

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



U.S. Immigration
and Customs
Enforcement

JAN 13 2012

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

SUBJECT: Florence Correctional Center Annual Review 2011

The annual review of the Florence Correctional Center conducted on September 13-15, 2011, in Florence, Arizona has been received. A final rating of **"Meets Standards"** has been assigned and this review is closed.

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

- 1) The Field Office Director, Enforcement and Removal Operations, shall notify the facility **within** five business days of receipt of this memorandum. Notification shall include copies of the Form G-324A Detention Facility Review Form, the G-324A Worksheet, LCI Summary Memorandum, and a copy of this memorandum.
- 2) The next annual review will be scheduled on or before September 13, 2012.

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

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

cc: Official File

MGT
OF AMERICA, INC.

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

Contract # HSCECR-09-C-00004

ICE National Detention Standards
Compliance Review

Facility: **Florence Correctional Center**
Inspection Date: September 13, 2011 – September 15, 2011
Report Date: September 18, 2011

MGT

OF AMERICA, INC.



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Suite 650 North
Washington, DC 20005
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September 18, 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: Florence Correctional Center
Annual Detention Review

MGT of America, Inc. performed an annual inspection for compliance with the Immigration and Customs Enforcement (ICE) Performance Based National Detention Standards (PBNDS) at the Florence Correctional Center (FCC) located in Florence, Arizona, during the period of September 13-15, 2011. This is an Intergovernmental Service Agreement (IGSA) facility which is operated by Corrections Corporation of America (CCA).

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

Subject Matter Field	Team Member
Security	(b)(6), (b)(7)(c)
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 Standards" during the October 2010 inspection.

Review Summary

The facility is accredited by the American Correctional Association (ACA). The facility was recently audited by the National Commission on Correctional Health Care (NCCHC) for accreditation. The results of that audit have not been received as of the date of this inspection. FCC is not accredited by 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 NDS annual inspections.

2010 Inspection PBNDs Review		2011 Inspection PBNDs Review	
Compliant	40	Meets Standard	40
Deficient	0	Does Not Meet Standard	0
Repeat Deficiency	0	Repeat Deficiency	0
Non-Applicable	1	Non-Applicable	1

The 2011 Performance-Based National Detention Standards consisted of both Mandatory and Non-Mandatory components. The following breakdown is provided as a result of the 2011 inspection.

2011 Inspection PBNDs Review	Mandatory	Non-Mandatory
Meets Component	39	705
Does Not Meet Component	0	7
Non-Applicable	1	137
Total Components	40	849
Percentage of Compliance	100%	99%

LCI issues and Concerns

There were no standards rated deficient during this inspection.

Recommended Rating and Justification

The LCI recommends the facility receive a rating of "Meets Standards." The facility was compliant with 40 of 41 PBNDs. One standard was not applicable.

Of the 40 mandatory components, 39 were found to meet the standard and one was determined to be non-applicable. Seven non-mandatory components did not meet the standard; three of these were repeat findings. The repeat findings were related to the Detainee Handbook. An addendum to the handbook was issued prior to the completion of the inspection, which addresses these findings. There were 137 non-mandatory components that were deemed to be non-applicable.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely recorded on the G-324A Worksheet and are supported by documentation in the inspection file. An out brief was conducted at the facility. In addition to the entire inspection team, the following were present: (b)(6), (b)(7)(c) Warden; (b)(6), (b)(7)(c) Assistant Warden; (b)(6), (b)(7)(c) Chief of Security; (b)(6), (b)(7)(c) Chief of Unit Management; (b)(6), (b)(7)(c) Administrative Supervisor; (b)(6), (b)(7)(c) Secretary; (b)(6), (b)(7)(c) Unit Manager; (b)(6), (b)(7)(c) Health Services Administrator; (b)(6), (b)(7)(c) Quality Assurance; (b)(6), (b)(7)(c) Quality Assurance; (b)(6), (b)(7)(c) Safety Manager; (b)(6), (b)(7)(c) Tool Control; (b)(6), (b)(7)(c) Training Manager; (b)(6), (b)(7)(c) ICE AFOD; (b)(6), (b)(7)(c) ICE

A. Type of Facility Reviewed

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

B. Current Inspection

Type of Inspection
☐ Field Office ☒ HQ Inspection
Date[s] of Facility Review
September 13-15 2011

C. Previous/Most Recent Facility Review

Date[s] of Last Facility Review
October 12-14, 2010
Previous Rating
☐ Superior ☐ Good ☒ Acceptable ☐ Deficient ☐ At-Risk

D. Name and Location of Facility

Name
Florence Correctional Center
Address (Street and Name)
1100 Bowling Road
City, State and Zip Code
Florence, AZ 85132
County
Pinal
Name and Title of Facility Administrator
(Warden/OIC/Superintendent)
(b)(6), (b)(7)(c) Warden
Telephone # (Include Area Code)
520-868 (b)(6), (b)(7)(c)
Field Office / Sub-Office (List Office with oversight responsibilities)
Florence Processing Center
Distance from Field Office
3 miles

E. ICE Information

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

F. CDF/IGSA Information Only

Contract Number
ODT-9-C-0001
Date of Contract or IGSA
October 1, 2008
Basic Rates per Man-Day
87.26
Other Charges: (If None, Indicate N/A)
N/A; ;
Estimated Man-days Per Year
72,022

G. Accreditation Certificates

List all State or National Accreditation[s] received:
ACA
☐ 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
1999
Date Last Remodeled or Upgraded
N/A
Date New Construction / Bedspace Added
2004 / 366
Future Construction Planned
☐ Yes ☒ No Date: N/A
Current Bedspace
1824
Future Bedspace (# New Beds only)
Number: 0 Date: N/A

J. Total Facility Population

Total Facility Intake for previous 12 months
16622
Total ICE Mandays for Previous 12 months
72,022

K. Classification Level (ICE SPCs and CDFs Only)

	L-1	L-2	L-3
Adult Male	183	27	0
Adult Female	0	0	0

L. Facility Capacity

	Rated	Operational	Emergency
Adult Male	1504	2216	2216
Adult Female	320	472	472
<input type="checkbox"/> Facility holds Juveniles Offenders 16 and older as Adults			

M. Average Daily Population

	ICE	USMS	Other
Adult Male	196	1543	602
Adult Female	0	392	0

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>	<i>Jan – Mar</i>	<i>Apr – Jun</i>	<i>Jul – Sept</i>	<i>Oct – Dec</i>
Assault: Offenders on Offenders ¹	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	1	0	0	1
	Without Weapon	8	4	6	3
Assault: Detainee on Staff	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
	With Weapon	7	1	5	3
	Without Weapon	0	1	1	4
Number of Forced Moves, incl. Forced Cell moves ³		1	6	1	4
Disturbances ⁴		4	1	2	3
Number of Times Chemical Agents Used		6	3	1	7
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		68 *	67 *	65 *	67 *
Offender / Detainee Medical Referrals as a result of injuries sustained.		1	3	3	1
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	23	5	3	10
	# Resolved in favor of Offender/Detainee	2	1	0	2
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	-	-	A	-
	Number	0	0	1	0
Psychiatric / Medical Referrals	# Medical Cases referred for Outside Care	107	61	62	43
	# 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

Routine transportation of detainees/offenders is not considered "forced"

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.

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Form G-324A SIS (Rev. 9/3/08)
ICE 2012 FOIA03030.015647

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"/>	<input type="checkbox"/>						
2	Environmental Health and Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
3	Transportation (By Land)	<input 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"/>	<input type="checkbox"/>						
5	Classification System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
6	Contraband	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
7	Facility Security and Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
8	Funds and Personal Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>
9	Hold Rooms in Detention Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
10	Key and Lock Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
11	Population Counts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
12	Post Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
13	Searches of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
14	Sexual Abuse and Assault Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
15	Special Management Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
16	Staff-Detainee Communication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
17	Tool Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
18	Use of Force and Restraints	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
PART 3 ORDER											
19	Disciplinary System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
PART 4 CARE											
20	Food Service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
21	Hunger Strikes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
22	Medical Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
23	Personal Hygiene	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
24	Suicide Prevention and Intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
25	Terminal Illness, Advance Directives, and Death	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
PART 5 ACTIVITIES											
26	Correspondence and Other Mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
27	Escorted Trips for Non-Medical Emergencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input checked="" type="checkbox"/>
28	Marriage Requests	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>
29	Recreation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
30	Religious Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
31	Telephone Access	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
32	Visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
33	Voluntary Work Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>
PART 6 JUSTICE											
34	Detainee Handbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
35	Grievance System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
36	Law Libraries and Legal Material	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
37	Legal Rights Group Presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
PART 7 ADMINISTRATION & MANAGEMENT											
38	Detention Files	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
39	News Media Interviews and Tours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
40	Staff Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
41	Transfer of Detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

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LCI Review Assurance Statement

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

Lead Compliance Inspector: (Print Name)	(b)(6), (b)(7)(c)
(b)(6), (b)(7)(c)	
Title & Duty Location	
Lead Compliance Inspector, MGT of America, Inc.	September 15, 2011

Team Members

Print Name, Title, & Duty Location	Print Name, Title, & Duty Location
(b)(6), (b)(7)(c), CI-Medical Care, 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-Security, 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: Since the last inspection there was one suicide attempt by an ICE detainee. A male ICE detainee was booked into the facility on August 30, 2011. An initial health screening was performed and documented by nursing staff. The detainee denied any medical or mental health issues. On the morning of August 31, 2011, the detainee walked to the medical unit after jumping from the top tier onto the tier steps with a blanket or blanket strips tied loosely around his neck. The detainee appeared uninjured but was transported via ambulance to Mountain Vista Medical Center for evaluation. When the detainee returned from hospital, ICE took custody of the individual, and he was removed from this facility.

(b)(7)(E)

*Canines are used for detection of contraband in the mail room. However, they are never used in the presence of or against ICE detainees.

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Form G-324A SIS (Rev. 9/3/08)
ICE 2012 FOIA03030.015649

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>Florence Correctional Center</i>
Address (Street and Name) <i>1100 Bowling Road</i>
City, State and Zip Code <i>Florence, AZ 85132</i>
County <i>Pinal</i>
Name and Title of Chief Executive Officer (Warden/Superintendent/Facility Administrator) (b)(6), (b)(7)(c) <i>Warden</i>
Name and Title of Lead Compliance Inspector (b)(6), (b)(7)(c)
Date[s] of Review From <i>September 13, 2011</i> to <i>September 15, 2011</i>
Type of Review <input checked="" type="checkbox"/> Headquarters <input type="checkbox"/> Operational <input type="checkbox"/> Special Assessment <input type="checkbox"/> Other

Introduction to the G324A Over 72hour Facility Detention Inspection Worksheets

What is "Performance-Based"?

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

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

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

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

Worksheet Overview

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

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

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

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

Worksheet Completion

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

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

Outcome Measures Completion

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

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

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Section I SAFETY

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

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. No Detainee or detainee groups exercise control or authority over other detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-4, Inmate/Resident Rights, Legal Rights of Inmates/Residents, addresses this requirement.
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"/>	Policy states that ICE detainees and non-ICE detainees are protected from the bulleted items listed 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 is trained yearly. The title of the program is Incident Command System/Emergency Plan.
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"/>	Staff disseminates information to the Facility Administrator through the chain of command. Information is provided to the next level supervisor.
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 facility Chief of Security is responsible for the emergency plans. She/he, along with other selected staff members, evaluates and offers proposed changes to the plan.
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"/>	
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"/>	This occurs during initial training and the yearly update. The title of the program is Incident Command System/Emergency Plan
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"/>	
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"/>	

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. Contingency plans include a comprehensive general section with procedures applicable to most emergency situations, including procedures for handling detainees with special needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Contingency plans include a procedure for notification of neighbors residing in close proximity to the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The emergency plan states local law enforcement staff is to notify local residents of facility incidents.
12. The facility has cooperative contingency plans with applicable: <ul style="list-style-type: none"> Local law enforcement agencies State agencies Federal agencies 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has cooperative contingency plans with Pinal County Sheriff, Florence Fire Department, and other local correction facilities. The facility also has a letter of understanding with the Arizona Highway Patrol. The facility has contingency plans with Border Patrol and local ICE facilities.
13. The facility conducts mock emergency exercises with agencies or departments with which they share mutual aid agreements and Memoranda of Understandings. The exercises should test specific emergency plans to assess their effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does conduct mock emergency exercises yearly. The latest mock mobilization did not utilize the agencies with which the facility has mutual aid agreements or Memoranda of Understandings.
14. All staff receives copies of the Facility Hostage policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Staff does not receive copies of the Hostage policy. They do sign a training form indicating they were trained on all the information in the Hostage policy.
15. (b)(7)(e) Within 24 hours after release, hostages are screened for medical and psychological effects.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. During initial training and yearly in-service, staff
				(b)(7)(e)
16. The facility maintains a list of translator services in the event one is needed during a hostage crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does have a list of translators that are part of the facility staff, if translation is needed.

PART 1 – 1. EMERGENCY PLANS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility emergency plan has a section specifically detailing the process available for staff and detainees to obtain medical treatment during and after an incident.
18. The Food Service Department maintains at least 3-days' worth of emergency meals for staff and detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility food service department maintains a minimum of three days' worth of food to create meals for staff and detainees during an emergency.
19. Written plans illustrate locations of shut-off valves and switches for utilities (water, gas, electric).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility emergency plan contains a site and building plan that includes locations of gas, electric, and water shut-off valves.
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"/>	
21. (MANDATORY) Written procedures cover: <ul style="list-style-type: none"> • Work/Food Strike • Fire • Environmental Hazard • Detainee Transportation System Emergency • ICE-wide Lockdown • Staff Work Stoppage • Disturbances • Escapes • Bomb Threats • Adverse Weather • Internal Searches • Facility Evacuation • Detainee Transportation System Plan • Hostages (Internal) • Civil Disturbances 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility emergency plan outlines steps to be taken in case of a work/food strike, fire, environmental hazard, detainees 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) and civil disturbances.
22. The Emergency Plans specify a procedure for post-emergency debriefings and discussions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility Emergency Plan and the facility policy clearly describe this process.

PART 1 – 1. EMERGENCY PLANS

☒ Meets Standard

☐ Does Not Meet Standard

☐ N/A

☐ Repeat Finding

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

The facility has Emergency Plans that meet the requirements of this PBNDS. Local policy was reviewed and it provides a comprehensive listing of procedures to follow in various emergency situations. The master emergency manual was reviewed. This manual contains a comprehensive set of contingency plans for all types of emergencies. Interviews with staff indicated a familiarization with the emergency plan and how to locate it, if necessary. Staff interviewed also were aware of the requirement that (b)(7)e Staff is trained to recognize signs of unrest during both pre-service and in-service training. The facility had a mobilization during this year. However, the agencies with which the facility has a memorandum of understanding and mutual aid agreements were not involved.

The facility does not have a Hostage Negotiation Team. If necessary, the Florence Police Department Hostage Negotiation Team is used. All staff is provided with first responder training for hostage incidents.

(b)(6), (b)(7)(c) / September 15, 2011

Reviewer's Signature / Date

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

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (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"/>	Facility policy 8-5, Control of Hazardous Chemicals and Materials, establishes facility procedures for storing, issuing, and maintaining inventories.
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"/>	Visual observation of hazardous material inventories during the site review appeared accurate and current and were consistent with facility policy.
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"/>	Complete MSDS files are maintained in the Safety Office and Medical Department. They include a list of storage areas, plant diagram, and legend.
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"/>	Personal protective equipment is available for use with hazardous materials. Hazards are to be reported to the Safety Manager.
5. The MSDS are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> Quantities are limited. Detainees are trained. Staff always supervises detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not allow detainees to utilize hazardous materials. Staff members are responsible for the application and use of hazardous materials.
7. All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Lighting fixtures and electrical equipment are installed in storage rooms and other hazardous areas and meet the National Electrical Code requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Excess flammables, combustibles, and toxic liquids are disposed of properly in accordance with MSDS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, for example, shoe dye. All such products are clearly labeled as such. "Accountability" includes issuing such products to detainees in the smallest workable quantities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Products containing methyl alcohol identified on the facility hazardous materials inventory are utilized only by facility staff members.
12. Every employee and detainee using flammable, toxic, or caustic materials receives advanced training, in accordance with OSHA standards, in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employees are required to attend annual hazardous material training.
13. (MANDATORY) The facility complies with the most current edition of applicable codes, standards, and regulations of the National Fire Protection Association (NFPA) and the Occupational Safety and Health Administration (OSHA).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility complies with both the NFPA and OSHA standards. Documentation from the most recent inspection by the Fire Marshal confirmed that the facility complies with the current fire codes and standards.
14. A technically qualified staff member conducts fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The safety manager conducts monthly inspections. The Florence Fire Department conducts and documents annual inspections.
15. The Safety Office (or officer) maintains files of inspection reports, including corrective actions taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. (MANDATORY) The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility fire plan is approved by the Florence Fire Department.
17. The plan requires: <ul style="list-style-type: none"> Monthly fire inspections. Fire protection equipment strategically located throughout the facility. Public posting of emergency plan with accessible building/room floor plans. Exit signs and directional arrows. An area-specific exit diagram conspicuously posted in the diagrammed area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Fire drills are conducted and documented quarterly in all facility locations including the administrative area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A sanitation program covers barbering operations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a comprehensive barbering operations sanitation program.
20. The barbershop has the facilities and equipment necessary to meet sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The housing unit barber shops are equipped with hot and cold running water in dedicated sinks. Sanitation equipment is provided for clippers and combs.

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
21. The sanitation standards are conspicuously posted in the barbershop.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure govern the handling and disposal of needles and other sharp objects.
23. All items representing potential safety or security risks are inventoried and a designated individual checks this inventory weekly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility safety manager reviews perpetual inventories of items representing potential safety risks on a weekly basis.
24. Standard cleaning practices include: <ul style="list-style-type: none"> Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a comprehensive cleaning and housekeeping plan and establishes a schedule. Staff is charged with follow up reviews to ensure compliance.
25. Spill kits are readily available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains spill kits in the medical, safety and food service departments.
26. A licensed medical waste contractor disposes of infectious/bio-hazardous waste.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility disposes of medical waste through a contract service with Stericycle, Inc., Louisville, KY.
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"/>	Facility staff attends annual training in the prevention of contact with blood and body fluids.
28. Do the methods for handling/disposing of refuse meet all regulatory requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility disposes of solid waste through a contract service with Waste Management, Phoenix, AZ.
29. A Licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. <ul style="list-style-type: none"> At least monthly. The pest-control program includes preventive spraying for indigenous insects. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a contract for pest control services with Johnny, Reeves Termite and Pest Control, Coolidge, AZ.
30. Drinking water and wastewater is routinely tested according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The City of Florence, the facility water provider, contracts with Legend Technical Services, Phoenix, AZ, for water testing. Results are provided to the facility maintenance department.

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
31. Emergency power generators are tested at least every two weeks. <ul style="list-style-type: none"> Other emergency systems and equipment receive testing at least quarterly. Testing is followed-up with timely corrective actions (repairs and replacements). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility maintenance staff tests the emergency generator weekly. Periodic testing and service is conducted by Lofton Caterpillar, Phoenix, AZ.
32. The Facility appears clean and well maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Hazardous material storage rooms meet the security and structural requirements of the standard. Storage cabinets meet the physical requirements specified in the standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. The Health Services Administrator has implemented a program supporting a high level of environmental sanitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 12-100, Daily Housekeeping Plan, requires the medical department maintain a high level of environmental sanitation.
35. The Health Services Administrator conducts medical-facility inspections daily. Each inspection includes noting the condition of floors, walls, windows, horizontal surfaces, and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility charge nurse on each shift completes daily inspections of the medical department.
36. The assigned staff member shall: Conduct special investigations and comprehensive surveys of environmental health conditions, and provide advisory, consultative, inspection, and training services regarding environmental health conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility safety officer is charged with the completion of investigations and surveys. Findings are reported to the safety committee to establish a plan of action.
37. The assigned staff member is responsible for developing and implementing policies, procedures, and guidelines for the environmental health program. These guidelines are intended to evaluate and eliminate or control as necessary, sources of injuries and modes of transmission of agents or vectors of communicable diseases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Environmental health and safety conditions shall be maintained at a level that meets recognized standards of safety and hygiene, including those from the: <ul style="list-style-type: none"> American Correctional Association, Occupational Safety and Health Administration, Environmental Protection Agency, Food and Drug Administration, National Fire Protection Association's Life Safety Code, and National Center for Disease Control and Prevention. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 1 – 2. ENVIRONMENTAL HEALTH AND SAFETY

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

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

The facility has established policies, procedures, and practice to support high standards of cleanliness and sanitation, safe work practices, and control of hazardous materials. Additionally, a comprehensive fire plan has been established and approved by the local fire department to support fire prevention and evacuation. Staff appeared to be trained in the implementation of the process and benchmarks used by facility management to ensure compliance. The facility appeared clean and well maintained during the site review.

(b)(6), (b)(7)(c) September 15, 2012
Reviewer's Signature / Date

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

PART 1 – 3. TRANSPORTATION (BY LAND)

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All transport staff have signed to acknowledge that they have reviewed and comply with all local, state and federal motor vehicles laws and regulations.
2. Every transporting officer required to drive a commercial size vehicle has a valid Commercial Driver's License (CDL) issued by the state of employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copies are retained by the Lieutenant in charge of transportation. Files were reviewed by this inspector.
3. Supervisors maintain records for each vehicle operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Documentation indicating annual inspection of vehicles and annual inspection in accordance with state statutes is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Documentation indicating safety repairs are completed immediately and vehicles are not used until they have been repaired and inspected is available for review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This information is retained on a computer that scans and saves all repair documentation of transport vehicles.
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"/>	A checklist is used for each vehicle. Transporting officers report deficiencies affecting operability. Any issues involving operability are corrected immediately or upon return before the vehicle is utilized for another transport.
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 does not conduct long term transports. Transport of detainees on emergency hospital runs only occurs. Non-ICE detainees are only transported to court. All other transport is provided by ICE for 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
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"/>	The facility has a bus. When used to transport non-ICE detainees, the (b)(7)(E) assigned transporting staff have CDLs. When buses travel in multiple groups there are (b)(7)(E) drivers with CDLs per vehicle. If it is necessary to move an empty vehicle, an unaccompanied driver with a CDL will drive the vehicle.
9. The transporting officer inspects the vehicle before the start of each detail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Positive identification of all detainees being transported is confirmed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
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. All uniformed officers wear their issued body armor in (b)(7)(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Whenever the facility transports an ICE detainee (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 crew conducts a visual count before leaving any pick-up or drop-off point, and whenever the vehicle stops for whatever reason.
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"/>	
16. Officers ensure that no one contacts the detainees. <ul style="list-style-type: none"> (b)(7)(e) officer remains in the vehicle at all times when detainees are present. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(e) staff member stays with the vehicle at all times to prevent contact with other persons.
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 does not conduct any transports in excess of 60 miles. Meals are not provided by the facility for detainees on any transfer.

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
<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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All ICE detainees being removed from this facility are brought to the Florence Detention Center (FDC), for processing. No meals are provided. If the detainee is transferred from the FDC, meals are provided by staff at that facility.
<p>19. Vehicles have:</p> <ul style="list-style-type: none"> <div style="background-color: #cccccc; padding: 10px; text-align: center;">(b)(7)(e)</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The vehicles are clean and sanitary at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<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"/>	Any time an ICE detainee or non-ICE detainee is transported to another facility his/her property is inventoried, inspected, and accompanies the detainee. Property for ICE detainees is held at the FDC. If the detainee is transferred, ICE staff are responsible to inventory, inspect, and transport the property.

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"/>	

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.)

Transportation is provided by both ICE and local facility staff. The staff member in charge of this area has files for every driver that is utilized for transportation. Files were reviewed, and included all information required by this standard. Each vehicle also has a file that includes all information required by this standard. The post orders for this assignment include a comprehensive listing of emergency contingency plans. Transportation Unit post orders are signed daily by transportation staff.

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

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

Section II SECURITY

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

PART 2 – 4. ADMISSION AND RELEASE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Admission processing includes an orientation of the facility. The orientation includes; unacceptable activities and behavior, and corresponding sanctions. How to contact ICE. The availability of pro-bono legal services and how to pursue such services. Schedule of programs, services, daily activities, including visitation, telephone usage, mail service, religious programs, count procedures, access to and use of the law library and the general library; sick-call procedures, and the detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an orientation that includes the detainee handbook. The other requirements of this component are only applicable to SPCs and CDFs. Detainees receive a facility handbook, the ICE National Detainee Handbook, and a verbal orientation. All of the topics included in this component are addressed in the handbook, except information regarding the availability of pro-bono legal services. Prior to the end of the inspection, an addendum to the handbook was issued which provided information about pro bono legal organizations.
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"/>	All detainees are screened by medical staff upon admission to the facility and before being assigned to general population.
3. When available, accompanying documentation is used to identify and classify each new arrival. In SPCs and CDFs, new detainees shall remain segregated from the general population during the orientation and classification period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring new detainees to be segregated from the general population during the orientation and classification period is specific to SPCs and CDFs. ICE provides documentation for each detainee being admitted. Per Policy 18-1, Internal Classification Assessment System, new detainees are to remain separated from general population until the orientation and classification period is completed.
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"/>	Policy 9-5, Searches of Inmates/Residents and Various Locations, addresses search procedures. Searches are conducted by officers of the same sex in an area that affords privacy.

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
5. Detainees are subjected to a strip search only when reasonable suspicion has been established and not as routine policy. Non-criminal detainees are never subjected to a strip search but are patted down unless cause or reasonable suspicion has been established. All strip searches are documented on G-1025, or equivalent, with proper supervisory approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that requires all strip searches to be documented on G-1025, or equivalent, with proper supervisory approval is specific to SPCs and CDFs. All ICE detainees at this facility are non-criminal. Strip searches only occur when there is reasonable suspicion and with a Captain's approval. All incidents involving strip searches are documented, using Form G-1025.
6. The "Contraband" standard governs all personal property searches. IGSA's and CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy. All identity documents are inventoried and given to ICE staff for placement in the A-file. All funds and valuables are safeguarded in accordance with ICE Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Staff completes Form I-387 or similar form for CDFs and IGSA's for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Property for ICE detainees is stored at the Florence Detention Center (FDC). When detainees are transferred from this facility, they are sent to the staging facility at the FDC for processing. The facility has a grievance process. However, it is never used, since all detainee property is stored at FDC. Any claim for lost or missing property is handled by ICE staff at that facility.
8. Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. All releases are coordinated with ICE.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All releases are scheduled and coordinated by ICE staff assigned to the FDC.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All personal property is secured at the FDC. Detainees receive receipts for property stored at that facility.
12. The facility has a system to maintain accurate records and documentation for admission, orientation, and release.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
13. ICE staff enters all information pertaining to release, removal, or transfer of all detainees into the Enforce Alien Detention Module (EADM) within 8 hours of action.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Upon entering and leaving this facility, all detainees are processed through the FDC. ICE staff located at FDC is responsible for entering appropriate information into EADM. Several detainee cases were viewed on the EADM system.
14. All orientation material shall be provided in English, Spanish, and other language(s) as determined by the Field Office Director.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Orientation material is provided in both English and Spanish.

PART 2 – 4. ADMISSION AND RELEASE

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

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

All ICE detainees received at this facility, transfer from the staging facility at the Florence Detention Center (FDC). Prior to being transferred to this facility, ICE staff inventory, store, and provide receipts for personal property of detainees. Detainees are also classified there.

Upon being admitted to this facility, detainees receive a medical and mental health screening. Additionally, detainees are provided with a handbook and verbal orientation as well as bedding, linens, and clothing.

(b)(6), (b)(7)(c) September 15,
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PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. SPC and CDF facilities use the required Objective Classification System. IGSAs use an objective classification system or similar system for classifying detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the facility use the required Objective Classification System is specific to SPCs and CDFs. All ICE detainees are classified by ICE staff at the Florence Detention Center (FDC) prior to their arrival and at regular intervals thereafter. In addition, facility staff also classifies detainees, held at this facility, according to Policy 18-1, Internal Classification Assessment System (ICAS).
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"/>	
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"/>	ICE provides an information package on all ICE detainees committed to this facility.
4. Staff uses only information that is factual, and reliable to determine classification assignments. Opinions and unsubstantiated/ unconfirmed reports may be filed but are not used to score detainee classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Only level 1 and 2 detainees are housed at this facility. There are two housing units dedicated to ICE detainees.
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"/>	All ICE detainees are given the same opportunity for recreation. ICE detainees recreate together.
7. Detainee work assignments are based upon classification designations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are not allowed to work outside of their housing units. Non-ICE detainees are eligible for work assignments based upon their classification status.

PART 2 – 5. CLASSIFICATION SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. The classification process includes reassessment/reclassification. The First Reassessment is to be completed 60 days to 90 days after the initial assessment. Subsequent reassessments are completed at 90 day to 120 day intervals. Special Reassessments are completed within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring subsequent reassessments to be completed at 90 day to 120 day intervals is specific to SPCs and CDFs. The facility classification policy establishes a six-month reclassification period. However, all detainees receive 30, 60, and 90 day classification reassessments performed by ICE staff assigned to the FDC. Special reassessments are completed within the required time frames.
9. The classification system includes standard procedures for processing new arrivals' appeals. Only a designated supervisor or classification specialist has the authority to reduce a classification-level on appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component that indicates that only a designated supervisor or classification specialist to have the authority to reduce a classification-level on appeal is specific to SPCs and CDFs. Per Policy 18-1, Internal Classification Assessment System, classification appeals are handled by the Classification Supervisor. If there is a difference between the facility classification and the ICE classification levels, facility staff contact ICE for a final decision.
10. Classification appeals are resolved w/in 5 business days. Detainees are notified of the outcome within 10 business days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring classification appeals to be resolved in five business days is specific to SPCs and CDFs. Detainees appeal Classification decisions, using detainee request forms which are responded to within 72 hours.
11. Classification designations may be appealed to a higher authority such as the Facility Administrator or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Appeals regarding classification designations are referred to the Classification Supervisor. If that decision is further appealed, it is directed to the Assistant Warden.

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
12. The Detainee Handbook or equivalent for IGSA's explains the classification levels, with the conditions and restrictions applicable to each.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not address classification levels, and the conditions and restrictions associated with each. Prior to the completion of this inspection, an addendum to the handbook was issued which includes an explanation of the classification levels and conditions and restrictions associated with each.
13. In SPCs and CDFs detainees are assigned color-coded uniforms and IDs to reflect classification levels. In IGSA's a similar system is utilized for each level of classification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring detainees to be assigned color-coded uniforms and IDs to reflect classification levels is specific to SPCs and CDFs. Detainees receive colored clothing associated with the unit to which they are assigned. Level 1 and 2 detainees are housed in the same unit and are issued green uniforms.

PART 2 – 5. CLASSIFICATION SYSTEM

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

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

ICE detainees at this facility are classified by ICE personnel assigned to the Florence Detention Center (FDC), as well as by Corrections Corporation of America (CCA) staff assigned to this facility. Only level 1 and 2 detainees are housed at this facility. ICE classification reviews occur at a frequency consistent with the ICE PBNDS. Detainees are provided with the opportunity to appeal decisions. All classification decisions are properly documented.

The handbook does not include an explanation of the classification levels and the restrictions and conditions associated with each level. An addendum to the handbook was issued prior to the completion of this inspection which includes an explanation of the classification levels.

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PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility follows a written procedure for handling contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requirement for staff to inventory, hold, and report contraband to the proper authority for action/possible seizure is specific to SPCs and CDFs. Staff inventory, hold and report contraband to the appropriate agency for possible prosecution. Facility policy 9-6, Contraband Control, Security and Control, covers the handling of contraband.
2. Contraband that is government property is retained as evidence for potential disciplinary action or criminal prosecution.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has no government property on site as the facility is run by a private corporation, Corrections Corporation of America.
3. Staff returns property not needed as evidence to the proper authority. Written procedures cover the return of such property.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy covers the return of property not needed as evidence.
4. Altered property is destroyed following documentation and using established procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Before confiscating religious items, the Facility Administrator or designated investigator contacts a religious authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has two Chaplains that are contacted prior to any religious material being confiscated.
6. Staff follows written procedures when destroying hard contraband that is illegal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Hard contraband that is illegal (under criminal statutes) is retained and used for official use, e.g. training purposes. <ul style="list-style-type: none"> If yes, under specific circumstances and using specified written procedures. Hard contraband is secured when not in use. Soft Contraband is mailed to a third party or stored in accordance with the Detention Standard on Funds and Personal Property. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The sections of the component that requires hard contraband that is illegal (under criminal statutes) if retained, be secured when not in use and be used under specific written procedures is specific to SPCs and CDFs. The facility does not retain any contraband for training purposes or other official use. Soft contraband is handled as required by facility policy in compliance with the Standard on Funds and Personal Property.

PART 2 – 6. CONTRABAND

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Detainees receive notification of contraband rules and procedures in the Detainee Handbook and notified when property is identified and seized as contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facilities with Canine Units only use them for contraband detection.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The canines are used for contraband detection, only, and are never used around or near detainees.

PART 2 – 6. CONTRABAND

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

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

This inspector reviewed policy and procedure, contraband logs, monitored how contraband is processed, reviewed search documents, and interviewed staff in review of this standard. All areas reviewed reflected that the facility meets this standard. The facility has a secure area for all contraband. Each item is noted in the contraband log and documentation occurs until disposition is approved by the facility head. The facility does use canines for detection of contraband. The canines are never used around or near detainees.

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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"/>	Each assignment area has a supervisory signature log. The shift supervisor signs whenever he/she visits the assignment or unit. These logs were reviewed during inspection and found to be in compliance.
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"/>	The facility has no female ICE detainees. The non-ICE detainee females are housed in a separate unit that is staffed only by females. There are no units where men and women are housed together.
3. Comprehensive annual staffing analysis determines staffing needs and plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The staffing analysis is conducted yearly with the Chief of Security and the Warden. There are also adjustments made to staffing levels when contracts are renewed, received, or cancelled.
4. Essential posts and positions are filled with qualified personnel.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Several daily assignment records from the past year were reviewed against the weapons qualification dates of the person assigned to armed posts. All were appropriately qualified with the weapons for which they are assigned.
5. Every Control Center officer receives specialized training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Policy restricts staff access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy states that all persons who enter the Control Center must be approved by the Shift Commander, if not previously on an approved list.
7. Detainees do not have access to the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainees and non-ICE detainees are not allowed in the Control Center.
8. Communications are centralized in the Control Center.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All communications are centralized in Central Control.
9. Facility security and safety will be monitored and coordinated by a secure, well-equipped, and continuously staffed control center.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. The Control Center maintain employee Personal Data Cards (Form G-74 or contract equivalent).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This facility does not utilize the Form G-74, but the facility does have a recall list.
11. Recall lists include the current home telephone number of each employee. Phone numbers are updated as needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does have a recall list that contains phone numbers of each employee. The list is updated on a monthly basis.
12. Staff makes watch calls every half-hour between 6 PM and 6 AM.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility makes watch calls every 30 minutes between 6:00 p.m. and 6:00 a.m.
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"/>	Log books were reviewed for all three shifts. Each had the required information noted in the log.
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 ID of this inspector was checked and the process viewed of several other staff following this procedure while waiting to enter and exit the facility.
15. All visits officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The facility has a secure, color-coded visitor pass system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Officers monitor all vehicular traffic entering and leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility. Each entry contains: <ul style="list-style-type: none"> The driver's name Company represented Vehicle contents Delivery date and time Date and time out Vehicle license number Name of employee responsible for the vehicle during the facility visit 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of current and several past logs for incoming and departing vehicles found all bulleted items in this component were recorded.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. By policy, vehicles are required to be searched. This Inspector directly observed this process for a vehicle exiting the facility.
20. The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-6, Security and Control, Contraband Control, addresses this requirement.
21. The front entrance has a sally-port type entrance, with interlocking electronic doors or grilles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The facility's perimeter will ensure that detainees remain within and that public access is denied without proper authorization.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Housing area searches occur at irregular times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Logbooks were reviewed and housing area searches were being conducted at irregular times.
25. Security officer posts located in or immediately adjacent to detainee living areas to permit officers to see or hear and respond promptly to emergency situations. Personal contact and interaction between staff and detainees is required and facilitated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. There are post orders for every security officer post.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Detainee movement from one area to another area is controlled by staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a hall officer that controls all movement in the halls of the facility to ensure ICE detainees do not mix with non-ICE detainees.
28. Living areas are constructed to facilitate continuous staff observation of cell or room fronts, dayrooms, and recreation space.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Every search of the SMU and other housing units is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Logbooks were reviewed and contained information verifying searches of the SMU. Searches of other units were recorded in the unit logs
30. The SMU entrance has a sally port.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This inspector directly observed the operation of the sally port entrance for the SMU.

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
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"/>	Tools are listed on an inventory list and verified by a shift Lieutenant or higher supervisor prior to being taken into or out of the SMU.
32. The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a comprehensive security inspection policy. The bulleted sections of this component are only applicable to SPCs and CDFs. Facility Policy 9-7 gives clear and concise directions to ensure that all bulleted items are covered.
33. Every officer is required to conduct a security check of his/her assigned area. The results are documented.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Every officer is required to conduct a security check of his area or unit and record the results in the logbook.
34. Documentation of security inspections is kept on file.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Procedures ensure that recurring problems and a failure to take corrective action are reported to the appropriate manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Procedures place the responsibility of taking action on recurring problems with the Chief of Security.
36. Tools being taken into the secure area of the facility are inspected and inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A shift Lieutenant or higher level supervisor must approve the inventory by signing that he/she inspected and authorized which tools entered the facility for use. When the tools are being taken out of the facility, the shift Lieutenant also ensures that the same tools that were brought into the facility are taken out of the facility.
37. Storage and supply rooms; walls, light and plumbing fixtures, accesses, and drains, etc. undergo frequent, irregular searches. These searches are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Walls, fences, and exits, including exterior windows, are inspected for defects once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Central Control logbook documents defects.
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"/>	The Central Control logbook documents the results of daily checks of the perimeter fence and alarm systems.
40. Visitation areas receive frequent, irregular inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 7. FACILITY SECURITY AND CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 security inspections cover all areas of the facility.
42. The Maintenance Supervisor and Chief of Security or equivalent make monthly fence checks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The monthly fence checks are done by the maintenance supervisor, Chief of Security and noted in the Central Control logbook.

FACILITY SECURITY AND CONTROL

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

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

This inspector reviewed facility policy and procedure, reviewed inspection reports, reviewed post orders, inspected the facility physical plant, and interviewed staff. All areas of review reflected facility compliance with this standard. The facility has policy and procedures which meet the requirements of this standard. Local policy was reviewed with facility staff assigned to the Control Center. Logbooks for general information and the sally port were reviewed. They reflected a good flow of information, as required by this standard. Interviews with Control Center and sally port staff indicated that they understood their security duties.

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PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainee funds and valuables are properly separated and stored. Detainee funds and valuables are accessible to designated supervisor(s) only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility processes funds to be placed on an ICE detainee's account. ICE detainee property is stored at the Florence Detention Center (FDC).
2. Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainee property is stored at the FDC.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainee property is stored at the FDC. Funds are collected by facility staff for deposit in the detainee's account.
4. (b)(7)(E) officers are present during the processing of detainee funds and valuables during admissions processing to the facility. (b)(7)(E) officers verify funds and valuables.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. (b)(7)(E) staff members verify detainee funds during the admissions process.
5. For IGSA and CDFs, Is the facility using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Staff gives the detainee the original inventory form, filing copies in the detainee's detention file and the personal property container.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
7. Staff forwards an arriving detainee's medicine to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Staff searches arriving detainees and their personal property for contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainee property is stored at the FDC. Policy 9-5, Searches of Inmates/Residents and Various Locations, addresses search procedures. Searches are conducted by officers of the same sex in an area that affords privacy.
9. Property discrepancies are immediately reported to the Chief of Security or equivalent.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
10. Staff follows written procedures when returning property to detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainee property is stored at the FDC.
11. CDF/IGSA facility procedures for handling detainee property claims are similar to the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainee property is stored at the FDC. Any property claims are addressed by ICE staff.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The facility attempts to notify an out-processed detainee that he/she left property in the facility. <ul style="list-style-type: none"> By sending written notice to the detainee's last known address; via certified mail; The notice states that the detainee has 30 days in which to claim the property, after which it will be considered abandoned. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainee property is stored at the FDC. Any property claims are handled by ICE staff.
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 two officers to be present when removing/documenting the removal of funds from a detainee's possession.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility utilizes two staff to verify detainee funds.
15. Staff issue and maintain property receipts (G-589s) in numerical order.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC. ICE staff provide detainees with receipts.
16. Staff complete and distribute the G-589 in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
17. The processing officer records each G-589 issuance in a G-589 logbook. The record includes the initials and star numbers of receipting officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
18. Staff tags large valuables with both a G-589 and an I-77.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
19. The supervisor verifies the accuracy of every G-589.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
20. The supervisor ensures that: <ul style="list-style-type: none"> Detainee funds are, without exception, deposited into the cash box; Every property envelope is sealed. All sealed property envelopes are placed in the safe. Large, valuable property is kept in the secured locked area. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
21. Staff tags every baggage/facility container with an I-77, completed in accordance with the ICE standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
22. Staff secures every container used to store property with a tamper-proof numbered strap.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
23. A logbook records detainee name, A-number/detainee-number, baggage-check/ I-77 number, security tie-strap number, property description, date issued and date returned.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
24. In SPCs, the Supervisory Immigration Enforcement Agent, accompanied by a detention staff member conducts a comprehensive weekly audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
25. The Facility Administrator has established quarterly audits of baggage and non-valuable property as facility policy, the audits occur each quarter and audits are verified and entered in the log.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.
26. The facility positively identifies every detainee being released or transferred.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainees are positively identified and all transfers are made to the FDC.
27. Staff routinely informs supervisors of lost/damaged property claims. Claims are properly investigated and missing or damaged property claim reports are filed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The section of this component requiring staff to routinely inform supervisors of lost/damaged property claims is specific to SPCs and CDFs. ICE detainee property is stored at the FDC. Any claims are handled by ICE staff.
28. Every lost/damaged property report completed in accordance with the ICE standard on an I-387 (or equivalent). The Facility Administrator receives a copy and staff place the original in the detainee's A-file, retaining a copy in the detainee's detention file.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee property is stored at the FDC.

PART 2 - 8. FUNDS AND PERSONAL PROPERTY

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

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

The facility receives detainees from the Florence Detention Center (FDC). Detainees may arrive with funds for deposit into their account. Funds are collected by two staff members, verified, secured in a seal envelope, and placed in a lock box. The facility business manager collects the funds and creates the detainee's account. All property and valuables of ICE detainees are maintained by ICE at the FDC.

(b)(6), (b)(7)(c) / September 15,
Reviewer's Signature / Date

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

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

ICE 2012 FOIA03030.015684

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The hold room is situated in a location within the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold rooms are located inside the secure perimeter.
2. The hold rooms are clean, in good repair, well ventilated, well lit, and all activating switches located outside the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring hold rooms be well ventilated, well lit, and that all activating switches are located outside the room is specific to SPCs and CDFs. The hold rooms are well ventilated. All activating switches are located outside the room. The hold rooms when viewed by this inspector were clean and in good repair.
3. The hold rooms contain sufficient seating for the number of detainees held.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms provide enough seating for the number of detainees placed there.
4. No bunks/cots/beds or other related make shift sleeping apparatuses are permitted inside hold rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. No make shift sleeping apparatus, bunks, cots, or bunks are placed in the hold rooms.
5. Hold room walls and ceilings are escape and tamper resistant.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility hold room walls and ceilings are escape and tamper proof.
6. Detainees are not held in hold rooms for more than 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation was reviewed on the Receiving and Discharge area computer that showed no detainee is held in hold rooms for more than 12 hours.
7. Male and females detainees are segregated from each other at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Detainees are provided with basic personal hygiene items such as water, soap, toilet paper, cups for water, feminine hygiene items, diapers and wipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If the hold room is not equipped with toilet facilities, an officer is posted within visual or audible range to allow detainees access to such on a regular basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's hold rooms where ICE detainees are held are equipped with toilet facilities. There are two holding areas with no toilet facilities that are used for non-ICE detainees, if needed.

PART 2 – 9. HOLD ROOMS IN DETENTION FACILITIES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
10. All detainees are given a pat down search for weapons or contraband before being placed in the hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. When the last detainee has been removed, the hold room is inspected for the following: <ul style="list-style-type: none"> Cleaning. Evidence of tampering with doors, locks, windows, grills, plumbing or electrical fixtures is reported to the shift supervisor for corrective action or repair. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While in the Receiving and Discharge area, this inspector observed the cleaning of the hold rooms as well as a review of windows, grills, plumbing or electric, doors, locks and windows to ensure tampering has not occurred.
12. (MANDATORY) There is a written evacuation plan. <ul style="list-style-type: none"> There is a designated officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring the written evacuation plan designate an officer to remove detainees from the hold rooms in case of fire and/or building evacuation, or other emergency is specific to SPCs and CDFs. There is a written evacuation plan posted in the holding area and at the officer's station. The officer at this station is responsible for the removal of ICE detainees and non-ICE detainees from the hold rooms.
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"/>	The facility utilizes the local EMS service for medical emergencies, when necessary.
14. Single occupant hold rooms contain a minimum of 37 square feet (7 unencumbered square feet for the detainee, 5 square feet for a combination lavatory/toilet fixture, and 25 square feet for a wheelchair turn-around area). <ul style="list-style-type: none"> If multiple-occupant hold rooms are used, there is an additional 7 unencumbered square feet for each additional detainee. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The multiple occupant hold rooms have occupancy of 11 and measure 320 square feet. This footage exceeds the required amount for this component.
15. In SPCs designed after 1998 the hold rooms are equipped with stainless steel combination lavatory/toilet fixtures with modesty panels. They are: <ul style="list-style-type: none"> Compliant with the American Disabilities Act. Small hold rooms (1 to 14 detainees) have at least one combi-unit. Large hold rooms (15 to 49 detainees) are provided with at least two combi-units. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The hold rooms are equipped with stainless steel combination units with modesty panels that are compliant with the American Disabilities Act. The capacity of the hold rooms is 11 and they have combo-units in each room.

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
16. In SPCs designed after 1998 the hold rooms have floor drain(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hold rooms have floor drains.
17. In SPCs designed after 1998, the door to the hold room swings outward and the door complies with the specifications outlined in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The doors to the hold rooms swing outward.
18. Family units, persons of advanced age (over 70), females with children, and unaccompanied juvenile detainees (under the age of 18) are not placed in hold rooms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Persons of advanced age are placed in hold rooms. The facility does not accept children or juveniles. If a juvenile is found they will be separated from all ICE detainees and non-ICE detainees.
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"/>	The facility does not accept juveniles. If a juvenile is found, s/he will be separated from all ICE detainees and non-ICE detainees.
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"/>	The portion of this component that requires the log to include the required information specified in the standard is specific to SPCs and CDFs. The facility does maintain a detention log manually which is then transferred to a computer containing and includes all the required information specified in the standard.
21. Officers provide a meal to any detainee detained in a hold room for more than six hours. <ul style="list-style-type: none"> 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"/>	Facility documentation reviewed showed that detainees do not stay in the holding area for more than two hours. The facility does not accept detainee juveniles, small children, or babies. Pregnant non-ICE detainees are handled as the term of the condition requires. If a juvenile is found, s/he will be separated from all ICE detainees and non-ICE detainees and provided a meal.
22. Any detainee with disabilities, including temporary disabilities, will be housed in a manner that provides for his or her safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. The maximum occupancy for the hold room will be posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The occupancy was posted on easily readable signs outside the door.
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"/>	

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
25. Staff does not permit detainees to smoke in a hold room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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 continuously monitored by a staff member outside the hold room whenever they are occupied. This staff member provides constant supervision. This staff member notifies the desk office of any unusual behavior.

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.)*

This inspector reviewed facility policy and procedure and interviewed staff in review of this standard. All areas of review supported facility compliance with this standard. Hold rooms were viewed, measured, and found to be in compliance. The written evacuation plan is easy to find and the process is easy to follow. The receiving policy is clearly written and addresses all requirements of this standard

(b)(6), (b)(7)(c) / September 15, 2012
 Reviewer's Signature / Date

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

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The security officer[s], or equivalent, has attended an approved locksmith training program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility locksmith has attended the Arizona Institute of Locksmithing, which was supported by a copy of the certificate earned.
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 Chief of Security has responsibility for key-related issues.
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 training staff provides all new employees and existing employees key control training during the 40-hour yearly update. The training officer provided documentation to verify that staff had attended.
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"/>	
5. The security officer follows a preventive maintenance program and maintains all preventive maintenance documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The security officer, or equivalent, develops policy and procedures to ensure safe combinations integrity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security developed a procedure to ensure safe combination security.
8. Only dead bolt or dead lock functions are used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Non-authorized locks (as specified in the Detention Standard) are not used in detainee accessible areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility does not use grand master keying systems.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is no grand master keying system for this facility.
11. All worn or discarded keys and locks cut up and properly disposed of.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disposal of discarded keys and locks is recorded and retained by the Chief of Security.
12. Padlocks and/or chains are not used on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to <ul style="list-style-type: none"> Occupational Safety and Environmental Health Manual, Chapter 3 National Fire Protection Association Life Safety Code 101. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. The operational 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"/>	
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"/>	
16. Emergency keys are available for all areas of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The facility uses a key accountability system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a chit system that provides a picture of the staff member that is obtaining any key rings.
18. Authorization is necessary to issue any restricted key.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A log is maintained in Central Control to record the authorizing official of restricted keys.
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"/>	
20. The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for the keys to be physically counted daily is specific to SPCs and CDFs. Facility Policy 9-3, Security and Control, Key Control, addresses this component. Keys are physically counted on each shift and documentation is recorded in the Central Control log.
21. All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. <ul style="list-style-type: none"> • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only required for SPCs and CDFs. During new employee training and in annual update training this is addressed. Documentation was provided by the training staff for verification. The bulleted items are all covered in the key control training.
22. Locks and locking devices are continually inspected, maintained, and inventoried.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 10. KEY AND LOCK CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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 facility's Chief of Security is the Security Officer.
24. The designated key control officer is the only employee who is authorized to add or remove a key from a ring.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility Chief of Security is the only employee allowed to authorize the adding or removing of keys from a ring.
25. The splitting of key rings into separate rings is not authorized.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Facility policy does not allow the splitting of key rings into separate 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.)

This inspector reviewed facility policy and procedure, reviewed the locksmith's credentials, reviewed training records, inspected key containment areas including emergency keys, reviewed inventories, and interviewed staff. All areas of review supported the facility's compliance with this standard. Key and lock control is a strength of this facility. Keys are inventoried by a process that is easy to follow. The chit (tag) system appeared to be well thought out. The key control policy is clearly written and addresses all requirements of this standard

(b)(6), (b)(7)(c) / September 15, 2012
Reviewer's Signature / Date

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

PART 2 – 11. POPULATION COUNTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Staff conducts a formal count at least once each 8 hours (no less than three counts per day). At least one of these counts shall be a face to photo count.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A face-to-photo count is done at 2200 hours daily.
2. Activities cease or are strictly controlled while a formal count is being conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility restricts all movement in the hallways. Detainee food service workers and detainees in health care are counted at those particular locations.
3. There is a system for counting each detainee, including those who are outside the housing unit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Receiving and Discharge staff prepares the count of detainees located out of the facility. Food service staff and the medical officer also provide a count of detainees remaining in their area.
4. Formal counts in all units take place simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Counts are all done simultaneously during each determined count time.
5. Officers do not allow detainee participation in the count.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There is no detainee participation allowed in the count process.
6. A face-to-photo count follows each unsuccessful recount.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility works to resolve count problems within an hour after count begins. If problems still occur with the count, the Shift Supervisor goes to the problem area to attempt to resolve the problem. If, after these procedures are completed the count still does not clear, a face-to-photo count occurs.
7. Officers positively identify each detainee before counting him/her as present.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The ICE detainees and non-ICE detainees are counted on their bunk during count.
8. Written procedures cover informal and emergency counts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The control officer (or other designated position) maintains an "out-count" record of all detainees temporarily out of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The count officer in Receiving and Discharge maintains the facility out count.

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"/>	The training for count is provided at initial training for all employees. Training records are maintained on computer files.

PART 2 – 11. POPULATION COUNTS

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

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

This inspector reviewed facility policy and procedure, reviewed count documents, monitored the count process, and interviewed staff. This Inspector observed the count process from the beginning to the final clearing of the count. The facility Receiving & Discharge area maintains the master count of detainees inside the secure perimeter. All assignments report their body count to the shift commander. The unit and assignment staff reports the count to the shift commander where the total count is tabulated and reconciled.

(b)(6), (b)(7)(c) / September 15
 Reviewer's Signature / Date

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

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Every fixed post has a set of Post Orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. In SPCs and CDFs, Post Orders are arranged in the required six-part folder format.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does not arrange its post orders 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 were reviewed on assignments and were found to have the latest inserts dated and signed by the Warden.
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 is responsible for keeping all post orders up to date and ensuring they are signed by the facility head and placed in the post order books.
5. Review, updating, and reissuing of Post Orders occurs regularly and at least annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The facility administrator authorizes all Post Order changes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The facility administrator has signed and dated the last page of every section.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility administrator has signed and dated the first page of every section but not the last page.
8. A Post Orders master file is available to all staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Procedures keep Post Orders and logbooks secure from detainees at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-10, Security and Control, Post Order Management, details the procedure used to secure logbooks and post orders.
10. Copies of the applicable Post Orders are retained at the post only if secure from detainee access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Supervisors ensure that officers understand the Post Orders, regardless of whether the assignment is temporary, permanent, or due to an emergency.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. In SPCs and CDFs, each time an officer receives a different post assignment, he or she is required to read, sign, and date those Post Orders to indicate he or she has read and understands them.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility currently requires Post Orders to be signed daily.
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"/>	Staffing rosters were reviewed and all staff that is assigned armed posts had qualified before assuming an armed post.

PART 2 – 12. POST ORDERS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
14. Post Orders for armed posts, and for posts that control access to the institution perimeter, clearly state that: <ul style="list-style-type: none"> Any staff member who is taken hostage is considered to be under duress, and Any order issued by such a person, regardless of his or her position of authority, is to be disregarded. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The post orders (b)(7)(E) include the bulleted items identified in this component.
15. Post Orders for armed posts provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The Post Orders for housing units track the daily event schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility post orders for housing units do not require tracking the daily schedule.
17. Housing unit post officers record all detainee activity in a log. The Post Orders include instructions on maintaining the logbook.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility does require housing unit officers to record all unit activity. However, the post order does not include instructions on maintaining the logbook.

PART 2 – 12. POST ORDERS

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

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

This inspector reviewed facility policy and procedure, reviewed post orders, reviewed assignment rosters, and interviewed staff. All areas reviewed support facility compliance with this standard. Post orders are not arranged in the required six-part format. Several post orders were viewed and found to be in compliance with the requirements of the PBNDS. This Inspector pulled random staffing sheets for different shifts and verified that staff assigned to armed posts were properly trained and had qualified with the assigned weapons.

(b)(6), (b)(7)(c) / September 15, 2012
 Reviewer's Signature / Date

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

PART 2 – 13. SEARCHES OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There are written policy and procedures governing searches of housing areas, work areas and of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The searches of housing areas, work areas, and detainees are addressed in policy 9-5, Searches of Inmates/Residents and Various Locations.
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"/>	Policy 9-5, Searches of Inmates/Residents and Various Locations addresses this requirement.
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 this requirement.
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"/>	Policy 9-5, Searches of Inmates/Residents and Various Locations addresses this requirement.
5. Detainees are pat searched and screened by metal detectors routinely to control contraband.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	During the inspection, detainees were observed frequently being pat searched and screened by metal detectors.
6. Strip Searches are conducted only when there is reasonable belief or suspicion that contraband may be concealed on the person, or a good opportunity for concealment has occurred, and when properly authorized by a supervisor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Strip searches must be approved by a Captain. The policy requires that reasonable suspicion must be established prior to conducting a strip search. Strip searches are documented using the Form G-1025.
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"/>	By policy, body cavity searches may only be conducted, with the approval of the Corrections Corporation of America (CCA) Vice President of Operations. If approved, the search must be conducted by medical personnel. There has not been a body cavity search conducted on an ICE detainee. Staff reported that if there was a request for a body cavity search, ICE would be notified immediately.

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
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"/>	Policy 9-104, Dry Cell Watches, establishes the procedures for the use of "Dry Cells". Reasonable suspicion must be established prior to the use of a dry cell.
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"/>	Evidence that may be used in a criminal case is stored in the Investigations Office. Evidence is properly inventoried, documented, and stored in a secure area.
10. Canines are not used in the presence of detainees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-11, Detention Canine Program, addresses this issue.

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.)

There are sufficient search procedures in place to ensure the protection of staff and detainees and to enhance the security and good order of the facility by detecting, controlling, and properly disposing of contraband.

Strip searches may only be conducted when reasonable suspicion has been established and with the approval of a Captain. If such a search is conducted, the incident is documented with Form G-1025.

Procedures exist to address the use of dry cells and canines within the facility.

(b)(6), (b)(7)(c) / September 15, 2012
Reviewer's Signature / Date

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a Sexual Abuse and Assault Prevention and Intervention Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 14-2, Sexual Abuse Prevention and Response, establishes this program
2. For SPCs and CDFs, the written policy and procedure has been approved by the Field Office Director.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The policy and procedures have not been approved by the FOD.
3. Tracking statistics and reports are readily available for review by the inspectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tracking statistics and reports were readily available for review.
4. All staff is trained, during orientation and in annual refresher training, in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the training curriculum revealed that all staff is trained during orientation and in annual refresher training.
5. Detainees are informed about the program in facility orientation and the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are informed about the program in the detainee handbook as well as on closed circuit television twice each week.
6. The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sexual Assault Awareness Notices were observed on all housing area bulletin boards.
7. The Sexual Assault Awareness Information brochure is available for detainees. (Required in SPCs and CDFs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The Sexual Assault Awareness Information brochure is given to each detainee upon arrival.
8. Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that this screening is part of the intake medical/mental health screening conducted by nursing staff. Interviews with mental health staff indicated that high risk individuals are referred promptly to a mental health professional and counseling is provided.

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. All incidents of sexual abuse or assault by a detainee on a detainee have been documented in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with the facility investigator revealed that all incidents of alleged sexual abuse or assault by a detainee-on-detainee have been documented in the past year. There were two reports made by ICE detainees regarding sexually abusive contact by another detainee. Both were investigated and were unsubstantiated.
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"/>	Interviews with the facility investigator indicated that all incidents or allegations of sexual abuse or assault by staff on a detainee are documented. There were no incidents or allegations of sexual abuse or assault by staff on a detainee in the past year.
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"/>	A review of incident reports, incident investigation reports, and interviews with the facility investigator revealed that there is prompt and effective intervention when any detainee is sexually abused or assaulted. Policy 14-2 requires reporting up the chain-of-command.
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"/>	A review of incident investigation reports revealed that staff conducts a thorough investigation, gathers and maintains evidence, and makes referrals to appropriate law enforcement agencies.
13. When there is an alleged or proven sexual assault, the required notifications are promptly made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of incident investigation reports revealed that when there is an alleged sexual assault, prompt notification is made to ICE and the Florence Police Department.
14. Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with Policy 13-79, Sexual Assault, and verified in interviews with the Health Services Administrator (HSA) and facility investigator, victims are referred to the Scottsdale Osborne Hospital for treatment and gathering of evidence.

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"/>	Records of allegations of sexual abuse or assault are logged into the electronic Incident Report Database and tracked by the facility investigator and a designated staff coordinator.

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.)*

A review of policy, Incident Reports, Incident Investigation Reports, and interviews with staff, indicated that the facility has a comprehensive sexual abuse and assault prevention and intervention program in compliance with ICE standards.

In the past 12 months, there were two allegations of sexually abusive contact made by ICE detainees against other ICE detainees. Both cases were thoroughly investigated and found to be unsubstantiated.

(b)(6), (b)(7)(c) September 15, 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"/>	Policy 10-100, Special Management of Inmates, completely outlines the procedures for the use of the special management unit.
2. A detainee is placed in protective custody status in Administrative Segregation only when there is documentation that it is warranted and that no reasonable alternatives are available.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility documents were reviewed for ICE detainees and non-ICE detainees documenting that Protective Segregation status is only utilized when there are no other reasonable alternatives available.
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"/>	
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"/>	The facility utilizes form SAR (Segregation Activity Report) for documentation. These forms were reviewed for five ICE detainees and non-ICE detainees and indicated that healthcare saw all individuals prior to admittance into the segregation unit. The assessment is noted on a document that is signed and dated with the time by healthcare personnel. This document is placed in the segregation file and retained by the facility until the ICE detainee or non-ICE detainee leaves the facility. Detainee's documentation is forwarded to local ICE SPC where it is retained.
5. There are written policy and procedures to control and secure SMU entrances, contraband, tools, and food carts, in accordance with the Detention Standard on Facility Security and Control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The number of detainees confined to each cell or room does not exceed the capacity for which it was designed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The cells in segregation are designed to house two persons. There has not been a time when more than two persons have been placed in a segregation cell.

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
7. Cells and rooms are well ventilated, adequately lit, appropriately heated and maintained in a sanitary condition at all times.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The segregation unit has a thermometer posted in the unit. At the time of this review, the temperature was 72 degrees. The cells were adequately lit, well ventilated, and maintained in a sanitary condition.
8. Permanent housing logs are maintained in SMUs to record pertinent information on detainees upon admission to and release from the unit, and in which supervisory staff and other officials record their visits to the unit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. A permanent log is maintained in each SMU to record all activities concerning SMU detainees (meals served, recreation, visitors, etc.). In SPCs and CDFs, the SMU log records the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official, and date released.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring the SMU log to have the detainee's name, A-number, housing location, date admitted, reasons for admission, tentative release date for detainees in Disciplinary Segregation, the authorizing official and the date released recorded is specific to SPCs and CDFs. The segregation unit uses form SAR (Segregation Activity Report) to record all activities of each ICE detainee or non-ICE detainee throughout the day. There is also a file folder at each cell door that includes the date admitted, reason for admission, and the authorizing official's signature. Upon release, this whole packet of information is retained in the segregation office for 30 days, and then forwarded to the records office.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has a log located between the gates of the segregation sally port that all persons entering the unit must sign to document time in and out of the unit.

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>11. A Special Management Housing Unit Record is maintained on each detainee in an SMU:</p> <ul style="list-style-type: none"> ▪ In SPCs form I-888 (Special Management Housing Unit Record) is prepared immediately upon the detainee's placement in the SMU. ▪ In CDFs and IGSA facilities form I-888 or a comparable form is used. <p>In SPCs and CDFs:</p> <ul style="list-style-type: none"> ▪ By the end of each shift, the special housing unit officer records: <ul style="list-style-type: none"> ○ Whether the detainee ate, showered, exercised, and took any medication, and ○ Any additional information, for example, if the detainee has a medical condition, has exhibited suicidal or assaultive behavior, etc. ▪ When a health care provider visits an SMU detainee, he or she signs that individual's record, and the housing officer initials the record after all medical visits are completed and no later than the end of the shift. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>IGSAs are only required to have a Special Management Housing Unit Record maintained on each detainee in the SMU, and this is to be recorded on an I-888 or comparable form. All the other bulleted items are only applicable to SPCs and CDFs. The facility does not use the I-888 form. The facility uses a facility specific form SAR (Segregation Activity Report) that records meals, showers and yard activity. This document also includes the healthcare provider visits, signatures, and time visiting the unit.</p>
<p>12. Upon a detainee's release from the SMU, the releasing officer attaches the entire housing unit record to the Administrative Segregation Order or Disciplinary Segregation Order and forwards it to the Supervisor for inclusion in the detainee's detention file.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>This component is only applicable for SPCs and CDFs. When ICE detainees and non-ICE detainees are released from the Segregation Unit, the supervisor of the unit records the date and time and forwards the packet to the Shift Supervisor who forwards the documents to the records office.</p>
<p>13. There are written policy and procedures concerning the property detainees may retain in each type of segregation.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>14. There are written policy and procedures concerning privileges detainees may have in each type of segregation.</p> <p>(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.)</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility policy and procedure indicates that all persons in segregation get the same privileges afforded to general population. If a restriction is needed for any reason, form IDR (Individual Determination Restrictions) is completed and must be signed by the facility head prior to initiating the restriction.</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
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 are allowed out with the other persons secured in Segregation. They are allowed to spend time socializing, watching TV and playing board games. Detainees are not allowed to work in the Segregation Unit due to the facility policy that ICE detainees do not mix with other populations.
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"/>	Staff observations are noted on the SAR (Segregation Activity Record) with times denoting when observed. A record review indicated that all of these observations were made no more than 30 minutes apart. No evidence was found of the need for the persons in segregation to be seen more often than 30 minutes. Mentally disordered persons and suicidal persons are not housed in the SMU.
17. The shift supervisor sees each segregated detainee daily, including weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a Segregation Sign in Log in the segregation sally port. The log documents the date and time when staff visit the segregation unit. These documents are sent to the Chief of Security for retention. Copies of documentation were observed by this Inspector.
18. The facility administrator (or designee) visits each SMU daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. A health care provider visits every detainee in an SMU at least three times a week, and detainees are provided any medications prescribed for them. In SPCs and CDFs, a nurse, doctor or other appropriate health care professional visits the SMU at least once each workday and questions each detainee to identify any medical problems or requests. Any action taken is documented in a separate logbook, and the medical visit is recorded on the detainee's SMU Housing Record (Form I-888).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have a health care provider visit each detainee in the SMU at least three times per week, and detainees are provided any medications prescribed to them. The facility records visits by health care staff on the SAR (Segregation Activity Report). Past documentation was reviewed and found to be completed daily.
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"/>	

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
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"/>	
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 ICE detainee or non-ICE detainee that displays behavior that could destroy clothing or harm himself or others is placed in the Health Care Unit for observation. An IDR (Individual Determination Restricted) is filed through the facility head noting restrictions, if necessary.
23. Detainees in an SMU may write and receive letters the same as the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Detainees in an SMU ordinarily retain visiting privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Adequate documentation was generated for any restricted or disallowed general visits for a detainee in an SMU who violated visiting rules or whose behavior indicated the detainee would be a threat to the security or good order of the visiting room in the past year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
27. Under no circumstances is a detainee permitted to participate in general visitation while in restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs and CDFs, detainees in protective custody and violent and disruptive detainees are not permitted to use the visitation room during normal visitation hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All segregated ICE detainees and non-ICE detainees visit on Thursday. They are the only detainees from the facility that are allowed in the visitation area on that 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
29. In SPCs and CDFs, violent and disruptive detainees are limited to non-contact visits and, in extreme cases, not permitted to visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. If a detainee is not permitted to visit, an IDR (Individual Determination Restriction) is prepared and must be signed by the facility head. There are non-contact visiting facilities available for violent and disruptive detainees.
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"/>	
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"/>	If it is determined that this type of visit would be disallowed, it requires that an IDR (Individual Determination Restriction) be signed by the facility head.
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"/>	The unit has two carts that contain reading material for segregated ICE detainees and non-ICE detainees. Materials on these carts are cycled out on a weekly basis by the facility Librarian.
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"/>	The facility Librarian determines access to Law Library and legal material for segregated ICE detainees and non-ICE detainees. Legal material is allowed to be stored in the detainee's cell as long it does not present a security or safety risk. The Unit Supervisor indicated that requests for legal materials are documented in the unit logbook as well as when the material is delivered.
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"/>	Documentation provided by the Librarian indicated that all ICE detainees and non-ICE detainees are allowed the same law library access.

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
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"/>	Legal materials are allowed to be retained by detainees in disciplinary segregation if it is determined that there is an immediate need.
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"/>	If legal access is denied it must be done by an IDR (Individual Determination Restriction) approved by the facility head. This document is forwarded to the ICE/DRO for notification. All areas of this component are addressed.
38. Recreation for detainees in the SMU is separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Segregation exercise areas are located outside the segregation unit and separated from other detainees by sight and sound utilizing a block wall
39. The facility has policy and procedures to ensure detainees who must be kept apart never participate in activities in the same location at the same time. (For example, recreation for detainees in protective custody is separated from other detainees.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Detainees in the SMU are offered at least one hour of recreation per day, scheduled at a reasonable time, at least five days per week. Where cover is not provided to mitigate inclement weather, detainees are provided weather-appropriate equipment and attire.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a specific schedule that allows all segregated ICE detainees and non-ICE detainees to be scheduled for one hour of exercise five days a week
41. The recreation privilege is denied or suspended only if it would unreasonably endanger safety or security. Ordinarily, a detainee is denied recreation privileges only with the facility administrator's written authorization that documents why the detainee poses an unreasonable risk even when recreating alone. For an immediate safety or security situation, the shift supervisor may verbally authorize denial of an instance of recreation. When a detainee in an SMU is deprived of recreation (or any usual authorized items or activity), a report of the action is forwarded to the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility head must have signed and approved the IDR (Individual Determination Restriction) for loss of recreation privileges before an ICE detainee or non-ICE detainee is denied outdoor exercise.
42. The case of a detainee denied recreation privileges is reviewed at least once each week, as part of the reviews required for all detainees in SMU status. The reviewer documents whether the detainee continues to pose a threat to self, others, or facility security and, if so, why.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has had no instances of ICE detainees or non-ICE detainees being denied recreation privileges. Policy allows for this occurrence and does require a review each week of the restriction.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>43. Denial of recreation privileges for more than 15 days requires the concurrence of the facility administrator and the health authority. It is expected that such denials shall rarely occur, and only in extreme circumstances.</p> <p>The facility notifies ICE/DRO when a detainee is denied recreation privileges for more than 15 days.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The initial denial of recreation privileges must be approved by the facility head. If the restriction is longer than 15 days, the facility head will notify the ICE DRO.
<p>44. Ordinarily, detainees in Administrative Segregation have telephone access similar to detainees in the general population, in a manner consistent with the special security and safety requirements of an SMU. Detainees in Disciplinary Segregation may be restricted from using telephones to make general calls as part of the disciplinary process; however, ordinarily, they are permitted to make direct and/or free and legal calls as described in the Detention Standard on Telephone Access, except for compelling and documented reasons of safety, security, and good order.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access to telephones is the same as for detainees in general population. The facility utilizes a phone on a car that the ICE detainee and non-ICE detainees in segregation use. Disciplinary Segregated detainees are allowed to only make legal calls which are verified by the unit supervisor.
<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"/>	This documentation maintained in the Segregation Unit Office was reviewed. The documentation is then forwarded to the Chief of Security for retention.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>46. There are implemented written procedures for the regular review of all detainees in Administrative Segregation.</p> <p>A supervisor conducts a review within 72 hours of the detainee's placement in Administrative Segregation to determine whether segregation is still warranted. The review includes an interview with the detainee, and a written record is made of the decision and the justification. In SPCs and CDFs, the Administrative Segregation Review Form (I-885) is used.</p> <p>If a detainee is segregated for the detainee's protection, but not at the detainee's request, continued detention requires the authorizing signature of the facility administrator or assistant facility administrator on the I-885.</p> <p>When a detainee has spent seven days in Administrative Segregation, and every week thereafter for the first 60 days and at least every 30 days thereafter, a supervisor conducts a similar review, including an interview with the detainee, and documents the decision and justification.</p> <p>A reviewing authority who concludes a detainee should be removed from Administrative Segregation, submits that recommendation to the facility administrator (or designee) for approval.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility uses a Segregation Confinement Review which addresses the requirements of this component. This document has signature lines for all required 72-hour reviews, 7-day reviews and 30-day reviews. This Inspector reviewed five of these documents to ensure compliance with this component.</p>
<p>47. A copy of the decision and justification for each review is given to the detainee, unless, in exceptional circumstances, this provision would jeopardize security. The detainee is given an opportunity to appeal a review decision to a higher authority within the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>48. After seven consecutive days in Administrative Segregation, the detainee may exercise the right to appeal to the facility administrator the conclusions and recommendations of any review conducted. The detainee may use any standard form of written communication (for example, detainee request form), to file the appeal.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The DHO (Disciplinary Hearing Officer) receives these documents upon completion of the process. The facility head responds to the appeal and a copy is forwarded to the detainee and the DHO who retains this document. This inspector reviewed ten of these documents to verify compliance.</p>

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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"/>	
50. When a detainee has been held in Administrative Segregation for more than 30 days, the facility administrator notifies the Field Office Director, who notifies the ICE/DRO Deputy Assistant Director, Detention Management Division.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51. When a detainee is held in Administrative Segregation for more than 60 days, the Field Office Director notifies, in writing, the Deputy Assistant Director, Detention Management Division, for consideration of whether it would be appropriate to transfer the detainee to a facility where he or she may be placed in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52. A detainee is placed in Disciplinary Segregation only by order of the Institutional Disciplinary Panel (IDP), or equivalent, after a hearing in which the detainee has been found guilty of a prohibited act. The maximum of a 60 day sanction in Disciplinary Segregation for a violation associated with a single incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The results of the disciplinary hearing are placed in the ICE detainee or non-ICE detainee file in segregation. These forms were reviewed and found no ICE detainee or non-ICE detainee is sanctioned more than 60 days for a violation associated with 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"/>	There is an SPC within two miles of this facility where the detainee could be transferred.

PART 2 – 15. SPECIAL MANAGEMENT UNITS

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Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>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).</p> <p>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.</p> <p>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.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The IDP chairman prepares an I-883 outlining the reasons for the finding. The ICE detainee or non-ICE detainee is given a copy of the written order for segregation at the time of the hearing. A copy of the order is given to the detainee within 24 hours, if s/he refuses the copy at the hearing. Upon release from disciplinary segregation all documentation is forwarded to the Chief of Security for retention.</p>
<p>55. The facility has implemented written procedures for the regular review of all Disciplinary Segregation cases.</p> <p>A supervisor interviews and reviews the status of each detainee in Disciplinary Segregation every seven days and documents his or her findings on a Disciplinary Segregation Review Form (I-887).</p> <p>At each formal review, the detainee is to be given a written copy of the reviewing officer's decision and the basis for this finding, unless institutional security would be compromised.</p> <p>The reviewer may recommend the detainee's early release upon finding that Disciplinary Segregation is no longer necessary to regulate the detainee's behavior. Early release and return to the general population requires approval of the facility administrator.</p> <p>All review documents are placed in the detainee's detention file.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 2 – 15. SPECIAL MANAGEMENT UNITS

☒ **Meets Standard**

 ☐ **Does Not Meet Standard**

 ☐ **N/A**

 ☐ **Repeat Finding**

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

This inspector reviewed facility policy and procedure, reviewed SMU logs and documentation, inspected SMU, interviewed staff, and interviewed detainees in the SMU. All areas reviewed served to support facility compliance with this standard. The facility has a segregation unit with cells that have two bunks. At the time of inspection, there were no ICE detainees in the SMU being held for administrative or disciplinary reasons. All documentation required for placement in segregation was available for all detainees currently housed in the segregation unit. Healthcare documentation was complete and timely. Past files were reviewed and were found to have been completed in a manner consistent with this standard. Daily segregation checklists for current and past detainees held in SMU were reviewed. The forms were up to date and correct. All required signatures were found on the forms for healthcare review and supervisor reviews.

(b)(6), (b)(7)(c) September 15, 20
Reviewer's Signature / Date

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

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The ICE/DRO Field Office Director ensures that weekly announced and unannounced visits occur.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of facility logs revealed that ICE staff was present in the facility frequently on days in addition to those listed on the schedule of visits posted in the units.
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 schedule is posted in the housing units.
4. Visiting ICE staff observes and note current climate and conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reports are generated by ICE staff who visits the facility. ICE supervisors have the ability to review this information on an electronic system.
5. ICE/DRO Detainee Request Forms are available for use by ICE/DRO detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee request forms were observed to be available in the housing units for use by detainees.
6. The facility treats detainee correspondence to ICE/DRO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee request forms are placed into a locked mail box where they are retrieved by ICE staff.
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"/>	
8. Only ICE staff are able to retrieve the contents of the secure box containing Detainee Request Forms,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. ICE/DRO staff responds to a detainee request from a facility within 72 hours and document the response in a log.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is an electronic tracking system for detainee request forms. A review of the data revealed that detainees are receiving their responses within the required time frames.
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"/>	All detainees receive a copy of the ICE National Detainee Handbook, upon admission, which includes information about their right to correspond with ICE/DRO staff.
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"/>	

PART 2 – 16. STAFF-DETAINEE COMMUNICATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. Daily telephone serviceability checks are documented in the housing unit logbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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.)

ICE detainees have frequent contact with both facility and ICE staff. Detainee request forms are available and frequently used by detainees. A review of the electronic log revealed that responses to requests are being returned to detainees within 72 hours.

Based upon a review of documentation and interviews with staff and detainees, it is determined that detainees have sufficient verbal and written contact with facility and ICE staff.

(b)(6), (b)(7)(c) / September 15
Reviewer's Signature / Date

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

PART 2-17. TOOL CONTROL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Chief of Security is responsible for developing the tool control system to insure accountability.
2. If the warehouse is located outside the secure perimeter, the warehouse receives all tool deliveries. If the warehouse is located inside the secure perimeter the facility administrator shall develop site-specific procedures, for example; storing tools at the rear sally port until picked up and receipted by the tool control officer. The tool control officer immediately places certain tools (band saw blades, files and all restricted tools) in secure storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All newly acquired tools are secured in the warehouse until the requesting individual can sign verifying receipt of the tool.
3. (MANDATORY) The use of tools, keys, medical equipment, and culinary equipment is controlled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility tools are all inventoried and shadow boarded to ensure they are controlled. Keys are secured and inventoried on each shift to ensure security of the keys. Medical equipment and culinary equipment are all shadow boarded and inventoried on daily basis.
4. A metal or plastic chit is taken in exchange for all tools issued, and when a tool is issued from a shadow board the receipt chit shall be visible on the shadow board.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. This inspector directly observed staff using the plastic chit system.
5. Tool inventories are required for: <ul style="list-style-type: none"> • Facility Maintenance Department • Medical Department • Food Service Department • Electronics Shop • Recreation Department • Armory 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has tool inventories for Maintenance Department, Medical Department, Food Service Department and Armory. There are no tools in the recreation department. The facility does not have an electronics shop.
6. Tool Inventories are conspicuously posted on all tool boards, tool boxes and tool kits.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tool inventories were found posted on all tool boards, tool boxes, and tool kits.
7. The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> • The policy sets minimum time lines for physical inventory and all necessary documentation. • ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 9-8, Security and Control -Control of Tools, and Equipment, comply with the requirements of this component. The facility does not use the AMIS bar code system.

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
8. The facility has a tool classification system. Tools are classified according to: <ul style="list-style-type: none"> • Restricted (dangerous/hazardous) • Non Restricted (non-hazardous). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted portions of this component requiring tools are specifically classified as Restricted and Non Restricted is specific to SPCs and CDFs. The facility does have a tool classification system. The tools are classified as Restricted and Non Restricted
9. Department heads are responsible for implementing proper tool control procedures as described in the standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility policy requires department heads to be responsible for implementing and following tool control standards in order to comply with this component.
10. There are policies and procedures in place to ensure that all tools are properly marked and readily identifiable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. The facility has an approved tool storage system. <ul style="list-style-type: none"> • The system ensures that all stored tools are accountable. • Tools are stored on shadow boards in which the shadows resemble the tool. • Shadow boards have a white background. • Restricted tools are shadowed in red. • Non-restricted tools are shadowed in black. • Commonly used tools (tools that can be mounted) are stored in such a way that missing tools are readily noticed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IGSAs are only required to have an approved tool storage system that ensures all stored tools are accountable and that commonly used tools (tools that can be mounted) are stored in a way that missing tools can easily be noticed. The facility has an approved tool storage system and all facility tools are shadow boarded and inventoried to ensure that missing tools are easily discovered. The facility complies with all bulleted items identified in this component.
12. Tools removed from service have their shadows removed from shadow boards.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tools removed from service have their shadow removed.
13. Tools not adaptable to a shadow board are stored in a locked drawer or cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tools that are unable to be placed on a shadow board are stored and locked in drawer or cabinet.
14. Sterile packs are stored under lock and key.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. All sterile packs are secured under lock and key.

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
15. Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. There are policies and procedures to address the issue of lost tools. The policy and procedures include: <ul style="list-style-type: none"> • Verbal and written notification. • Procedures for detainee access. • Necessary documentation/review for all incidents of lost tools. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy regarding the issue of lost tools complies with the bulleted items identified 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"/>	
18. All private or contract repairs and maintenance workers under contract with ICE, or other visitors, submit an inventory of all tools prior to admittance into or departure from the facility. The inventory is reviewed and verified prior to the contractor entering/departing the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility complies with this component and all documentation is retained by the Chief of Security.
19. Hoses longer than three feet in length are classified as a restricted tool.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Hoses longer than three feet are classified as restricted tools.
20. Scissors used for in-processing detainees are tethered to the furniture (e.g. table, counter, etc.) where they are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. There are no scissors used during intake or stored in the Receiving and Discharge Area.

PART 2-17. TOOL CONTROL

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

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

This inspector reviewed facility policy and procedure relative to tool control, reviewed tool inventories, checked shadow boards and designations for restricted and non-restricted tools. Staff were interviewed and a spot inventory of tools was conducted. All areas of review served to support facility compliance with this standard

(b)(6), (b)(7)(c) September 15, 2011
Reviewer's Signature / Date

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

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. (MANDATORY) The facility has a Use of Force Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 9-1, Security and Control, Use of Force addresses this requirement.
2. Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. When the detainee is in an area that is or can be isolated (e.g., a locked cell, a range), posing no direct threat to the detainee or others, policy requires that staff must try to resolve the situation without resorting to force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy requires that staff attempt to resolve the issue prior to determining if use of force is necessary.
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 states that calculated use of force must be utilized unless time and situation does not allow.
5. The facility subscribes to the prescribed Confrontation Avoidance Procedures. • Ranking detention official, health professional, and others confer before every calculated use of force.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does subscribe to confrontation avoidance techniques. The shift supervisors will meet with the staff and healthcare to determine the best practice to use for the incident.
6. When a detainee must be forcibly moved and/or restrained and there is time for a calculated use of force, staff uses the Use-of-Force Team Technique. • Under staff supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A shift supervisor or assistant supervisor must be involved in the planning and execution of a calculated use of force.
7. Staff members are trained in the performance of the Use-of-Force Team Technique.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Use-of-Force-Team Technique is presented to staff at initial training and is provided yearly as part of the 40-hour update.
8. All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires the documentation of all incidents and that the facility head reviews all the documentation.
9. All use of force incidents are properly documented and forwarded for review use of force documentation at a minimum, shall include the medical examination through the conclusion of the incident. All calculated uses of force incidents must be audio visually recorded in its entirety from the beginning of the incident to its conclusion. Any breaks in recording, e.g., dead batteries, tape exhausted, are fully explained on the video.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All use-of-force incidents reviewed had required documentation included. All participants document their involvement, including healthcare, from beginning to conclusion.

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
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"/>	Policy states staff may not use force as punishment. Staff is taught to gain compliance of their orders through verbal persuasion. The policy addresses that the use of force is a last resort and that only the amount of force necessary to control the detainee is to be used.
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"/>	Medication is not used at this facility for restraint purposes. There is no policy that discusses the use of medication for this purpose.
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 states Use-of-Force teams must follow the guidelines in the policy to prevent injury and exposure to communicable diseases. This inspector viewed a use-of-force incident on a DVD. All precautions were used during that incident.
13. Standard procedures associated with using four/five point restraints include: <ul style="list-style-type: none"> Soft (nylon/leather) restraints. Dressing the detainee appropriately for the temperature. A bed, mattress, and blanket/sheet. Checking the detainee at least every 15 minutes. Logging each check. Repositioning detainee often enough to prevent soreness or stiffness. Medical evaluation of the restrained detainee twice per eight hour shift. When qualified medical staff are not immediately available, staff position the detainee "face-up." 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The facility policy dictates the process (b)(7)(E) (b)(7)(E) The bulleted points in this component are all covered clearly in the policy.</p>
14. The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shift supervisor visits are all noted on the checklist that is placed at the restrained person's cell.
15. All detainee checks are logged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. In immediate-use-of-force situations, officers contact medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
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 addresses the requirements of this component. All documentation reviewed indicated that the facility complies with this component regarding the use of non-lethal weapon.
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"/>	
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"/>	The facility houses no female ICE detainees. The facility has special precautions that are used with pregnant non-ICE detainees.
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"/>	
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"/>	All use-of-force incidents are reviewed by the facility administrator. There is a signature on the use of force review sheets that indicates the facility administrator has reviewed the incident.
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"/>	
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"/>	<div>(b)(7)(E)</div> <div>(b)(7)(E) Training records indicate that all employees are trained (b)(7)(E)</div> <div>(b)(7)(E)</div>

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. The use of canines is restricted to contraband detection purposes only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Canines are not used around or near ICE detainees and non-ICE detainees. The canines are used to detect contraband in the facility mail room.
27. The officers are thoroughly trained in the use of soft and hard restraints.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. In SPCs, the Use of Force form is used. In other facilities (IGSAs / CDFs) this form or its equivalent is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to use the "Use of Force Form" is specific to SPCs. The facility uses a local version of the use-of-force form.

PART 2 – 18. USE OF FORCE AND RESTRAINTS

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

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

The facility has a Use of Force policy that meets the requirements of this standard. Local policy was reviewed and the components of this standard are clearly delineated. Copies of incident reports and use of force reviews were reviewed by this inspector which reflected compliance with this standard. The facility does not have or use (b)(7)(e). The facility does have (b)(7)(e) on hand and a policy for their use. The facility does not and has not used the (b)(7)(e) in a period of three years as supported by the records reviewed.

(b)(7)(E)

(b)(7)(E)

Staff interviewed indicated that they understood the use-of-force procedures.

The use-of-force training curriculum specifically prohibits the use of (b)(7)(e) to control detainees.

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

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

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 15-2, Resident Rules and Discipline - Disciplinary Procedures, clearly explains the progression of offenses and appeals, and the process is required.
2. The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of legal access and legal materials • deprivation of physical exercise 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy prohibits staff from imposing or permitting sanctions of corporal punishment, deviations from normal service, clothing deprivation, bedding deprivation, denial of personal hygiene products, loss of correspondence privileges, deprivation of legal access and legal materials or deprivation of physical exercise.
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"/>	Detainees are notified via the handbook and orientation.
5. The following items are conspicuously posted in Spanish and English or other dominate languages used in the facility: <ul style="list-style-type: none"> • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A Spanish and English version of rights and responsibilities, prohibited acts, disciplinary severity scale and sanctions are posted and are included in the handbook.
6. When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Incident Reports and Notice of Charges are promptly forwarded to the designated supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Incident Reports and Notice of Charges are forwarded to the shift supervisor immediately upon completion.

PART 3 – 19. DISCIPLINARY SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
8. Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before investigations end.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. An intermediate disciplinary process is used to adjudicate minor infractions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The disciplinary panel consists of the Disciplinary Hearing Officer, the Classification Officer and a randomly selected staff member. This panel conducts hearings on charges referred by the Unit Disciplinary Committee and complies with the requirements of this component.
11. A staff representative is available if requested for a detainee facing a disciplinary hearing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	The continuance or postponement of a hearing is allowed in extenuating circumstances.
13. The duration of punishment set by the Facility Administrator, as recommended by the disciplinary panel does not exceed established sanctions. The maximum time in disciplinary segregation does not exceed 60 days for a single offense.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Written procedures govern the handling of confidential-source information. Procedures include criteria for recognizing "substantial evidence".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility policy covers the handling of confidential-source information. Policy also includes criteria for recognizing substantial evidence.
15. All forms relevant to the incident, investigation, committee/panel reports, etc., are completed and distributed as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 3 – 19. DISCIPLINARY SYSTEM

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

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 facility food service department is operated through a contract service with Canteen Correctional Services. The Food Service Director (FSD) is ServSafe certified. The duties and responsibilities of staff are documented.
2. The Cook Foreman is on duty on days when the FSA is off duty and vice versa.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains eight food service staff members. A food service employee is on duty anytime the food service department is in operation.
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"/>	The facility provides food service staff with initial training that includes detainee-related issues as well as a review of the ICE Food Service Standard.
4. (MANDATORY) Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device. Knives and keys are inventoried and stored in accordance with the Detention Standard on Tool Control	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize knives.
5. All knives not in a secure cutting room are physically secured to the workstation and staff directly supervises detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The section of this component requiring staff to monitor the condition of knives and dining utensils is specific to SPCs and CDFs. The facility food service staff monitors the use of utensils; knives are not used at the facility.
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"/>	The facility has determined pepper products could pose a security threat. So, they are maintained in a separate locked spice cabinet.
7. Operating procedures include daily searches (shakedowns) of detainee work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has security staff assigned to the food service department. The security staff member is responsible for daily searches.
8. The FSA monitors staff implementation of the facility population count procedures. These procedures are in writing. Staff is trained in count procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility security staff assigned to the food service department conduct population 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"/>	ICE detainees are not authorized to work in the food service department. Facility food service staff completes a daily hygiene checklist on non-ICE detainees working in the department.
10. The FSA annually reviews detainee-volunteer job descriptions to ensure they are accurate and up-to-date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility FSD maintains the annual review of detainee job descriptions.
11. The Cook Foreman or equivalent instructs newly assigned detainee workers in the rules and procedures of the food service department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. During orientation and training session(s), the Cook Supervisor (CS) explains and demonstrates: <ul style="list-style-type: none"> • 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"/>	The facility food service department maintains comprehensive training documentation for each detainee assigned to the department. Training includes safe work practices, safety instructions for food service equipment and hazardous material training.
13. The Cook Foreman documents all training in individual detainee detention files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Detainees at SPCs and CDFs are paid in accordance with the "Voluntary Work Program" standard. Detainee workers at IGSA's are subject to local and State rules and regulations regarding detainee pay.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The portion of this component requiring detainees be paid in accordance with the "Voluntary Work Program" standard is specific to SPCs and CDFs. ICE detainees do not work in the facility food service department. Non-ICE detainee workers are paid at a rate of \$2.00 per day.
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"/>	Facility meal times include breakfast at 6:00 a.m.; lunch at 11:30 a.m.; and evening meal at 4:00 p.m.
16. For cafeteria-style operations, a transparent "sneeze guard" protects both the serving line and salad bar line.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility utilizes a bulk satellite feeding program.
17. The facility has a standard 35-day menu cycle. IGSA's use a 35 day or similar system for rotating meals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The section of this component requiring a 35-day menu cycle is specific to SPCs and CDFs. The facility utilizes a 35-day cycle menu.

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"/>	Canteen Correctional Services, the contract food service provider, employs a registered dietitian who conducts the required nutritional analysis to ensure the master menu meets Recommended Daily Allowances. Menus are certified before they are incorporated into the food service program. If a menu is modified, it is re-certified by the registered dietitian.
19. The FSA has established procedures to ensure that items on the master-cycle menu are prepared and presented according to approved recipes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility utilizes approved recipes for the production of food products.
20. The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification, with copy to the FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Standard requires the "Cook Supervisor or equivalent" as having this authority. The food service provider maintains acceptable substitution guideline which staff must adhere to when making menu changes. The facility command staff is notified.
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"/>	The facility maintains an approved common fare menu that adheres to the requirements established in this component.
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 Chaplain provides the FSD with a listing of detainee authorized 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"/>	
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"/>	The facility food service program maintains a common fare program to accommodate religious requests. The menu can support Muslims, Jews and other religious groups if they are housed at the facility.
27. The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's medical department provides a listing of detainees requiring medical diets.
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"/>	Food temperatures were visually observed during the site review. All temperatures were maintained within the prescribed safe range.
30. All meals provided in nutritionally adequate portions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Food is not used to punish or reward detainees based upon behavior.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. The food service staff instruct detainee volunteers on: <ul style="list-style-type: none"> 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"/>	Detainee workers are trained on cleanliness, hygiene, preparation, and maintenance of equipment. Training records are maintained by the FSD.
33. Everyone working in the food service department complies with food safety and sanitation requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34. (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"/>	The facility has established procedures for the FSD to make weekly inspections. Monthly inspections are conducted by the FSD, Safety Officer, and Health Services Administrator (HAS).

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
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"/>	The facility food service staff documents dishwashing temperatures after each meal. The documentation is reviewed and maintained by the FSD.
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"/>	The facility food service staff documents refrigerator/freezer temperatures daily. The documentation is reviewed and maintained by the FSD.
38. The cleaning schedule for each food service area is conspicuously posted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Storage areas are locked when not in use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage areas were locked during the site review of the facility food service department.
41. Food service personnel conduct shakedowns along with detention staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food service staff conducts visual inspections, and security staff conducts physical shakedowns.
42. <u>In SPCs only:</u> The ICE supervisor on duty ensures that ICE officers participate in dining room supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility is an IGSA. So, ICE staff does not participate in dining room supervision.
43. Menus are certified by a registered dietitian prior to being incorporated into the Food Service Program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. <u>In SPCs only:</u> the FSA prepares quarterly cost estimates for the Common Fare Program. This quarterly estimate is factored into the quarterly budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The FSD does not conduct a quarterly cost estimate of the Common Fare Program.
45. When required, only food service staff prepare the sack lunches for detainee transportation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not feed sack lunches to ICE detainees. The Florence Detention Center (FDC) provides sack lunches for detainee transportation.

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility food service department does not have outside doors. Food shipments are received and brought into the facility down a hallway into the food service department.
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"/>	The facility utilizes a satellite feeding operation. Detainees are fed in their housing unit.
51. (MANDATORY) An independent, external source shall conduct annual inspections to ensure that the food service facilities and equipment meet governmental health and safety codes. Corrective action is taken on deficiencies, if any.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Pinal County Environmental Health Services conducted an annual inspection December 10, 2010. The inspection concluded with an excellent rating.
52. Personnel inspecting the food service department shall note needed corrective action(s), if any, in a written report to the Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Only those toxic and caustic materials required for sanitary maintenance of the facility, equipment, and utensils shall be used in the food service department. Material Safety Data Sheets (MSDSs) will be maintained on all flammable, toxic, and caustic substances used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. (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"/>	Pest control is provided to the facility via a contract service with Johnny Reeves Termite and Pest Control, Coolidge, AZ.

FOOD SERVICE

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

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"/>	Interviews with staff and a review of policy indicated that it is standard practice for staff to refer a hunger striker to the medical department.
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"/>	Policy 13-46, Hunger Strikes, requires that the administrator notify ICE immediately if a detainee is on a hunger strike.
3. The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 establishes procedures to ensure that staff responds immediately to a hunger strike with referral to medical staff; a medical and mental health evaluation; and isolation from other detainees.
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 is required by policy 13-46.
5. Medical personnel are authorized to place a detainee in the Special Management Unit or a locked hospital room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires that a hunger striking detainee be placed in a medical isolation cell.
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 is required by policy 13-46.
7. The facility medical authority obtains a hunger striker's consent before medical treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A general consent for treatment is obtained as part of the intake process. Specific consents are required for any invasive procedures.
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"/>	Per policy, a signed Form 13-49B, Refusal to Accept Medical Treatment, is completed whenever a detainee rejects a medical evaluation or treatment. If the detainee refuses to sign the form, then two staff signatures are provided who witnessed the detainee's refusal to sign the form.
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"/>	Policy 13-46 requires that three meals be delivered to the detainee and left in the detainee's cell.
10. Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires that an ample supply of drinking water and other beverages be provided to a hunger striking detainee.

PART 4 – 21. HUNGER STRIKES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. During a hunger strike, staff removes all food items from the hunger striker's living area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires the removal of all food items when a hunger striking detainee is moved to a medical isolation cell.
12. Staff is directed to record the hunger striker's fluid intake and food consumption on the Hunger Strike Monitoring Form I-839 or equivalent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires that staff monitor and record the hunger striker's fluid and food intake and output on a local Corrections Corporation of America (CCA) form.
13. The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 provides written procedures for the evaluation and monitoring of hunger strikers.
14. Staff documents all treatment attempts in the medical record, including attempts to persuade the hunger striker by counseling him or her of the medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-46 requires that all treatment attempts and other encounters with the hunger striker be documented in the 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"/>	A review of training curriculums and interviews with staff indicated that all staff receives orientation and annual training on hunger strikes. Medical staff is up-to-date on hunger strike evaluation and monitoring techniques.

PART 4 – 21. HUNGER STRIKES

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

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

No detainee hunger strikes have been reported since the last review. A review of policy and interviews with staff indicated that policies and procedures are in place to identify, refer, and monitor hunger striking detainees. Staff is trained and knowledgeable regarding these procedures. An interview with the Health Services Administrator indicates that if involuntary treatment became necessary, the detainee would be transferred to an off-site medical facility or to another ICE facility.

(b)(6), (b)(7)(c) / September 15

Reviewer's Signature / Date

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

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility operates a health care facility in compliance with state and local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility is accredited by the American Correctional Association and has undergone an accreditation review earlier this month by the National Commission on Correctional Health Care (NCCHC). Pharmacy license and Clinical Laboratory Improvement Amendments (CLIA - waived category) certificate are current. A review of credential files reveals that all professional licenses are current and verified.
2. The facility's in-processing procedures of arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-50, Intake Screening, indicates that in-processing procedures of arriving detainees include a medical screening. A review of 25 detainee medical records revealed that all had a medical and mental health screening performed and documented by a health care provider.
3. (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"/>	The current staffing plan was reviewed and was found to be reviewed annually by the health authority and the facility. Current staffing includes (b)(7)(e) physicians, (b)(7)(e) Registered Nurse Practitioner, (b)(7)(e) Registered Nurses, (b)(7)(e) Licensed Practical Nurses, (b)(7)(e) dentist, (b)(7)(e) dental assistant, and various administrative and ancillary staff. Mental health staffing includes (b)(7)(e) social worker and (b)(7)(e) psychologist. This position is currently vacant, but is in the process of being filled. Staffing is supplemented by other specialty consultants to include a psychiatrist who provides services once a week.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
4. (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"/>	Observation revealed that newly admitted detainees are informed about how to access health services, orally and in writing. They receive a Health Care Orientation Handbook that is written in English and Spanish. If other languages are needed, telephonic Interpretalk Service or Translate.Google.com are used. Detainees sign a receipt for the Health Care Orientation Handbook.
5. Detainees will have access to and receive specified 24-hour emergency medical, dental, and mental health services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff is on duty 24 hours per day, seven days a week (b)(7)(e) physician, dentist, and, psychiatrist are always on call.
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"/>	Interviews with staff and review of records indicated that all staff receive TB testing prior to their job assignment and annually thereafter. Hepatitis B vaccine is also offered, based on exposure risk.
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"/>	Policy 13-55, Job Descriptions and Work Assignments, defines every health care workers role, responsibilities, expectations, and requirements. A review of credential files reveals that all health care workers are properly licensed, certified, credentialed, and/or registered in compliance with applicable state and federal requirements.
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"/>	Each arriving detainee is provided and signs for a facility handbook and a Health Care Orientation Handbook, in which procedures for access to health care services are explained in English and Spanish.
9. In SPCs and CDFs, medical personnel credentialing and verification complies with the standards established by the NCCHC and Joint Commission.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility underwent a NCCHC audit one week ago. A review of credential files indicated compliance

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 review of 25 detainee medical records revealed that all received a medical, dental, and mental health screening by a health care provider within 12 hours of arrival. Screenings are only performed by medical personnel.
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"/>	Observation indicates that translation services for languages other than Spanish are available through a contract with Interpretalk Services (a telephonic available service) or by computer through Translate.Google.com.
12. The facility has sufficient space and equipment to afford each detainee privacy when receiving health care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department is of adequate size and well equipped with modern and functional equipment. Examining rooms are available in the medical department and adjacent to the housing units. All provide privacy when receiving medical care.
13. The medical facility has its own restricted-access area. The restricted access area is located within the confines of the secure perimeter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department is located within the secure perimeter. Access is restricted and controlled by Central Control.
14. The medical facility entrance includes a holding/waiting room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department includes a waiting room with plastic chairs for about 20 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"/>	A corrections officer is assigned to the medical department and provides direct supervision of the waiting room.
16. Detainees in the holding/waiting room have access to a toilet and a drinking fountain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees in the waiting room have direct access to a toilet and water is available in a large thermos with plastic cups.
17. Medical records are kept apart from other files. They are: <ul style="list-style-type: none"> Secured in a locked area within the medical unit. With physical access restricted to authorized medical staff. Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic Medical Records (EMR) are used at this facility. Any paper medical information is scanned into the EMR. Access is by password and restricted to medical staff. Copies of medical records are not placed in detainee files.

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
18. (MANDATORY) A signed and dated consent form is obtained from a detainee before medical treatment is administered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A general consent form is completed as part of the intake process. Specific consent forms for any invasive procedures are obtained prior to performance of such procedures. This was verified through a review of 25 detainee medical records.
19. Detainees use the I-813 (or IGSA equivalent) to authorize the release of confidential medical records to outside sources.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees use a local form, Authorization for Release of Protected Health Information, to authorize the release of confidential medical records to outside sources.
20. The facility health care provider is given advance notice prior to the release, transfer, or removal of a detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interviews with the medical records staff indicated that normally at least 24 hours notice is given prior to the release, transfer, or removal of a detainee.
21. A detainee's medical records will be transferred as appropriate. All detainees will be transferred with a copy of their transfer summary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees are transferred with a medical summary, current TB clearance status, and any needed medication.
22. Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL."	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical summaries are placed in a sealed envelope and marked with the detainee's name, A-number and stamped "Medical Confidential".
23. Medical screening includes a Tuberculosis (TB) test.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that all had TB testing performed by PPD or chest x-ray as part of the intake medical screening.
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"/>	A review of 25 detainee medical records revealed that all had a mental health screening upon arrival, performed by a health care provider, prior to assignment to a housing unit.
25. The facility health care provider promptly reviews all I-794s (or equivalent) to identify detainees needing medical attention.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that the health care provider conducting the intake medical screening reviews all pertinent documentation arriving with a 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
26. (MANDATORY) Each facility's health care provider conducts a health appraisal and physical examination on each detainee within 14 days of arrival. If there is documentation of one within the previous 90 days, the facility health care provider may determine that a new appraisal is not required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that all had a health appraisal and physical examination performed by the physician or nurse practitioner within 14 days of arrival.
27. Detainees in the Special Management Unit have access to the same level of health care as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that detainees in the SMU have access to the same level of health care as detainees in the general population. (b)(7)(D) health care provider makes rounds to each cell in the SMU at least once a day
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"/>	Health services request slips were observed in each housing unit and readily available to detainees. Request slips are available in English and Spanish. Instructions are posted if detainees need help in completing a form in other languages. Request slips are picked up daily by a member of the nursing staff and triaged. A review of 25 detainee medical records revealed that requests are answered and patient encounters scheduled within one to five days depending on the specific need.
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"/>	Medical staff is on duty 24 hours a day, seven days a week. Policy 13-34, Medical Emergency Response, provides guidance for when immediate outside medical attention is required.
30. The plan includes an on-call provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(D) physician, dentist, and psychiatrist are on call for medical, dental, or mental health emergencies.
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"/>	Phone numbers for on-call providers and local hospitals are posted in the medical department. Emergency medical services are accessed via the 911 system, as listed in the plan.
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"/>	Policy 13-34 includes procedures for staff to utilize this emergency health care consistent with security and safety.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
33. (MANDATORY) Detention and health care personnel will be trained, at least annually, to respond to health-related situations within four minutes and to properly use first aid kits, available in designated areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of training files and curriculum revealed that all detention and health care personnel are trained annually to respond to health related situations within four minutes. All staff is trained in CPR and first aid.
34. Where staff is used to distribute medication, a health care provider properly trains these officers.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All medication at this facility is distributed by medical staff.
35. Pharmaceuticals and nonprescription medicines will be stored, inventoried, dispensed, and administered in accordance with sound standards and facility needs for safety and security.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pharmaceuticals are dispensed through a contract with Diamond Pharmacy in blister packs. Medication is stored in medication carts in the pharmacy. The pharmacy is a secure room with limited access. Inventories of controlled substances are maintained and were found to be accurate. A pharmacist inspects the pharmacy quarterly and ensures compliance with applicable standards and laws. Observation of the "pill line" revealed that medication is administered in accordance with sound correctional standards.
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"/>	Policy 13-70, Pharmaceuticals, includes a method for obtaining medicines not on the formulary; prescription practices to include requirements that medications are prescribed only when clinically indicated and that prescriptions are reviewed before being renewed; procurement, receipt, distribution, storage, dispensing, administration, and disposal of medications; secure storage and perpetual inventory of all controlled substances, syringes, and needles. A formulary of all prescription and non-prescription medicines stocked or routinely procured is used.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>37. All pharmaceuticals are stored in a secure area with the following features:</p> <ul style="list-style-type: none"> • A secure perimeter; • Access limited to authorized medical staff (never detainees); • Solid walls from floor to ceiling and a solid ceiling; • A solid core entrance door with a high security lock (with no other access); and • A secure medication storage area. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Pharmaceuticals are stored in the pharmacy located in the medical department which is in a secure perimeter. Access is limited to the pharmacy nurse. The walls of the</p> <p align="center">(b)(7)(e)</p> <p>The entrance door is a solid core door with a high security lock.</p> <p align="center">(b)(7)(e)</p>
<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"/>	<p>The portion of this component requiring the pharmacy to have a locking pass-through window is specific to SPCs and CDFs. The pharmacy does have a locking pass-through window. It is licensed as a non-resident pharmacy and is managed on a day-to-day basis by a Registered Nurse. A contracted local pharmacist inspects the facility quarterly. Medication is only administered by nursing personnel under the supervision of the HSA, according to physician orders.</p>
<p>39. Distribution of medication is in accordance with specific instructions and procedures established by the health care provider. Written records of all medication given to detainees are maintained.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Observation revealed that medication is distributed in accordance with procedures established in policy 13-70. All medications given to detainees are recorded in the electronic medical records.</p>
<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"/>	<p>Medical staff is on duty 24 hours a day at this facility. All medication at this facility is delivered or administered by medical staff.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
41. The facility maintains documentation of the training given any officer required to distribute medication, and the officer has available for reference the training syllabus or other guide or protocol provided by the health authority.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Officers do not distribute medication at this facility.
42. The Warden/Facility receives notification that a detainee that has special medical needs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical department notifies the Warden/Facility that a detainee has special needs via an electronic entry and through the use of a local form.
43. Procedures are in place, consistent with the detention standard, for examinations by independent medical service providers and experts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-77, Scope of Services, establishes procedures for examinations by independent medical providers.
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"/>	Policy 13-47, Infection Control, addresses the management of infectious and communicable diseases to include prevention, education, identification, surveillance, immunization, treatment, follow-up, isolation, and reporting to local, state, and federal agencies. Policy includes coordination with public health authorities; ongoing education for staff and detainees; control, treatment and prevention strategies; protection of individual confidentiality; media relations; management of TB, hepatitis A, B, and C, HIV infection, avian influenza; and reporting communicable disease to local and/or state health departments in accordance with local and state regulations.
45. Detainees diagnosed with a communicable disease are isolated according to local medical operating procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Two negative pressure rooms are available and used to isolate detainees with a communicable disease.
46. All new arrivals receive TB screening in accordance with guidelines of the Centers for Disease Control (CDC). Unless a chest x-ray is the primary screening method, the PPD (mantoux method) is the primary screening method. (For a detainee on whom the PPD is contraindicated; a chest x-ray will be needed. Detainees not screened are housed separate from the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that all were screened for TB using either the Montoux method or chest x-ray upon arrival at the institution. Detainees that are not screened are housed separately from the general population.

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
47. Detainees with symptoms suggestive of TB are placed in a negative pressure isolation room and promptly evaluated for TB disease. Detainees at facilities with no negative pressure isolation room are referred to an appropriate off-site facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees with symptoms suggestive of TB are placed in one of the two negative pressure rooms in the medical department and promptly evaluated for TB disease.
48. A transportation system will be available that ensures timely access to health care services that are only available outside the facility, including: prioritization of medical need, urgency (ambulance versus standard), and transfer of medical information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emergency transportation is available through the 911 system. Transportation to a specialty or other off site provider is arranged with custody staff based on urgency and medical need.
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"/>	A review of medical records revealed that detainees who require close, chronic, or convalescent medical supervision are treated in accordance with a plan of care approved by the physician, nurse practitioner, dentist, or mental health practitioner.
50. (MANDATORY) Female detainees have access to pregnancy testing and pregnancy management services that include routine high-risk prenatal care, addiction management, comprehensive counseling and assistance, nutrition, and postpartum follow-up.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This facility does not house female ICE detainees.
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"/>	A review of medical records revealed that detainees with chronic conditions are identified, evaluated, and scheduled for follow-up visits as determined by the physician. Laboratory testing is performed as ordered by the practitioner and all results are available in the individual medical record.
52. The Facility Administrator, or other designated staff will be notified in writing of any detainees whose special medical or mental health needs requiring special consideration in such matters as housing, transfer, or transportation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A local form is used to notify the facility of any detainees whose special medical or mental health needs require special consideration in such matters as housing, transfer, or transportation.
53. Detainees will have access to emergency and specified routine dental care provided under direction and supervision of a licensed dentist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility employs (b)(7)(e) full-time dentist, (b)(7)(e) dental assistant, and (b)(7)(e) part-time dental hygienist. The facility also has a Panorex on site. Routine, as well as emergency, dental care is provided.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
54. (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"/>	A review of medical records revealed that detainees identified with mental health problems during intake screenings are referred to a mental health provider based on urgency. (b)(7)(e) mental health provider sees all new detainees within 14 days of arrival at the facility.
55. Crisis intervention services are available for detainees who experience acute mental health episodes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b)(7)(e) psychologist and licensed clinical social worker are available at all times to provide crisis intervention. Nursing staff are on duty 24 hours a day, seven days a week and have access to an on-call psychiatrist in the event of a mental health emergency.
56. Medical and mental health interviews, examinations, and procedures will be conducted in settings that respect detainees' privacy, and female detainees will be provided female escorts for health care by male health care providers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that medical and mental health encounters are conducted in rooms that provide privacy. Female detainees are not housed at this facility.
57. (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 review of medical records revealed that detainees referred for mental health treatment receive a comprehensive evaluation by a licensed mental health provider within 72 hours of the referral. All newly arriving detainees receive a comprehensive mental health evaluation within 14 days of arrival.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>58. (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:</p> <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"/>	<p>Policy 13-69, Personal Restraint and Seclusion, specifies the conditions under which restraints may be applied, the types of restraints to be used, how a detainee in restraints is to be monitored, the length of time restraints are to be applied, requirements for documentation to include efforts to use less restrictive alternatives, and after incident review. Order for Discontinuation of Restraint or Seclusion is used in lieu of DIHS-867.</p>
<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"/>	<p>Policy 13-9, Compulsory (Involuntary) Medication of Mentally Ill Inmates/Residents, states that the authorizing physician or psychiatrist will specify the duration of therapy, document that less restrictive intervention options have been exercised without success, detail how the medication is to be administered, monitor the detainee for adverse reactions and side effects, and prepare treatment plans for less restrictive alternatives as soon as possible. ICE would be notified prior to the involuntary administration of psychotropic medication to an ICE detainee. The policy is silent to obtaining an order. However, staff noted that if involuntary administration was determined to be necessary, the ICE- detainee would be immediately transferred.</p>

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
60. An initial dental screening exam should be performed within 14 days of the detainee's arrival. If no on-site dentist is available, the initial dental screening may be performed by a physician, physician's assistant, nurse practitioner or trained RN.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of 25 detainee medical records revealed that an initial dental screening exam is performed by a trained nurse as part of the initial screening process. Dental staff completes a more comprehensive screening within 14 days of arrival at the facility.
61. In each detention facility, the designated health authority and Facility Administrator determines the contents, number, location(s), use protocols, and procedures for monthly inspections of first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The health authority and facility administrator have determined the contents, location, number, and use protocols for first aid kits. Nursing staff perform monthly inspections of first aid kits.
62. An automatic external defibrillator should be available for use at the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation reveals that there is an AED in the medical department. All medical staff is trained in the use of the AED.
63. If a detainee refuses treatment, ICE/DRO will be consulted in determining whether forced treatment will be administered, except in emergency circumstances, in which case, ICE/DRO will be notified as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is specifically required by policy 13-49, Informed Consent/Refusal of Care.
64. In SPCs and CDFs, the Facility Administrator and health services administrator will meet at least quarterly and include other facility and medical staff as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Quarterly administrative meetings with the HSA, Warden, and other staff are required by policy 13-2, Administrative Meeting and Reports. A review of meeting minutes indicated these meetings are conducted as required.
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"/>	Biohazardous waste handling and disposal was observed to be in compliance with sound medical standards and applicable laws. Disposal is contracted to Stericycle. Sterilization procedures were observed and found to be sound. Spore testing is performed weekly and documented results were available.

PART 4 – 22. MEDICAL CARE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
66. (MANDATORY) The health authority will implement a system of internal review and quality assurance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The health authority has an active quality assurance program and a system of internal review. A nurse is the designated Quality Assurance Coordinator. A review of provided documentation indicated an active internal review and quality assurance program.

PART 4 – 22. MEDICAL CARE

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

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

The facility recently underwent a review by the National Commission on Correctional Health Care (NCCHC). A review of policies, observation of activities, review of 25 detainee medical records, and staff interviews indicated that detainees have access to a continuum of health care services. This includes preventive services and health education. It was determined that detainee health care needs are met in timely and efficient manner. Medical documentation was appropriate and readily available. Medical, dental, and mental health screenings and examinations are performed, as required. Detainee medical and dental requests are addressed in a timely fashion and care is provided, as needed.

(b)(6), (b)(7)(c) / September 1
Reviewer's Signature / Date

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

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. There is a policy and procedure for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items. The supply of these items exceeds the minimum required for the number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 14-6, Inmate/Resident Property, establishes policy and procedures for the regular issuance and exchange of clothing, bedding, linens, towels, and personal hygiene items.
2. All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive, at a minimum: <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants or one jumpsuit. One pair of socks. One pair of underwear (daily change). One pair of facility-issued footwear. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. All new detainees are issued three complete sets of clean clothing, socks, underwear, and one pair of shoes.
3. Additional clothing is available for changing weather conditions and as is seasonally appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The component is only applicable for SPCs and CDFs. One coat is issued during cold weather.
4. New detainees are issued clean bedding, linens and towels, at a minimum: <ul style="list-style-type: none"> One mattress One blanket Two sheets One pillow One pillowcase One towel Additional blankets, based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The bulleted items in this component are only applicable to SPCs and CDFs. New detainees are issued clean bedding, linens, and towels to include: one mattress, one pillow, two sheets, one pillowcase, and two towels. Sufficient blankets are issued, when necessary, to provide comfort under existing temperature controls.
5. The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with policy 14-6, and policy 17-100, Reception and Orientation, each new detainee is given personal hygiene items on arrival which can be replenished weekly. Female ICE detainees are not housed at this facility.

PART 4 – 23. PERSONAL HYGIENE

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>6. Toilet facilities are:</p> <ul style="list-style-type: none"> • 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. <p>ACA Expected Practice 4-ALDF-4B-08 requires that toilets be provided at a minimum ratio of one for every 12 male detainees or one for every 8 female detainees. For males, urinals may be substituted for up to one-half of the toilets.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Observation revealed that toilet facilities are in each cell where detainees are housed.
<p>7. Bathing facilities are:</p> <ul style="list-style-type: none"> • Clean • Operable with temperatures between 100 and 120 degrees Fahrenheit. <p>ACA Expected Practice 4-ALDF-4B-08 requires one washbasin for every 12 detainees.</p> <p>ACA Expected Practice 4-ALDF-4B-09 requires a minimum ratio of one shower for every 12 detainees.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Observation of the housing units where ICE detainees are housed revealed that there are 13 showers for a rated capacity of 183. This translates into one shower for every 14 detainees. Detainees have access to these showers throughout the day. Each cell is equipped with a combination toilet/washbasin. Water temperature in the showers was 104 degrees F at the time of the inspection.
<p>8. Detainees with disabilities are provided adequate facilities, support, and assistance needed for self-care and personal hygiene.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the IEA indicated that detainees with disabilities are not housed at this facility; however, adequate facilities are provided.
<p>9. Detainees are provided clean clothing, linen and towels.</p> <ul style="list-style-type: none"> • Socks and undergarments - daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 14-6 provides for the exchange of linen and towels weekly. Laundry facilities are available in each unit and can be used on a rotating schedule.
<p>10. Food service detainee volunteer workers are permitted to exchange outer garments daily.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainees are not allowed to work in food service. Non-ICE detainee workers are permitted daily exchanges.
<p>11. Volunteer detainee workers are permitted to exchanges of outer garments more frequently.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainees are only assigned to work in the housing unit. Non-ICE detainee workers are permitted frequent exchanges.

PART 4 – 23. PERSONAL HYGIENE

☒ **Meets Standard**

☐ **Does Not Meet Standard**

☐ **N/A**

☐ **Repeat Finding**

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

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

(b)(6), (b)(7)(c) / September 15
Reviewer's Signature / Date

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

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a written suicide prevention and intervention program approved and signed by the health authority and Facility Administrator and reviewed annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policies 13-84, Suicide Management, and 9-19, Suicide Prevention/Risk Reduction, establish a written suicide prevention/intervention program. Policy 13-84 is reviewed annually by the CCA chief medical officer and chief corrections officer.
2. At a minimum, the Program shall include procedures to address: <ul style="list-style-type: none"> • 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"/>	Policies 13-84 and 9-19 include procedures to address intake screening and referral requirements; the identification and supervision of suicide-prone detainees; staff training requirements; the management and reporting of suicidal incidents, suicide watches, and deaths; provision of safe housing 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.
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"/>	A review of training curriculum and interviews with staff indicated that every staff member receives suicide prevention training during the employee orientation and annual training

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>4. Training prepares staff to:</p> <ul style="list-style-type: none"> Effective methods for identifying the warning signs and symptoms of impending suicidal behavior, Demographic, cultural, and precipitating factors of suicidal behavior, Responding to suicidal and depressed detainees, Effective communication between correctional and health care personnel, Necessary referral procedures, Housing observation and suicide-watch level procedures, Follow-up monitoring of detainees who have already attempted suicide, and Reporting and written documentation procedures. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the training outline revealed that training prepares staff with effective methods for identifying the warning signs and symptoms of impending suicidal behavior; demographic, cultural, and precipitating factors of suicidal behavior; responding to suicidal and depressed detainees; effective communication between correctional and health care personnel; necessary referral procedures; housing observation and suicide-watch level procedures; follow-up monitoring of detainees who have already attempted suicide; and reporting and written documentation procedures.
<p>5. A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process.</p> <ul style="list-style-type: none"> 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"/>	A review of medical records revealed that a nurse screens all detainees for suicide potential as part of the admission process. The screening is conducted upon arrival at the facility. Officers do not screen detainees for suicide potential during the admission process.
6. Written procedures contain when and how to refer at-risk detainees to medical staff and procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-19 provides procedures for referring at-risk detainees to medical staff.
7. Written procedures include returning a previously suicidal detainee to the general population, upon written authorization of the clinical director or appropriate health care professional.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-84 indicates that the psychiatrist or psychologist can authorize the return of a previously suicidal detainee to the general population.
8. The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Room 157 in the medical department is the designated isolation room for evaluation and treatment of a suicidal detainee.
9. The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The designated room does not contain any structures or smaller items that could be used in a suicide attempt.
10. Medical staff have approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The psychiatrist has approved the room for this purpose.

PART 4 – 24. SUICIDE PREVENTION AND INTERVENTION

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
11. Staff observes and document the status of a suicide-watch detainee at least once every 15 minutes/constant observation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy requires the documentation of observations at least once every 15 minutes. Observation of a non-ICE detainee on a current suicide watch revealed that this is the practice.
12. At facilities with twenty-four-hour medical staff, observation of imminently suicidal detainees by medical or detention staff shall occur no less than every 15 minutes. The Clinical Director (CD) may recommend constant direct supervision. If a detainee is clinically evaluated and determined to be at risk for suicide, medical staff shall document the status of the detainee in the medical record at least every two hours, unless otherwise directed by the CD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is the practice at this facility as required by policy 13-84.
13. In CDFs or IGSA's, and/or at facilities where there is not twenty-four hour medical staff, the facility administrator shall report to ICE/DRO any detainee who has been identified as suicidal. ICE/DRO, shall consult with the CD or designated medical authority for immediate evaluation (with constant observation until evaluation), or for transfer to a local psychiatric facility or emergency room by ambulance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Medical staff is on duty 24 hours a day, seven days a week. The psychiatrist is always on call.
14. Every completed suicide and serious suicide attempt shall be subject to a mortality review process. A critical incident debriefing shall be provided to all affected staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is required by policy.

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.)

A review of policies, training curriculum, and interviews with staff revealed that all staff is trained and knowledgeable in the identification, supervision, and referral of potentially suicidal detainees. No suicides have been reported at this facility since the last review. Mental health staff is available during normal duty hours and a psychiatrist is on call 24 hours a day, seven days a week.

One detainee suicide attempt was reported since the last review. A male ICE detainee was booked into the facility on August 30, 2011. An initial health screening was performed and documented by nursing staff. The detainee denied any medical or mental health issues. On the morning of August 31, 2011, the detainee walked to the medical unit after jumping from the top tier onto the tier steps with a blanket or blanket strips tied loosely around his neck. The detainee appeared uninjured but was transported via ambulance to Mountain Vista Medical Center for evaluation. When the detainee returned from hospital, ICE transport was at the facility with a remand, and detainee was released to ICE.

(b)(6), (b)(7)(c) September 15, 2011
Reviewer's Signature / Date

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

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

ICE 2012 FCI 03030.015752

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees, who are chronically or terminally ill, are transferred to an appropriate off-site medical facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not accept detainees who are severely or terminally ill. If a detainee becomes severely or terminally ill at this facility he is transferred to Casa Grande Medical Center, Mountain Vista Medical Center, or to a more appropriate detention facility.
2. The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition. <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In accordance with facility policy 13-62, Notification of Next of Kin, the facility would notify ICE and ICE would make all other notifications
3. There are guidelines addressing State Advanced Directive Form for Implementing Living Wills and Advanced Directives. <ul style="list-style-type: none"> These guidelines include instructions for detainees who wish to have a living will. These guidelines provide the detainee the opportunity to have a private attorney prepare the documents, at the detainee's expense. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-3, Advanced Directives: Living Will/Durable Power of Attorney for Health Care, provides direction for detainees who wish to have a living will and includes the provision to have a private attorney prepare the documents, at the detainee's expense.
4. There is a policy addressing "Do Not Resuscitate Orders"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-3 addresses "Do Not Resuscitate Orders".
5. Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This is specifically stipulated in policy 13-3.
6. The facility notifies ICE/DRO Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-3 requires that ICE be notified of any detainee with a DNR order.
7. The facility has written procedures to address the issues of organ donation by detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 13-77, Scope of Services, establishes written procedures for organ donation by a detainee.
8. The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in custody.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 13-62 establishes procedures for notification of ICE in the event of a detainee death. ICE assumes responsibility for all other notifications.

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. The facility has a policy and procedure to address the death of a detainee while in transport.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 9-18 addresses procedures to follow in the event of a detainee death while in transport.
10. At all ICE locations the detainee's remains disposed of in accordance with the provisions detailed in this standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An interview with the IEA indicates that ICE would assume this responsibility.
11. In the event that neither family nor consulate claims the remains, the Field Office schedules an indigent's burial, consistent with local procedures. <ul style="list-style-type: none">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"/>	An interview with IEA indicates that ICE would do this.
12. An original or certified copy of a detainee's death certificate is placed in the subject's A-File.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be verified since no detainee deaths have been reported at this facility. An interview with IEA indicated that this would be done.
13. The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as; <ul style="list-style-type: none">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"/>	Policy 13-62 establishes procedures for notification of the coroner. ICE would assume authority for who is to perform the autopsy, obtaining state approved death certificates, and local transportation of the body.
14. ICE staff follows established procedures to properly close the case of a deceased detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This cannot be verified since no detainee deaths have been reported at this facility. An interview with IEA indicated that this would be done.

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

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

Remarks: (Record significant facts, observations, other sources used, etc.)
No detainee deaths have been reported at this facility.

The facility is not equipped or staffed to house severely or terminally ill detainees. A review of policies and interviews with staff revealed the facility's continuum of health care services addresses terminal illness, fatal injury, and advanced directives and provides specific guidance in the event of a detainee's death.

(b)(6), (b)(7)(c) September 15, 2012
Reviewer's Signature / Date

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

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

ICE 2012-01-03030.015754

Section V ACTIVITIES

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

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has written policy and procedures concerning correspondence and other mail. The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement for correspondence rules to be posted in each housing or common area is specific to SPCs and CDFs. Correspondence rules are posted in the housing units. Information about correspondence rules is also included in the handbook. Policy 16-1, Correspondence Procedures, addresses the requirements of this component.
2. The facility provides key information in English, Spanish, and other languages spoken by a significant number of detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided to detainees 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"/>	
4. Outgoing mail is delivered to the postal service within one business day of its entering the internal mail system (excluding weekends and holidays).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Staff maintains a logbook-recording acceptance of priority, priority overnight, and certified mail delivered to the facility for a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. A log is maintained of all priority and certified mail received for detainees.
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"/>	Packages are not accepted at this facility. All mail is inspected in the presence of detainees.
7. Staff does not read incoming general correspondence without the Facility Administrator's prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Mail received for ICE detainees is not read by staff.
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"/>	All mail, whether general or Special, is only inspected in the presence of the detainee.
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"/>	No mail for ICE detainees is read or copied at this facility.

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"/>	The requirement to inspect outgoing mail without the detainee present is specific to SPCs and CDFs. Outgoing mail is not inspected.
11. Correspondence to a politician or to the media is processed as Special Correspondence and is not read or copied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The official authorizing the rejection of incoming mail sends written notice to the sender and the addressee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The requirement to notify the sender of rejected incoming mail is specific to SPCs and CDFs. When mail is rejected, both the sender and the addressee are provided with written notice.
13. The official authorizing censorship or rejection of outgoing mail provides the detainee with signed written notice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation of all items removed for detainee mail is maintained in the Mail Room.
15. The Facility Administrator or designee monitors staff handling of discovered contraband and its disposition. Records are accurate and up to date.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The procedure for safeguarding cash removed from a detainee protects the detainee from loss of funds and theft. The amount of cash credited to detainee accounts is accurate. Discrepancies are documented and investigated. Standard procedure includes issuing a receipt to the detainee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided with a receipt signed by two staff members when cash is removed from correspondence. The cash and a copy of the receipt are forwarded to the mail room. The mail officer recounts the cash and documents the amount, which is also co-signed by a second employee, before it is credited to the detainee's account.
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"/>	Original identification documents are picked up daily by ICE employees.
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"/>	
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"/>	The policy requires that writing supplies be provided to ICE detainees free of charge. Based upon interviews with staff and detainees, it was confirmed that writing supplies are provided to detainees free of charge.
23. SMU detainees have the same correspondence privileges as general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per Policy 10-100, Segregation Management, all inmates/residents housed in the Segregation Unit may write and receive letters in the same manner as the general population.
24. Detainees have access to outside publications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 – 26. CORRESPONDENCE AND OTHER MAIL

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

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

Detainees have the ability to correspond with their families, community, legal representatives, government officials in a manner that is consistent with the safe and orderly operation of the facility. Overall, the facility complies with the PBNDS regarding Correspondence and Other Mail.

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

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

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

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director considers and approves, on a case-by-case basis, trips to an immediate family member's: <ul style="list-style-type: none"> • Funeral • Deathbed 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The facility recognizes as "immediate family member" a parent (including stepparent or foster parent), brother, sister, child, and spouse (including common-law spouse).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The CDF/IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The detainee's Deportation Officer reviews the file before forwarding a detainee's request, with recommendation, to the approving official. Each recommendation addresses the individual's suitability for travel, e.g., the kind of supervision required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees who require overnight housing are placed in approved IGSA facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Each escort detail includes at least (b)(7)(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
<p>11. Escort officers ensure that detainees:</p> <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"/>	
<p>15. Facility procedures comply with the following ICE Standards:</p> <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.)

This facility is in close proximity to the Florence Detention Center (FDC). All transportation related to escorted trips for non-medical emergencies is handled by ICE staff from the FDC.

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

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

PART 5 – 28. MARRIAGE REQUESTS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Field Office Director or Facility Administrator considers detainee marriage requests on a case-by-case basis.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility forwards all marriage requests to the ICE Field Office for review and approval.
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"/>	Facility policy 14-7, Marriage, defers all matters concerning marriage to the ICE Field Office.
3. It is standard practice to require a written request for permission to marry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The written request includes a signed statement or comparable documentation from the intended spouse, confirming marital intent.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The Facility Administrator provides a written copy of his or her decision to the detainee and his or her legal representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility forwards all marriage requests to the ICE Field Office for review and disposition.
6. When permission is denied, the Facility Administrator states the basis for his or her decision along with instructions on how the detainee can file an appeal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility forwards all marriage requests to the ICE Field Office for review and disposition.
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"/>	The facility will assist ICE detainees with wedding arrangements when approved by the ICE Field Office.
8. The detainee handbook explains the marriage request process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The ICE National Detainee Handbook explains the marriage process.
9. In SPCs the Facility Administrator or highest ranking ICE official on-site is the only officer authorized to approve a request to marry.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. ICE detainee marriage requests are completed by the ICE Field Office.

PART 5 – 28. MARRIAGE REQUESTS

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

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

The facility has created a procedure to ensure marriage requests from ICE detainees are forwarded to the ICE Field Office for review and approval. Facility staff assists detainees with wedding arrangements when the request is approved by the ICE Field Office.

(b)(6), (b)(7)(c) / September 15
Reviewer's Signature / Date

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

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The Facility provides: <ul style="list-style-type: none"> An indoor recreation program. An outdoor recreation program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 20-101, Recreation and Leisure Time Programs, establishes indoor and outdoor recreation programs for detainees.
2. A recreational specialist (for facilities with more than 350 detainees) tailors the program activities and offerings to the detainee population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility has a recreation supervisor who coordinates recreation programming.
3. Regular maintenance keeps recreational facilities and equipment in good condition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. The recreational specialist or trained equivalent supervises detainee recreation workers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The recreational specialist or trainee equivalent oversees recreation programs for Special Management Unit and special-needs detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Dayrooms offer sedentary activities, e.g., board games, cards, television.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Board games, playing cards, and televisions are available in the facility dayrooms.
7. Outside activities are restricted to limited-contact sports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Basketball, handball, and weights are available as well as space for walking and running.
8. Each detainee has the opportunity to participate in daily recreation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Detainees have access to recreation activities outside the housing units for at least one hour daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	
16. Special programs or religious activities are available to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 5 - 29. RECREATION

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
17. All volunteers have completed an orientation program with documentation required before entering a secure portion of the facility where detainees are present.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility requires volunteers to submit a formal application and undergo a background check. If approved, volunteers are required to attend a facility orientation program prior to entering the facility.
18. Visitors, relatives or friends of detainees are not allowed to serve as volunteers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility does not allow friends, relatives, or visitors to serve as volunteers.
19. If the facility has no outside recreation, are detainees considered for transfer after six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers outdoor recreation to the detainee population.
20. If yes, written procedures ensure timely review of all eligible detainees.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.
25. If no recreation is available, the ICE Field Office routinely review transfer eligibility for all detainees after 60 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.
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 offers outdoor recreation to the detainee population.

PART 5 - 29. RECREATION

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

PART 5 – 30. RELIGIOUS PRACTICES

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. Detainees are allowed to engage in religious services. When available, these services are provided in major languages spoken within the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious services are provided to the detainee population in both English and Spanish.
2. Space is available for detainees to participate in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains adequate space for conducting religious programming.
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"/>	The facility allows detainees to observe all major holy days. There are no exceptions listed.
4. The facility accommodates recognized holy-day observances by: • Providing special meals, consistent with dietary restrictions. • Honoring fasting requirements. • Facilitating religious services. • Allowing activity restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility accommodates special meals, fasting, facilitates religious services, and activity restrictions when requested by the detainee and approved by the Chaplain.
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"/>	The facility allows the use of religious items in the detainee housing area and Chapel.
6. Volunteer's credentials are checked and verified before allowing participation in detainee programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility requires volunteers to submit a formal application and submit to a background check. When approved, they are required to attend a facility orientation program prior to entering the facility.
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

PART 5 – 31. TELEPHONE ACCESS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are allowed to access to telephones during established facility waking hours, including access to TTY devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are allowed access to telephones whenever they are out of their cells. TTY devices are available for use by the detainees.
2. Upon admittance, detainees are made aware of the facility's telephone access policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided to detainees in the handbook and through a verbal orientation.
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"/>	Telephone rules are posted in the units. Consulate numbers are posted in the units.
5. The facility makes a reasonable effort to provide key information to detainees in languages spoken by any significant portion of the facility's population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information is provided to detainees in both English and Spanish.
6. Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are a sufficient number of telephones in each unit to comply with this component.
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"/>	All telephones are checked daily at 6:15 a.m. The condition of the telephones is documented daily in the unit log.
8. Telephones are located a reasonable distance from televisions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The facility administration promptly reports out-of-order telephones to the facility's telephone service provider.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The facility administration monitors repair progress and takes appropriate measures to ensure that the required repairs are begun and completed timely.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Detainees are afforded a reasonable degree of privacy for legal phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. A procedure exists to assist a detainee who is having trouble placing a confidential call.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When a detainee needs assistance to place a confidential call, arrangements are made by the unit team, the chaplain, or ICE.
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"/>	

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
15. In facilities unable to fully meet this requirement initially because of limitations of its telephone service, ICE makes alternate arrangements to provide required access within 24 hours of a request by a detainee.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Special access calls are provided to detainees.
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"/>	Requests to speak by phone to family members confined in other facilities are referred to ICE. Detainees are taken to the Florence Detention Center (FDC), where ICE employees allow the call.
18. All telephone restrictions are documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The telephone policy establishes a process to document telephone restrictions. There have been no incidents of telephone restrictions being imposed upon an ICE detainee.
19. The facility has a system for taking and delivering emergency detainee telephone messages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Phone call messages are given to detainees as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 10-100, Segregation Management, states that phone access is "Emergency phone calls only as determined by Unit Supervisor." An addendum to the policy was issued on July 25, 2011, which states that ICE detainees on Disciplinary Segregation status receive unlimited legal phone calls per week, with the approval of the Segregation Supervisor and based on the availability of the phone.

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
23. Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 10-100, Segregation Management, states that phone access is "Emergency phone calls only as determined by Unit Supervisor." An addendum to the policy was issued on July 25, 2011, which states that ICE detainees on Disciplinary Segregation status receive unlimited legal phone calls per week, with the approval of the Segregation Supervisor and based on the availability of the phone. Calls to consular/embassy officials are treated as legal phone calls.
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"/>	Policy 10-100, Segregation Management, states that phone access is "Emergency phone calls only as determined by Unit Supervisor." On July 25, 2011, an addendum to the policy was issued which states that detainees in administrative segregation receive unlimited personal phone usage pending the availability of the phone. The addendum also states that they receive unlimited legal phone calls with the approval of the Segregation Supervisor and the availability of the phone.
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"/>	The Lead Compliance Inspector successfully contacted the OIG using the pre-programmed detainee telephone system.
28. The Field Office Director has assigned ICE staff to check and report on the serviceability of facility phones. This is documented on a weekly basis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff has the ability to electronically track the progress of telephone repair orders.

PART 5 – 31. TELEPHONE ACCESS

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

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"/>	Policy 16-2, Visitation, addresses visiting procedures. The schedule for visits is posted in the units and is available on the website.
2. The visitation hours are tailored to the detainee population and the demand for visitation. The minimum duration for a visit is 30 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation periods are one hour in duration, twice per week.
3. The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitation rules are available in a handout. Schedules and rules are also available on the facility website and through an automated telephone information system.
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Visitors are not allowed to deliver personal property items to this facility for detainees.
8. A visitor dress code is available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The dress code is available on the facility website and in a handout available to visitors.
9. Visitors are searched and identified according to standard requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visitors must pass through a metal detector and submit to a pat search, if necessary.
10. The requirement on visitation by minors is complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At facilities where there is no provision for visits by minors, ICE arranges for visits by children and stepchildren, on request, within the first 30 days.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit.
12. After that time, on request, ICE considers a transfer, when possible, to a facility that will allow minor visitation. At a minimum, monthly visits are allowed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minors are allowed to visit.
13. Anytime a visit is denied, to either a general population detainee or SMU detainee, the denial is documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a process to document the denial of visits.
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"/>	

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
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"/>	Visiting hours are from 7:00 a.m. to 5:00 p.m. daily.
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"/>	It was reported by the visiting room officer that detainees are given the option to remain on a legal visit during meal periods. It was also reported that meals are provided to detainees in the attorney meeting rooms.
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, governs detainee searches.
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"/>	Legal representatives must pass through a metal detector and submit to a pat down search, if necessary. Personal belongings are also passed through a scanner.
21. Per the Standard, prior to each visit, legal service providers and assistants are identified.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. SPCs and CDFs shall submit written requests for tours from domestic or international organizations and associated with detention issues to the appropriate Field Office Director for approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Tours must be approved by the Warden.
24. Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of documentation revealed that the only case of a NGO requesting a tour of the facility was handled consistent with the Standard. The request was reviewed by the Warden, and ICE was notified prior to approval.
25. Law enforcement officials, requesting to visit with a detainee, are referred to the ICE Facility Administrator for approval.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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
26. Former detainees or aliens in proceedings, requesting to visit with a detainee, are referred to the Facility Administrator or ICE Field Office.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The current policy does not contain language that requires a request to visit by former detainees or aliens in proceedings be referred to the Warden. A revised policy, includes the required language, and is currently awaiting final approval, before being implemented.

PART 5 – 32. VISITATION

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

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

Based upon a review of available documentation and interviews of staff and detainees, it was determined that the visiting program provides detainees with an opportunity to maintain family ties, maintain contact with legal representatives and consulates in a manner that does not negatively impact the safety, security and good order of the facility. Overall, the facility complies with the PBNDs regarding Visitation.

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

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

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 19-100, Work Programs, establishes a voluntary work program for detainees assigned to the facility.
2. Detainee housekeeping meets acceptable levels of neatness, cleanliness and sanitation standards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visual observation of the facility found an acceptable level of housekeeping.
3. At IGSA's detainees are never allowed to work outside the secure perimeter. SPCs and CDFs detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of this component requiring detainees classified as level 1 have the opportunity to participate in special details outside the secure perimeter under direct supervision is specific to SPCs and CDFs. The facility allows ICE detainees the opportunity to work in their assigned housing area. ICE detainees are not allowed to work outside the secure perimeter of the facility.
4. Written procedures govern selection of detainees for the Voluntary Work Program. <ul style="list-style-type: none"> 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"/>	Facility policy 19-100, Work Programs, establishes procedures for the detainee work program. Staff follows the policy and procedures in establishing work details.
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: <ul style="list-style-type: none"> Eight hours a day. Forty hours a week. 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. Detainees assigned to the facility do not work more than eight hours per day or 40 hours per week.
7. Detainee volunteers ordinarily work according to a fixed schedule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure states detainees will work a fixed shift assignment daily.
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"/>	

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
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"/>	Facility staff provides detainee workers training which is documented prior to assignment to a job duty.
10. The voluntary work program meets: <ul style="list-style-type: none"> • OSHA standards • NFPA standards • ACA standards 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility voluntary work program complies with OSHA, NFPA, and ACA standards.
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> • Before the assignment begins • As a matter of written procedure 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainees are not permitted to work in the facility food service department. Other detainees working in the department complete a medical screening prior to assuming their position.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee workers are given initial training on safety and equipment usage prior to beginning duties.
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure require notification of the ICE Field Office if a detainee sustains an injury during the work program.

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

The facility maintains a work program as an avenue to offer detainees opportunities to work on a routine basis and earn money while confined at the facility. The facility maintains a number of different missions in the housing of various populations. In an effort not to mix populations, ICE detainees are only allowed to work in their housing unit.

(b)(6), (b)(7)(c) September 1, 2012
Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 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
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"/>	Facility staff provides detainee workers training which is documented prior to assignment to a job duty.
10. The voluntary work program meets: <ul style="list-style-type: none"> • OSHA standards • NFPA standards • ACA standards 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility voluntary work program complies with OSHA, NFPA, and ACA standards.
11. Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> • Before the assignment begins • As a matter of written procedure 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICE detainees are not permitted to work in the facility food service department. Other detainees working in the department complete a medical screening prior to assuming their position.
12. Detainees receive safety equipment/ training sufficient for the assignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee workers are given initial training on safety and equipment usage prior to beginning duties.
13. Proper procedure is followed when an ICE detainee is injured on the job.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy and procedure require notification of the ICE Field Office if a detainee sustains an injury during the work program.

PART 5 – 33. VOLUNTARY WORK PROGRAM

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

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

The facility maintains a work program as an avenue to offer detainees opportunities to work on a routine basis and earn money while confined at the facility. The facility maintains a number of different missions in the housing of various populations. In an effort not to mix populations, ICE detainees are only allowed to work in their housing unit.

(b)(6), (b)(7)(c) September 15

Reviewer's Signature / Date

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

Performance-Based National Detention Standards

Section VI JUSTICE

34 Detainee Handbook

35 Grievance System

36 Law Libraries and Legal Material

37 Legal Rights Group Presentations

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility has a detainee handbook. Each detainee receives a copy of the local handbook and the ICE National Detainee Handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility issues detainees the ICE National Detainee Handbook, a local supplement, and a healthcare orientation handbook.
2. The detainee handbook is written in English and translated into Spanish, and other languages spoken by significant numbers of detainees in that facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbooks are issued 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"/>	The handbook instructs detainees regarding the process for requesting interpretive services.
4. Orientation materials are read to detainees who cannot read, or they are provided the material via audio or video recordings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The handbook supplements the facility orientation video where one is provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The facility does not utilize an orientation video.
6. The handbook is revised as necessary and there are procedures in place for immediately communicating any revisions to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The handbook was last revised March 22, 2011. During the site review, staff was creating additional revisions which were pending.
7. There is an annual review of the handbook by a designated committee or staff member.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The detainee handbook address the following issues: <ul style="list-style-type: none"> Personal Items permitted to be retained by the detainee. Initial issue of clothes, bedding and personal hygiene items. How to access care. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. The handbook clearly outlines the methods for classification of detainees, explains each level, and explains the classification appeals process.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook supplement did not address the methods of classification, explain each level, or explain the appeals process. Staff created revisions during the site review for inclusion in future editions.
11. The handbook states when a medical examination will be conducted.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
12. The handbook describes the facility, housing units, dayrooms, In-dorm activities and special management units.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not describe the facility housing units, dayrooms, indoor activities, or the special management unit. Staff created a revision during the site review for inclusion in future editions.
13. The handbook describes: official count times and count procedures, meal times, feeding procedures, procedures for medical or religious diets, smoking policy, clothing exchange schedules and if authorized, clothes washing and drying procedures and expected personal hygiene practices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. The handbook describes times and procedures for obtaining disposable razors and explains that detainees attending court will be afforded the opportunity to shave first.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility issues razors one time per week. They are exchanged on a one-for-one basis.
15. The handbook describes barber hours and hair cutting restrictions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. The handbook describes; the telephone policy, debit card procedures, direct and frees calls; locations of telephones; policy when telephone demand is high; and policy and procedures for emergency phone calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. The handbook addresses religious programming.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The handbook states times and procedures for commissary or vending machine usage. (where available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. The handbook describes the detainee voluntary work program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. The handbook describes the library location and hours of operation and law library procedures and schedules.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility supplement does not describe the library location. Staff was working on revisions for inclusion in future copies.
21. The handbook describes: attorney and regular visitation hours, policies, and procedures, location of the list of pro bono legal organizations; group legal rights presentations schedule and sign up procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. The handbook/supplement provides local ICE contact information.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The facility handbook does not contain information on how a detainee may contact the local ICE Field Office.
23. The handbook describes the facility contraband policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. The handbook describes the facility visiting hours and schedule and visiting rules and regulations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 - 34. DETAINEE HANDBOOK

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
25. The handbook describes the correspondence policy and procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. The handbook describes the detainee disciplinary policy and procedures, including: <ul style="list-style-type: none"> 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"/>	The specific portion of this component requiring procedures for filing an appeal of a grievance with ICE is specific to CDFs. The facility supplement addresses all of the bulleted items detailed within this component.
28. The handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility requires detainees in general population and segregation to file a sick call request.
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"/>	
31. The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Detainees are required to sign for the handbook to ensure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Orientation materials are provided to illiterate detainees either orally or via audio/video tapes in a language they can understand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility offers detainees an oral orientation upon arrival.

PART 6 - 34. DETAINEE HANDBOOK

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

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

The facility issues detainees the ICE National Detainee Handbook, a local supplement, and a healthcare orientation handbook. The facility has created a local handbook as a supplement to the ICE National Detainee Handbook. The supplement provides an orientation to and outline of the facility policy and procedures. The supplement addresses facility rules, the disciplinary system, mail, the grievance process, and medical care.

The handbook did not include provisions explaining the classification system and levels, housing units and dayroom, library location or local contact information for the ICE Field Office. Facility staff were in the process of revising the local supplement during the inspection to address the missing element. Staff advised the additions would be included in future editions.

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

Reviewer's Signature / Date

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

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. Detainees are informed about the facility's informal and formal grievance system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility policy 14-5, Grievance, establishes the facility's informal and formal grievance process. It is also contained in the facility supplemental handbook that is distributed to detainees.
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"/>	The facility provides detainees with the ICE National Detainee Handbook and the local handbook supplement.
3. The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> • Informal and formal grievance procedures; • The appeals process and step-by-step procedures; • Staff/detainee availability to help during the grievance process • Guarantee against staff retaliation for filing/pursuing a grievance. • How to file a complaint about officer misconduct with the Department of Justice. • How to file an emergency grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility supplemental handbook addresses the requirements of this component.
4. Written procedures provide for the informal resolution of oral grievances (Not mandatory). If yes, the detainee has up to five days within which to make his or her concern known to a member of the staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures. <ul style="list-style-type: none"> • Detainees may seek help from other detainees or facility staff when preparing a grievance. • Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility will allow detainees to gain access to a grievance committee if the detainee rejects the grievance response. Detainees may request assistance when needed.
6. Facility has written procedures for identifying and handling a time-sensitive emergency grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff attends annual training on how to identify and expedite an emergency grievance.
8. Staff shall not harass, discipline, punish or otherwise retaliate against a detainee who files a complaint or grievance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 6 – 35. GRIEVANCE SYSTEM

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>9. Procedures include maintaining a Detainee Grievance Log.</p> <ul style="list-style-type: none"> • If not, an alternative acceptable record keeping system is maintained. • "Nuisance complains" are identified in the records. • For quality control purposes, staff document nuisance complaints received but not filed. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility maintains a grievance log that is an acceptable record keeping system. The facility forwards all ICE detainee grievances, including the disposition, to ICE for review. If nuisance complaints are received, the facility policy and procedure contain a means to identify and notate them.
10. If a detainee who establishes a pattern of filing nuisance complaints or otherwise abusing the grievance system, the Facility Administrator may authorize staff to refuse to process subsequent complaints. This authority may not be delegated, even to an acting Facility Administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility forwards all ICE detainee grievances to the local ICE Field Office.
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"/>	The facility forwards all grievances including the disposition to the Florence Detention Center (FDC), where detainee detention files are maintained, to be reviewed and filed.
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"/>	The facility requires staff to notify a supervisor regarding allegations of staff misconduct. The facility reported during the site review there had been no occurrences of reported staff misconduct.
<p>14. In SPCs and CDFs, when a Detainee does not accept the grievance committee's decision, he/she files an appeal with the ICE Facility Administrator.</p> <ul style="list-style-type: none"> • In all facilities written procedures cover detainee appeals and are included in the detainee handbook 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The portion of the component requiring a detainee to file an appeal with the ICE Facility Administrator when he/she does not accept the grievance committee's decision is specific to SPCs and CDFs. Detainees may file an appeal with the facility administrator and the grievance committee.
15. In SPCs/CDFs, the detainee has a reasonable timeframe after the incident or informal-grievance outcome to file a formal grievance.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This component is only applicable for SPCs and CDFs. The facility requires detainees to submit formal or informal grievances within five days of the occurrence.

PART 6 – 35. GRIEVANCE SYSTEM

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

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

The facility has an established grievance policy and procedure created to protect detainee rights and ensure they are treated fairly. The grievance process offers detainees an informal and formal avenue to address concerns they have with management staff. A review of the detainee grievance log indicated a limited number of grievances had been filed by ICE detainees. All ICE detainee grievances, including the disposition, are forwarded to the Florence Detention Center (FDC) for review and inclusion in the detention file.

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

/ September

Reviewer's Signature / Date

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

PART 6 – 36. LAW LIBRARIES AND LEGAL MATERIAL

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. The facility provides a designated law library for detainee use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a designated library/law library available to detainees.
2. The law library contains all materials listed in the "Access to Legal Materials" Standard, Attachment A. The listing of materials is posted in the law library. <ul style="list-style-type: none"> In lieu of/or in addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses LexisNexis to provide Attachment A. Therefore, there is no requirement to post a listing of the materials.
3. If the Lexis/Nexis CD-ROM service alternative is used for the publications in Attachment A, the facility provides detainees sufficient: <ul style="list-style-type: none"> Operable computers and printers, in sufficient numbers in order to provide access Photocopiers, and Supplies for both. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There are two computers available for use by detainees, as well as adequate supplies and a photocopier. A review of the list of detainees who have used the Law Library revealed that the equipment is sufficient to address the demand for use.
4. The library contains a sufficient number of chairs, is well lit and is reasonably isolated from noisy areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. The law library is adequately equipped with typewriters, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Detainees are provided with the means to save legal work in a private electronic format for future use.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The law librarian has disks available to store information for detainees. The disks remain secured in the library and are made available to detainees, as needed.
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"/>	LexisNexis was updated in July 2011. An ICE employee ensures that the system is updated, as needed.
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"/>	There have been no requests to submit materials to the legal collection. The law librarian reported that before accepting any materials, she would provide the material to her supervisor to obtain ICE approval to include it in the law library.
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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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"/>	
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 may request materials. A review of documentation revealed that delivery of materials occurs within the required time frames.
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"/>	Detainees have access to a pro bono legal project, assistance from other detainees, and some Spanish materials in the LexisNexis collection.
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"/>	Arrangements are made to bring detainees housed in segregation to the law library, when it is not in use by other detainees. It was reported that there have been very few requests to use the law library from detainees housed in segregation.
16. All denials of access to the law library fully documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There is a process to document denials of access to the law library. However, there have been no incidents of detainees being denied access.
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 is a process to document denials of access to the law library. However, there have been no incidents of detainees being denied access
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.)*

Detainees have the ability to conduct legal research, and maintain contact with the courts. LexisNexis is available for use by the detainee population.

The law library has sufficient equipment and supplies to accommodate the number of detainees using the law library.

Detainees have the ability to receive assistance from other detainees. Overall, the facility complies with the PBNDS regarding the Law Library and Legal Materials

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

Reviewer's Signature / Date

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

PART 6 - 37. LEGAL RIGHTS GROUP PRESENTATIONS

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<input 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"/>	The Florence Project is an Immigration Rights Project that meets weekly with ICE detainees.
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"/>	A weekly schedule has been established to allow the Florence Project to give presentations to detainees.
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"/>	All materials presented by the Florence Project have been pre-approved by ICE.
4. Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No posters were observed regarding scheduled presentations. However, attendance at the presentations is mandatory. Each Wednesday all new ICE detainees attend a presentation given by the Florence Project.
5. Detainees have access to group presentations on immigration law, procedures and detainee options. Documentation is submitted and maintained when any detainee is denied permission to attend a presentation and the reason(s) for the denial.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No detainees are denied access to the group presentations.
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"/>	Although it has not occurred, the staff person responsible for overseeing the scheduling of the presentations indicated that a private presentation would be scheduled, if a detainee was housed in segregation. All detainees scheduled to attend deportation hearings are scheduled to attend presentations by the Florence Project.
8. Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The presenters for the Florence Project are bi-lingual.

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.				
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"/>	Presentations and meetings occur between the hours of 8:00 a.m.- 11:00 a.m. on Wednesdays.
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"/>	
12. Group presenters who have had their privileges suspended are notified in writing by the Field Office Director or designee, and the reasons for suspension are documented. The Headquarters Office for Detention and Removal, Field Operations and Detention management Division is notified when a group or individual is suspended from making presentations.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No presenters have lost their privileges at this facility.
13. The facility plays ICE/DRO-approved videotaped presentations on legal rights, at regular opportunities at the request of outside organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Florence Project has not requested to show video presentations, at this facility.
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"/>	Equipment is available, but there has not been a request to present electronically formatted material.

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.)

All detainees scheduled to attend deportation hearings are provided with an opportunity to attend a presentation on Immigration Law and procedures. The Florence Project provides weekly presentations to detainees.

During the inspection, this inspector observed a presentation in progress which was attended by more than 20 detainees. Several detainees were interviewed. All of reported that they had the opportunity to attend a presentation by the Florence Project.

(b)(6), (b)(7)(c) September 15
Reviewer's Signature / Date

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

Section VII ADMINISTRATION & MANAGEMENT

38 Detention Files

39 News Media Interviews and Tours

40 Staff Training

41 Transfer of Detainees

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. A Detention File is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Copies of documents generated during the confinement of a detainee are placed in the detention file. Several files were reviewed and included samples of various documents cited in this component.
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"/>	The portion of this component requiring detention files be in lockable cabinets and the key distribution to be limited to supervisors if the files are not located in a secure area is specific to SPCs and CDFs. The files are maintained in a secure area. Records room staff are responsible for retrieving files, if they are requested by other staff.
5. The Detention File remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Each file has a discharge checklist which is verified by the discharging officer when the folder is ready to be closed.
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"/>	All requests for files are processed by records room staff. Files are properly logged out, and Records staff account for all files by the end of the day.

PART 7 – 38. DETENTION FILES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
9. Electronic record-keeping systems and data are protected from unauthorized access.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Any release of information is coordinated with ICE staff, and proper release forms are generated, signed, and placed in the detention file.
11. Electronic data on individual detainees is subject to the same Privacy Act regulations as the contents of traditional paper Detention Files and A-files.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. The Facility Administrator or staff designate ensures that necessary equipment and supplies, including copier and copier supplies are available; all equipment is maintained in good working order and that equipment has the capacity to handle the volume of work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. The Detention Operations Supervisor or equivalent can direct certain operations 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The current policy allows for the destruction of detention files after three years. Prior to the end of the inspection, the policy was revised.
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.)

Files are created for each detainee admitted to this facility.

Based upon a review of documentation, the inspection of several files, and interviews of staff, it was determined that the procedures and practice for maintaining detention files are consistent with the requirements of the PBNDS.

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

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

PART 7 - 39. NEWS MEDIA INTERVIEWS AND TOURS

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

Components	Meets Standards	Does Not Meet Standards	N/A	Remarks
1. The ICE/DRO Field Office Director approved all interviews by reporters, other news media representatives, academics and others not covered by the Detention Standard on Visitation.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is a process in place to approve interviews by news media representatives. However, there have been no requests for such an interview.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There is a process in place to document interviews of detainees by the media, but no such interviews have taken place.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There have been no requests for interviews.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Release forms were reviewed which will be used. However, there has not been an interview or photograph which required their use.
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There has never been an instance when a press pool was used at this facility.

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 is a procedure in place which addresses the requirements of this standard. However, it has never been implemented because there have been no requests for interviews of detainees.

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

September 15

Reviewer's Signature / Date

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

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

ICE 2012 FOIA03030.015791

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"/>	Facility policy 4-1, Training, establishes a comprehensive training policy and procedure for staff, contractors, and volunteers that includes initial and annual training.
2. The amount and content of training is consistent with the duties and function of each individual and the degree of direct supervision that individual receives.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff is trained in accordance with their duties and job functions.
3. At least one qualified individual with specialized training for the position coordinates and oversees the staff development and training program. At a minimum, full-time training personnel complete a 40-hour training-for-trainers course.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility has a full time training manager who has completed a 40 hour training for trainers' course.
4. Training is governed and guided by a training plan that is reviewed and approved annually by the facility administrator.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility training plan was approved by the facility administrator December 10, 2010.
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"/>	The facility maintains electronic and paper copy training records. Each employee has a master training record containing of the employee's training in electronic format.

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"/>	Each new employee, contractor and volunteer completes a 40 hour initial training program which includes the subjects listed within the component.

PART 7 – 40. STAFF TRAINING

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

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

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"/>	Each new employee and contractor, completes a 40 hour initial training program including the subjects listed within the component.

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"/>	Each full time health care employee completes a 40 hour initial training program which includes the subjects listed within the component.

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"/>	Security personnel including contractors complete a 40 hour initial training program which includes the subjects listed within the 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"/>	SRT teams receive initial specialized training and monthly training, thereafter.
<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"/>	Facility management staff complete 40 hours of training annually.
<p>13. (MANDATORY) Personnel authorized to use firearms receive training that covers their use, safety, and care and constraints on their use – before being assigned to a post involving their possible use.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility staff is required to attend firearms training prior to assignment to a post requiring the use of a firearm.
<p>14. (MANDATORY) All personnel authorized to use firearms demonstrate competency in their use at least annually.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional staff is required to demonstrate competency in the use of firearms during annual training.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
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) Annual recertification training is conducted.
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 staff, contractors, and volunteers are required to sign a statement acknowledging their completion and compliance with a drug free workplace.
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"/>	
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"/>	Ethics training is provided to facility staff, contractors, and volunteers initially and during annual training.
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"/>	

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>20. (MANDATORY) All staff in frequent contact with detainees is trained at least annually to respond to health-related emergencies within four minutes. The training is provided by a responsible medical authority in cooperation with the facility administrator and includes:</p> <ul style="list-style-type: none"> Recognizing of signs of potential health emergencies and the required responses. Administering first aid and cardiopulmonary resuscitation (CPR). Obtaining emergency medical assistance through the facility plan and its required procedures. Recognizing signs and symptoms of mental illness, suicide risk, retardation, and chemical dependency. The facility's established plan and procedures for providing emergency medical care including, when required, the safe and secure transfer of detainees for appropriate hospital or other medical services, including by ambulance when indicated. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Facility staff annually attend classes in First Aid and a class approved by the American Heart Association regarding cardiopulmonary resuscitation. The facility conducts and documents quarterly medical and fire safety drills ensuring a response within the required time frame. The annual training curriculum for this facility addresses all of the areas identified in this component.</p>
<p>21. All staff in frequent contact with detainees are trained at least annually on the facility's Sexual Abuse and Assault Prevention and Intervention Program, to include:</p> <ul style="list-style-type: none"> Understanding that sexual abuse or assault is never an acceptable consequence of detention. Recognizing housing or other situations where sexual abuse or assault may occur. Recognizing the physical, behavioral, and emotional signs of sexual abuse or assault and ways to prevent such occurrences. Knowing how to report knowledge or suspicion of sexual abuse or assault and make intervention referrals in the facility's program. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Comprehensive sexual abuse training is included in the initial orientation for staff members and annual in-service training. It includes the items listed within the component.</p>

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
<p>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"/>	Comprehensive suicide prevention training is included in the initial orientation and the annual in-service training of staff having frequent contact with detainees. It includes the areas described within the component.
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"/>	Facility staff attends annual training which includes the subjects contained within this component.

PART 7 – 40. STAFF TRAINING

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
26. Employees are encouraged to continue their education and professional development through incentives such as salary enhancement, reimbursement of costs, and administrative leave.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART 7 – 40. STAFF TRAINING

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

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

The facility maintains a comprehensive training plan that ensures staff is properly trained and aware of their assigned duties. Staff members working at the facility, regardless of position, attend 40 hours of initial training from instructors certified as staff trainers. Follow-up training is conducted annually in 40 hour blocks of instruction with specialized training offered for staff wishing to gain additional knowledge. Facility staff reported during the site review, training that was available was useful and presented by instructors who were enjoyable and capable. Staff training records appeared comprehensive and complete with documents supporting training provided.

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

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

PART 7 - 41. TRANSFER OF DETAINEES

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

Components	Meets Standard	Does Not Meet Standard	N/A	Remarks
1. When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer within 24 hours of transfer. <ul style="list-style-type: none"> The notification is recorded in the detainee's file When the A-File is not available, notification is noted within ENFORCE. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Policy 9-18, Transportation Procedures, addresses the requirements of this component. Except for emergency transportation, transfers are handled by ICE personnel who follow the procedures outlined in the Transfer Standard.
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"/>	A Form I-203 is used to inform and authorize facility staff to prepare ICE detainees for transfer. ICE staff takes custody of the detainees and transport the detainees to the Florence Detention Center (FDC), where they are processed prior to release, deportation, or transfer.

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
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"/>	
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.)*

A unique situation exists regarding the transfer of ICE detainees into and out of the facility. All detainees are processed through the Florence Detention Center (FDC) before being transferred into or out of this facility.

All property and valuables are maintained at the FDC.

ICE staff at FDC are responsible for making all required notifications, completing required documentation, and implementing the actions required by the by the Standard.

Due to the nature of the ICE population at this facility, there are very few transfers to other facilities. The majority of the ICE detainees leaving this facility are being released or deported.

Based upon a review of documentation, an inspection of detainee files and the Enforce system as well as staff interviews, it was determined that the procedures and process for transferring detainees from the facility are consistent with the requirements of the ICE PBNDS.

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

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