

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



U.S. Immigration
and Customs
Enforcement

JAN 13 2012

MEMORANDUM FOR: John Tsoukaris
Field Office Director
New York Field Office
[Redacted]
(b)(6), (b)(7)c
Assistant Director for Detention Management

SUBJECT: Elizabeth Contract Detention Facility Annual Review 2011

The annual review of the Elizabeth Contract Detention Facility conducted on October 18-20, 2011, in Elizabeth, New Jersey has been received. A final rating of "**Meets Standard**" has been assigned and this review is now 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-324 Detention Facility Review Form, the G-324 Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before October 20, 2012.

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

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

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

cc: Official File

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
October 18-20, 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
August 17-19, 2010

Previous Rating Meets Standard
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
Elizabeth Contract Detention Facility
Address (Street and Name)
625 Evans Street
City, State and Zip Code
Elizabeth, NJ 07201
County
Union
Name and Title of Facility Administrator (Warden/OIC/Superintendent)
Charlotte Collins - Warden
Telephone # (Include Area Code)
908 659(6), (b)(7)c
Field Office / Sub-Office (List Office with oversight responsibilities)
Newark
Distance from Field Office
6 miles

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number
ODT-5-C-0010/P00020
Date of Contract or IGSA
July 2005
Basic Rates per Man-Day
120.00
Other Charges: (If None, Indicate N/A)
; Guard Services; ;
Estimated Man-days Per Year
90,000 - 100,000

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA/2010, NCCHC/2010, JCAHO/2009

☐ 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
January 1994
Date Last Remodeled or Upgraded
1996
Date New Construction / Bedspace Added
N/A
Future Construction Planned
☐ Yes ☒ No Date:
Current Bedspace 326 **Future Bedspace (# New Beds only)**
Number: Date:

J. Total Facility Population

Total Facility Intake for previous 12 months
4,076
Total ICE Mandays for Previous 12 months
101160

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male		54	
Adult Female		3	

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	326	326	326
Adult Female	0	0	0
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	241		
Adult Female	40		

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 ICE' 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.)	0	0	Physical	Physical
	With Weapon	0	0	0	0
	Without Weapon	0	0	1	1
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	Physical	Physical	Physical	0
	With Weapon	0	0	0	0
	Without Weapon	1	1	2	0
Number of Forced Moves, incl. Forced Cell moves ³	[Hatched Box]	0	1	0	0
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		0	0	0	0
Number of Times Special Reaction Team Deployed/Used		0	0	0	0
# Times Four/Five Point Restraints applied/used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	0	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	0	0	0	0
Number of Times Canines Used in Facility					
Offender / Detainee Medical Referrals as a result of injuries sustained.		0	0	0	0
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	1	4	4	0
	# Resolved in favor of Offender/Detainee	1	2	3	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	0	0	0	0
	Number	0	0	1	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)	Signature	<div>(b)(6), (b)(7)c</div>
(b)(6), (b)(7)c		
Title & Duty Location	Date	
LCI, MGT of America, Inc.	10-	

Team Members

Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)c CI-Security, MGT of America, Inc.	(b)(6), (b)(7)c CI-Food Service & Environmental Health and Safety, MGT of America, Inc.
Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)c CI-Medical Care, MGT of America, Inc.	
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 Elizabeth Contract Detention Facility does not use tasers.

ICE Detainee Death:

A 56 year old Hispanic male ICE detainee was admitted to this facility on September 6, 2011. The Intake medical screening showed that the detainee had a positive history of hypertension and high cholesterol and had been without medications for 3 weeks. The detainee was seen by the Physician Assistant on September 13, 2011 for a review of the lab tests.

On September 26, 2011, at about 0530, the detainee reported for his morning medication to the Health Services Unit. After receiving his medication, he returned back to the waiting room. At about 0535, the detainee was reported by the officer to be having seizures in the waiting room. The RN immediately responded to the waiting room and secured the detainee by laying him down on his left side. The detainee was observed to be holding his chest, unresponsive to verbal commands, eyes wide open, and slow steady breathing. He showed a positive radial pulse, positive intermittent snoring, drooling of saliva, positive diaphoresis, and pupils dilated. The EMS was activated and 911 was called. Ammonia salts were administered at about 0540 and a faint pulse was noted.

At 0545 the EMS arrived. No breathing was noted. The AED and CPR were started and continued. The ICE detainee was taken to the local hospital at 0613 and at 0633, the detainee was pronounced dead by the attending physician.

An autopsy was performed however the results are not yet available.

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

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

MANAGEMENT REVIEW

Review Authority

The signature below constitutes review of this report and acceptance by the Review Authority.

The Facility and FOD have [REDACTED] from receipt of this report to respond to all findings and recommendations.

HQDRO MANAGEMENT REVIEW: (Print Name)	Signature
Title	Date

Final Rating: ☐ Meets Standards
☐ Does Not Meet Standards

Comments:

MGT

OF AMERICA, INC.

601 13th Street, NW
Suite 650 North
Washington, DC 20005
202/824-0725 (T)
202/824-0728 (F)
www.MGTofAmerica.com

October 23, 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: Elizabeth Contract Detention Facility
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 Elizabeth Contract Detention Facility (ECDF) located in Elizabeth, New Jersey, during the period of October 18-20, 2011. This facility is a Contract Detention Facility (CDF) operated by the Corrections Corporation of America (CCA).

The annual inspection was performed under the guidance of Cynthia Williams, Lead Compliance Inspector (LCI). Team members were:

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

Type of Review

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

Review Summary

The facility is accredited by the American Correctional Association (ACA), the National Commission on Correctional Health Care (NCCHC) and The Joint Commission (TJC), formerly (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	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
At Risk	0
Not Applicable	1

2011 Inspection	
Meets Standard	40
Does Not Meet Standard	0
Repeat Finding	0
At Risk	0
Not Applicable	1

The PBNDS consists of both Mandatory and Non-Mandatory components. Shown below is a breakdown of the 2010 and 2011 inspections.

2010 Inspection PBNDS Review	Mandatory	Non- Mandatory
Meets Component	38	800
Does Not Meet Component	0	19
Non-Applicable	2	49
Total Components	40	849
Percentage of Compliance	100%	97.625%

2011 Inspection PBNDS Review	Mandatory	Non- Mandatory
Meets Component	38	797
Does Not Meet Component	0	18
Non-Applicable	2	34
Total Components	40	849
Percentage of Compliance	100%	95.5%

Outcome Measures

The analysis of the Outcome Measures provided by the facility is consistent with the overall mission and security level of the facility.

LCI Issues and Concerns

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

Recommended Rating and Justification

The LCI recommends that the facility receive a "Meets Standard" rating. The facility currently complies with 40 of 41 applicable ICE PBNDS; one standard (Escorted Trips for Non-Medical Emergencies) was not applicable.

The facility is in compliance with 100% of the Mandatory worksheet components and 95.5 of the Non-Mandatory worksheet 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 inspection team, the following were present:

Warden Charlotte Collins; Assistant Warden (b)(6), (b)(7)c Chief of Security (b)(6), (b)(7)c
(b)(6), (b)(7)c HSA; (b)(6), (b)(7)c Assistant HSA (b)(6), (b)(7)c Food Service Manager; (b)(6), (b)(7)c
Assistant Food Service Manager (b)(6), (b)(7)c Training Manager; (b)(6), (b)(7)c Business Manager
(b)(6), (b)(7)c Human Resource Manager; (b)(6), (b)(7)c Shift Supervisor; (b)(6), (b)(7)c
COTR; (b)(6), (b)(7)c ICEAFOD; and (b)(6), (b)(7)c ICE DSM.

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

October 23, 2011
Date

Signature: _____

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 <i>Elizabeth Contract Detention Facility (CCA)</i>
Address (Street and Name) <i>625 Evans Street</i>
City, State and Zip Code <i>Elizabeth, New Jersey 07201</i>
County <i>Union</i>
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) <div style="background-color: #cccccc; padding: 2px;">(b)(6), (b)(7)(C)</div> , <i>Warden</i>
Name and Title of Lead Compliance Inspector <div style="background-color: #cccccc; padding: 2px;">(b)(6), (b)(7)(C)</div> <i>Lead Compliance Inspector</i>
Date[s] of Review From <i>10/18/11</i> to <i>10/20/11</i>
Type of Review <input checked="" type="checkbox"/> <i>Headquarters</i> <input type="checkbox"/> <i>Operational</i> <input type="checkbox"/> <i>Special Assessment</i> <input type="checkbox"/> <i>Other</i>

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.

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- 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 8-1, Emergency Response, precludes detainees or detainee groups from exercising control 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"/>	Facility Policy 14-4, Legal Rights of Inmates-Residents, ensures detainees' protection from each of the bulleted issues in this component.
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"/>	Staff at this facility receives training regarding the importance of identifying and immediately reporting signs of detainee unrest. Initial employee orientation addresses the topic and is included in the recurring mandatory training curriculum.
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"/>	Regular and frequent communication occurs at all levels. Shift briefings, frequent senior staff visits, and post order files are used to disseminate information both up and down the chain of command.
5. There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Associate Warden has primary responsibility for development and implementation of emergency plans. An ad hoc committee of supervisory level security staff meets periodically for the purpose of reviewing, evaluating, and updating contingency plans.
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"/>	Emergency plans at this facility are maintained (b)(7)e (b)(7)e (b)(7)e There are assigned control numbers for each plan volume. The (b)(7)e (b)(7)e controls access and maintains accountability for assigned copies.

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
7. All staff receives training in the emergency plans during their orientation training as well as during their annual training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff orientation training includes an introduction to the facility's emergency plans. Mandatory annual training also includes a review of contingency plans.
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"/>	Emergency plans include both primary and alternate routes of egress.
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"/>	The facility's contingency plans address the issues of confidentiality and accountability. They also define guidelines for annual reviews and revisions.
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"/>	Plans include a comprehensive section that addresses general procedures that are applicable in most emergency situations. There is an addendum that defines procedures for handling special needs detainees. The facility was cited in the 2010 review, but the issue has been corrected.
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden has designated the Associate Warden to insure neighbors in close proximity to the facility are notified in the event of an escape or other event that could affect the surrounding area. Specific guidelines are included in the emergency recall portion of the facility's Emergency Plans. There is an addendum list that includes contact names and phone numbers of 17 surrounding businesses.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has in place cooperative Memoranda of Understanding contingency plans with the Woodbridge Armory for emergency housing, the Union County Office of Public Safety, and the Elizabeth, NJ Police Department.

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
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 checked="" type="checkbox"/>	<input type="checkbox"/>	There have been no recent mock drills. Mock drills are to be conducted annually with participating jurisdictions.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All assigned staff receives and formally acknowledges receipt for a copy of the facility's hostage policy during initial employment orientation.
15. (b)(7)e (b)(7)e Within 24 hours after release, hostages are screened for medical and psychological effects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The hostage policy and post orders specifically explain that (b)(7)e</p> <p>(b)(7)e</p> <p>(b)(7)e The policy also mandates an immediate medical and psychological review of released hostages.</p>
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a contract with a translation service that can be called upon in the event it is necessary during a hostage crisis or other emergency.
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's contingency plan includes direction 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Food Service Department maintains at least three days' of emergency rations.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's contingency plans include a schematic drawing of locations for utility controls.
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 facility's contingency plans include a restricted section regarding staff work stoppage situations. Access to that portion of the plan is limited to supervisory personnel with a 'need to know.'

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 emergency contingency plans address each of the bulleted elements in this mandatory component.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's post-emergency procedures define requirements for debriefings, discussions, and evaluations.

PART 1 – 1. EMERGENCY PLANS

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

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

During this review, the following policies were reviewed: Policy 8-1, Emergency Response; Policy 9-16, Emergency Response Team; Policy 8-2, Facility Safety Authority/Team Safety Program; Policy 9-14, SORT Operations; and Policy 14-4, Legal Rights of Inmates/Residents.

The facility's Warden, Associate Warden, and Chief of Security were interviewed.

Additionally, the following documents were reviewed: Special Needs Inmates/Detainee Procedures, Emergency Plan Appendix M, Employee Strike Plan, Emergency Notification Checklist and the Facility Hydrant, Standpipe, Water and Gas Shut-Off Information sheet. Memoranda of Understanding with the Elizabeth City Police Department, Union County Department of Public Safety, the Woodbridge Armory and the Elizabeth Contract Detention Facility Emergency Plans were also reviewed.

The facility policy indicates consideration for each of the elements contained in the mandatory component. The Associate Warden has primary staff responsibility for development, implementation, and periodic review/evaluation of emergency plans. The plans reflect involvement and participation by the corporate Medical and Food Service staff.

(b)(7)e	All
certified security personnel are trained, equipped and qualified to perform ERT procedures.	(b)(7)e
(b)(7)e	

The plans mandate medical staff availability and consultation during emergency situations. Food service staff will maintain no less than a three day ration for emergency situations. The facility has a trained negotiation team, and contracts with a translation service that can be called upon in an emergency. Access to the emergency plans is properly controlled.

(b)(6), (b)(7)(C)	October 20, 2011
Reviewer's Signature / Date	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (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 system this facility employs for the storing, issuing, and maintaining of hazardous materials was observed and was found to be well within the requirements of the ICE standard.
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"/>	This inspector observed the inventories maintained in all areas of the facility where flammable, toxic, and caustic substances were stored and were found to be current and accurate.
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"/>	This inspector found MSDSs readily available in all areas of the facility where hazardous materials were stored. These MSDSs were current, and there was a sheet for each product stored in that respective area.
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"/>	
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed that MSDSs were readily available to staff.
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"/>	This inspector found that all flammable and combustible materials were stored in appropriately marked cabinets and were used according to label instructions.
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"/>	

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
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"/>	This inspector found that all toxic and caustic materials were stored in their original containers and all storage areas were appropriately secure.
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"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector reviewed the MSDSs for products at this facility and found that there are no products containing methyl alcohol.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (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"/>	This facility is operated by Corrections Corporation of America (CCA), which reviews all updates from NFPA and OSHA and forwards applicable policy changes to the institution which implements the updated policy.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Maintenance Supervisor is assigned as the fire safety inspector. This inspector observed documentation verifying that the Maintenance Supervisor has successfully completed OSHA training as a fire safety specialist.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility fire plan was approved by City of Elizabeth, NJ Fire Department on August 22, 2011.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>17. The plan requires:</p> <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"/>	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">(b)(7)e</div> <p>Further, this inspector observed fire protection equipment strategically placed throughout the facility. This equipment included fire extinguishers, fire blankets, sprinklers, etc. This inspector also observed appropriate posting of emergency plans with floor plans, exit signs, directional arrows and an area-specific exit diagram conspicuously posted throughout the facility.</p>
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"/>	This facility does conduct quarterly fire drills per a master schedule put out by the Maintenance Supervisor.
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"/>	This inspector observed the barbershop which had the facilities and equipment necessary to meet and maintain appropriate sanitation requirements.
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the sanitation standards posted conspicuously in the barbershop.
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>24. Standard cleaning practices include:</p> <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"/>	This inspector observed spill kits strategically posted throughout the facility.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a contract with Stericycle, Inc. for the disposal of bio-hazardous waste.

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
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"/>	This inspector observed documentation in training records verifying this training.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a contract with Western Pest Control which inspects and/or treats for pests every two weeks. The most recent inspections were completed on October 3 and 17, 2011.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This inspector observed the log book which verified that the emergency power generators are tested weekly. Other emergency equipment is tested monthly and quarterly.
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"/>	This inspector observed the storage rooms which were well within the requirements of the ICE standard.
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"/>	This inspector reviewed facility policy 7.1, Environmental Health Program Guidelines.
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"/>	
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"/>	The Health Services Administrator (HSA) insures that the environmental health program is developed and operated to insure appropriate environmental health conditions.

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
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"/>
PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY			
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding			

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

This standard has three mandatory components all of which were found to be in compliance.

During the inspection, the Maintenance Supervisor and the Warehouse Supervisor were interviewed. This facility has a very structured system for the storing, issuance and maintaining of hazardous materials. Further, the Maintenance Supervisor has been certified by OSHA as a Fire Safety Officer. The facility fire plan has been approved by the local authority having jurisdiction which is the Elizabeth Fire Department. This inspector obtained a copy of the most recent inspection by the Elizabeth Fire Department, and it is attached to the working papers.

This inspector interviewed the barber who is on contract with the facility. The barbershop meets the requirements of the ICE standard.

This inspector interviewed the Maintenance Worker who produced the appropriate documentation verifying that tests of the emergency power generator are conducted (b)(7)e

This inspector interviewed the Health Services Administrator who verified that the facility has an appropriate environmental health program in place.

The policy and procedures of this facility meet or exceed the requirements of the ICE standard on Environmental Health and Safety.

(b)(6), (b)(7)(C) / October 20, 2011
 Reviewer's Signature / Date

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Driving records and New Jersey Driver Licenses for assigned transport officers are maintained in those individuals' employment records.
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"/>	Commercial Driver Licenses (CDL) are not required to operate vehicles used for detainee transport by this facility.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Safety Manager/ Maintenance Supervisor maintains a preventative maintenance and repair record for each assigned vehicle.
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"/>	The vehicles are maintained and inspected by the State of New Jersey. Inspection documents are kept on file in each vehicle record.
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"/>	Inspection and repair documentation is completed and filed in each vehicle record. Vehicles are not being returned to service until repairs have been accomplished and documented.
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"/>	Facility forms are used to insure proper inspection and reporting of deficiencies. Deficiencies are documented and corrected before a vehicle is returned to fleet service.
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"/>	The facility's Transport Officer Post Order defines compliance with the bulleted elements of this component. Transport commitments are normally limited to the immediate geographical area.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	This facility uses only limited capacity vans for detainee transports. CDLs are not required. (b)(7)e officers are always deployed for any transport assignment.
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's transport officer Post Order requires an inspection of vehicles before the start of each trip.
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Positive identification of detainees to be transported is confirmed in the Receiving Section immediately prior to boarding.
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"/>	Pat-down searches of all detainees are conducted by escort officers immediately prior to boarding.
12. The facility ensures that the number of detainees transported does not exceed the vehicle manufacturer's occupancy level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. (b)(7)e	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
14. The vehicle crew conducts a visual count once all passengers are on board and seated. <ul style="list-style-type: none"> Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The transport officers Post Orders require a visual headcount prior to departure from the facility and at all scheduled and unscheduled stops.
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"/>	The facility policy and transport officers Post Order address the use of restraining equipment on detainee transport vehicles.
16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> One officer remains in the vehicle at all times when detainees are present. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The transport officers Post Order defines compliance with the elements of this component.
17. Meals are provided during long distance transfers. <ul style="list-style-type: none"> The meals meet the minimum dietary standards, as identified by dietitians utilized by ICE. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy requires meals and snacks on trips that are expected to be six or more hours in duration.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>18. The vehicle crew inspects all Food Service meals before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.).</p> <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"/>	Meals are inspected by vehicle crews and discrepancies resolved prior to departure from the facility. There are no basins or latrines on board any of the facility's vehicles. Bottled or canned beverages are issued.
<p>19. Vehicles have:</p> <ul style="list-style-type: none"> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;">(b)(7)e</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicles are equipped with required communication equipment and have assigned equipment bags that are stored (b)(7)e and issued immediately prior to dispatch. At the time of this review, the facility did not have a vehicle equipped for transporting detainees with physical disabilities.
<p>20. The vehicles are clean and sanitary at all times.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-18, Transportation Procedures, and transport officers' Post Orders require that vehicles be clean and sanitary at all times. A physical inspection of an assigned vehicle indicated compliance with this component.
<p>21. Personal property of a detainee transferring to another facility:</p> <ul style="list-style-type: none"> Is inventoried. Is inspected. Accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal property is accounted for, inspected and moved with departing detainees.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. The following contingencies are included in the written procedures for vehicle crews: <ul style="list-style-type: none"> • 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"/>	The facility's Transport Officer Post Order and policy 9-18, Transportation Procedures, define guidelines for each of the bulleted items listed in this component.

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

This inspector reviewed facility policy 9-18, Transport Procedures, and the Post Orders for Transportation Officers. The Associate Warden, Safety Manager/Maintenance Supervisor, and Food Service Director were interviewed.

Vehicles are properly equipped, inspected and maintained. Vans are used for detainee movement; therefore, CDLs are not required. Each vehicle has an assigned equipment bag that is secured in (b)(7)e and issued at the time of dispatch. The Transport Officer's Post Order is a comprehensive document that addresses emergency contingencies and routine security procedures.

Detainee transport provided by this facility includes trips of sufficient distance and duration to require meals, snacks, and rest stops. Facility policy 9-18, Transport Procedures, defines allowable limitations on time for vehicle operation and required time between dispatches.

(b)(6), (b)(7)(C) / October 20, 2011
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Section II SECURITY

- 4 Admission and Release**
- 5 Classification System**
- 6 Contraband**
- 7 Facility Security and Control**
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- 14 Sexual Abuse and Assault Prevention and Intervention**
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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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Detainees view the "Know Your Rights" video in their housing unit. The video is available in both English and Spanish and is shown every morning at 9:45 a.m.</p> <p>Upon admission, each detainee receives a facility handbook which is available in English and Spanish. The only component of this standard that is not covered in the facility's handbook is religious programs. Detainees also receive a copy of the ICE National Detainee Handbook. ICE staff also provides the detainee with an opportunity to make one phone call.</p>
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"/>	The medical screenings are performed by the Booking staff that has been trained in the booking procedures and Crisis Intervention.
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"/>	ICE provides the criminal history and classification level to the facility prior to the detainee's arrival. Detainees are classified the same day of arrival. The detainee is then assigned to the Fox Dorm housing unit following the booking process.
4. All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are strip searched only when reasonable suspicion has been established. There have been no strip searches conducted during this past audit period.

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"/>	All personal property is stored in green bags. Money is confiscated, recorded, and then dropped in a safe. The Business Manager picks up the cash and deposits it in the bank. Detainees are given cash upon their release.
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"/>	There have been no missing property claims processed within the past 12 months.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hooded sweatshirts have been issued to all detainees.
9. All releases are coordinated with ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All releases are coordinated with ICE.
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"/>	
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"/>	Files are maintained in the facility's records office.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Typically, ICE staff enters all information to release as well as for removal or transfer of all detainee information into the EADM within four hours of action.
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"/>	The facility's detainee handbook is available in both English and Spanish. The Language Line Program is used if an interpreter is needed.

PART 2 – 4. ADMISSION AND RELEASE

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

Detainees view the "Right to Know" orientation video every morning and each detainee receives a copy of the facility handbook, which is available in English and Spanish. Detainees also receive a copy of the ICE National Detainee Handbook. Medical staff conducts a review of the initial screening following the booking process. ICE provides the most recent criminal history for each new arrival. The facility's religious programs are not covered in the detainee handbook. ICE staff provides the detainee the opportunity to make one phone call.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSAs use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Detainee Classification system is used. A primary assessment form is completed by ICE and is used to classify detainees.
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"/>	ICE staff classifies each new arrival. The facility booking staff assigns male detainees to the Fox Dorm first. Female detainees are assigned to J Dorm. The ICE SDDO reviews every classification decision.
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"/>	The ICE IEA conducts a NCIC check; and if there is a criminal record, it is verified. A classification form is completed and then forwarded to the facility booking staff along with the Form I-203 and medical screening form. Following the booking process, the detainee is seen by medical staff.
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A detainee's classification-level does not affect his or her recreation opportunities. Detainees recreate with persons of similar classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The average length of stay is 47 days. An initial assessment is completed on each detainee. If a detainee is involved in a disciplinary action, a reassessment is completed.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE SDDO is the designated supervisor who has the authority to reduce a classification level on appeal.

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
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appeals are resolved within five business days and notification to the detainee occurs within 10 business days.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee has the right to appeal the decision to the OIC.
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"/>	This component is covered in the facility's detainee handbook.
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"/>	This facility houses Level 1 and Level 2 detainees. Level 1 detainees wear a blue uniform and Level 2 detainees wear an orange uniform.

PART 2 – 5. CLASSIFICATION SYSTEM

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

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

The ICE IEA classifies each new arrival and the ICE SDDO conducts a subsequent review of the classification decision.

Detainees have an opportunity to appeal the initial classification decision. This CDF has 13 housing units plus a segregation unit.

ICE male detainees are housed in the Fox Dorm housing unit, and ICE female detainees are housed in housing unit J. To reflect the classification level, a blue uniform is worn by Level 1 detainees and an orange-colored uniform is worn by Level 2 detainees. The detainee handbook describes the classification levels with the conditions and restrictions applicable to each.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's policy 9-6, Contraband Control, provides procedures for handling seized contraband. Contraband material is to be properly inventoried, held, and reported to required authority.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-6, Contraband Control, mandates appropriate recording and retention of property that has been seized for use as evidence in subsequent disciplinary action or criminal prosecution.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	There is nothing in policy 9-6, Contraband Control, which addresses issues regarding return of seized personal property.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has procedures in place that require documented evidence for destruction of seized contraband.
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The contraband policy does not require consultation with a religious authority prior to confiscation of religious items. The Associate Warden advised that he is responsible for this function, but there has not been an issue during this review cycle.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's contraband policy defines procedures for documentation and destruction of illegal hard contraband. This issue was cited in the 2010 review and has been corrected.
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"/>	Samples of hard contraband are not retained for training or display. Hard contraband is remanded to the assigned ICE staff for disposition. Soft contraband is disposed of in accordance with the Standard.

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 facility's handbook defines the issues related to contraband, what constitutes contraband, the risks and liabilities of hard contraband, and how contraband is documented and handled. When contraband is seized, the suspect detainee is formally advised.
9. Facilities with Canine Units only use them for contraband detection.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's contract with ICE precludes the use of canine units for any purpose.
PART 2 – 6. CONTRABAND				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

Facility policies 9-6, Contraband Control, and 9-5, Searches of Inmates and Various Locations, were reviewed. The detainee handbook was also reviewed. The Associate Warden and Chief of Security were interviewed.

This facility's policies address the issues regarding identification, documentation, and control of contraband. When a detainee claims an item has religious significance, the Associate Warden determines the final disposition.

The detainee handbook provides incoming detainees with specific information regarding what constitutes contraband and the penalties for having it in their possession. The policy defines procedures and required documentation regarding the retention or destruction of hard contraband. Hard contraband is remanded to the ICE staff for disposition/prosecution.

(b)(6), (b)(7)(C) October 20, 2011
 Reviewer's Signature / Date

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility administrator or assistant administrator and department heads visit detainee living quarters and activity areas weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visits by the facility's senior staff are documented in each unit's log.
2. At least one male and one female staff are on duty where both males and females are housed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility houses adult male and female detainees. Shifts are staffed with male and female personnel.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has conducted a staff analysis to determine staffing needs. Staffing is reviewed annually. At the time of this review, the facility was undergoing a restructure of the staffing requirements. (b)(7)e (b)(7)e (b)(7)e The facility will begin accepting both Level I and Level II detainees.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff with adequate training and experience is identified to fill essential posts and positions. Personnel assigned in critical areas undergo on-the-job training before assuming those posts.
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control Center officers receive specialized training on the systems and work under the guidance of experienced personnel prior to being permanently assigned.
6. Policy restricts staff access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy restricts access to the Control Center to staff having a duty related admission.
7. Detainees do not have access to the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy states that detainees are not to be allowed access to the Control Center.
8. Communications are centralized in the Control Center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Control Center is staffed around the clock. All (b)(7)e
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Up to date records of all assigned staff are maintained at the Front Desk.

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
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recall telephone number files are maintained (b)(7)e Employees are advised during initial training that it is their responsibility to ensure changes in home telephone numbers are immediately reported.
12. (b)(7)e	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders at this facility require (b)(7)e (b)(7)e A review of the Control Center log confirmed compliance.
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"/>	All routine events, emergency situations, and unusual incidents are recorded in permanent post logs and shift reports.
14. The front-entrance officer checks the ID of everyone entering or exiting the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The front entrance officer's post orders require an ID check of everyone entering and exiting the facility. This review team was formally identified and searched prior to each entry into the facility.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors' arrival and departure are recorded in a visitor logbook maintained at the front entrance.
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's visitor pass system has serial numbered ID cards that are color coded to reflect a visitors' status. Members of this review team were each issued a serial numbered visitor pass.
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicular traffic is monitored by CCTV in the Control Center.
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"/>	The facility's gate officer Post Order requires a log of incoming and departing vehicles at both the Central Control and at the warehouse loading dock. All of the bulleted information in this component is reflected in post log.

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
19. Officers thoroughly search each vehicle entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers posted in the vehicle sally port are required by the post order to conduct a thorough search of both entering and departing vehicles.
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"/>	Access into the secure area of the facility requires entry through sally port gates operated from the Control Center.
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"/>	This facility's secure perimeter is designed to ensure adequate control of public access and detainee security.
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-7, Security Inspections, defines guidelines for searches of detainee housing units and personal areas.
24. Housing area searches occur at irregular times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The post orders for the housing units and shift supervisors require searches at irregular times.
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers are posted in areas that facilitate personal contact and interaction between security staff and the detainee population.
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders are in place for every security post in the facility.
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Internal detainee movement, either individual or groups, is done with a security escort.
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"/>	Security posts in the living areas are located to ensure optimum staff observation.
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All searches conducted in this facility are documented in the housing unit logs.
30. The SMU entrance has a sally port.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a sally port entrance to the SMU.
31. All tools entering SMU will be inspected and inventoried by the SMU officer prior to entering the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU post orders and policy 9-8, Control of Tools and Equipment, require an inspection and inventory of tools entering the housing unit.

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
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"/>	This facility's policy 9-7, Security Inspections, addresses each bulleted element of this component.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post orders require (b)(7)e (b)(7)e (b)(7)e Results are documented in the unit log.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records of security inspections are maintained by the Chief of Security.
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recurring issues and failure to take corrective action by responsible staff are reported through supervisory staff and referred to the appropriate section. When necessary, the senior staff is advised by way of supervisors' logs and commentary.
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"/>	Facility policy 9-8, Control of Tools and Equipment, and security post orders require an inspection and inventory of tools prior to being taken into and out of the secure area.
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"/>	Facility policy 9-5, Searches of Inmates and Various Locations, requires documented irregular searches of storage and supply rooms, walls, light and plumbing fixtures, utility accesses and drains.
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift supervisors' post orders require a documented inspection of walls, exterior windows, fences, and exits during 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"/>	Alarm systems and physical checks of the facility's perimeter are documented in the Central Control logbook. This facility does not have perimeter fencing.

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
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee visitation areas are searched frequently and the searches are documented in the Central Control logbook.
41. An officer is assigned responsibility for ensuring the security inspection process covers all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is responsible for ensuring the inspection process covers all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is no perimeter fencing used.
FACILITY SECURITY AND CONTROL				

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

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

During this review, the Associate Warden, Chief of Security and Maintenance Supervisor were interviewed. The following policies were reviewed: 9-7, Security Inspections; 9-6, Contraband Control; 9-5, Searches of Inmates and Various Locations; and 9-8, Control of Tools and Equipment.

This facility has a comprehensive series of policies, procedures, and post orders that ensure guidelines for an effective security program. (b)(7)e Searches in the facility are documented and conducted at irregular times by both line and supervisory staff.

Access into the secure areas is controlled from Central Control. Tools and vehicles are thoroughly searched and/or inventoried both at the time of entry and departure from the facility. The front gate officers' post order requires a positive ID and record of all personnel as they arrive and depart. Serial-numbered and color coded badges were issued to members of this review team. The housing units are designed to ensure adequate observation and oversight by assigned security staff.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the process for inventorying and storing detainee funds and valuables.
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Staff search and itemize the baggage and personal property of arriving detainees, including funds and valuables, using a personal property inventory form that meets the ICE standard, in the presence of the detainee unless otherwise instructed by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. (b)(7)e officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)e officers verify funds and valuables.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Policy requires that (b)(7)e staff be present during processing of funds only when the detainee is in possession of \$25.00 or more. During this inspection, facility policy was changed to require (b)(7)e officers be present during the processing of all detainee 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"/>	
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The staff gives the detainee the original inventory form.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees who arrive with medication are escorted to the Health Care Unit when processing is complete.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any property discrepancies are immediately reported up the chain of command to the Chief of Security.
10. Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-6, Inmate/Resident Property, stipulates the procedures to be followed when returning property to detainees.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector reviewed the facility policy, which is in accordance with the ICE standard.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility attempts to contact the detainee by using the contact information provided by the detainee during the intake process. If that fails, the property is forwarded to ICE.
13. Staff obtains a forwarding address from each detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. It is standard procedure for (b)(7)(e) officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Facility policy states that (b)(7)(e) officers must be present when removing funds from a detainee only if the detainee has more than \$25.00 in his/her possession. During this inspection, facility policy was changed to require (b)(7)(e) staff be present when removing/documenting all funds from a detainee's possession.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed that the G-589 forms were maintained in numerical order.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the completion of the G-589 form during Intake process.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receiving officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recording of the G-589 is done electronically.
18. Staff tags large valuables with both a G-589 and an I-77.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does tag large valuables with both a G-589 and an I-77.
19. The supervisor verifies the accuracy of every G-589.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The supervisor does verify the accuracy of every G-589.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee funds are placed in a secure safe. Staff ensures that all envelopes are sealed and placed in the safe. Large property items are stored in a secure, locked area.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Every piece of baggage and/or facility container was observed to be tagged with an I-77 form which was completed properly.
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the tamper proof strap secured to all containers.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All this information is maintained electronically.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does not have an SIEA participating in weekly audits.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quarterly audits of baggage and non-valuable property are conducted by the facility Business Administrator.
26. The facility positively identifies every detainee being released or transferred.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility, in conjunction with ICE personnel, ensures that every detainee entering or leaving the facility is positively identified.
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy does require that any lost/damaged property claims are to be reported immediately up the chain of command. These reports are properly investigated.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Although this has not happened to date, the policy of this facility does require that every lost/damaged property report is documented and the original is placed in the detainee's A-file with a copy placed in the detainee's detention file.

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.)*

This inspector interviewed the Assistant Warden, the Chief of Security and the officer who works in the Intake section. The policy and procedures of this facility meet requirements of the ICE standard regarding Funds and Personal Property.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's hold rooms are adjacent to the Receiving Section which is inside the secure perimeter of the facility.
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 hold rooms are clean and in good repair. They are well ventilated, adequately lighted, and all activation switches are located outside of the rooms.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Seating in the hold rooms is adequate for their design capacity.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no bunks, cots, or other make-shift sleeping apparatuses observed during a physical review of the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is constructed to comply with modern jail construction standards. The hold rooms have reinforced masonry walls and ceilings that are 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"/>	The hold rooms are intended for short term detention.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Male and female detainees are held in separate areas of the Receiving Section.
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"/>	Incoming detainees are provided an initial issue of personal hygiene supplies.
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's hold rooms are equipped with toilets and sinks.
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"/>	Facility policy 9-5, Searches of Inmates and Various Locations, mandates a pat-search for weapons or other contraband prior to detainees being placed in a hold room.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Post orders in the Receiving Section require an inspection of hold cells when detainees have been removed. Observation of the general cleanliness and an inspection for tampering also occurs.
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 facility's Evacuation Plan and Receiving Section post order, specifically designate the officer present in the Receiving Section responsible for evacuation of detainees from the hold rooms in the event of a fire and/or building evacuation, or other emergency.
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"/>	When a detainee medical emergency occurs in the Receiving Section, the on-duty medical staff is immediately notified and appropriate emergency service is called.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms were inspected during this review. The square footage is compatible with the posted occupancy of each room. There are two single-occupancy hold rooms for males and three designated for females.
15. <u>In SPCs designed after 1998</u> the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms are all equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They conform to all of the bulleted elements in this component.
16. <u>In SPCs designed after 1998</u> the hold rooms have floor drain(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility was activated in 1994. The latrine area of the 23 detainee capacity hold room floor is equipped with a floor drain. The single occupancy hold rooms do not have floor drains.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold room doors in this facility swing outward and comply with modern jail construction codes and 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility holds older detainees under observation in the common area of the Receiving Section near the officers' post.
19. Minors (under 18) are confined apart from adults, except for immediate relatives or guardians.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees under the age of 18 are not admitted to this facility.
20. Each detention facility maintains a detention log (manually or by computer) for each detainee placed in a hold cell. <ul style="list-style-type: none"> The log includes the required information specified in the standard. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility maintains a log for each detainee during the time they're held in a hold room. The information recorded complies with the PBNDS.
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"/>	This facility's Receiving Section procedure complies with the relevant issue in this component. Meals served in the holding area are documented on a local form. No minor detainees are admitted.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are immediately evaluated upon their arrival. Those with disabilities are housed in a manner that will insure their safety and security.
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The maximum capacity for the hold rooms is conspicuously posted at the room entrances.
24. Before placing a detainee in a room, an officer shall observe each individual to screen for obvious mental or physical problems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Receiving Section staff has undergone training to ensure detainees with mental, emotional, or physical problems are identified.
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility is "tobacco free." There is no smoking allowed by detainees or staff.

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
26. Officers closely supervise hold rooms through direct supervision, to ensure: <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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The hold rooms are in immediate auditory and/or visual supervision of the Receiving Section. Visual checks are conducted and recorded at 15-minute intervals. Detainees demonstrating signs of hostility, depression, or similar behavior are under direct on-site observation.

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.)*

During this review, the Associate Warden and an intake officer were interviewed. The facility's intake officer post order was reviewed. The following documents were also reviewed: Hold Room Log, Record of Persons and Property Transferred, Holding Room Confinement Record as well as the Holding Room Fire and Building Evacuation Plan.

The hold rooms in this facility are within the secure perimeter and within sight and sound observation of the Receiving Section. Cell checks in the hold rooms are documented at 15-minute intervals. There are six hold rooms that meet the minimum square footage requirements. Security staff assigned to the area has undergone training to identify incoming detainees who require special handling.

The correctional officer assigned in the Receiving Section is specifically assigned responsibility for evacuation of the holding cells in the event of an emergency. This constitutes compliance with the mandatory component of the standard.

In the event of medical emergencies, Receiving Section staff immediately notifies the Medical Section, which is in close proximity to the hold cell area.

Upon arrival, detainees are immediately separated by age, gender, security risk, mental and physical condition and any other factor that would require special handling.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager/Maintenance Supervisor is assigned responsibility for lock and key maintenance. He and an assigned maintenance technician have completed an approved locksmith training program.
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 facility's key and lock policy defines the responsibilities assigned to the Safety Manager/Maintenance Supervisor.
3. The security officer, or equivalent, provides training to all employees in key and lock control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager/Maintenance Supervisor provides orientation training for new employees in key and lock control and conducts the required annual recertification training.
4. The security officer, or equivalent, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager/Maintenance Supervisor is responsible for key and lock control. He maintains monthly inventories of all keys 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 Safety Manager/Maintenance Supervisor has responsibility for the facility's key and lock maintenance program. Documentation of work performed is maintained in that office.
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's key and lock control policy defines contingencies and procedures in the event of 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"/>	Facility policy 9-3, Key Control, includes procedures that ensure safe combination integrity. (b)(7)e
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrically operated doors with dead bolts controlled and operated from Central Control are used in living units and other critical areas of the facility.

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
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	During this review, there were no unauthorized locks observed in detainee accessible areas.
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not use a grand master keying system.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Safety Manager/Maintenance Supervisor is responsible for disposition of worn or discarded keys and locking equipment.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no padlocks observed on cell doors.
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"/>	The doors to detainee living areas comply with both OSHA and NFPA standards.
14. The operational keyring sufficient to accommodate all the facility key rings including keys in use is located in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The operational keyring is sufficient to accommodate all of the facility's key rings, including those issued and in use.
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"/>	An inspection of the key rings noted that the rings are serial-numbered, and the number of assigned keys is cited on ring tags. The rings are secured to ensure that keys cannot be removed without proper authority.
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the emergency keys in the Central Control key box revealed keys available for all areas of the facility. (b)(7)e (b)(7)e
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a manual key accountability system that provides accountability for all assigned keys.
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authorization for issue of restricted keys requires specific approval of th (b)(7)e (b)(7)e (b)(7)e when emergency circumstances dictate.

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
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 Both are under staff observation by security personnel in Central Control and are not in areas where detainee or public access is allowed.
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 facility's key accountability system requires a physical count of keys during each shift which ensures accurate 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"/>	Facility policy 9-3, Key Control, ensures that all staff are trained and held responsible for adhering to key control procedures. The policy addresses each of the bulleted elements in this component.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's assigned Safety Manager/Maintenance Supervisor has responsibility for insuring that locks and locking devices are continually inspected, maintained, and inventoried on an approved preventative maintenance schedule. Documentation was produced that supports compliance with the component.
23. Each facility has the position of Security Officer. If not, a staff member appointed the collateral duties of security officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Safety Manager/Maintenance Supervisor is responsible for key and lock accountability and maintenance.
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's Safety Manager/Maintenance Supervisor is the only employee authorized to add or remove keys from the secured rings.
25. The splitting of key rings into separate rings is not authorized.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's key and lock control policy precludes splitting key rings or otherwise tampering with secured rings.
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.)*

During the course of this review, this inspector reviewed facility policy 9-3, Key Control, and interviewed the Safety Manager/Maintenance Supervisor, a maintenance technician and a correctional officer assigned in Central Control.

The key and lock systems installed in this facility comply with current OSHA and jail construction requirements. The training staff and Safety Manager/Maintenance Supervisor are responsible for ensuring new-hire personnel are trained in key and lock control procedures.

The facility's Key Control policy requires a documented physical inventory of assigned keys during each security shift. Key rings observed on the operational keyboard are adequately secured and identified with tags indicating inventory serial numbers and the number of assigned keys.

(b)(7)e

n areas where visitors and detainees are not permitted.

They are under CCTV observation by security staff in Central Control.

The locking equipment on doors where detainee access is available has dead bolt features and is electrically operated by security staff in Central Control.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

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"/>	This facility's population is counted two times during each shift. Formal counts are conducted at 0815, 1300, 1615, 2000, 0015, 0300, and 0600.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-13, Count Principles and Procedures, and post orders require strict control of detainee movement during count procedures.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's headcount system is maintained in Central Control. Physical counts are reported and out-counts are accounted for by the Shift Supervisors. Counts are reconciled and recorded seven times per day.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Headcounts are not conducted simultaneously in all of the living and work assignment areas. A team of two officers traverse the living and work areas to conduct the counts.
5. Officers do not allow detainee participation in the count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's population count policy precludes detainee participation in headcount procedures.
6. A face-to-photo count follows each unsuccessful recount.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a headcount fails to reconcile, an immediate face-to-photo recount is conducted.
7. Officers positively identify each detainee before counting him/her as present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Officers conducting counts are trained to ensure positive identification of each detainee before counting them present.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's policy 9-13, Count Principles and Procedures, addresses situations requiring informal and emergency counts.
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An assigned officer in Central Control is responsible for maintaining the facility's "out count" record of 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"/>	Security officers are provided documented population count training during initial employment orientation. Count procedures are included in the mandatory annual training schedule. All staff training is documented in each employee's training record.

PART 2 – 11. POPULATION COUNTS

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

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

During this review, facility policy 9-13, Count Principles and Procedures, was reviewed. The on duty Shift Supervisor and a correctional officer in Central Control were interviewed. The internal headcount documents were also reviewed. The 1300 hour formal count on October 18, 2011 was observed by this review team.

The headcount is maintained and reconciled in Central Control. The policy and living unit post orders mandate strict control of detainee movement during count procedures. Formal counts are conducted seven times each day. The policy requires periodic informal counts and mandates emergency counts when circumstances dictate.

Detainees are not permitted participation in head counting procedures. Population counts are conducted by a (b)(7)e team that traverses the living and work areas.

Count procedures are included in new hire security employee orientation and are a recurring subject in mandatory annual training. Individual officers' records document successful completion of population count training.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

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"/>	Post Orders are maintained on each fixed post.
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders are organized in the required 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 include updated information as well as the latest inserts and revisions.
4. One individual or department is responsible for keeping all Post Orders current with revisions that take place between reviews.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security has responsibility for keeping post orders current with revisions that take place between required annual reviews.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-10, Post Order Management, requires annual review and revisions, as necessary.
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Revisions and changes to post orders require the formal approval and endorsement of the Warden.
7. The facility administrator has signed and dated the last page of every section.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden has signed and dated the header at the top of the first page of each post order.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's post order policy requires that a current Post Orders Manual be maintained in the Associate Warden's Office, the facility's electronic information system, the Shift Supervisor's office, Training Section and the Quality Control Program office.
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has adequate measures in place to ensure that Post Orders, living unit logs, and other sensitive documents are secure and protected from detainee access.
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"/>	This facility's living unit posts and others in close proximity to the detainee population are adequately secured.
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"/>	When assuming a post, officers are required to endorse a log in the Post Order folder that acknowledges receipt and understanding of the Order.

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
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
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"/>	
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"/>	<div style="text-align: center;">(b)(7)e</div> <div style="text-align: center;">(b)(7)e</div> The Control Center operators' orders and the facility's emergency plans define compliance with the bulleted elements of this component.
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
16. The Post Orders for housing units track the daily event schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Orders for housing units include requirements for tracking the daily event schedule.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit Post Orders in this facility include instructions on maintaining the unit's detainee activity logs.

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 inspector reviewed facility policy 9-10, Post Order Management; Form 1-1A,;Policy/Post Order PCN Review/Revision; and a selection of post orders including the general population housing units, Transportation Officers, SMUs, Central Control, Shift Supervisors, and intake officers.

Post Orders undergo a documented annual review and are revised, as needed. The Chief of Security is responsible for review and ensuring current updates are properly posted in Post Orders Manuals. Post orders are organized in a standard six-part format and in such a way that information is easily found. The facility's policy requires that post orders are made readily available to the staff by the Associate Warden.

(b)(7)e Post orders for housing unit posts are adequately secured and protected from detainee access.

(b)(6), (b)(7)(C) October 20, 2011
Reviewer's Signature / Date

PART 2 – 13. SEARCHES OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-5, Searches of Inmates, Residents, and Various Locations, addresses this requirement.
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"/>	This component is covered in policy 9-5.
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"/>	Policy 9-5, Searches of Inmates, Residents and Various Locations, addresses.
4. Written policy and procedures require staff to leave a searched housing area, work area and detainee property in its original order, to the extent practicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirements of this component are covered in policy 9-5.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Body cavity searches are conducted by designated health personnel only when authorized by the facility administrator (or acting administrator) on the basis of reasonable belief or suspicion that contraband may be concealed in or on the detainee's person.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no body cavity searches to date. Policy addresses the requirements of this component.
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"/>	Procedures are in place which address this requirement. There have been no examples to date.
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"/>	Facility policy addresses this component.
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is included in policy. There have been no canines used to date.

PART 2 – 13. SEARCHES OF DETAINEES

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

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

Facility policy 9-5, Searches of Inmates, Residents and Various Locations, is comprehensive and complies with the requirements of the PBNDS regarding Searches of Detainees.

(b)(6), (b)(7)(C)

/ October 20, 2011

Reviewer's Signature / Date

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure 3-17, Harassment/Sexual Harassment, and 14-2, Sexual Abuse Prevention and Response, address this program.
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written policy and procedure were approved by the ICE office and this facility's Warden.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were five reported case of alleged sexual abuse in this facility during the last 12 months prior to this review. One of the five reported cases was substantiated. Incident reports are maintained for tracking statistics as required in this facility's policy.
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"/>	This facility staff is trained on sexual abuse and assault prevention and intervention during their new employee orientation programs, annual refresher course and quarterly training programs. This was confirmed by the Warden, Associate Warden and the medical staff interviewed.
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"/>	During intake screening, newly admitted detainees are provided the Preventing Sexual Abuse and Misconduct brochure. Detainees are also provided the DIHS National Detainee Handbook to inform them of this program. Quarterly meetings are also conducted to inform detainees about this program.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In all common areas accessible and visible to all detainees in the housing units, several sexual assault awareness notices are posted in English and Spanish languages.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Preventing Sexual Abuse and Misconduct brochure was reviewed. A copy of this handout is provided to each detainee during intake screening.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Detainees are screened upon arrival for “high risk” sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon arrival, all detainees are screened for sexual assaultive and sexual victimization potential by responding to the questions on the IHSC Intake Screening Form (IHSC Form 795-A) prior to a housing assignment. Any positive response are referred to the social worker immediately and to the psychiatrist as deemed necessary.
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"/>	There were five detainee to detainee sexual abuse or assault incidents documented in the past year.
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"/>	A system is in place to document sexual abuse/assault by staff on a detainee. However, there was no reported alleged abusive sexual contact by staff on a detainee documented in the last 12 months.
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"/>	
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"/>	An interview with the Associate Warden showed that investigative staff conducted a thorough investigation, gathered and maintained information and evidence regarding the reported cases.
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 alleged sexual abuse was reported immediately to the ICE office and to appropriate law enforcement staff, as appropriate.
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"/>	Facility policy 14-2, Sexual Abuse Prevention and Response, requires that the alleged victim is immediately escorted to the Health Services Unit. Medical staff is responsible for medical stabilization and assessment of the detainee until s/he can be transported to an outside medical provider for collection of evidence and any necessary medical treatment.

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
15. All records associated with claims of sexual abuse or assault is maintained, and such incidents are specifically logged and tracked by a designated staff coordinator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's Associate Warden maintains incidents reports of alleged sexual abuse or assault incidents. These reports are filed electronically. Hard copies are filed in locked, secured drawers in the Associate Warden's office.

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.)*

The facility has a Sexual Abuse and Assault Prevention and Intervention Program. All facility staff is trained on sexual abuse or assault prevention and intervention during new employee orientation as well as in annual refresher and quarterly in-service programs.

The standard rating is based on a review of established policies and procedures, review of records, observations, and interviews with staff.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Written policy and procedures are in place for special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10-100, Organization and Administration of Segregation Areas, is a comprehensive policy regarding the operation of the Special Management Unit (SMU).
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Detainees are placed in a protective custody status in the Administrative Segregation SMU on the recommendation of the Shift Supervisor. Policy 10-100 does not mandate documentation to indicate protective custody is warranted.
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 15-2, Disciplinary Procedures-Adult, requires a hearing before the facility's Disciplinary Panel prior to a detainee being placed on Disciplinary Segregation status. This is to occur only when a detainee has been found guilty of a violation defined in the handbook.
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"/>	Facility policy 10-100, Organization and Administration of Segregation Areas, mandates notification of the health care staff for medical review when a detainee is admitted to the SMU. At the time of this review, there were no detainees assigned to Disciplinary Segregation status.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10-100, policy 9-6, Contraband Control, and the SMU Post Order provide for the control of entrances, contraband, tools, and food carts entering the SMU.
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's SMU cells are designed for single occupancy. At the time of this review, there was no double occupancy rooms observed. The SMU was non-operational during this review.
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"/>	This facility was constructed in 1982. The SMU cells are well ventilated, lighted, heated, and are in a sanitary condition.

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
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The SMU housing log maintains a permanent record of all pertinent information on detainees. Visits by facility staff, medical personnel, volunteers, food service carts, etc. are recorded in the SMU log.
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"/>	This facility maintains a permanent log that records all activities concerning detainees.
10. In SPCs and CDFs, a separate log is maintained in the SMU that all persons visiting the unit must sign and record: <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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's SMU maintains a separate logbook that requires a sign-in by all persons visiting the unit. The time and date are recorded and any observed unusual individual detainee behavior is documented, forwarded to the Associate Warden, and noted in the detainee's file.
11. A Special Management Housing Unit Record is maintained on each detainee in an SMU: <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. In SPCs and CDFs: <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"/>	The SMU policy requires an individual activity record for each detainee. The facility uses an internal form for this purpose. The form is designed to comply with the DF requirements bulleted in 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
12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee is released from SMU, the facility's policy requires that the entire individual file be forwarded to the unit supervisor for inclusion in the detention file.
13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10-100, Organization and Administration of Segregation Areas, and the SMU post order define the personal items that detainees may retain while on either status of segregation.
14. There are written policy and procedures concerning privileges detainees may have in each type of segregation. (In Administrative Segregation, detainees generally receive the same general privileges as detainees in the general population, as is consistent with available resources and safety and security considerations.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy provides guidelines regarding allowable privileges for detainees in each category of segregation. With the exception of volunteer work assignments, detainees in Administrative Segregation have essentially the same privileges as the general population.
15. Detainees in Administrative Segregation are provided opportunities to spend time outside their cells (over and above the required recreation periods), for such activities as socializing, watching TV, and playing board games and may be assigned to work details (for example, as orderlies in the SMU).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in Administrative Segregation are allowed opportunities for 'out-of-cell' time for general activity in the common area of the SMU.
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"/>	Facility policy 10-100 requires documented individual observation of detainees at intervals not to exceed 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"/>	The Shift Supervisors' post order requires a documented SMU security round during their tour of duty.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When the SMU is occupied, a designated senior staff member conducts a documented tour each duty day.

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
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 10-100 requires a documented daily visit by a health care provider. A review of the unit's earlier log entries reflected compliance with the component.
20. Detainees in SMUs are provided three nutritionally adequate meals per day, ordinarily from the general population menu.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees on segregation status are served the same menu as the general population.
21. Detainees in SMUs may shave and shower three times weekly and receive other basic services (laundry, hair care, barbering, clothing, bedding, linen) on the same basis as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility allows SMU detainees to shave and shower daily. Access to other basic services listed in the component is available on the same basis as the general population.
22. Only for documented medical or mental health reasons are detainees denied such items as clothing, mattress, bedding, linens, or a pillow. If a detainee is so disturbed that he or she is likely to destroy clothing or bedding or create a disturbance risking harm to self or others, the medical department is notified immediately and a regimen of treatment and control instituted by the medical officer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any situation that would necessitate the temporary denial of bedding and/or clothing first requires consultation and oversight as a regimen of treatment instituted by medical authority.
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"/>	Access to mail service for detainees in the SMU is the same as for the general population.
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unless individual behavior creates a security concern, detainees in Administrative Segregation retain essentially the same visiting privileges as the general population. Detainees on Disciplinary Segregation are not permitted routine visitation.
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"/>	During the past year, there was no documentation of incidents where visitation was restricted or disallowed.

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
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"/>	There were no documented incidents in the past year where visitation was restricted or denied to a detainee in Administrative Segregation status.
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"/>	Detainees do not participate in general visitation while in restraints.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	This facility does not have a non-contact visitation area.
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility is not staffed or equipped to manage visitation for violent or disruptive detainees. In those situations, detainees are reclassified and transferred to another facility.
30. Ordinarily, detainees in SMUs are not denied legal visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. There are policy and procedures for a situation where special security precautions for legal visitation have to be implemented and for advising legal service providers and assistants prior to their visits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When circumstances dictate special security precautions, legal service providers would be advised of those circumstances prior to visiting their client. There have been no instances of this nature in the recollection of current staff.
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"/>	Under circumstances that do not present a risk to safety, security, or orderly operations, detainees may receive pastoral visits.
33. Detainees in SMUs have access to reading materials, including religious materials. In SPCs and CDFs, the Recreation Specialist offers each detainee soft-bound, non-legal books on a rotating basis, provided no detainee has more than two books (excluding religious material) at any one time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU have access to reading material. There is no stated limitation on allowable material for detainees on a non-disciplinary status.

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
34. Detainees in SMUs have access to legal materials, in accordance with the Detention Standard on Law Libraries and Legal Material. Detainees are permitted to retain a reasonable amount of personal legal material in the SMU, provided it does not create a safety, security and/or sanitation hazard. Detainee requests for access to legal material in their personal property are accommodated as soon as possible and always within 24 hours of a detainee's request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SMU detainees have regularly scheduled access to the LexisNexis system. A reasonable amount of personal legal material is allowed and requests for access to legal material in stored personal property would be accommodated within 24 hours.
35. Detainees in Administrative Segregation or Disciplinary Segregation have the same law library access as the general population, unless compelling and documented security concerns require limitations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unless behavior or other documented security concerns require limitations, detainees on either status of segregation will have the same access to law library material as the general population.
36. Policy and procedures provide for legal material to be brought to individuals in Disciplinary Segregation under certain circumstances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Legal Rights of Detainees policy provides for legal materials being brought to detainees in SMU status when circumstances dictate.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-4, Legal Rights of Inmates-Residents, provides for access to legal material. There was nothing found in the facility's policies that contemplated denial of access to the law library. There have been no instances of denial of access during this review cycle.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the SMU are allowed access to recreation separately from the general population.
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"/>	The facility would insure that detainees with separation requirements are not allowed in activities in the same place at the same time.
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SMU detainees are offered at least one hour of recreation every day. There are provisions to mitigate for inclement weather and to provide weather appropriate equipment and attire.

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>41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security.</p> <p>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.</p> <p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Warden advised that there have been no instances where recreation privileges were denied or suspended during this review cycle.
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Warden stated that no denial of recreation privileges has occurred during this review cycle.
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Warden stated there have been no instances of denial during this review cycle.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU.</p> <p>Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees on Administrative Segregation have the same telephone access as those in the general population. Those in Disciplinary Segregation are limited to, "verifiable legal needs or family emergencies as determined by the Warden or Chief of Security."

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>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>In exigent circumstances, the facility's policy will allow a detainee to be placed in the SMU prior to a segregation order being prepared. In those cases, the order is to be served as soon as possible.</p> <p>If a detainee has been placed in protective custody (PC), the order is to state whether the detainee requested separation, and whether s/he has requested a hearing.</p> <p>Segregation orders remain on file in the SMU until the detainee is released from segregation status. At that time, orders are forwarded for review by the Chief of Security and the Warden. Orders are then included in the detainee's detention file. An order is not required for detainees awaiting removal, release, or transfer within 24 hours.</p>
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility policy 10-100, Organization and Administration of Segregation Areas, provides for each of the review requirements defined in this component.</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
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided with a copy of each review. Appeal rights are defined in the detainee handbook and are explained at the time of their hearing.
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	After seven consecutive days in Administrative Segregation, detainees may appeal their status to the Warden. Appeals may be prepared using any standard form of written communication.
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. A similar review is done every 30 days thereafter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy provides for a status review by the Warden after a detainee has been in administrative segregation for 30 days. The Warden formally reviews the issues and prepares a written record of the decision and the justification. Similar reviews are to be conducted at 30-day intervals for the remainder of the detainee's time in SMU.
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"/>	This facility provides administrative space for ICE operations. Communication regarding detainees' status with ICE staff is a matter of daily routine. There is, however, nothing found in the facility's policies that require formal notification by the Warden to the ICE FOD.
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"/>	Facility policy 15-100, Detainee Discipline, provides compliance with this component. During this review cycle, there have been no instances of a detainee being held in Administrative Segregation for 60 days.

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
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"/>	Detainees are placed on SMU disciplinary segregation status only following adjudication by the Facility Disciplinary Committee. Facility Policy 15-100, Detainee Discipline, allows a maximum of 60 days in disciplinary segregation for a single incident.
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"/>	Written orders for disciplinary segregation are completed and served on the detainee within 24 hours. Relevant documentation and detailed reasons for disciplinary segregation are compiled and forwarded to the Chief of Security and included in the detainees' detention files.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The reviews and early release provisions contained in this component are defined in facility policy 15-100, Detainee Discipline.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

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

Facility policy 10-100, Organization and Administrative of Segregation Areas; policy 14-4, Legal Rights of Inmates-Residents; and policy 15-100, Detainee Discipline, were reviewed. The Associate Warden and Chief of Security were interviewed. The following documents were reviewed: Form 10-100A, Segregation Confinement Record; Form 1-100B, Segregation Confinement Review; Form 10-100C and Detainee Administrative Segregation Hearing Report, Form 10-100D, Segregation, Detention, and Protective Custody Review.

Policy 10-100, Organization and Administration of Segregation Areas, is a comprehensive document that includes language taken from the ICE standard. In compliance with the mandatory component, the policy requires immediate notification to the medical staff when a detainee is admitted to the SMU.

The routine status reviews and rights to appeal are included in policy 15-2, Disciplinary Procedures. Appeal rights are also defined in the detainee handbook.

Housing logs provide a permanent record of SMU events and activities. There is a separate sign-in log to record staff and other visits to the SMU.

Detainees in Administrative Segregation have basically the same privileges and program opportunities as the general population. Detainees on Disciplinary Segregation status have limited access to visitation. Legal visits are not restricted or limited. Meals are served from the same menu and access to legal resources is the same as the general population. SMU detainees are not permitted to participate in general visitation while in restrains.

(b)(6), (b)(7)(C) October 20, 2011
Reviewer's Signature / Date

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Announced visits occur every Wednesday by a deportation officer. Unannounced visits are conducted by the ICE DOs, IEAs, SDDOs and the AFOD.
2. Detention Staff and Deportation Staff conduct scheduled weekly visits with detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Scheduled visits are posted in ICE/DRO detainee housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A posting of scheduled visits was observed on the bulletin board of each 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"/>	Facility Liaison Visit checklists completed by ICE staff were reviewed.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. A secure box is located in an accessible location for detainee's to place their Detainee Request Forms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A secure box is located in each housing unit for submission of detainee request forms. This box can only be accessed by ICE staff.
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"/>	The ICE IEA's are the only staff who can retrieve the contents of this secure box.
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"/>	Detainee request forms were reviewed and responses given were documented within 72 hours.
10. ICE/DRO detainees are notified in writing upon admission to the facility of their right to correspond with ICE/DRO staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is covered in the facility handbook.
11. OIG Hotline Informational Posters are mounted in all appropriate common areas (recreation, dining, etc.) and, in SPCs and CDFs, in all housing areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Posters are mounted in the housing units and recreation area.
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daily telephone serviceability checks are conducted and documented in the housing unit log book.

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.)*

Announced and unannounced visits by ICE staff occur and are documented. A box is located in the housing unit for detainee request forms and is secure. This box can only be accessed by ICE personnel.

OIG hotline informational posters were mounted in the housing areas and in all appropriate common areas such as the dining room, and recreation areas. Daily telephone serviceability checks are being conducted by both facility staff and ICE staff.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (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 Safety Manager/Maintenance Supervisor is responsible for development and implementing a tool control procedure and an inspection system that ensures 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The warehouse is located inside the secure perimeter. A review of facility policy 9-8, Control of Tools and Equipment, and tool control practices in the warehouse reflect compliance with this component.
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 inventories, issue and accountability procedures for the use of tools, keys, medical and culinary equipment ensure control of facility property. A review of the facility's policy, inventories, sign out logs and a physical inspection of tool storage boxes, bins, cages, and lockers reflect compliance.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility uses a brass chit system for tool issue. When tools are checked out, serial numbered metal chits are visibly displayed on shadow boards.
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"/>	This facility has tool and equipment inventories for the Maintenance, Medical, and Food Service sections. There is no Electronics Shop and recreation equipment is not maintained on a tool inventory. An onsite review of the Maintenance, Medical, and Food Service Departments reflects compliance.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventory sheets are conspicuously posted on or in all tool boards, boxes and kits.

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
<p>7. The facility has a policy for the regular inventory of all tools.</p> <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"/>	<p>Facility policy 9-8, Control of Tools and Equipment, defines requirements for minimum time lines for physical inventory and necessary documentation of all tools. This facility (b)(7)e</p> <p>(b)(7)e</p>
<p>8. The facility has a tool classification system. Tools are classified according to:</p> <ul style="list-style-type: none"> Restricted (dangerous/hazardous) Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>This facility's policy and tool control procedures provide a tool classification system that classifies tool as Restricted and Non Restricted or Class A and Class B categories.</p>
<p>9. Department heads are responsible for implementing proper tool control procedures as described in the standard.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Department heads are responsible for implementing tool control procedures as described in the standard.</p>
<p>10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility's tool control policy requires tools to be permanently marked and made readily identifiable for ease of accountability. A physical check of tools and equipment in the Maintenance and Food Service sections indicated compliance.</p>
<p>11. The facility has an approved tool storage system.</p> <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"/>	<p>A system is in place that ensures all stored tools are accounted for at all times. Tools are stored in secured storage bins, cages, and boxes or on secured shadow boards that silhouette the shape of the tools. Shadow boards are painted white. Restricted tools are shadowed in red and non restricted tools are shadowed in black.</p>
<p>12. Tools removed from service have their shadows removed from shadow boards.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Department heads are accountable for tool control in their areas and are responsible for ensuring shadow boards are updated and kept current with assigned tool inventories.</p>

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heavier and larger tools not adaptable to a shadow board are secured and accounted for in locked drawers, cages, or cabinets.
14. Sterile packs are stored under lock and key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical sterile packs are kept secure.
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-8, Control of Tools and Equipment, includes procedures for issuance of tools to both staff and detainees.
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"/>	The portion of policy 9-8, Control of Tools and Equipment, which addresses lost tools, includes procedures that address each bulleted item in 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"/>	Facility policy 9-8, Control of Tools and Equipment, addresses disposition of broken and worn out tools. Section heads are responsible for ensuring unserviceable tools are properly removed from inventory and safely disposed of off-site.
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"/>	Facility policy 9-8, Control of Tools and Equipment, includes guidelines regarding the introduction of tools and equipment. Tool inventories are reviewed and verified prior to entry and at the point of departure.
19. Hoses longer than three feet in length are classified as a restricted tool.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the facility's tool classification system indicates that hoses longer than three feet are handled as restricted tools.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were no scissors observed in the Receiving Section. (b)(7)e (b)(7)e

PART 2-17. TOOL CONTROL

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

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

The review of facility policy 9-8, Control of Tools and Equipment, occurred as did interviews with the Associate Warden, Safety Manager/Maintenance Supervisor, a Control Room Officer, (b)(7)(e) maintenance Technicians and the Food Service Manager.

The internal inventory control documents in the Maintenance, Food Service and Medical Sections were reviewed. The facility complies with both of the mandatory components of the standard. A designated staff member is responsible for development and implementation of a tool control system and internal system that ensures control of tools, keys, and medical and culinary equipment.

Inventories of tools are conspicuously posted or secured in approved storage containers. The tool classification system adequately defines procedures for handling restricted and non-restricted tools and equipment. Shadow boards and locked cabinets/bins meet the requirements of the PBNDS. The facility's policy defines procedures for handling lost tools and proper disposal procedures for broken and worn out tools. Procedures for safe introduction and removal of tools by facility staff and contract personnel are defined in the Control of Tools and Equipment policy.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, provides compliance.
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"/>	Policy 9-1, Use of Force and Restraints, provides authorization for staff to respond in immediate situations with an appropriate level of force without a supervisor's presence or direction.
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"/>	When circumstances allow and a detainee is posing no immediate threat to himself or others, staff are trained to use non-confrontational methods of control.
4. Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, asserts specifically that the calculated use of force is feasible in most cases.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. <ul style="list-style-type: none"> Ranking detention official, health professional, and others confer before every calculated use of force. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, defines a prescribed Confrontation Avoidance Procedure. The policy requires a consult among senior facility staff, health care staff and others, when appropriate, prior to any calculated Use of Force.
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. <ul style="list-style-type: none"> Under staff supervision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a calculated Use of Force is necessary to move or restrain a detainee, the facility uses the Use of Force Team Technique. When a team is deployed, a senior member of the security staff is required to be present to observe and direct the operation.
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"/>	Members of the security staff are trained in the performance of the Use of Force Team Technique.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of Force incidents are all documented and reviewed by the Shift Supervisor.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, mandates documentation of all Use of Force incidents. This includes a mandatory medical examination at the conclusion of an incident. In cases of the calculated Use of Force, the incident is to be audio-visually recorded in its entirety. Breaks in the recording are to be explained for the record on the video.
10. Staff: <ul style="list-style-type: none"> 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"/>	The facility's Use of Force policy includes language that specifically addresses each bulleted element of this component.
11. Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, mandates Medical Authority approval if medication is to be considered necessary for restraint purposes.
12. (MANDATORY) Use-of-Force Teams follow written procedures that attempt to prevent injury and exposure to communicable disease(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1.5, Procedures, A.4, Use of Force and Restraints, and policy 9-14, SORT Operations, define measures that comply with this component. Teams are equipped and trained to prevent injury and exposure to communicable disease(s).

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
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"/>	(b)(7)e
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"/>	Checks by security and medical staff are documented.
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"/>	Facility policy 9-1, Use of Force and Restraints, requires a medical screen following any Use of Force incident.
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"/>	Facility policy 9-1, Use of Force and Restraints, mandates a medical consult prior to use of non-lethal weapons. Medical staff is required to review a detainee's file before authorizing the use of non-lethal equipment.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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. <ul style="list-style-type: none"> Medical personnel are consulted 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-1, Use of Force and Restraints, provides for precautions in handling pregnant detainees. It was noted that female detainees determined to be pregnant are immediately transferred from this facility.
21. Protective gear is worn when restraining detainees with open cuts or wounds.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Staff documents every use of force, including what type of restraints was used during the incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Use of Force and Restraints, mandates documentation of any Use of Force incident. Reports are to include the type of restraints used during the incident.
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"/>	Any Use of Force incident and non-routine application of restraining equipment requires documentation with a Use of Force Incident Report.
24. All officers receive training in self-defense, confrontation-avoidance techniques and the use of force to control detainees. <ul style="list-style-type: none"> 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"/>	All security staff receives documented training in self-defense, confrontation-avoidance techniques, and Use of Force techniques. Training for the use of specialized restraint equipment is documented in individuals' training records.
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"/>	(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"/>	The terms of the facility's contract with ICE precludes the use of canine units for any purpose,
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)e
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. This facility uses a CCA form for documenting Use of Force incidents.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

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

During this review, facility policy 9-1, Use of Force and Restraints; policy 9-14, SORT Operations; and policy 9-110, Chemical Agents and Security Equipment Control, were reviewed. The Associate Warden and Chief of Security were interviewed.

Facility policy 9-1, Use of Force and Restraints, complies with the mandatory component. The policy mandates a medical consult and review of detainees' medical record prior to the calculated Use of Force. A documented medical screen is required immediately following any Use of Force incident.

The policy specifically asserts that in most circumstances a calculated Use of Force is feasible and preferred. The policy provides guidelines regarding the deployment of Use of Force Teams that complies with the mandatory component regarding use of measures prevent injury and exposure to communicable disease(s).

The facility's Use of Force and Restraints training

(b)(7)e

(b)(7)e

The facility's contract with ICE precludes admission of juvenile detainees and does not permit the introduction of canine units for any purpose. The Use of Force policy provides a precautionary statement regarding restraint of pregnant detainees. (b)(7)e

(b)(7)e

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

Performance-Based National Detention Standards

Section III ORDER

19 Disciplinary System

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 15-100, Detainee Discipline, and the detainee handbook define progressive levels of reviews and appeals.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 15-100 specifically states that disciplinary sanctions shall not "degrade or humiliate."
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 15-100, Detainee Discipline, addresses each of the bulleted elements of this component.
4. The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's rules of conduct, allowable sanctions, and procedures for violations are defined in the detainee handbook. The facility shows the "Know Your Rights" video daily in the housing units.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	At the time of this review, the required material had not been posted. English and Spanish editions of the ICE National Detainee Handbook are secured by wire attached to the living area bulletins. They include a section that defines "Rights and Responsibilities." A loose-leaf binder is also attached to the bulletin that includes a laminated English version of the facility's prohibited acts, disciplinary severity scale and sanctions. There was no Spanish translation on any of the several bulletins checked. These issues were corrected during the review.

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
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The security staff is encouraged to use informal resolution for minor rule violations and prohibited acts.
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 15-100, Detainee Discipline, requires that Incident Report documents be completed and submitted to the designated supervisor prior to the end of shift.
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"/>	Facility policy 15-100, Detainee Discipline, requires investigations to commence within 24 hours of an incident. Hearings are not to be convened prior to completion of an investigation.
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The supervisory staff has the authority to resolve minor infractions and impose informal sanctions.
10. A disciplinary panel (or equivalent in IGSA's) 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"/>	Facility policy 15-100 addresses each of the elements bulleted in this component.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 15-100, Detainee Discipline, and the detainee handbook provide for the availability of staff assistance for detainees facing a disciplinary hearing.
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"/>	Policy 15-100 defines procedures when a hearing is postponed or continued. The policy also requires documented reasons for such delays.

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
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"/>	Facility policy 15-100 states that a detainee may only be held in disciplinary segregation for a period not to exceed 60 days for a single rules violation.
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"/>	
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"/>	Facility policy 15-100 defines requirements for disposition and retention of relevant forms and documents.

PART 3 – 19. DISCIPLINARY SYSTEM

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

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

During this review, the Associate Warden and Chief of Security were interviewed. Facility policy 15-100, Detainee Discipline, and the detainee handbook were reviewed. Policy 15-100 states that sanctions for rules violations will not be "administered in a way that will degrade or humiliate".

Allowable sanctions are administered at progressive levels, depending on the severity of the infraction. A section of the policy provides guidelines regarding postponement or continuances. Policy and the handbook provide for staff assistance and representation when detainees are facing a hearing. The security staff is trained and encouraged to utilize on-the-spot correction for minor rules violations.

At the time of this review, the facility had not posted material regarding detainee's rights and responsibilities, prohibited acts, disciplinary severity scale, and sanctions in the living areas. At the time of this review, English and Spanish versions of the ICE National Detainee Handbook were affixed to the living units' bulletins. This addressed the rights and responsibilities expected of detainees. The remaining material was printed on laminated stock and attached to unit bulletins in loose-leaf binders; however, there was no Spanish version available. Facility staff corrected these concerns during the review, as observed by inspection team.

(b)(6), (b)(7)(C) October 20, 2011
 Reviewer's Signature / Date

Performance-Based National Detention Standards

Section IV CARE

20 Food Service

21 Hunger Strikes

22 Medical Care

23 Personal Hygiene

24 Suicide Prevention and Intervention

25 Terminal Illness, Advance Directives, and Death

PART 4 – 20. FOOD SERVICE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The food service program is under the direct supervision of a professionally trained and certified Food Service Administrator (FSA). The Responsibilities of cooks and cook foremen are in writing. The FSA determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The person who supervises the food service program is the Food Service Manager (FSM). The certification documentation which verified that this staff member had been appropriately trained was observed. Further, the FSM determines the responsibilities of all staff assigned to the food service area and ensures that these responsibilities are promulgated in writing.
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"/>	When the FSM is off, the Assistant FSM is on duty.
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"/>	This inspector observed documentation verifying appropriate training in detainee-related issues, including a review of the ICE standard on Food Service.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the room where knives were stored and found it to be secured with an approved locking device. Only (b)(7)e on duty has the key. All knives and other tools were stored and inventoried in accordance with the standard on Tool Control.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All knives are secured physically to the work station with steel cable and padlock. Detainees are not authorized to use knives at this facility. The condition of knives and dining utensils is monitored by staff.
6. Special procedures (when necessary) govern the handling of food items that pose a security threat.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed documentation of daily shakedowns of detainee work areas.
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"/>	Uniformed security personnel conduct all counts.

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"/>	Detainees working in the food service areas are cleared for those assignments by the medical department. This inspector observed that all workers in the kitchen wore protective clothing including, hair nets, gloves, aprons, and shoe protection.
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"/>	This inspector observed detainee job descriptions which had been reviewed within the past year.
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 FSM trains detainee workers on the rules and procedures and documents this training.
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"/>	This inspector observed documentation of training which covered safe work practices, safety features of individual products and pieces of equipment, and the handling of hazardous materials.
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSAs are subject to local and State rules and regulations regarding detainee pay.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are paid \$1.00 per day, which is in accordance with the provisions of the ICE standard on Voluntary Work Program.
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"/>	Meal times at this facility are 6:45 a.m., 11:30 a.m., and 4:45 p.m. This inspector observed the current master menu which verified at least two hot meals every day.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility uses a "satellite" feeding operation.
17. The facility has a standard 35-day menu cycle. IGSAs use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A 35-day menu cycle is utilized.

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
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"/>	This inspector observed the 35-day master-cycle menu for this facility which was accompanied by a complete nutritional analysis completed by a registered dietitian. This inspector also noted that any changes in the master menu were submitted to the dietitian to be re-certified.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> 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 FSM or the Assistant FSM have the authority to change menu items if necessary, insuring that each change is documented and forwarded to the FSM for filing.
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"/>	This inspector observed the Common Fare menu available to detainees, which meets the requirements of the PBNDS regarding Food Service.
23. Detainees whose religious beliefs require the adherence to particular religious dietary laws are referred to the Chaplain or FSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not have a Chaplain. However, detainees who request special consideration for religious diets are referred to the FSM who, in turn, consults appropriate religious authorities in the community for advice regarding religious diets.

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
24. A supervisor at the command level must approve a detainee's removal from the Common Fare Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. The Facility Administrator, in conjunction with the chaplain and/or local religious leaders provides the FSA a schedule of the ceremonial meals for the following calendar year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector reviewed a copy of the schedule for ceremonial meals which is provided to the FSM.
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"/>	Medical diets are coordinated through the facility medical unit.
28. Satellite-feeding programs follow guidelines for proper sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served. See Detention Standard on Food Service for guidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 11-1, Food Service, prohibits the use of food to punish or reward detainees.
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"/>	This inspector observed the documentation of training of detainee volunteers in personal hygiene and sanitation.
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"/>	This inspector observed documentation which verified weekly inspections of all food service areas, including storage areas, equipment, and food preparation areas. There are no dining areas since this facility utilizes satellite feeding program.
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"/>	This inspector observed the documentation which verified that temperatures of all dishwashing machines have been checked after each meal.
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"/>	This inspector observed the documentation which verified that temperatures of all refrigerators/freezers have been checked in accordance with the requirements of the standard on Food Service.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the cleaning schedules posted throughout the kitchen area.
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 facility is a CDF which utilizes a satellite feeding program and does not have a dining room.
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 is a CDF and 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"/>	An air curtain is used on the outside freezer.
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"/>	
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility has no dining rooms as it uses satellite feeding program.
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"/>	This inspector observed documentation of the most recent sanitary inspection by the City of Elizabeth, NJ, Division of Health. This documentation reveals the food service area received the highest rating of "Satisfactory" on that report.
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"/>	This inspector observed documentation which reveals that an outside exterminator (Western Pest Control) conducts an inspection and provides treatment, if needed, every two weeks. The most recent inspection was conducted on October 17, 2011.
FOOD SERVICE				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

This standard has eight mandatory components, all of which were in compliance with the ICE standard on Food Service.

This inspector interviewed the Food Service Manager, the Assistant Food Service Manager, and one of the Food Service Workers. The facility policy governing is 11-1, Food Service.

This inspector observed the food service area to be maintained appropriately in a sanitary manner. All staff and detainees working in the kitchen were dressed appropriately.

This inspector obtained a copy of the most recent public health inspection conducted by the City of Elizabeth Division of Health on June 13, 2011. The facility received the highest rating of "Satisfactory" on that inspection.

The policy and procedures of this facility meet or exceed all requirements of the PBNDS regarding Food Service.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee has refused food or observed to have not eaten for 72 hours, it is standard practice for staff to refer him or her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 8.35, Responsible Health Authority, requires that any detainee who refuses food for 72 consecutive hours is deemed to be on a hunger strike. The medical clinic is alerted when the detainee has not eaten in 72 hours. The detainee is brought to the Health Services Unit observation room until outside consultation is deemed necessary.
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"/>	This facility policy requires the Clinical Director or designee to complete a Medical/Psyche Alert Form to notify the OIC, ICE Office on-site, and IHSC Headquarters of detainee on hunger strike. This incident notification procedure is confirmed by the HSA and the ICE Officer on-site interviewed.
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"/>	This facility's policy provides procedures to respond immediately to a detainee who has refused food for 72 hours and referral procedures to medical staff for evaluation.
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"/>	This facility policy requires that a detainee who is on hunger strike be placed in isolation in the Health Services Unit observation room in order to monitor food intake and fluids. The HSA and Warden interviewed confirmed this procedure.
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"/>	The medical staff authorizes the placement of a detainee in the SMU or in the observation room in the Health Services Unit as soon as the detainee refuses food for 72 hours.
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"/>	This facility policy requires that medical staff will take and record vital signs including weight, skin turgor, and mucous membrane examination as well as assess complaints of weakness or dizziness at least daily while the detainee is on a hunger strike.

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
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility requires that an informed consent be documented on a Medical Consent Form (IHSC Form 793) with the detainee's signature and staff witness signature prior to provision of medical care. The medical staff obtains this medical informed consent form during s detainee's intake screening.
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"/>	Every detainee who rejects medical treatment or evaluation is required to sign a Refusal Form (IHSC Form 820) with a staff witness signature required. If the detainee refuses to sign this form, the refusal must be witnessed by two staff members who sign in the witness signature block.
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"/>	Facility policy requires that food service will provide three meals per day for the detainee unless otherwise directed by the Clinical Director, regardless of detainee's response to verbally offered meal. Staff is required to physically deliver each meal.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that an adequate supply of drinking water be provided and that other beverages are offered to the detainee during a hunger strike. The observation room utilized for hunger strike detainee has continuous water supply.
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"/>	Facility policy requires that staff remove all food items not authorized by the medical provider. The detainee may not purchase commissary/vending machine food items while on a hunger strike.
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"/>	Facility policy requires all food and water/liquids intake be recorded on the Hunger Strike Monitoring Form (DIHS 839). This completed form is filed in the detainee medical record.

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
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy on hunger strikes provides detailed procedures for medical staff to treat detainees on hunger strike or refusing to eat and/or drink for a period of 72 hours.
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"/>	Facility policy requires that before medical treatment is administered against the detainee's will, staff must make every reasonable effort to convince the detainee to accept treatment voluntarily. Staff documents their efforts in the detainee's electronic medical record.
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"/>	Facility detention and medical staff received training in recognizing signs of a hunger strike and referral procedures during orientation and annual and periodic in-service training programs. The staff training records and lesson plan power point training program on hunger strike complies with the training requirements of this standard.

PART 4 – 21. HUNGER STRIKES

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

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

The facility has established policies and procedures to identify, refer, manage, and treat detainees on a hunger strike. All staff receive training on hunger strikes during new employee orientation, annual and periodic in-service refresher training programs. There were no detainees on a hunger strike during this review.

(b)(6), (b)(7)(C) / October 20, 2011
Reviewer's Signature / Date

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's Health Services Unit is operated by the ICE Health Service Corps (IHSC) which is staffed by Public Health Personnel and contract staff. This facility is currently accredited by The Joint Commission (TJC), the National Commission on Correctional Health Care (NCCHC), and the American Correctional Association (ACA). The Health Services Unit operates under the Federal and State Guidelines and Regulations of New Jersey Department of Health. This facility's medical practitioners' medical licenses reviewed were verified and current.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 8.14, Medical Intake Screening, requires that a medical provider perform all medical intake screenings on all detainees entering this facility. The Intake Screening form (IHSC Form 795-A) is utilized. This inspector reviewed 10 electronic medical records. All contained completed Intake Health Screening forms by the nursing staff upon admission.

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
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"/>	Facility policies 8.5, Staffing Levels; 1.5, Medical Autonomy; 1.5.1, Organization Structure; 1.6, Responsible Health Authority; and 1.4, Policy and Procedure Development, Revisions and Format, provide a staffing plan and scope of services. This plan is reviewed annually by the ICE Health Service Corps, the HSA, and the Clinical Director. Medical staffing includes the following full time staff: HSA, Assistant HSA, (b)(7)e Physicians Assistants (PAs), (b)(7)e Registered Nurses (RNs), (b)(7)e Licensed Practical Nurses (LPNs), Administrative Assistant/Medical Record Technician, Pharmacist, Clinical Social Worker and the following part-time staff: a psychiatrist who provides services once a week; and (b)(7)eNs who provide service on an as needed basis. There has been an IHSC Acting Clinical Director since January 2011, who provides services on site once a quarter. There is a staffing plan developed which identifies employing (b)(7)e RNs by November 2011. A Clinical Director is to be employed as soon as the Senate signs the new Public Health employee orders to report to this facility. Dental services are obtained in the community, as needed. This facility has staff coverage, 24 hours a day, seven days a week.
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"/>	All detainees are provided information on how to access medical care during the intake processing and through the handbook available in English and Spanish. When needed, the contract Telephone International Languages Translation Line is available, according to the Warden who was interviewed.

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
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"/>	This facility has 24 hour medical staff coverage. The Health Services Unit is mainly staffed by RNs and LPNs during non-office hours. A Physician Assistant, the Acting Clinical Director, and a Psychiatrist are on call at all times.
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"/>	This facility's Health Services Unit is staffed by Public Health Service Personnel and contract civilian medical staff. Prior to job assignment, a tuberculosis test is required. Staff are offered the hepatitis B vaccine series during their employment in this facility according to the HAS.
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"/>	Health Services Unit personnel are licensed and certified medical practitioners. Their duties and job descriptions are in compliance with the state and federal requirements complying with the IHSC national standards. Licenses and certification reviewed were verified and current.
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"/>	During the admission process, each detainee is provided a copy of the detainee handbook with information on how to access health care services. The detainee handbook is available in English and Spanish. The contract Telephone International Translator Line is available in the event another language interpretation is needed.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility is currently accredited with NCCHC and TJC. The certificates and licenses of the medical practitioners are current, were verified and comply with the above standards.

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
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"/>	A trained detention officer initiates the In-Processing Health Screening (DIHS-794 form) by asking general medical questionnaires and by observing all newly arriving detainees. The nursing staff performs a detailed medical, mental, and dental health screening within 12 hours of arrival.
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"/>	This facility has staff who can speak different languages (i.e. Spanish, Tagalog, and Creole). If communication is difficult during medical screening, assistance via the Telephone International Languages Translation Line is obtained.
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"/>	This facility's Health Services Department has a nurses' station, three exam rooms, treatment room, pharmacy room, holding/waiting room, negative pressure room, biohazard waste room, conference room, three administrative offices and an empty room being converted to another administrative office. Each detainee is afforded privacy when receiving health care. A well equipped x-ray room is located in the intake processing area.
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"/>	This facility's Health Services Unit is a restricted access area within the confines of the secure perimeter.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's Health Services Unit has a holding/waiting room for detainees.
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"/>	This facility's Health Services Unit holding/waiting room is controlled and supervised visually by a detention officer assigned to the Health Services Unit.
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"/>	The holding/waiting room has a drinking fountain, but no toilet facilities. Detainees may request access from the officer to the toilet located in front of the nurses' station.

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>17. Medical records are kept apart from other files. They are:</p> <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"/>	Facility policy 14.2, Confidentiality and Security, requires that the medical records office be locked at all times when the medical records technician or a medical staff member is not present. Health information and the health records are maintained separately from other detention files. The health records and health information is accessible to authorized healthcare personnel. Limited access to non-medical staff is provided on a "need to know basis." All medical records are maintained electronically. Hard copies are shredded immediately after scanning into the electronic file.
<p>18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	During the intake screening, the ICE Health Service Corps Medical Consent Form is signed and completed by the detainee prior to the provision of medical care. The consent forms are scanned into the electronic file. Ten electronic medical records were reviewed by this inspector. All ten detainee medical records reviewed showed signed and dated ICE Health Service Corps Medical Consent Form.
<p>19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility utilizes the ICE HSC Authorization for Release of Confidential Health Information (IHSC Form 003) and Medical Consent Form (IHSC Form 793) to authorize release of confidential medical records to outside sources. It requires dated detainee's signature and is witnessed by staff.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the onsite ICE Officer and the HSA revealed that the ICE officer provides advance notice to the medical staff regarding transfers and releases. This ensures the transfer medical summary reports, copies of medical records, and needed medications are available for transfer with the detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Transfer of Health Records, requires a medical summary form (I-792) be attached to the medical records and transferred with the detainee.
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"/>	The completed health information/ medical summary form is to be transported in a sealed envelope marked "Confidential Medical Information." This was confirmed by the Medical Records Technician.
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A chest x-ray is the primary screening method for TB and is performed on all detainees arriving at this facility. PPD testing is not a part of the medical intake screening for TB. Ten detainees' electronic medical records were reviewed and showed that all the detainees had chest x-rays performed during the admission process.
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"/>	Upon admission, the nursing staff performs a mental health screening using the IHSC Form 795-A. These intake screening forms are completed prior to a housing assignment. Detainees' electronic medical records reviewed showed the mental health screening was completed on each detainee.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	Facility policy 8.0, Continuity of Care, requires that the transfer summary and previous medical records be reviewed by qualified health care staff regarding all transfers prior to a housing assignment. Accommodations regarding all detainees' medical needs as well as continuity of care are required.
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"/>	The RNs and the PAs conduct the detainees' physical examinations. This inspector reviewed 10 electronic medical records. All showed physical examinations completed within 14 days of admission.
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"/>	Facility policy 8.13, Sick Call, requires that all detainees may access health care through sick call request forms available to all detainees, including those detainees housed in administrative segregation units. Detainees in the segregation unit may also access health care services via the nursing staff who conducts rounds on the SMU on every shift. This procedure was confirmed by the Assistant Warden and the HAS.
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"/>	Facility policy 8.13, Sick Call, requires sick call forms are available upon request from the unit officer. The Sick Call Request Form is available in Spanish, Portuguese, Arabic, French, Chinese, and Albanian languages. The completed sick call forms are collected, triaged daily by the nursing staff, and referred to the physician assistant, as deemed necessary.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	The facility Health Services Unit provides 24 hours a day, seven days a week health care services. The Physician Assistant and the Clinical Director are on call at all times. Facility policy 8.73, Urgent Care, provides written plans for the delivery of 24 hour health care.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's Health Services Unit 24 hour coverage is mainly staffed by RNs and LPNs. The PA, the acting Clinical Director, and the contract Psychiatrist are on call at all times.
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 emergency on call plan reviewed included a list of names and telephone numbers of medical staff, medical services providers. The hospital emergency and ambulance numbers are posted in the Health Services Unit.
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"/>	Facility policy 8.73, Urgent Care, requires that if emergency or routine transport of a detainee is necessary, the facility's Tour Commander will be notified. The Commander will determine the mode of transportation and to facilitate safe and security transport procedures.
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 facility staff, including the medical staff, is certified in First Aid, CPR, and AED annually and bi-annually. CPR training records reviewed were current and updated. Everywhere in the facility can be accessed in less than one minute.
34. Where staff is used to distribute medication, a health care provider properly trains these officers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The nursing staff or the pharmacist distributes medications, as required in the policy titled "Pharmacy/Dispensing of Medication." This facility neither trains nor utilizes detention officers to distribute medications. This was confirmed by the HSA and pharmacist.

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
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"/>	Facility policy, Pharmacy, requires pharmaceuticals to be stored in locked, secured medication room in accordance with the U.S.P. Standards and in accordance with the detainee's needs for safety and security.
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"/>	Facility policy, Pharmacy, provides detailed procedures which address each bulleted sub-component in the management of pharmaceuticals.
37. All pharmaceuticals are stored in a secure area with the following features: <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"/>	The pharmacy room was observed to be in a secured area in the Health Services Unit with solid walls from floor to ceiling, a solid ceiling with light fixtures, and a solid entrance door. The entrance door is secured with a high security lock. The pill line window is plexi-glass, covered with pull-away metal blinds. Access and control of medications by appropriate medical staff are required in the facility policy, Pharmacy.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>38. In SPCs and CDFs, the pharmacy has a locking pass-through window.</p> <ul style="list-style-type: none"> 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 pharmacy room has a pass through window used to administer and manage medication distribution according to the physician orders. Medication administration is conducted by the pharmacist or by the nursing staff. A detention officer provides direct supervision. Medications are dispensed by a licensed pharmacist and supervised by the HSA, as required by facility policy.
<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"/>	Facility policy requires that medications be administered in accordance with the prescribing medical provider's specific instructions. Medications administered are documented on the Medication Administration Record form (MAR).
<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 has 24 hour medical staff coverage. The nursing staff administers medication, as ordered by the provider and as required by policy, Pharmacy. Detention officers do not deliver or administer medications to detainees. No detainees deliver medications at this facility.
<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"/>	This facility utilizes a trained licensed pharmacist and nursing staff to administer medications. No officer is trained or utilized to distribute medications to the detainee population.
<p>42. The Warden/Facility receives notification that a detainee that has special medical needs.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 8.0, Continuity of Care, requires that during intake screening, the nursing staff review all transfer summary reports arriving with the detainee. Based on the intake screening and review of summary reports, the Special Needs Form (DIHS-819) is used to communicate a detainee's medical requirements to facility staff.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 8.0, Continuity of Care, requires that referral to facilities in the healthcare network occur when necessary medical treatment is beyond the scope of care available at this facility. This facility refers detainees requiring medical consultation and specialized ambulatory care to two local hospitals: Trinitas Hospital (psychiatric cases) and the University of Medicine and Dentistry of New Jersey (medical and dental cases).
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"/>	Facility policy 8.21.1, Infectious Disease Reporting, requires the laboratory contracted by this facility notify the New Jersey State Department of Health of any reportable conditions. According to the HSA and the Infectious Disease Control Coordinator, all communicable diseases in this facility are treated in accordance with the Infectious Disease Management Technical Reference Manual. This treatment is required in facility policy 8.15, Chronic Care Patients. The Health Promotion/Disease Prevention Program incorporated in each chronic clinic visit is utilized to educate, control, treat, and prevent disease in this facility.
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"/>	Detainees with communicable diseases are treated in accordance with the Infectious Disease Management Technical Reference Manual. Policy 8.14, Medical Intake Screening, requires detainees with communicable diseases to be isolated and transferred to the contract local hospital.

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
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"/>	In this facility, admission chest x-ray is the primary screening method to detect TB. Detainees not screened or having symptoms suggestive of TB are isolated from the general population in the negative pressure room in the Health Services Unit.
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with symptoms suggestive of positive TB are placed in the negative pressure room in the Health Services Unit. This practice was confirmed by the HSA and Assistant HSA.
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"/>	In emergency situation, the ambulance (EMS/911) is contacted or this facility's van is utilized, depending on the urgency of medical care needed that is only available outside this facility.
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"/>	Facility policy 8.15, Chronic Care Patients, provides guidelines to provide care to detainees with chronic care conditions approved by the physician.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility IHSC Health Services Unit follows the DIHS National Standard 8.25, Pregnancy Screening and Prenatal/Postnatal Care, requiring pregnancy screening of female detainees and provision of prenatal/postnatal care, when needed.

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
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"/>	Facility policy 8.15, Chronic Care Patients, and 8.6, Chronic Conditions, of the DIHS National Standard policy and procedure provides procedures to follow when a chronic health problem is discovered. A Chronic Disease Flow Sheet is initiated to monitor the course of therapy deemed appropriate by the treating provider. This inspector reviewed 22 electronic medical records of detainees that were being monitored in different chronic care clinics.
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"/>	Prior to a detainee's arrival at this facility, the ICE officer notifies the medical staff of a detainee's medical condition for accommodation of special medical or mental health needs. Based on the intake assessment and review of the medical summary report, a detainee will be provided consideration related to housing, transfer, or transportation.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees requiring emergency and routine dental care are referred to the dentist at the contract local hospital. This facility does not provide dental services.
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"/>	During intake screening, sick call, or physical examinations, as soon as the medical staff identifies that a detainee has a mental health problem, the detainee is referred to the social worker staff and/or to the psychiatrist. This process was confirmed by the Social Worker and the HSA.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has a full time social worker staff. A contract psychiatrist who provides onsite services once a week and is on call at all times and the local hospital provide crisis intervention services for detainees experiencing acute mental health episodes.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has three examination rooms and a treatment room and several female medical staff. Medical and mental health interviews, examinations, and procedures are conducted maintaining privacy and respect. Female detainees are provided a female escort for health care if the health services provider is male. This was confirmed by the HSA.
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"/>	A contract psychiatrist conducts a comprehensive mental health evaluation of a detainee referred for mental health treatment. An electronic medical record of a detainee referred to the psychiatrist was reviewed. A comprehensive evaluation was completed within 14 days of the referral.
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"/>	This facility follows the DIHS National Standard policy and procedure on Seclusion and Therapeutic Restraints (15.16) which addresses all requirements of this component.

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>59. (MANDATORY) Involuntary administration of psychotropic medications to detainees complies with applicable laws and regulations and the authorizing physician or psychiatrist will:</p> <ul style="list-style-type: none"> • 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"/>	According to the HSA and the Assistant HSA, involuntary administration of psychotropic medications to detainees is not provided in this facility.
<p>60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Upon arrival, detainees have an initial dental screening and within 14 days of admission to this facility, detainees are provided a dental screening exam by the nursing staff or the physician assistant. The nursing staff that performs the dental screening examination completed competency training provided by the Clinical Director.
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 8.6, First Aid Kit/Emergency Bag, requires that the contents of the First Aid Kit or Emergency Bag (located in the Health Services Unit) be determined by the Clinical Director and approved by the HSA. The contents are reviewed by a staff nurse on a monthly basis.
<p>62. An automatic external defibrillator should be available for use at the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	As part of the CPR training, all staff was trained on the use of automatic external defibrillator (AED). The AED is located in the Health Services Unit Treatment Room.
<p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee refuses treatment, the onsite ICE Office is immediately notified regarding further disposition.

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
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The HSA and other facility department staff along with the ICE officer meet with the Warden bi-weekly. The meeting minutes are filed and maintained by the HSA.
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"/>	Facility policy, Biomedical Waste Management Plan, provides program management in compliance with the applicable local, state, and federal regulations. Biohazard waste materials are stored in a well ventilated room. They are boxed and placed on a heavy duty plastic mobile covered cart, and then collected by the Stericycle company. This facility does not have a dental department on site. Thus, no dental equipment or dental instruments are decontaminated at this facility.
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"/>	Facility policy 5.3, Local Performance Improvement Committee, requires a committee, composed of medical staff, to conduct an internal review and quality assurance for the purpose of improvement and performance.
PART 4 – 22. MEDICAL CARE				
<input checked="" type="checkbox"/> Meets Standard <input type="checkbox"/> Does Not Meet Standard <input type="checkbox"/> N/A <input type="checkbox"/> Repeat Finding				

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

During this review, the facility was in a transitional stage from a Level 1 to a Level 2 facility. This facility expects full capacity by November 1, 2011. The Health Services Unit is appropriately staffed at this time and provides coverage 24 hours a day, seven days a week. According to the staffing plan, four Registered nurses are expected to be added in the next two months and a Clinical Director is awaiting orders to report to this facility. A written emergency 24 hour on-call plan is established to provide urgent/emergency medical services. Medical, mental, and dental screening are performed by the nursing staff.

Upon arrival, a chest x-ray is performed immediately. Arriving female detainees are tested for pregnancy before the chest x-ray is performed. Physical examinations including dental screening examinations are performed within 14 days. All detainees have access to health care via the Sick Call Request Form. The form is available in several languages from the Unit Officer, and from the nursing staff who conducts daily unit rounds.

The detainees who have difficulty in communicating are accommodated by staff who speaks their language or via the Telephone Translation Line. Sick Call Requests are picked up daily, triaged, and referred accordingly to the physician assistant.

Medications are dispensed by a pharmacist. Medications are administered by the pharmacist or by the nursing staff in the Health Services Unit with direct supervision by an officer. Records of administration of medications are maintained in the Medical Administration Record (MAR).

All staff is trained on First Aid, CPR, and use of the AED. Biohazard waste management plans are established.

A Performance Improvement Committee is established to conduct internal review and quality assurance program.

(b)(6), (b)(7)(C) October 20, 2011
Reviewer's Signature / Date

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 12-101, Sanitation and Hygiene, was established to ensure that an adequate supply of clean and suitable clothing, bedding, linen, and hygiene items are provided to detainee.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The standard issue provided by the facility exceeds the amount of issue identified in this component. Facility policy and procedure requires that detainees will be issued clean, appropriate, presentable clothing during intake processing. Standard issue includes three complete uniforms, (three pairs of pants, three shirts, a pair of shoes), three pairs of socks, three pairs of white underwear, one hand towel, one large towel, one sanitary mattress, two sheets, one blanket, one pillow, one pillow case and thermal underwear. The daily laundry schedule is posted for linens, personal items and clothing items.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility allows for issuance of an extra blanket during winter months.
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"/>	Facility policy states that new detainees will be provided clean bedding, linens, and towels. Standard issue of items is consistent with the bulleted requirements of this component.

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
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"/>	Upon admission, each detainee is provided soap, shampoo, a toothbrush, and toothpaste. These articles necessary for maintaining personal hygiene are available to all detainees at no charge.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Living units have clean toilet facilities with a ratio of ten detainees to one toilet. There are no urinals in this facility.
7. Bathing facilities are: <ul style="list-style-type: none"> Clean Operable with temperatures between 100 and 120 degrees Fahrenheit. ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees. ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	According to a Maintenance Worker, the bathing water temperature is between 108-110 degrees Fahrenheit, depending on the weather. There is a ratio of ten detainees to one wash basin. There are three dorms that have 20 detainees to three showers and five dorms that have 40 detainees with five showers which are compliant with this standard.
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"/>	In this facility's housing units, the bathing areas and toilets are equipped with a shower seat and handicapped bars. In the female housing unit, the bathing area is equipped with a hand held shower.
9. Detainees are provided clean clothing, linen and towels. <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"/>	Detainees are provided sets of clean clothing, linens, and a towel during admission and allowed to launder/exchange on the posted laundry schedule time.
10. Food service detainee volunteer workers are permitted to exchange outer garments daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility provides clean white uniforms to food service workers daily.

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
11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are no detainees working outside the facility. Volunteer detainee workers, other than food service, follow the laundry/exchange schedule of clothing.

PART 4 – 23. PERSONAL HYGIENE

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

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

The facility has established policies and procedures regarding the issuance of clean clothing, bedding, and linens. Detainees are issued personal hygiene items, clean clothing, and linens during admission and allowed to launder/exchange in a manner consistent with this standard. Bathing and toilet facilities were clean at the time of the inspection. Bathing areas provided for detainees with disabilities are equipped with hand-held shower and handicapped bars.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-19, Suicide Prevention/Risk Reduction, provides a written suicide prevention and intervention program. The plan was approved by the facility Warden, HSA and the Clinical Director.
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 plan, as established by facility policy and procedure, addresses all provisions 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"/>	This facility's medical staff and general staff/officers receive suicide prevention training during the orientation program and during the annual refresher training course and periodic in-service training. Training records of staff and the Suicide Prevention Training Lesson Plan were reviewed and are consistent 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>4. Training prepares staff to:</p> <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"/>	Facility policies and procedures on suicide watch and the Suicide Prevention Training Lesson Plan provide detailed procedures preparing staff to respond in the event a suicide incident occurs.
<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"/>	This facility trained officer initiates the In-Processing Health Screening on newly arrived detainees. Then nursing staff performs a detailed medical screening to include suicide potential upon detainee's arrival to this facility. Staff training records were reviewed which are consistent with the requirements of this standard.
<p>6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy, Suicide Prevention/Risk Reduction, provides detailed procedures on when and how to refer a detainee identified as potentially suicidal to the medical and mental health staff. The staff interviewed appeared to understand and follow these procedures.
<p>7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that upon receipt of medical clearance from a qualified psychiatric practitioner by the Clinical Director, the detainee will be returned to general population.
<p>8. The facility has a designated isolation room for evaluation and treatment.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has designated suicide observation rooms in the Segregation Unit as well as in the Health Services Observation Room.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that the designated suicide watch rooms be as suicide resistant as possible; free of all obvious protrusions and provide full visibility to staff. Personal belongings, objects, and clothing that could be used in a suicidal manner are removed. The designated suicide rooms in the Segregation Unit were observed to have a glass door window, steel toilet and steel sink mounted on the wall. The Health Services Unit observation room has a glass window, steel sink and toilet mounted on the wall, and rolling bed and rolling cabinet.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that the designated suicide watch observation rooms be approved by the medical or mental staff.
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"/>	Facility policy requires that detainees who are suicidal be continuously observed with documentation being made at least every 15 minute checks on a suicide watch Monitoring Form (13-63A) by an officer. There were no detainees on suicide watch during this review.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires monitoring and documentation as directed by the Clinical Director or the Psychiatrist.

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 IGSA's, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility has 24 hour medical staff coverage. The PA, Acting Clinical Director, and the contract Psychiatrist are on call. Any detainee who has been identified as a suicidal risk is reported to the ICE Office.
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"/>	Facility policy requires that a suicide or serious suicide attempt be reported on a Medical/Drug Incident Report form (DIHS QMD-010). A critical incident debriefing is conducted by the Clinical Director. The incident will be presented to the After Action Facility Review and Mortality Review Committee.

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.)*

Facility staff is trained to observe, recognize, identify, intervene, refer, house, and monitor detainees who demonstrate a potential suicide risk. Training occurs during new employee orientation, annual refresher training, and periodic in-service training. Policies and procedures are established outlining the signs and symptoms, and required documentation of a suicidal detainee's status housed in the medically approved designated suicide watch rooms. There was no detainee on suicide watch during this review.

(b)(6), (b)(7)(C) / October 20, 2011
 Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A chronically ill or terminally ill detainee who needs medical care beyond the scope of care available at this facility is transferred to a local contract hospital for medical care deemed necessary.
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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines. Local policy requires that the medical staff notify the ICE on site office and the IHSC office. Notification of next of kin regarding the detainee's medical condition, hospital location, and visitation regulations is carried out by ICE.
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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines on Living Wills and Advanced Directives and the INS Detention Standard on Terminal Illness, Advance Directives, and Death, which address these elements. The guidelines provide for the use of the State Advanced Directive form for implementing Living Wills and Advanced Directives. They also provide instructions for detainees who wish to have a Living Will other than the one DIHS provides. They also address detainees who wish to appoint another individual or attorney to prepare or make advance decisions for him/her.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines on Obtaining Do Not Resuscitate Order (DNR) in DIHS Medical Facilities and the INS Detention Standard on Terminal Illness, Advance Directives, and Death.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines on Related Medical Care and INS Detention which requires that any detainee with a "Do Not Resuscitate" order in the medical record is entitled to receive maximal therapeutic efforts 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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines. The facility notifies the onsite ICE Office of the name and basic circumstances of any detainee for whom a "Do Not Resuscitate" order has been written in the medical record.
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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Policy Guidelines on Organ Donation. An interview with the HSA revealed that the ICE Office will be notified of a detainee wishing to have organ donation.
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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines. The on-site ICE OIC is notified of a detainee's death and the ICE OIC notifies the detainee's next-of-kin. There was a detainee death last month in this facility. The ICE Officer interviewed was notified of the detainee's death and procedures were followed in compliance to this standard.
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"/>	Facility policy 9-18, Transportation Procedures, addresses the death of a detainee 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"/>	This facility's IHSC Public Health Service staff follows the DIHS National Standard Guidelines. The onsite ICE OIC is notified of a detainee's death and who is responsible to make arrangements for the disposal of the remains.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none"> 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"/>	This facility's HSA notifies the onsite ICE OIC who retains the authority for this administrative decision, as required in the DIHS National Standard Guidelines. As a result of last month's detainee's death, the HSA obtained the detainee's death certificate and provided a copy to the ICE OIC who was responsible for filing the detainee's death certificates in the detainee's A-file. This is required by the DIHS National Standard Guidelines.
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"/>	A copy of the detainee's death certificate that died last month was filed in the detainee A-file. This was confirmed by ICE staff.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none"> 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 HSA notifies the on-site ICE OIC retains the authority to arrange for the local coroner to perform autopsy; local transportation of the body; and obtaining death certificate to be filed in the detainee's medical records and A-file, as required by the DIHS National Standard Guidelines.
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"/>	The HSA and ICE staff on-site confirmed that procedures were followed to close the case of the deceased detainee by the ICE Officer, as required in the DIHS National Standard Guidelines.

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 holds detainees for over 72 hours. Chronically or terminally ill detainees requiring medical care beyond the scope of this facility's medical services are transferred to the local hospital for provision of appropriate medical care. The DIHS National Standard is followed to include the guidelines for detainees wishing to formulate Advanced Directives/Living Will, a Do Not Resuscitate Order, and Organ Donation. The opportunity to appoint a health care proxy, private attorney, detainee's death, and notification to appropriate ICE Office are also addressed in this Standard.

This facility transports detainees for routine, urgent, and emergency treatment to local hospitals. It has policy and procedure addressing the death of a detainee while in transport.

The standard rating is based on a review of established policies and procedures, observations, and interview with staff.

DEATH OF A DETAINEE:

A 56 year old, male, Hispanic was admitted to this facility on September 6, 2011. The intake medical screening showed the detainee had a positive history of hypertension and high cholesterol but had been without medications for three weeks. Blood pressure taken during intake screening was 166/116. He was given 0.1 mg of clonidine. Then, the blood pressure was 158/93 after an hour. HCTZ, Amlodipine, and Aspirin were prescribed. Laboratory tests (CMP, Lipid Panel and CBC) were ordered and drawn on September 8, 2011. The detainee was seen by the Physician Assistant on September 13, 2011 for review of the lab tests. His blood pressure was 131/80 with the following lab results: RBC 5.78, Hb 18, Hct 51.2, Glucose 102, Creatinine 1.29, ALT 29, Cholesterol 272, and LDL 200. Simvastatin was prescribed for the high cholesterol.

The detainee was given the flu vaccine on September 19, 2011. On September 26, 2011, at about 0530, the detainee reported to the Health Services Unit for his medication. After receiving his medication, he returned back to the waiting room. At about 0535, detainee was reported by the officer to be having seizures in the waiting room. The Registered Nurse immediately responded to the waiting room and secured the detainee by laying him down on his left side. The detainee was observed to be holding his chest, unresponsive to verbal commands, eyes wide open, no difficulty of breathing, but slow steady breathing. The detainee had a positive radial pulse, positive intermittent snoring. Drooling of saliva was noted, positive diaphoresis, and his pupils were dilated. EMS was activated and 911 was called. Ammonia salts were administered at about 0540, and a faint pulse was noted.

At 0545, EMS arrived. No breathing noted; AED and CPR were started and continued. Detainee was taken to the local hospital at 0613. At 0633, detainee was pronounced dead by the attending physician.

Staff interviewed stated that an autopsy was performed. However, the autopsy results were not available to review. Possible cause of death per medical staff was Massive Myocardial Infarction.

(b)(6), (b)(7)(C) October 20, 2011
Reviewer's Signature / Date

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"/>	Mail guidelines are outlined in the detainee handbook and posted in housing units.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's detainee handbook is available in both English and Spanish.
3. Incoming mail is distributed to detainees within 24 hours or 1 business day after it is received and inspected.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mail arrives at the facility at approximately 11 a.m. and is distributed to detainees by approximately 1:30 p.m. on the same day.
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"/>	The postal service picks up the outgoing mail at the same time it drops off the incoming mail.
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The mail room clerk maintains a logbook with acceptance of priority overnight and certified detainee mail delivered to the facility.
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"/>	The mail room clerk goes to the each housing unit to deliver mail. It is opened and inspected with the detainee present.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff does not read incoming general correspondence without the Facility Administrator's prior approval.
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"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The mail room clerk sends written notice to the sender when incoming mail is rejected. There were no instances of rejected incoming mail during this audit period.
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"/>	There were no instances of rejected outgoing mail during this audit period.
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The mail room clerk maintains a log book of every item removed from detainee mail.
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"/>	Contraband is handled by the Chief of Security.
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A cash receipt is issued to the detainee and a copy is given to the Business Manager.
17. Original identity documents (for example, passports, and birth certificates) are immediately removed and forwarded to ICE staff for placement in the A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Staff provides the detainee a copy of his or her identity document(s) upon request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Staff disposes of prohibited items found in detainee mail in accordance with the Detention Standard on "Contraband".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Every indigent detainee has the opportunity to mail, at government expense: At least five pieces of special correspondence per week; Three one ounce letters per week; Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
21. The facility has a system for detainees to purchase stamps and for mailing all Special Correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may purchase stamps at the commissary.
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"/>	Detainees may obtain writing paper, envelopes, and pencils at no cost from the mail room clerk.
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"/>	Detainees may receive outside publications directly from the publisher.

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.)*

Mail is received, processed, and delivered to the detainee population in a timely manner at this facility. A log is maintained for all legal, priority overnight, and certified detainee mail processed. Detainees may obtain writing paper, envelopes, and pencils at no cost from the mail room clerk.

(b)(6), (b)(7)(C)

/ October 20, 2011

Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> • 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)(e) officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The detainee remains under constant, direct visual supervision of escorting staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Escorting officers report unexpected situations to the originating facility as a matter of procedure and the ranking supervisor on duty has the authority to issue instructions for completion of the trip.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Escorting officers have the discretion to increase or decrease minimum restraints in accordance with written instruction, procedures and classification level of the detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Escort officers do not accept gifts/gratuities from a detainee, detainee's relative or friend for any reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Escort officers ensure that detainees: <ul style="list-style-type: none"> 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.)*

ICE personnel provide detainee escort for non-medical emergency trips.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 5 – 28. MARRIAGE REQUESTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainee requests for marriage are forwarded to the ICE FOD.
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"/>	
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-7, Inmate Marriages, requires written requests for marriage.
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The Facility Administrator provides the detainee with a place and time to make wedding arrangements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook explains the marriage request process.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not address marriage requests.
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"/>	The ICE FOD is approved to authorize a request to marry.

PART 5 – 28. MARRIAGE REQUESTS

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

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

This inspector interviewed the Assistant Warden.

There have been no marriage requests within the past 12 months. However, this facility has the appropriate policy in place to accommodate detainee requests to be married. This policy meets the requirements of the ICE PBNDS regarding Marriage Requests.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed detainees participating in both indoor and outdoor recreation 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"/>	The rated capacity for this facility is 326. The facility does not employ a recreational specialist.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the recreational facilities and equipment to be in good condition.
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no detainee workers assigned to recreation.
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is no recreational specialist or trained equivalent at this facility.
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"/>	This inspector observed detainees participating in volleyball during outdoor recreation
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed the recreation schedule which offers a minimum of one hour of outdoor recreation seven days per week and one hour of indoor recreation seven (7) days per week.
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"/>	
10. Staff checks all items for damage and condition when equipment is returned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff conducts searches of recreation areas before and after use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Recreation areas are under constant staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Supervising staff are equipped with radios.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The facility provides detainees in the SMU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his or her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has an outdoor recreation area for detainees to exercise.
20. If yes, written procedures ensure timely review of all eligible detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has an outdoor recreation area for detainees to exercise.
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"/>	The facility has an outdoor recreation area for detainees to exercise.
22. The Facility Administrator documents all detainee-transfer decisions, whether yes or no.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility has an outdoor recreation area for detainees to exercise.
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"/>	The facility has an outdoor recreation area for detainees to exercise.
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"/>	The facility has an outdoor recreation area for detainees to exercise.
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 has an outdoor recreation area for detainees to exercise.
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"/>	The facility has an outdoor recreation area for detainees to exercise.
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"/>	The facility has an outdoor recreation area for detainees to exercise.

PART 5 - 29. RECREATION

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

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

This inspector interviewed the Assistant Warden and the Chief of Security. Facility policy 20-100, Recreation and Leisure Time Activities, outlines the recreational activities at this facility.

The policy and procedures of this facility are within the requirements of the ICE PBNDS regarding Recreation.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 5 – 30. RELIGIOUS PRACTICES

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed a schedule for religious activities offered to detainees.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does accommodate recognized holy day observances.
5. Each detainee is allowed religious items in his/her immediate possession; refer to the Funds and Personal Property Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Members of faiths not represented by clergy may request to present their own services within security allowances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees in the Special Management Unit may participate in religious practices unless otherwise documented for the safety and security of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RELIGIOUS PRACTICES				

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

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

This inspector interviewed the Assistant Warden. This facility does not employ a Chaplain. However, it strategically uses religious authorities from the community who assist in providing religious programming for detainees.

The religious programming at this facility fulfills the requirements of the ICE standard on Religious Practices.

(b)(6), (b)(7)(C) / October 20, 2011

Reviewer's Signature / Date

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing unit phones are available for detainee use between the hours of 7:00 a.m. and 11:00 p.m. Phones cannot be used during count times.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees receive a facility detainee handbook upon admission to the facility.
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"/>	
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"/>	The detainee handbook is available in both Spanish and English.
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"/>	Telephones are provided at a ratio of one phone per 22 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"/>	Telephones are inspected by the day shift officers.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility reports any phone issues to ICE and ICE contacts the service provider, Talton Communications.
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"/>	Detainees are taken to the shift supervisor's office to make a private phone call.
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"/>	Detainees are taken to the shift supervisor's office to make a private phone call.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
16. No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Special arrangements are made to allow detainees to speak by telephone with an immediate family member detained in another Facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This would be handled by ICE.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The call is put through to the shift commander who notifies the ICE DO.
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"/>	
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	This inspector verified that the OIG's number was operable from a housing unit phone.
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"/>	Telephone Serviceability checklists completed by IEAs were reviewed.

PART 5 – 31. TELEPHONE ACCESS

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

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

The facility permits detainees reasonable and equitable access to telephones. Detainees may use the housing unit phones from 7 a.m. to 11 p.m. A notice indicating phone calls may be monitored is posted next to the housing unit phones. The telephone access rules are posted in the housing units. Telephones are regularly inspected and the inspections are documented by both ICE and facility staff.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 5 – 32. VISITATION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a written visitation procedure, schedule, and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitation schedule is posted in the housing units and is outlined in the detainee handbook.
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"/>	
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitation schedule is posted in the facility lobby. The visitation rules are available in a handout at the officer's desk.
4. The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. A written copy of the rules regulating visitation and the hours of visitation is available to visitors in English, Spanish, and other major languages spoken in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Detainees are permitted to retain authorized personal property items specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are permitted to retain eye glasses, phone numbers, and bibles.
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors must clear the metal detector and present a government issued photo ID or passport.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees in special housing are afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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"/>	A sack lunch is provided.
18. Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. There are written procedures governing detainee searches.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-5, Searches of Inmates/Residents and Various Locations, addresses this component.
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"/>	A request to visit form is completed and a photo ID must be presented along with a letter from their law firm.
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written requests for tours from domestic or international organizations are submitted to the ICE FOD for approval.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 32. VISITATION

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

The facility permits authorized persons to visit detainees within security and operational constraints. The facility allows detainees to meet privately with their current or prospective legal representatives and legal assistants, as well as with consular officials. Visitation guidelines are listed in the detainee handbook and posted in the housing unit and facility lobby.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	This facility does not allow detainees to work outside the secure perimeter.
4. Written procedures govern selection of detainees for the Voluntary Work Program. • The same procedures apply for replacement workers as for "new" workers. • Staff follows written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Where possible, physically and mentally challenged detainees participate in the program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility complies with work-hour requirements for detainees, not exceeding: • Eight hours a day. • Forty hours a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility does comply with the work-hour requirements for detainees of no more than eight hours per day and 40 hours per week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If a detainee is removed from a work detail, staff 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"/>	
10. The voluntary work program meets: • OSHA standards • NFPA standards • ACA standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility ensures that the voluntary work program meets or exceeds all OSHA, NFPA and ACA standards.
11. Medical staff screen and formally certifies detainee food service volunteers; • Before the assignment begins • As a matter of written procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This inspector observed documentation of the medical clearance of all detainee food service volunteer workers.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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.)*

This inspector interviewed the Assistant Warden, the Food Service Manager, and the Assistant Food Service Manager. Facility policy 19-100, Detainee Work Program, addresses the policy and procedures for the voluntary work program.

The policy and procedure of this facility are in accordance with the ICE standard on the Voluntary Work Program.

(b)(6), (b)(7)(C) / October 20, 2011
Reviewer's Signature / Date

Performance-Based National Detention Standards

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This facility issues the ICE National Detainee Handbook and the local handbook to all detainees upon admission. Detainees are required to sign a form indicating receipt of the handbooks.
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"/>	This inspector reviewed the facility handbook which was printed in both English and Spanish. The ICE National Detainee Handbook, provided in the housing unit, was printed 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"/>	
5. The handbook supplements the facility orientation video where one is provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not provide an orientation video.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	An annual review is conducted by the General Counsel and Vice President of Operations of CCA.
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"/>	Basic detainee responsibilities are found in the National ICE Detainee Handbook which is provided to all detainees in each housing unit.
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"/>	

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
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not state when a medical examination will be conducted. The ICE National Detainee Handbook provided to detainees in the housing units does state that a medical examination will be conducted within 14 days of admission.
12. The handbook describes the facility, housing units, dayrooms, in-dorm activities and special management units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Razors will be issued, and must be returned, between the hours of 8:45 a.m. and 10:30 a.m. every day. Detainees scheduled to attend court will be afforded the opportunity to shave first. Staff maintains a log of razor issue and return.
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not address religious programming.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not discuss the voluntary work program for detainees.
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"/>	

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
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not describe the contraband policy.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not describe the correspondence policy.
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"/>	
27. The grievance section of the handbook explains all steps in the grievance process – Including: <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"/>	This facility does include the procedures for filing an appeal of a grievance with ICE and complies with all bulleted components.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. The handbook describes the facility recreation policy including: <ul style="list-style-type: none"> Outdoor recreation hours. Indoor recreation hours. In dorm leisure activities. Rules for television viewing. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. The handbook describes the detainee dress code for daily living; and work assignments and the meaning of color-coded uniforms.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not specify the rights and responsibilities for all detainees. Basic detainee rights and responsibilities are found in the ICE National Detainee Handbook which is provided to all detainees in each housing unit.
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are required to sign Form 14-1A, verifying receipt of the facility handbook.
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

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

This inspector interviewed the Assistant Warden, the Chief of Security, and the Detention Officer assigned to the Intake area. Facility policy 14-1, Inmate/Resident Rights, provided policy and procedures on the detainee handbook.

Detainees at this facility are issued a facility handbook upon intake. The ICE National Detainee Handbook is available to detainees in each housing unit. Both of these handbooks are available in both English and Spanish.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a discussion of the grievance process in the detainee handbook, and the grievance policy is posted on the housing unit bulletin boards.
2. The admissions process includes providing each new arrival with a copy of the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The detainee handbook states the policy for grievances is posted on the dormitory bulletin board.
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"/>	Facility policy 14-5.4, discusses the policy for informal grievance resolution.
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"/>	
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-5.4, addresses policy for emergency grievances.
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-5.4, addresses the policy for detainee protection from reprisal which prohibits harassing, disciplining, punishing, or otherwise retaliating against detainees who file a grievance.

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Procedures include maintaining a Detainee Grievance Log. <ul style="list-style-type: none"> 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"/>	This inspector observed the grievance log maintained at this facility. This log was comprehensive in documenting grievances. Although there were no "nuisance complaints" in the Detainee Grievance Log, facility policy addresses.
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"/>	Facility policy 14-5.4, discusses policy for Excessive Filing of Grievances.
11. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Informal resolution of a written grievance is documented in the detainee's Detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Staff complies with the requirement to report allegations of officer misconduct to a supervisor or higher-level official in his or her chain of command, and/or to ICE/DRO Office of Professional Responsibility and/or the DHS Inspector General.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator. <ul style="list-style-type: none"> 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"/>	Facility policy 14-5.4 indicates that appeals are to be forwarded to the Warden (Facility Administrator).
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-5.4 requires the timeframe for resolution of informal grievances to be no more than 15 days.

PART 6 – 35. GRIEVANCE SYSTEM

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

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

This inspector interviewed the Warden. Facility policy 14-5, Inmate/Resident Grievance Procedure, addresses local procedures.

This inspector reviewed the Grievance Log maintained at the facility, and it was comprehensive in documenting grievances filed and the disposition of those grievances.

The policy and procedures of this facility meet the guidelines of the ICE standard on the Grievance System.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	There are two computers, one printer, and one photocopier as well as supplies for both in the Law Library. On day one of the inspection, the BICE CD could not be loaded with the Case Law due to a storage capacity overload in both computers. This was fixed by day three of the inspection by removing some of the programs in the computer. The Immigration Case Law program installed is dated September 2011, and the BICE Program installed is dated May 2011.
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"/>	There are four chairs and two tables and the room is well lit.
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"/>	There are two computers, one printer and one photocopier as well as supplies for both. The BICE CD cannot be loaded with the Case Law due to storage capacity overload in both computers.
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"/>	Upon request, a disc is issued.
7. The facility subscribes to updating services where applicable and legal materials requiring updates are current.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Outside persons and organizations are permitted to submit published legal material for inclusion in the legal library. Outside published material is forwarded and reviewed by the ICE prior to inclusion.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. There is a designated ICE or facility employee who inspects, updates, and maintain/replace legal material and equipment on a routine basis. The designee properly disposes outdated supplements and replaces damaged or missing material promptly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The warden's secretary and the ICE/IEA (jail liaison) are responsible for maintaining legal materials.

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"/>	Detainees currently submit a request to the Library Officer who in turn schedules their library time. A log is maintained on all requests received.
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"/>	Detainees submit a request to ICE, who then obtains the court decisions.
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"/>	
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"/>	The Language Line is used. ICE staff also provides assistance.
14. Detainees may retain a reasonable amount of personal legal material in the general population and in the special management unit. Stored legal materials are accessible within 24 hours of a written request.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Detainees housed in Administrative Segregation and Disciplinary Segregation units have the same law library access as the general population, barring security concerns. Detainees denied access to legal materials are documented and reviewed routinely for lifting of sanctions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no instances to date.
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"/>	There have been no instances to date.
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

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

There are two computers, one printer and one photocopier as well as supplies for both in the Law Library. On day one of the inspection, the BICE CD could not be loaded with the Case Law CD due to a storage capacity overload in both computers. This problem was corrected by day three of the inspection by removing some of the programs loaded on the computer. The facility advised that new computers will be installed in the law library in the future. The Immigration Case Law LexisNexis program installed is dated September 2011, and the BICE Program installed is dated May 2011. Pens, papers, and pencils are also supplied. A weekly library schedule is maintained. Upon request, a disc is issued to detainees who wish to save their legal work.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE sets up the presentations once they have been approved.
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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE reviews and approves the material to be presented.
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	To date no detainee has been denied.
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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Staff permits presenters to distribute ICE/DRO-approved materials.	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff is present during the presentations.

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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no instances to date.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The "Know Your Rights" video is played every morning at 9:45a m. In every housing unit.
14. A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. The facility maintains equipment for viewing approved electronically formatted presentations.	<input checked="" 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.)*

NGO attorneys come to the facility on Tuesday and Friday each week to conduct legal rights presentations for all of the new arrivals. ICE staff review and approve all materials presented.

(b)(6), (b)(7)(C) October 20, 2011

Reviewer's Signature / Date

Section VII ADMINISTRATION & MANAGEMENT

38 Detention Files

39 News Media Interviews and Tours

40 Staff Training

41 Transfer of Detainees

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Booking creates the files.
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"/>	
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"/>	
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 placed in locked cabinets in the Records office, which is located in a secured area.
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The officer closing the Detention File makes a notation that the file is complete and ready to be archived.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff make copies and sends documents from the file when appropriately requested by supervisory personnel at the receiving facility or office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Appropriate staff has access to the Detention Files and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Records Clerk maintains a sign in/sign out logbook.
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain documents be added to a detainee's detention File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Archived files are purged after six years by shredding or burning.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation reviewed found archived files for ICE detainees was shredded on 6-3-11.
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"/>	

PART 7 – 38. DETENTION FILES

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

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

A detention file is created for each detainee upon arrival at the facility. The files are maintained in a locked file cabinet in the facility's records office. A logging system is in place to document the removal of files.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	
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"/>	

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.)

There have been no news media interviews or tours within the past 12 months.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility conducts appropriate orientation, initial training, and annual training for all staff, contractors, and volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	This inspector observed the curricula for all training and found it to be consistent with the duties and function of the staff for which the training is designed to reach.
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"/>	This inspector observed the certification for "Train the Trainers" program, which was successfully completed by the facility staff member assigned as Training Manager.
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 training plan prepared by the Training Manager and approved by the facility Warden was reviewed.
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"/>	This inspector observed the training record of ten random employees. All of these files contained complete records of training attended by each employee.

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>This inspector observed the training curriculum for new employees which incorporated all aspects of this component. Further, a check of employee training files verified completion of this training.</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
7. Clerical/support employees who have minimal detainee contact receive a minimum of: <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"/>	

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"/>	

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"/>	

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"/>	This inspector observed training files which verified successful completion of appropriate training for security personnel which addresses the elements of this component.
<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"/>	This inspector observed training files for SRT members which verified all members had received specialized training. Additionally, training files verified that all SRT members receive specialized 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b)(7)e
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"/>	(b)(7)e
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"/>	The facility Training Manager presents training on the drug-free workplace program. This inspector observed training files which verified all staff was trained on the drug-free workplace program.
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"/>	Individual training files verify that new staff acknowledges in writing that they have reviewed and understand the facility's drug-free workplace program.
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"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
19. New staff are required to acknowledge in writing that they have reviewed and understand facility work rules, ethics, regulations, conditions of employment, and related documents, and a copy of the signed acknowledgement is maintained in that person's personnel file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. (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: <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"/>	This inspector reviewed (b)(7)(e) random training files. All of these files indicated that staff had received training in recognizing signs of potential health emergencies; administering first aid and CPR; recognizing signs of potential mental illness, suicide risk, chemical dependency; and the facility's plan for providing emergency medical care.
21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include: <ul style="list-style-type: none"> • 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"/>	This inspector reviewed (b)(7) random training files all of which verified appropriate and comprehensive training regarding the facility's Suicide Prevention and Intervention Program.
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<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"/>	This inspector observed documentation of the facility's program for encouraging staff to participate in continuing education and professional development. Qualified staff can receive tuition reimbursement and request leave to attend such training.

PART 7 – 40. STAFF TRAINING

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

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

This standard has five mandatory components, two of those components were not applicable

(b)(7)e

(b)(7)e

The other three mandatory components were in compliance.

This inspector interviewed the Training Manager. Facility policy 4.1, Staff Development and Training, provides guidance for the facility training program.

This inspector found the training curricula for all staff to be comprehensive, covering all required aspects of the ICE standard on Staff Training. Further, the training records maintained on facility staff contained meticulous documentation of training successfully completed by the staff.

This inspector found all aspects of the training program at this facility to meet or exceed the requirements of the ICE standard on Staff Training.

(b)(6), (b)(7)(C)

October 20, 2011

Reviewer's Signature / Date

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"/>	
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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"/>	
12. Transfer and documentary procedures outlined in Section C and D are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Indigent detainees unable to make a telephone call at their new location are able to make a telephone call at the government's expense within 12 hours of arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Meals are provided when transfers occur during normally schedule meal times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. An A-File or work folder accompanies the detainee when transferred to a different Field Office or sub-office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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.)*

All ICE detainees housed at this facility are transferred in compliance with the ICE PBNDS.

(b)(6), (b)(7)(C)
 October 20, 2011
 Reviewer's Signature / Date