed by the dietitian before they are placed onto the menu.
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"/>	All meals are prepared and presented according to approved recipes, as required.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The standard requires the "Cook Supervisor or equivalent" as having this authority. The AFSM, or the duty cook, are authorized to change the menu. Notification is made to the Shift Captain, and the change is documented in the daily production log.
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"> Changes to the planned Common Fare menu can be made at the facility level. Hot entrees are offered three times a week. The Common Fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provides hot water for instant beverages and foods. <ul style="list-style-type: none"> Common Fare meals are served with: Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the Common Fare diet items. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Common Fare program is available at no charge, as required. The facility complies with all 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 is the only staff member authorized to remove a detainee from the Common Fare Program.
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"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common Fare Program receive the same Kosher-for- Passover meals as those who do participate. Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 	<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"/>	The facility has nine satellite feeding areas. All satellite feeding areas were inspected and found to meet sanitation guidelines.
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"/>	Food temperatures were taken during the inspection. Food was plated and served consistent with the requirements of the standard.
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"/>	There was no evidence of food being used as a reward or punishment for behavior.
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> Personal cleanliness and hygiene; Sanitary techniques for preparing, storing, and serving food, and; The sanitary operation, care, and maintenance of equipment. 	<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. (MANDATORY) 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"/>	Weekly inspections of food service areas are conducted and documented by the AFSM, Maintenance Supervisor, and a member of the medical staff. The FSM reviews the weekly inspection reports and forwards the report and information regarding corrective action taken to the Assistant Warden of Operations.
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. (MANDATORY) 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"/>	Dish machine temperatures are taken during each meal. Temperatures are documented on the daily Dish Machine Temperature Log, as well as on the Daily Production Log.
37. (MANDATORY) 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"/>	Cooler and freezer temperatures are taken two times a day. Both temperatures are documented on the Cooler/Freezer Log as well as on the Daily Production Log.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning schedules were observed throughout the department.
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE staff is not permanently assigned to this facility.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The FSM does not prepare a quarterly cost estimate for the Common Fare Program.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<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
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"/>	
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"/>	Inspection revealed dietary staff ensures housekeeping standards are maintained, and storeroom and refrigerator guidelines are followed.
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"/>	The facility does not have a dining room. Instead, satellite feeding is conducted. The population is given ample time to consume their meal.
51. (MANDATORY) 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 last health inspection was conducted by the Pinal County Environmental Health Department on February 3, 2011. The facility received an overall rating of Excellent.
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. (MANDATORY) 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 an annual contract with Anteater Extermination. The contract requires monthly inspections and needed applications.

FOOD SERVICE

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The food service department does not utilize ICE detainees as part of the workforce. The facility does not use knives. The overall sanitation and security within the department was good at the time of the inspection. The assigned workforce wore clean and neat food service uniforms.

The facility utilizes a satellite feeding method that requires bulk food to be sent to nine different designated satellite areas within the facility. The population is moved from their assigned unit to the satellite feeding areas where they are issued a tray. The satellite feeding area is located directly outside of the housing unit. Once a detainee is issued a tray, he returns to the unit to consume the meal. The trays are prepared in an enclosed room and passed to the population through a tray slot. Each tray is checked for compliance by a food service staff member. The feeding process takes approximately 60 minutes from the time the bulk food is removed from the food service department and the empty food trays are returned to the food service department.

There is a caged area located in food service secured with an approved locking device. All dietary tools and utensils are stored and inventoried in this area. This area is under the control and supervision of a corrections officer assigned to the area who retains the key.

A review of facility policies and other documentation, interviews with staff, inspection of food service areas and observation of practices for the facility determined compliance with the PBNDS regarding Food Service.

(b)(6), (b)(7)(c) / September 29, 201

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"/>	When a detainee has not eaten for two days, he is referred to the medical unit for evaluation and treatment.
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"/>	Medical staff notifies ICE via the chain of command when a hunger strike occurs.
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"/>	The Hunger Strike policy addresses this requirement.
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"/>	Detainees that are on a hunger strike are placed in the Short Stay Observation Room.
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"/>	If ordered by the psychiatrist, detainees are placed in the Special Management Unit or the Short Stay Observation Room, which is monitored by medical staff.
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"/>	The medical staff records the weight and vitals of a hunger striker at least every 24 hours.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A blanket Consent for Treatment is obtained during the initial booking process. Consent is assumed unless a Refusal of Treatment is signed. When a new treatment plan is developed, a new consent is obtained.
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"/>	The Hunger Strike Policy requires a Refusal of Treatment to be signed if a detainee rejects a medical evaluation or treatment.
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"/>	Unless otherwise directed by medical staff, three meals per day are delivered to the hunger striking detainee. The detainee's consumption of these meals is documented on the Hunger Strike Monitoring Form.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water from a drinking fountain and other beverages are available to the hunger striker. Facility staff monitors and reports any consumption, when possible.

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
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"/>	When the hunger striker is placed in an observation room, he is not allowed to bring any food item into the secure area.
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"/>	The Hunger Strike Monitoring Form is utilized to record fluid intake and food consumption.
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Hunger Strike policy provides direction for treating 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"/>	Staff documents all treatment attempts in the progress notes. The Health Services Administrator (HSA) interviews all hunger strikers.
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"/>	During the orientation process, all staff receives training in identifying and referring a hunger striker. Further training is provided during annual in-service training. Medical staff receives periodic training in evaluating and treating hunger strikers from the HSA.

PART 4 – 21. HUNGER STRIKES

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

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

There have been no hunger strikes by ICE detainees in the last year. The facility has adequate policies in place and has demonstrated appropriate responses to hunger strikes of non-ICE detainees. Overall, the facility complies with the PBNDS regarding Hunger Strikes.

(b)(6), (b)(7)(c) September 29, 201

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"/>	At the time of the inspection, staff licenses were current, along with the pharmacy license and the Clinical Laboratory Improvement Act waiver for onsite laboratory testing.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff completes an intake screening on all arriving detainees within 12 hours of arrival. A review of 50 charts indicated this process was being performed correctly.
3. (MANDATORY) 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"/>	Medical services are provided 24 hour per day, seven days a week by a variety of medical staff, from physicians to nursing staff. (7) all time psychiatrist and dentist are also available. All staff appeared to operating within the scope of their license. The staffing plan is updated at least yearly.
4. (MANDATORY) 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"/>	Detainees who speak English or Spanish are informed orally and in writing of how to access health services. Others are informed through the Language Line with written documentation being provided soon after.
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 site 24 hours per day, seven days per week. The medical director and psychiatrist are on call for emergencies when they are not on site. If necessary, detainees are transported to a local hospital for treatment.
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"/>	All staff members receive TB testing every six months. The staff is offered the hepatitis B vaccine series, and refusals are documented.
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"/>	The job descriptions, licenses, certifications, and credentials of the medical staff were reviewed and found to be current and appropriate.

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
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"/>	Upon arrival, the detainee is provided a handbook that is written in English and Spanish. The handbook details the procedure for obtaining medical services.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility has been certified by ACA and recently by the NCCHC.
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"> When screening is performed by a detention officer, the facility maintains documentation of the officer's special training. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Within 12 hours of arrival, a medical professional provides all detainees with a complete medical screening.
11. (MANDATORY) If language difficulties prevent the health care provider/officer from sufficiently communicating with the detainee for purposes of completing the medical screening, the officer obtains translation assistance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spanish speaking nurses or correctional officers are available to communicate with those detainees that speak Spanish. The telephone based Language Line is available for those detainees that do not speak English or Spanish.
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 facility has three secure medical units to provide services to detainees. One of the units has four negative flow rooms, used to house those with communicable diseases. Sufficient equipment is available.
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"/>	There are three separate medical units dispersed throughout the facility which are all located within the secure perimeter.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All of the entrances of the medical units have holding/waiting areas.
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"/>	Security staff is assigned in all of the medical treatment areas.
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"/>	Igloo coolers with fresh water are available in all areas and restrooms are available.

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
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff enters much of the information directly into an electronic data system which is supplemented with some scanned paper documentation. The electronic records are password protected and access is limited to medical staff only. No copies of medical records were found in the detainee files.
18. (MANDATORY) 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"/>	At the time of booking, a blanket consent is signed by the detainee authorizing medical treatment. Procedure specific consents are obtained when invasive medical procedures or dental procedures are performed. Additionally, specific consents are obtained when a new treatment plan is developed or psychotropic medication is prescribed.
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"/>	In lieu of the I-813, an Authorization for Release of Information form is utilized any time confidential medical records are released to outside sources.
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, the facility is given two days notice of any impending transfer.
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"/>	According to the medical staff, a medical summary is prepared for all transferring detainees. Medical records are transferred when the detainee is moved to another facility which provides ICE medical services.
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"/>	Medical records are placed in a sealed envelope with the detainee's name and A-number, as well as "Medical Confidential," marked on the outside.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prior to arriving at this facility, all detainees receive a chest x-ray. The facility duplicates the testing by conducting additional TB testing.

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
24. All detainees receive a mental-health screening upon arrival. It is conducted: <ul style="list-style-type: none"> By a health care provider or specially trained officer; Before a detainee's assignment to a housing unit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff completes a mental health screening as a part of the intake process. Detainees are not placed in general population until the screening is completed.
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"/>	If any medical issues are identified during the intake screening, a Registered Nurse (RN) reviews the form and schedules the appropriate medical services.
26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A health appraisal and physical examination is conducted by a primary provider (physician, physician's assistant, or nurse practitioner) within 14 days of the detainee's arrival at the facility.
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 medical services as detainees in the general population. Request for Medical Care forms are available, and staff referrals can also be utilized. Medical staff makes daily rounds in SMU and are there when distributing medications.
28. Staff provides detainees with health- services (sick call) request slips daily, upon request. <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Request for Medical Care Forms, written in English and Spanish, are available in all housing units. Completed forms are deposited in secure boxes in the housing units. The requests are collected and triaged daily by the medical staff. Those with routine medical needs are seen within 48 hours.
29. (MANDATORY) 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"/>	Staff is available 24 hours per day.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The staff physician and psychiatrist are available for calls.
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"/>	The 911 system is utilized for medical emergencies. Local Emergency Medical Services are able to respond in less than four minutes.

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
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"/>	(b)(7)(e) staff members are sent with all medical transports.
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff is trained in First Aid, CPR, and the use of an Automatic External Defibrillator (AED). Emergency drills are conducted and response times are less than four minutes. First aid kits and Automated External Defibrillators (AEDs) are available in most areas of the facility.
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"/>	Only medical staff distributes medication.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medications are stored in a secure pharmacy, inventoried, and distributed in accordance with sound standards. Medication distribution is conducted under the supervision of a security officer.
36. (MANDATORY) Each facility has written policy and procedures for the management of pharmaceuticals that include: <ul style="list-style-type: none"> • A formulary of all prescription and nonprescription medicines stocked or routinely procured from outside sources. • A method for obtaining medicines not on the formulary. • Prescription practices, including requirements that medications are prescribed only when clinically indicated and that prescription are reviewed before being renewed. • Procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications. • Secure storage and perpetual inventory of all controlled substances (DEA Schedule II-V), syringes, and needles. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a formulary that is reviewed and adjusted on a regular basis. All of the aspects of this standard are appropriately addressed by the facility's policies and procedures.

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>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A locked pharmacy is located within the secure perimeter of the facility. Solid walls, along with a solid ceiling, mark the perimeter of the pharmacy. A solid core entrance door with a high security lock is entered by use of a key. Access is limited to appropriate medical staff.
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> • Administration and management in accordance with state and federal law. • Supervision by properly licensed personnel. • Administration of medications by personnel properly trained and under the supervision of the health services administrator, or equivalent. • Accountability for administering or distributing medications in a timely manner and according to physician orders. 	<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. Medications are delivered through secure medication carts from properly licensed personnel. All staff are properly trained and supervised by the HSA. Medications are administered and distributed in a timely manner, according to the physician's orders.
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medication distribution is recorded on Electronic Medication Administration Records pursuant to the orders of an appropriate medical clinician.
<p>40. Medication may not be delivered or administered by detainees.</p> <ul style="list-style-type: none"> • In facilities that are medically staffed 24 hours a day, the health care provider distributes medication. • 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility is staffed 24 hours per day by medical staff. All medications are dispensed by licensed medical professionals.
<p>41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Security officers do not administer medications at this facility.

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
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 is notified immediately by e-mail and via a phone call of any special needs detainee. During the Monthly Special Needs Meeting, these detainees are discussed.
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"/>	Any detainee requesting an independent medical exam has his request submitted to the FOD for review.
44. (MANDATORY) Each facility has a written plan (or plans) that address the management of infectious and communicable diseases, including prevention, education, identification, surveillance, immunization (when applicable), treatment, follow-up, isolation (when indicated), and reporting to local, state, and federal agencies. Plans include: <ul style="list-style-type: none"> • Coordination with public health authorities; • Ongoing education for staff and detainees; • Control, treatment, and prevention strategies; • Protection of individual confidentiality; • Media relations; • Management of tuberculosis, hepatitis A, B, and C, HIV infection, avian influenza, and • Reporting communicable diseases to local and/or state health departments in accordance with local and state regulations. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Occupational Exposure Control manual establishes written procedures covering all aspects of this component.
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"/>	Any detainee with a communicable disease is isolated in a negative pressure room, Med Room 1.
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"/>	All detainees arriving at this facility first receive a chest x-ray conducted by ICE. The facility also performs another TB test. A review of 50 charts indicated compliance with the standard.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a chest x-ray and a thorough medical screening prior to being placed at this facility. If they are symptomatic, they would be placed in a negative pressure room.

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
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"/>	The 911-system is utilized to contact outside medical services. Relevant medical information is transported with the detainee.
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"/>	Treatment plans are developed by an appropriately licensed treatment provider. Chronic care clinics are conducted by primary medical providers.
50. (MANDATORY) 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"/>	There are no female detainees housed at this facility.
51. (MANDATORY) 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"/>	Detainees with chronic conditions are seen by a primary care provider on a regular basis. All appropriate services are provided.
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"/>	The Warden is notified of any detainee whose special needs require special consideration.
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"/>	(b)(7) full time licensed dentist provides emergency and routine dental care.
54. (MANDATORY) 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"/>	Mental health services are provided by a full time psychiatrist, a Licensed Professional Counselor (LPC), and a Licensed Clinical Social Worker (LCSW).
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specially trained staff is available for detainees who experience acute mental health problems.
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"/>	Rooms are available offering privacy to detainees who receive mental health interviews, examinations, and procedures.

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
57. (MANDATORY) 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"/>	All detainees referred for mental health treatment receive a comprehensive evaluation by a licensed mental health provider within 14 days of referral. A review of 50 charts indicated this occurred in all but one case.
58. (MANDATORY) 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"> • 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. • The medical authority or mental health provider completes a Post-Restraints Observation Report form DIHS-867 or similar form. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Personal Restraints and Seclusion policy provides specific direction for all aspects of this component. Mental health staff indicated there has been no medical or mental health restraints utilized in the last four to five years.
59. (MANDATORY) 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"> • Specify the duration of therapy; • Obtain an order authorizing the administration of the drug from a Federal District Court. • 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; and • Prepare treatment plans for less restrictive alternatives as soon as possible. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Compulsory (Involuntary) Medication of Mentally Ill Inmates/Residents policy provides specific direction that would meet the conditions of this component. However, this has not been utilized in the last year.
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"/>	(b) (7) (D) All time dentist provides a complete screening within 14 day of a detainee's arrival. A review of 50 charts indicated this procedure occurred.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden, in conjunction with medical staff, determines the contents, number, location, use protocol and procedures for 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"/>	There are three automatic external defibrillators located within the facility.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE would be consulted if forced treatment should be needed.
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. Monthly meetings occur to discuss medical services.
65. (MANDATORY) 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"/>	Stericycle collects all contaminated material. Dental equipment is decontaminated in accordance with sound medical procedures.
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monthly Comprehensive Quality Assurance meetings are conducted.

PART 4 – 22. MEDICAL CARE

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

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

The facility employs (b)(7)(e) full-time Physicians, (b)(7)(e) Nurse Practitioners, (b)(7)(e) Physician Assistants, (b)(7)(e) Psychiatrists, (b)(7)(e) Licensed Professional Counselors, (b)(7)(e) Licensed Clinical Social Workers, (b)(7)(e) Dentists, (b)(7)(e) Registered Nurses, (b)(7)(e) Licensed Practical Nurses, (b)(7)(e) Certified Medical Assistants, and (b)(7)(e) Certified Nursing Assistants to provide services to approximately 3,500 non-ICE and 75 ICE detainees.

The facility has sufficient policies and procedures in place to meet the needs of the detainees.

Due to the size of the facility, three different medical units are located within the secure confines of the facility. The units are sufficiently equipped to provide the required services. If unusual medical treatment is required, the detainees are transported to local medical facilities.

A review of 50 charts indicated chest x-rays were conducted on all ICE detainees prior to their arrival at the facility. Follow-up TB testing was also conducted on ICE detainees.

All of the detainees receive complete physicals performed by a primary medical provider within 14 days of their arrival at the facility. This was confirmed by a review of 50 charts. The review also indicated in all but one case, mental health evaluations were performed within the same time frame.

Two non-ICE detainees died this last year from medical issues. One was admitted on July 12, 2011, with a broken arm, which had been casted prior to his arrest. The detainee received an initial medical screening and other than a broken arm, no significant medical issues were identified then or during his physical. A follow-up medical exam to treat the broken arm was scheduled on September 9, 2011. When officers went to the detainee's cell, he was found unresponsive. CPR was performed and the AED provided six shocks to his heart. EMTs arrived and assumed medical responsibility. A slight heart beat was detected. The detainee was taken to the hospital where he expired from cardiac arrest.

Another non-ICE detainee arrived at the facility on June 15, 2011, and was provided an initial medical screening. The 14-day physical was performed on the 12th day of his stay at the facility with no remarkable medical issues being identified. On August 17, 2011, the detainee complained of abdomen fullness even though he had experienced a normal bowel movement. He was encouraged to drink more water and to return if the systems persisted. On August 23, 2011, the detainee complained of bloating and nausea and was seen again by a primary provider. Extensive lab work was ordered, as well as medication for constipation. The lab work indicated Hepatitis-C and the possibility of a tumor. On August 28, 2011, the detainee requested to see the doctor. He was seen during the nurse sick call, presenting with severe abdominal pain, a distended abdomen, and swollen lower extremities. After lab results were obtained, the detainee was seen by a physician on August 30, 2011, and an abdominal ultrasound was recommended. He continued to be seen every couple of days by medical staff and provided treatment. On September 6, 2011, he was sent to Tempe St Luke's Emergency Room (ER) via a facility van. At the ER, a diagnosis of hepatic carcinoma was confirmed. He was placed on life support on September 12, 2011, and pronounced dead on September 14, 2011.

After reviewing 50 files, observing medication pass, nurse sick call, 14-day physical exams, and general medical services, it appears the quality of care is sufficient to meet the medical needs of the detainees. Overall, the facility complies with the PBNDS regarding Medical Care.

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

September 29, 2011

Reviewer's Signature / Date

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

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"/>	The detainee handbook outlines the facility's policies and procedures for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.
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"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. During in processing, the detainees are issued a sufficient amount of clean, temperature appropriate clothing.
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. Wind breakers are available when the weather becomes cooler.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. The detainees are issued clean bedding, linens, and towels when they arrive at the facility.
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"/>	The detainees are provided personal hygiene items, as needed, which are replenished, as needed.
6. Toilet facilities are: <ul style="list-style-type: none"> Clean Adequate in number and can be used without staff assistance 24 hours per day when detainees are confined in their cells or sleeping areas. 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.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The toilet facilities are clean and well maintained. In most housing units, the ratio of toilets to detainees is one for 12 or less. In one pod, there are 14 detainees with one toilet.

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <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"/>	The bathing facilities are clean with the operable temperatures appearing to be appropriate.
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"/>	Special housing can be provided to detainees with disabilities.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clean clothing, linen, and towels are provided appropriately.
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. No ICE detainees work in food service. However, non-ICE detainee workers are permitted exchanges.
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. Volunteer detainee workers are permitted to exchange outer garments more frequently.

PART 4 – 23. PERSONAL HYGIENE

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

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

Detainees have access to clean, temperature-appropriate clothing, bedding, and linens. They are able to exchange those items as necessary. Bathing facilities are appropriate and in most cases, there were sufficient toilets. In one pod, there were 14 men with only one toilet.

(b)(6), (b)(7)(c) September 29, 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 facility has an approved written suicide prevention and intervention program approved by the Warden which is reviewed annually.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • 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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Suicide Prevention and Intervention policy covers all of the aspects of this component.
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"/>	All staff members receive the required suicide prevention training during the initial employee orientation and the annual in-service.
4. Training prepares staff to: <ul style="list-style-type: none"> • 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the suicide intervention and prevention curriculum indicated it adequately covers all of the aspects of this component. Several staff were interviewed and found to be knowledgeable with the requirements of this standard.

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>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"> Screening does not occur later than one working day after the detainee's arrival. Documentation exists that "specially trained officers" have completed training in accordance with a syllabus approved by the medical authority. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a mental health screening at the time of intake, which is within 12 hours of arrival. The screening, which is performed by medical staff, addresses suicide potential.
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"/>	The Suicide Management policy addresses the requirements of this component.
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"/>	The Mental Health Services policy provides direction about returning a previously suicidal detainee to 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 facility has 12 cells which have been renovated and designated as appropriate to house suicidal detainees.
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 cells are inspected yearly by the Licensed Professional Counselor to ensure they are safe.
10. Medical staff has approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The cells have been designated through the Suicide Prevention Facility Risk Assessment as appropriate to house a suicidal detainee.
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"/>	Staff observe the detainee at least every 15 minutes. Constant observation is utilized for those considered to have a higher risk of self harm.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The psychiatrist or physician can order a constant watch. Medical staff does not document the status of the detainee at least every two hours.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. In CDFs or IGSAs, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has 24 hour medical staff.
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"/>	A morbidity and mortality review was conducted on the completed suicide. That information was shared with relevant staff.

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.)*

The facility has a comprehensive suicide identification and prevention policy. Training appears to be comprehensive and the staff interviewed were knowledgeable about the policy. The facility has 12 cells identified to house suicidal detainees. The rooms have been modified to remove dangerous items and are inspected yearly by the Licensed Professional Counselor (LPC).

A non-ICE detainee successfully committed suicide on February 20, 2011. He was booked on November 4, 2010, and denied suicidal tendencies at that time. He did admit to prior sexual offenses. The next day, he was evaluated by the LPC regarding his sexual offenses. He received a complete mental health exam on November 8, 2010, and no significant issues were identified. He received a physical exam on November 17, 2010. Other than minor medical and dental issues, no significant problems were noted. On February 20, 2011, at approximately 11 p.m., the detainee asked his cell mate to leave the cell so he may utilize the toilet in private. He put a towel on his window, which is against facility policy, and hung himself. When discovered by staff, CPR was performed and EMS was contacted. The AED did not call for any shock to be applied. He was taken to a local hospital where he was pronounced dead at 11:27 p.m.

There have been no ICE detainees on suicide watch during the last year.

(b)(6), (b)(7)(c) / September 29, 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"/>	Any detainee, who is chronically or terminally ill, is transferred to an appropriate off site medical facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Notification of Next of Kin/Others policy requires ICE to make proper notifications.
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Advanced Directives: Living Will/Durable Power of Attorney for Health Care policy addresses the requirements of this component.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Advanced Directives: Living Will/Durable Power of Attorney for Health Care policy addresses the requirements of this component.
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"/>	According to the Health Services Administrator (HSA), a detainee with a DNR would receive maximal therapeutic effort short of resuscitation.
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"/>	Per policy, the facility provides ICE with the basic information of any detainee with a DNR.
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 Scope of Service policy addresses organ donation by a detainee.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Notification of Next of Kin/Others policy requires ICE to make proper notifications.
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"/>	The Transportation Procedures provide policies and procedures in the event of a detainee death while in transport.

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
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"/>	According to the local ICE officers, this component would be met.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. • If the detainee is a U.S. military veteran, the Department of Veterans Affairs notified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to the local ICE officers, this component would be met.
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"/>	The facility has policies in place that address filing of death certificate.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; • Performance of an autopsy. • Person(s) to perform the autopsy. • Obtaining State approved death certificates. • Local transportation of the body.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has policies in place addressing when to contact the coroner.
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"/>	There have been no ICE deaths to assess the facility's performance of this component, but staff was cognizant of the requirements of this component.

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.)

The facility has sufficient policies in place to address this standard. This includes the Advanced Directives: Living Will/Durable Power of Attorney for Health Care policy. The Notification of Next of Kin/Others policy requires ICE to make proper notifications. The Transportation Procedures provide policies and procedures in the event of a detainee death while in transport.

There have been no ICE detainee deaths to assess the facility's response to this standard. Overall, the facility complies with the PBNDS regarding Terminal Illness, Advanced Directives and Death

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

September 29, 2011

Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section V ACTIVITIES

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has written policy concerning correspondence and other mail. The requirement for correspondence rules to be posted in each housing or common area is specific to SPCs and CDFs. The rules are posted in the ICE housing unit and provided in the detainee handbook which is available in English and Spanish.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. However, facility staff maintains and logs priority, priority overnight, and certified mail.
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"/>	Facility policy allows all incoming mail (general correspondence) to be opened, read, and searched prior to detainee delivery.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Incoming mail may be read as authorized by facility policy.
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"/>	Special correspondence must be opened in the detainee's presence and the detainee is required to sign a log book indicating receipt.
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"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Staff is only authorized to inspect outgoing correspondence or other mail without the detainee present when there is reason to believe the item might present a threat to the facility's secure or orderly operation, endanger the recipient or the public, or might facilitate criminal activity.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written policy allows all mail to be subject to being read, in part or full and searched prior to going to the Post Office. The requirement to inspect outgoing mail without the detainee present is specific to SPCs and CDFs. The detainee is not present during inspection of outgoing mail.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written notice is sent to the addressee. The requirement to notify the sender of rejected incoming mail is specific to SPCs and CDFs. Written notice is not sent to the sender.
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"/>	
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"/>	Any cash received within incoming mail is documented and logged by two staff members. The detainee is provided a receipt and any discrepancy is documented and investigated.
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"/>	ICE maintains all original identity documents in the ICE sub-office located in Florence, Arizona.
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"/>	
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"/>	Written policy is in place.

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may purchase stamps from the facility commissary system. The facility places no restrictions on the amount of outgoing mail a detainee may send out.
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"/>	Facility policy allows outside publications from recognized publishers, distributors, or authorized retailers.

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.)

The facility mail room is located outside the secure perimeter.

The processing in and out of general correspondence and special correspondence was observed.

Facility policy is in place which meets the requirements of the PBNDS regarding Correspondence and Other Mail.

Pursuant to policy, all outgoing mail is subject to being read. Outgoing mail is required to be inspected only if it presents a threat to the facility's orderly operation, endangers the recipient or the public, or might facilitate criminal activity.

(b)(6), (b)(7)(c) September 29, 2012
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"> • Funeral • Deathbed 	<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)(C) 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"> Conduct themselves in a manner that does not bring discredit to ICE/DRO. Do not violate federal, state, or local laws. Do not purchase, possess, use, consume, or administer narcotics, other drugs, or intoxicants. Do not arrange to visit family or friends unless approved before the trip. Make no unauthorized phone calls. Know they are subject to search, urinalysis, breathalyzer, or comparable test upon return to the facility. 	<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"> Transportation (Land Transportation) Restraints applied strictly in accordance with the Use of Force Standard. 	<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 Supervisory Immigration Enforcement Agent indicated transports of ICE detainees into the community for deathbed and funeral visits are handled by ICE. Facility staff is not involved.

(b)(6), (b)(7)(c) September 29, 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"/>	All marriage requests are sent to the local ICE field office for consideration. The local FOD approves/denies all marriage requests.
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"/>	All requests are sent to ICE for consideration.
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"/>	ICE provides the detainee a written copy of the decision. The detainee's legal representative is provided a copy at the detainee's request.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When permission is denied, the FOD provides the detainee a copy of the decision as well as instructions on how to appeal the decision.
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"/>	If the request is approved, the local ICE field office assists the detainee in making wedding arrangements.
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. <u>In SPCs</u> 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. All ICE marriage requests are forward to the local ICE field office.

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 does not approve or deny any ICE marriage requests. All requests are forwarded to ICE for consideration. If approved, the detainee is taken to the adjacent ICE field office where the ceremony is performed and then returned to the facility.

(b)(6), (b)(7)(c) / September 29, 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"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides both indoor and outdoor recreation areas and activities.
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 a full time recreation specialist on staff.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not have any equipment requiring maintenance.
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recreation specialist provides supervision to the recreation work detail.
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 are limited to soccer, basketball, and walking.
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 are offered one hour of outdoor recreation 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"/>	All recreation areas are searched by assigned officers prior to and after each recreation period.
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided the same programs and religious activities as the general population.

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All volunteers receive four hours of facility orientation prior to being authorized entrance into the facility.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors, friends, or relatives are not permitted to participate in the volunteer program.
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 daily outdoor recreation.
20. If yes, written procedures ensure timely review of all eligible detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Transfers are not required as the facility offers outdoor recreation daily.
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"/>	There have been no written transfer recommendations submitted. The facility offers daily outdoor recreation.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Detainees are not transferred. The facility offers outdoor recreation seven days a week.
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"/>	Transfers are not considered. The facility offers daily outdoor recreation.
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"/>	Transfers are not required. The facility offers daily outdoor recreation.
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"/>	The facility offers daily outdoor recreation.
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"/>	Daily access to outdoor recreation is provided.
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"/>	Transfers are not necessary. The facility offers daily outdoor recreation.

PART 5 - 29. RECREATION

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

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"/>	ICE detainees are afforded the same religious services/activities as the general population which are available in Spanish and English.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Services are conducted in the multi-purpose room of each unit.
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. The facility accommodates all recognized holy days and meets the requirements of the bulleted components.
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"/>	Detainees are authorized to have religious reading material, plastic religious medallions, prayer rugs, and religious headwear in their possession.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are authorized to participate in all religious activities that can be completed on the unit. If a service is requested, the Chaplain will arrange a one-on-one service.

RELIGIOUS PRACTICES

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

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed telephone access from 6 a.m. until 10:30 p.m. with the exception of during count times when the phone is turned off. The facility has a TTY device. However, no requests for use have been reported during this inspection period.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This information is provided to all detainees via the issued handbook and the orientation video which is available in English and Spanish.
3. Notification explaining the facilities telephone policy is in the Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Access rules, including updated telephone and consulate number, are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirements of this component are posted in the ICE housing unit.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE housing unit contains four telephones for 70 ICE detainees.
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"/>	Facility staff documents daily telephone inspections to ensure the equipment is in good working order.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephones are located next to the wall-mounted television. However, there is no sound emitted from the television, and detainees must use ear bud headphones to hear sound. As such, the area is reasonably quiet.
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"/>	The issued detainee handbook provides clear guidance for any detainee having trouble placing a confidential call.

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	
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"/>	The SIEA would receive this request, confirm the relationship and authorize these types of calls.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written facility policy is in place for taking and delivering emergency detainee telephone messages.
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"/>	Any detainee in this status must submit a request for a telephone call 24 hours in advance, and it is allowed.
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 that in general population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees in administrative segregation or protective custody must submit a written request 24 hours in advance of any telephone call allowed. Detainees in general population have unlimited access from 6 a.m. until 10:30 p.m., except during count times.
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"/>	Monitoring occurs and notification is clearly posted and a recording advises of the monitoring process. The detainee handbook outlines the procedure for special access calls.

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
27. The OIG phone number for reporting abuse is programmed into the detainee phone system. The reviewer must verify that the number is operable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The OIG phone number is programmed into the phone system and was tested on July 27, 2011, resulting in a successful call.
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"/>	ICE inspection forms documented the requirements of this component being met.

PART 5 – 31. TELEPHONE ACCESS

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

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

All available policy and procedures were reviewed and an inspection of the ICE housing unit completed.

Telephones are provided at an acceptable ratio, in a reasonably private area which is conducive to communication between parties.

The facility has a policy and procedure in place for addressing confidential, special access, and emergency telephone calls.

The facility does have a TTY device, if needed.

The programmed OIG phone number was tested and found functional.

Detainees in administrative segregation and protective custody are not afforded the same telephone privilege as detainees in general population. During the inspection, the Warden issued a bulletin that stated, "ICE detainee's housed in administrative segregation will have access to the telephone per verbal request."

(b)(6), (b)(7)(c) / September 29, 2011

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"/>	The facility has a written visitation policy, schedules, and hours for general visitation, as required.
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"/>	ICE detainee visits are scheduled on Wednesday, Friday, and Sunday from 7 p.m. until 9 p.m.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Written copies of rules, and hours of visitation are provided in English and Spanish.
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	A visitor dress code is posted and provided in English.
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All visitors must pass through a metal detector and have shoes and property pass through an X-Ray machine. An additional hand wand is used, if required.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows minor visitation.
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"/>	Minor visitation is allowed.
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"/>	Minor visitation is allowed.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal visitation is allowed seven days a week, including holidays.
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"/>	Legal visits are allowed to occur as long as the Attorney desires.

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
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"/>	Sack lunches are provided to detainees whose visit is during a scheduled meal.
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"/>	The visitation area for legal visits is an open area. However, there are four private side rooms, which allow document exchange, which are used for ICE legal visits.
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"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The current list of pro bono legal organizations is posted in the ICE housing unit.
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. While it is reported that no requests have occurred, ICE staff have a clear understanding of the requirements of this component.
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"/>	ICE processes all requests for visits from law enforcement officials.
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"/>	ICE staff would process all requests of this nature.

PART 5 – 32. VISITATION

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

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"/>	The facility has a voluntary work program. ICE detainees are only permitted jobs on the ICE unit.
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitation in the living unit was noted as being adequate.
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"/>	ICE detainees are only allowed work assignments within their living unit. As the facility is an IGSA, it is not required to allow level 1 detainees to work outside the secure perimeter under direct supervision, and the facility does not.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	There are no written procedures for selecting ICE detainees for work assignments within the unit. Assignments are made daily and detainees are selected based on who volunteers. ICE detainees are compensated at the rate of one dollar per day.
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 usually work two to three hours a day.
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"/>	Unit staff is responsible for providing and documenting the training that each detainee is receives prior to starting a job.
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The voluntary work program meets the OSHA, NFPA and ACA standards.

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
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> Before the assignment begins As a matter of written procedure 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are not authorized to work in food service. Detainees assigned to food service are screened by medical staff and certified before the assignments begin. Written policy is in place, as required.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unit staff provides all training and safety equipment.
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

ICE detainees are only authorized to work in the ICE unit.

Detainees are paid in accordance with the facility's voluntary work program at the rate of one dollar per day.

There are no written procedures in place for selecting ICE workers.

Training, screening, and orientation occurs, and is documented prior to work assignment.

(b)(6), (b)(7)(c) / September 29, 2011

Reviewer's Signature / Date

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

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"/>	The facility provides a copy of the local handbook to the detainees during the intake process. ICE provides detainees with a copy of the National Detainee Handbook prior to transporting them to the facility.
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 facility handbook is available in both English and 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"/>	The facility provides an orientation video. The video is shown during the intake process and twice a week in the ICE unit.
5. The handbook supplements the facility orientation video where one is provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	The handbook was reviewed and updated on September 26, 2011.
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> • Personal Items permitted to be retained by the detainee. • Initial issue of clothes, bedding and personal hygiene items. • How to access care. 	<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"/>	The facility handbook thoroughly discusses the classification process.
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook states that detainees will receive a medical examination within 14 days after arrival.
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 describes times and procedures for obtaining disposable razors and advises those detainees attending court have 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"/>	The handbook covers barbering services, hours, and restrictions in the Personal Hygiene section.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	<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
<p>27. The grievance section of the handbook explains all steps in the grievance process – Including:</p> <ul style="list-style-type: none"> • Informal (if used) and formal grievance procedures; • The appeals process; • In CDFs procedures for filing an appeal of a grievance with ICE. • Staff/detainee availability to help during the grievance process. • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Homeland Security. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook does describe the grievance system and all the bulleted requirements of this component. The specific portion of this component requiring procedures for filing an appeal of a grievance with ICE is specific to CDFs. Appeal procedures are explained on page 24 of the 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"/>	
<p>29. The handbook describes the facility recreation policy including:</p> <ul style="list-style-type: none"> • Outdoor recreation hours. • Indoor recreation hours. • In dorm leisure activities. • Rules for television viewing. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The handbook addresses all the requirements of this component except for rules regarding television viewing.
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"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook does specify the rights and responsibilities of all detainees.
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An orientation video is provided in English and Spanish.

PART 6 - 34. DETAINEE HANDBOOK

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

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"/>	Both formal and informal grievances are addressed in the facility handbook.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided a copy of the facility handbook and the ICE National Detainee Handbook prior to beginning the intake process.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook explains the grievance system and addresses all the bulleted requirements of this component.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees have the same access to the grievance committee as the general population. Detainees are allowed assistance from other detainees and special assistance is available, as required.
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff receives emergency grievance training during the initial institution orientation and annual refresher training.
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"/>	There are no documented cases of complaints filed by detainee.

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
<p>9. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complains" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Executive Assistant maintains a Grievance Log which addresses all the requirements of this component.
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"/>	
<p>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.</p> <ul style="list-style-type: none"> • In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is an IGSA and does not have an ICE Facility Administrator. Grievance appeals may be filed with the facility's Warden. Written procedures are in place for appeals and are explained in the facility handbook.
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. Facility policy allows up to seven days for formal grievances to be filed.

PART 6 – 35. GRIEVANCE SYSTEM

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a dedicated law library in the ICE housing unit. It is located at the end of the housing unit in a separate, secure room which appears to have been a double occupancy cell.
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"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses LexisNexis to provide Attachment A materials. Therefore, there is no requirement to post the listing of materials. The law library provided for ICE detainees has two computers equipped with LexisNexis, two printers, one working table, and two chairs. Logs were made available supporting ICE detainee use of this area.
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"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE and the facility ensure supplies are available. The law library contains two operable computers containing LexisNexis and printers. Legal material is stored on a disc and preserved by the facility until the detainee requires access. Any request for photocopying is processed upon request.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	ICE inspects the area weekly.
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 employees 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"/>	The IEA has responsibility for inspecting, updating, and maintaining/replacing legal material and equipment weekly. Any outdated materials or equipment is disposed of by the IEA.

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Detainees are offered a minimum 5 hours per week in the law library. Detainees are not required to forego recreation time in lieu of library usage. Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are allowed access from 9 a.m. to 5 p.m. daily in two hour increments. ICE detainees may visit the law library daily, if desired.
11. Detainees may request material not currently in the law library. Each request is reviewed and where appropriate an acquisition request is initiate 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"/>	All requests of this nature are processed by ICE. No requests of this nature have occurred. However, staff advised they would be processed, as required.
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"/>	ICE detainees are allowed to assist other ICE detainees.
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"/>	ICE detainees may retain all legal work created. Discs are available for a detainee's use which are stored by facility staff. The ICE detainee must present his ID to gain access to the stored disc for future use.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	This inspection revealed that the mobile computer for use by ICE detainees on this status did not contain LexisNexis. ICE and facility staff indicated it had not been installed for use. The computer was updated during this inspection to include the current addition of LexisNexis.
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Facility staff indicated no denials have occurred, but ICE would be notified if it occurred.
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"/>	
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**

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

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

Facility and ICE staff both reported there have been no requests for Group Legal Rights Presentations during the past year.

(b)(6), (b)(7)(c) / September 29, 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 created for every new arrival.
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"/>	Files inspected contained the required documentation.
3. The detainee's Detention File also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s or IGSA equivalent, closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Files inspected contained the required forms.
4. The Detention Files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detention files are maintained in a dedicated, secure area. The portion of this component requiring detention files to be in lockable cabinets with the key distribution to be limited to supervisors if the files are not located in a secure area is specific to SPCs and CDFs. Files are not locked but are maintained within a secure room which is locked when staff exits. The room may only be opened with a restricted key by supervisory staff.
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"/>	The file remains active while the detainee is housed at the facility. Upon release, all relevant documents, closed-out receipts, and the original I-385 are placed in the file prior to closure.
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any authorized request from another facility is approved via supervisory staff at both facilities.
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"/>	Facility staff authorized to access files are identified by posted signs and clearly identified. Detention files may be reviewed in the secure area, removed by designated staff, and are logged, as required.

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
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Files of this nature are password protected.
10. Unless release of information is required by statute or regulation, a detainee must sign a release-of-information consent form prior to the release of any information, and a copy of the form is maintained in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Electronic data on ICE detainees is treated the same as traditional paper files and A-files.
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"/>	Observations during this inspection confirmed required equipment was in place and in good working order.
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility files are maintained for seven years, at which time they are shredded.
15. Field Offices maintains detention files on detainees housed in IGSA Facilities as needed. These files are maintained for a minimum of 18 months.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The AFOD indicated files are maintained in storage for seven years.

PART 7 – 38. DETENTION FILES

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The facility's process of establishing, completing, documenting, maintaining, and closing detention files was reviewed.

Files are maintained securely and designated staff has access. Files, if removed by designated staff, are logged, as required.

Detention files are maintained consistent with standard expectations.

(b)(6), (b)(7)(c) / September 29, 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"/>	While the AFOD reports no requests for interviews by news media occurred over the past year, the AFOD would approve all interviews.
2. All personal interviews are documented with the News Interview Authorization form (or equivalent) and filed in the detainee's A-file with a copy in the facility's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The AFOD was familiar with 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"/>	
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"/>	If any approved interview occurred, required release forms would be completed and retained.
5. All press pools are organized according to the procedures in the Detention Standard. <ul style="list-style-type: none"> A press pool may be established when the Field Office Director and facility administrator determine that the volume of interview requests warrants such action. 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. All material generated from such a press pool is made available to all news media, without right of first publication or broadcast. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While no press pools have been requested or required in the past year, the AFOD understands all the requirements.

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.)

While no news media interviews or tours were requested during the past year, facility and ICE staff are familiar with the requirements of the PBNDS. Overall, the facility complies with the PBNDS regarding News Media Interviews and Tours.

(b)(6), (b)(7)(c) September 29, 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"/>	All correctional staff receives five weeks of initial training and 40 hours of annual refresher training. Contractors receive 40 hours of initial training and 40 hours of annual refresher training. Volunteers receive four hours of initial training and four hours of annual refresher training.
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 Training Coordinator, who has completed training and certification as required, oversees the staff development and training program.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The annual training plan is approved by the Warden and the corporate office.
5. An accurate and complete record is maintained of all formal training activities in: <ul style="list-style-type: none"> Individual training folders, Other training records systems, and/or Electronic systems. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All training is documented in individual hard copy training files and electronically.

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"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Drug-free Workplace • Health-related emergencies • Signs of Suicide risk and precautions • Suicide prevention and intervention • Hunger strikes • Use of Force • Keys and Locks • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • Orientation and training on detainee handbook and detainee rights. • Requirement of special-needs detainees. • National Detention Standards 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>An inspection of individual training files support all the bulleted requirements of this component were included in the training being provided to new employees, contractors, and volunteers.</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>7. Clerical/support employees who have minimal detainee contact receive a minimum of:</p> <ul style="list-style-type: none"> • Working conditions • Cultural diversity/understanding staff & detainees • Code of ethics • Personnel policy manual • Employees' rights and responsibilities • Overview of the criminal justice system • Tour of the facility • Facility goals and objectives • Facility organization • Staff rules and regulations • Sexual harassment/sexual misconduct awareness • Personnel policies • Program overview • National Detention Standards. • Key and Lock Control. • Suicide risk and prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Clerical and support staff are provided 40 hours of initial training and 40 hours of annual refresher training which addresses all the bulleted requirements.</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>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"> • Security procedures and regulations • Code of Ethics • Health-related emergencies • Drug-free workplace • Supervision of detainees • Signs of suicide risk and hunger strike • Suicide precautions • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plan and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/First aid • Counseling techniques • Sexual harassment/sexual misconduct awareness. • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted requirements are addressed in training provided to all professional and support employees.

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"> • The purpose, goals, policies and procedures for the facility and parent agency security and contraband regulations • Key control; appropriate conduct with detainees • Responsibilities and rights of employees • Standard precautions • Occupational exposure • Personal protective equipment • Bio-hazardous waste disposal • Overview of the detention operations. • National Detention Standards. • Medical grievance procedures and protocol. • Requirement for special needs detainees. • Code of Ethics • Drug free workplace • Hostage situations and staff conduct if taken hostage. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Full-time health care employees receive 40 hours of formal orientation and 40-120 hours of departmental training prior to undertaking their assignment.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>10. Security personnel (including contractors) will receive training on the following subjects, at a minimum:</p> <ul style="list-style-type: none"> • Security procedures and regulations • Supervision of detainees • Searches of detainees, housing units, and work areas • Signs of suicide risk, precaution, prevention and intervention. • Code of Ethics • Health-related emergencies • Drug-free workplace • Suicide precautions • Self-defense techniques • Use-of-force regulations and tactics • Report writing • Detainee rules and regulations • Key control • Rights and responsibilities of detainees • Safety procedures • Emergency plans and procedures • Interpersonal relations • Social/cultural lifestyles of the detainee population • Cultural diversity/understanding staff & detainees • Communication skills • Cardiopulmonary resuscitation (CPR)/first aid • Counseling techniques • Sexual abuse/assault awareness • National Detention Standards. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Training files inspected established both security and contractual staff receive training, as required.
<p>11. Situation Response Teams (SRTs) receive:</p> <ul style="list-style-type: none"> • Specialized training before undertaking their assignments. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SRT members receive 40 hours of additional SRT training prior to assignment and eight hours of SRT training monthly.
<p>12. Facility management and supervisory staff receive:</p> <ul style="list-style-type: none"> • Management and Supervisory training 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>13. (MANDATORY) 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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff issued authorized firearms are trained as required prior to being assigned to any armed post.

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
14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All staff authorized to use firearms must be recertified annually.
15. (MANDATORY) 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff authorized to disperse chemical agents receive four hours of initial certification training and four hours of re-certification training annually.
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"> • Staff, contractors, and volunteers prohibited from: • Using illegal drugs. • Possessing illegal drugs except in the authorized performance of official duties. • Procedures to be used to ensure compliance. • Opportunities available for treatment and/or counseling for drug abuse. • Penalties for violation of the policy. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Training records inspected established this requirement is met.
18. All staff is trained during orientation and annually thereafter, regarding the facility's code of ethics. Typical contents are: <ul style="list-style-type: none"> • Staff, contractors, and volunteers prohibited from: • Using their official positions to secure privileges for themselves or others. • Engaging in activities that constitute a conflict of interest. • Accepting any gift or gratuity from, or engaging in personal business transactions with a detainee or a detainee's immediate family. • Acceptable behavior in the areas of campaigning, lobbying or political activities. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy is in place which requires staff to comply with this component. Training records inspected contain documentation, as 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
<p>20. (MANDATORY) 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"> • Recognizing of signs of potential health emergencies and the required responses. • Administering first aid and cardiopulmonary resuscitation (CPR). • Obtaining emergency medical assistance through the facility plan and its required procedures. • Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. • 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. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility staff is trained to respond, as required, during pre-service and annual training. Training is conducted by facility medical staff in cooperation with the training coordinator. Training has been reviewed and approved by the facility administrator. Training addresses the requirements of this component.</p>
<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"> • Understanding that sexual abuse or assault is never an acceptable consequence of detention. • Recognizing housing or other situations where sexual abuse or assault may occur. • Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. • Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>22. (MANDATORY) All staff in frequent contact with detainees are trained at least annually on the facility's Suicide Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Communication between correctional and health care personnel, Referral procedures, Housing observation and suicide-watch level procedures, and Follow-up monitoring of detainees who have attempted suicide. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff assigned to areas with frequent detainee contact receives annual training in suicide prevention, suicidal behavior, and suicide watch procedures. The curriculum reviewed addresses the bulleted requirements of this component.
<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"/>	All staff receives key control training during the pre-service and annual training. Training is conducted by the Key Control Officer.
<p>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:</p> <ul style="list-style-type: none"> The requirements of this Detention Standard The use of force continuum Communication techniques Cultural diversity Dealing with the mentally ill Confrontation-avoidance techniques Approved methods of self-defense Force cell-move techniques Communicable diseases, particularly precautions to be taken for use of force Application of restraints (progressive and hard) Reporting procedures. 	<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
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.)*

Training files and curriculum were reviewed as were facility policy and procedure.

Training is in place which provides all employees, volunteers, and contractual staff with pre-service and annual training requirements, as required.

Training documentation reviewed was current.

Armed and chemical training is conducted prior to assignment to posts and includes annual re-certification.

Facility staff interviewed appeared to be well trained and encouraged to continue training, education, and professional development.

(b)(6), (b)(7)(c) / September 29, 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"> The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a G-28 has been filed, the legal representative of record is notified by the Deportation Officer, as required. The notification is recorded in the detainee file and the A file.
2. Notification includes the reason for the transfer and the location of the new facility,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Facility policy mandates that: <ul style="list-style-type: none"> Times and transfer plans are never discussed with the detainee prior to transfer. The detainee is not notified of the transfer until immediately prior to departing the facility. The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility transfer policy alludes to, but does not specify, the requirements of this component. Specifically, there is no mention of the detainee not being permitted to make telephone calls or have contact with any detainees in general population.
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Detainee Transfer Notification Form is provided.
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"/>	The G-391, I-203, and I-216 forms are all used.
8. For medical transfers: <ul style="list-style-type: none"> The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. Medical transfers are coordinated through the local ICE/DRO office. A medical transfer summary is completed and accompanies the detainee. Detainee is issued a minimum of 7 days worth of prescription medications. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has no IHSC staff. Medical transfers would be coordinated by the facility HSA and ICE. A medical transfer summary is completed and accompanies the detainee. Seven days of medication is provided, as required.
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"/>	

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
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"/>	The only item the detainee maintains while at the facility are his funds which are returned and transferred with him to the new location.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Meals are not required as the transfer is directly across the street to the SPC Florence.
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"/>	The A-file accompanies the ICE detainee.
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.)

The notification, processing, and transfer of ICE detainees were reviewed. The facility and ICE transfer detainees consistent with standard's expectations.

The facility does not have a specific written policy mandating that time and transfer plans are not to be discussed with the detainee prior to transfer; that the detainee is not notified of the transfer until immediately prior to departure; and that the detainee is not permitted to make a telephone call or have direct contact with any detainee in general population.

Overall, the facility complies with the PBNDS regarding the Transfer of Detainees.

(b)(6), (b)(7)(c) / September 29, 2011

Reviewer's Signature / Date

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

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



U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Katrina S. Kane
Field Office Director
Phoenix Field Office
[Redacted]
(b)(6), (b)(7)(c)
FROM: [Redacted]
Assistant Director for Detention Management

SUBJECT: Central Arizona Detention Center Annual Review 2011

The annual review of the Central Arizona Detention Center conducted on September 27-29, 2011, in Florence, Arizona has been received. A final rating of **"Meets 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.
- 2) The next annual review will be scheduled on or before September 27, 2012.

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

[Redacted]
(b)(6), (b)(7)(c)

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

cc: Official File